

Whereas the National Sea Grant College Program creates or sustains more than 20,000 jobs and 2,900 businesses annually;

Whereas the National Sea Grant College Program has supported 1,175 John A. Knauss Marine Policy Fellows in Congress and throughout Federal agencies since 1979; and

Whereas the National Sea Grant College Program has supported thousands of undergraduate and graduate students at institutions of higher education across the United States: Now, therefore, be it

*Resolved*, That it is the sense of the Senate that the National Sea Grant College Program is—

(1) of vital importance to improving the economy, health, stewardship, and preparedness of the United States;

(2) an exceptional example of effective partnerships between Federal, State, and local governments; and

(3) a valuable investment for the Federal Government.

#### SENATE RESOLUTION 125—SUPPORTING THE GOALS AND IDEALS OF NATIONAL PUBLIC HEALTH WEEK

Mr. UDALL (for himself, Mr. WHITEHOUSE, Mr. MARKEY, Ms. HEITKAMP, Ms. WARREN, Mr. CARDIN, Mr. KING, Mrs. SHAHEEN, Ms. KLOBUCHAR, Mr. BLUMENTHAL, Mr. HEINRICH, Mr. FRANKEN, Mrs. MURRAY, Mr. BROWN, and Mr. VAN HOLLEN) submitted the following resolution; which was referred to the Committee on Health, Education, Labor, and Pensions:

S. RES. 125

Whereas the week of April 3, 2017, through April 9, 2017, is National Public Health Week; Whereas the theme of National Public Health Week in 2017 is “Healthiest Nation 2030”, with the goal of making the United States the healthiest country in 1 generation;

Whereas, according to the National Academy of Medicine, despite being one of the wealthiest countries in the world, the United States ranks below many other economically prosperous and developing countries with respect to measures of health, including life expectancy and infant mortality rates;

Whereas the life expectancy for the population of the United States has declined for the first time in more than 2 decades and the leading causes of deaths are among the most common, costly, and preventable of all health problems;

Whereas there is a significant difference in the health status, including with respect to obesity, mental health, and infectious disease, of individuals who live in the healthiest States as compared with individuals who live in the least healthy States;

Whereas, despite having a high infant mortality rate compared to other economically prosperous and developing countries, and a death rate that varies greatly among States, the United States, until recently, was making steady progress with respect to overall measures of public health, with the infant mortality rate in 2014 reaching a historic low of 5.8 infant deaths per 1,000 live births;

Whereas, since 1999, opioid-involved deaths have more than quadrupled, requiring a comprehensive strategy across a range of sectors, including robust efforts to prevent substance misuse disorders;

Whereas the percentage of adults in the United States who smoke cigarettes, an activity that is the leading cause of preventable disease and death in the United States and accounts for more than 480,000 deaths

each year, decreased from 20.9 percent in 2005 to 15.1 percent in 2015;

Whereas a strong public health system results in clean and healthy air, water, food, and places in which to live, learn, work, and play;

Whereas public health organizations use National Public Health Week to educate the public, policymakers, and public health professionals on issues that are important to improving the health of the people of the United States;

Whereas studies show that small strategic investments in prevention can result in significant savings in health care costs;

Whereas each 10 percent increase in local public health spending contributes to a 6.9 percent decrease in infant deaths, a 3.2 percent decrease in deaths related to cardiovascular disease, a 1.4 percent decrease in deaths due to diabetes, and a 1.1 percent decrease in cancer-related deaths;

Whereas public health professionals help communities prevent, prepare for, withstand, and recover from the impact of a full range of health threats, including disease outbreaks, such as the Zika virus, natural disasters, and disasters caused by human activity;

Whereas public health professionals collaborate with partners that are not in the health sector, such as city planners, transportation officials, education officials, and private sector businesses, recognizing that other sectors have an important influence on health;

Whereas, in communities across the United States, individuals are changing the way that they care for their health by avoiding tobacco use, eating healthier, becoming more physically active, and preventing unintentional injuries at home and in the workplace; and

Whereas efforts to adequately support public health and prevention can continue the transformation from a health system that is focused on treating illness to a health system that is focused on preventing disease and promoting wellness: Now, therefore, be it

*Resolved*, That the Senate—

(1) supports the goals and ideals of National Public Health Week;

(2) recognizes the efforts of public health professionals, the Federal Government, States, tribes, municipalities, local communities, and individuals in preventing disease and injury;

(3) recognizes the role of the public health system in improving the health of individuals in the United States;

(4) encourages increased efforts, and the use of additional resources, to improve the health of people in the United States and make the United States the healthiest country in 1 generation—

(A) through greater opportunities to improve community health and prevent disease and injury; and

(B) by strengthening the public health system in the United States; and

(5) encourages the people of the United States to learn about the role of the public health system in improving health in the United States.

#### SENATE RESOLUTION 126—EX-PRESSING SUPPORT FOR THE DESIGNATION OF THE WEEK OF APRIL 10 THROUGH APRIL 14, 2017 AS “NATIONAL ASSISTANT PRINCIPALS WEEK”

Mr. CARPER (for himself, Mr. HELLER, Mr. MARKEY, and Mr. ENZI) submitted the following resolution; which was referred to the Committee on

Health, Education, Labor, and Pensions:

S. RES. 126

Whereas the National Association of Secondary School Principals (NAASP), the National Association of Elementary School Principals (NAESP), and the American Federation of School Administrators (AFSA) have designated the week of April 10 through April 14, 2017, as “National Assistant Principals Week”;

Whereas an assistant principal, as a member of the school administration, interacts with many sectors of the school community, including support staff, instructional staff, students, and parents;

Whereas assistant principals are responsible for establishing a positive learning environment and building strong relationships between school and community;

Whereas assistant principals play a pivotal role in the instructional leadership of their schools by supervising student instruction, mentoring teachers, recognizing the achievements of staff, encouraging collaboration among staff, ensuring the implementation of best practices, monitoring student achievement and progress, facilitating and modeling data-driven decision-making to inform instruction, and guiding the direction of targeted intervention and school improvement;

Whereas the day-to-day logistical operations of schools require assistant principals to monitor and address facility needs, attendance, transportation issues, and scheduling challenges, as well as supervise extra- and co-curricular events;

Whereas assistant principals are entrusted with maintaining an inviting, safe, and orderly school environment that supports the growth and achievement of each and every student by nurturing positive peer relationships, recognizing student achievement, mediating conflicts, analyzing behavior patterns, providing interventions, and, when necessary, taking disciplinary actions;

Whereas since its establishment in 2004, the NAASP National Assistant Principal of the Year Program recognizes outstanding middle and high school assistant principals who demonstrate success in leadership, curriculum, and personalization; and

Whereas the week of April 10 through April 14, 2017, is an appropriate week to designate as National Assistant Principals Week: Now, therefore, be it

*Resolved*, That the Senate—

(1) supports the designation of April 10 through April 14, 2017, as “National Assistant Principals Week”;

(2) honors the contributions of assistant principals to the success of students in the United States; and

(3) encourages the people of the United States to observe National Assistant Principals Week with appropriate ceremonies and activities that promote awareness of the role played by assistant principals in school leadership and ensuring that every child has access to a high-quality education.

#### SENATE RESOLUTION 127—SUPPORTING THE GOALS AND IDEALS OF TAKE OUR DAUGHTERS AND SONS TO WORK DAY

Mr. BARR (for himself and Ms. HEITKAMP) submitted the following resolution; which was referred to the Committee on Health, Education, Labor, and Pensions:

S. RES. 127

Whereas the Take Our Daughters To Work program was created in New York City as a response to research that showed that, by

the 8th grade, many girls were dropping out of school, had low self-esteem, and lacked confidence;

Whereas, in 2003, the name of the program was changed to “Take Our Daughters And Sons To Work” so that boys who face many of the same challenges as girls could also be involved in the program;

Whereas, in 2017, the mission of the program, to develop “innovative strategies that empower girls and boys to overcome societal barriers to reach their full potential”, fully reflects the addition of boys;

Whereas the Take Our Daughters And Sons To Work Foundation, a nonprofit organization, has grown to be one of the largest public awareness campaigns, with more than 39,000,000 participants annually in more than 3,000,000 organizations and workplaces representing each State;

Whereas, in 2007, the Take Our Daughters To Work program transitioned to Elizabeth City, North Carolina, became known as the Take Our Daughters And Sons To Work Foundation, and received national recognition for its dedication to future generations;

Whereas, every year, mayors, governors, and other private and public officials sign proclamations and lend support to Take Our Daughters And Sons To Work Day;

Whereas the fame of the Take Our Daughters And Sons To Work program has spread overseas, with requests and inquiries being made from around the world on how to operate the program;

Whereas 2017 marks the 24th anniversary of the Take Our Daughters And Sons To Work program;

Whereas Take Our Daughters And Sons to Work Day will be observed on Thursday, April 27, 2017; and

Whereas, by offering opportunities for children to experience activities and events, Take Our Daughters And Sons To Work Day is intended to continue helping millions of girls and boys on an annual basis to examine their opportunities and strive to reach their fullest potential: Now, therefore, be it

*Resolved*, That the Senate—

(1) recognizes the goals of introducing our daughters and sons to the workplace; and

(2) commends all participants of Take Our Daughters And Sons To Work Day for the—

(A) ongoing contributions that the participants make to education; and

(B) vital role that the participants play in promoting and ensuring a brighter, stronger future for the United States.

**SENATE RESOLUTION 128—DESIGNATING APRIL 2017 AS “NATIONAL CONGENITAL DIAPHRAGMATIC HERNIA AWARENESS MONTH”**

Mr. CARDIN (for himself and Mr. STRANGE) submitted the following resolution; which was referred to the Committee on the Judiciary:

S. RES. 128

Whereas congenital diaphragmatic hernia (referred to in this preamble as “CDH”) occurs in individuals in which the diaphragm fails to fully form, allowing abdominal organs to migrate into the chest cavity and preventing lung growth;

Whereas the Director of the Centers for Disease Control and Prevention recognizes CDH as a birth defect;

Whereas the majority of CDH patients suffer from underdeveloped lungs or poor pulmonary function;

Whereas babies born with CDH endure extended hospital stays in intensive care with multiple surgeries;

Whereas CDH patients often endure long-term complications, such as pulmonary hypertension, pulmonary hypoplasia, asthma, gastrointestinal reflux, feeding disorders, and developmental delays;

Whereas CDH survivors sometimes endure long-term mechanical ventilation dependency, skeletal malformations, supplemental oxygen dependency, enteral and parenteral nutrition, and hypoxic brain injury;

Whereas CDH is treated through mechanical ventilation, a heart and lung bypass (commonly known as “extracorporeal membrane oxygenation”), machines, and surgical repair;

Whereas surgical repair is often not a permanent solution for CDH and can lead to re-herniation and require additional surgery;

Whereas CDH is diagnosed in utero in less than 50 percent of cases;

Whereas infants born with CDH have a high mortality rate, ranging from 20 to 60 percent, depending on the severity of the defect and interventions available at delivery;

Whereas CDH has a rate of occurrence of 1 in every 2,500 live births worldwide;

Whereas in the United States, CDH affects approximately 1,600 babies each year;

Whereas since 2000, CDH has affected more than 700,000 babies worldwide since 2000;

Whereas CDH does not discriminate based on race, gender, or socioeconomic status;

Whereas the cause of CDH is unknown;

Whereas the average CDH survivor will face postnatal care that totals not less than \$100,000; and

Whereas Federal support for CDH research at the National Institutes of Health for 2017 is estimated to be not more than \$4,000,000: Now, therefore, be it

*Resolved*, That the Senate—

(1) designates April 2017 as “National Congenital Diaphragmatic Hernia Awareness Month”;

(2) encourages that steps should be taken to—

(A) raise awareness of and increase public knowledge about congenital diaphragmatic hernia (referred to in this resolving clause as “CDH”);

(B) inform all Americans about the dangers of CDH, especially groups of people that may be disproportionately affected by CDH or have lower survival rates;

(C) disseminate information on the importance of quality neonatal care of CDH patients;

(D) promote quality prenatal care and ultrasounds to detect CDH in utero; and

(E) support research funding of CDH to—

(i) improve screening and treatment for CDH;

(ii) discover the causes of CDH; and

(iii) develop a cure for CDH; and

(3) calls on the people of the United States, interest groups, and affected persons to—

(A) promote awareness of CDH;

(B) take an active role in the fight against this devastating birth defect; and

(C) observe National Congenital Diaphragmatic Hernia Awareness Month with appropriate ceremonies and activities.

Mr. CARDIN. Mr. President, I rise today to ask my Senate colleagues to join me in designating April 2017 as National Congenital Diaphragmatic Hernia Awareness Month. Congenital Diaphragmatic Hernia, also known as CDH, is a birth defect that occurs when the fetal diaphragm fails to fully develop, allowing abdominal organs to move into the chest cavity and preventing lung growth. When the lungs do not develop properly during pregnancy, it can be difficult for the baby

to breathe after birth or the baby is unable to take in enough oxygen to stay healthy. Congenital diaphragmatic hernia is a birth defect that occurs in 1 out of every 2,500 live births worldwide. Only about 50 percent of CDH cases are diagnosed in utero. The Center for Disease Control & Prevention, CDC, estimates that CDH affects 1,600 babies in the United States each year. Every 10 minutes, a baby is born with CDH, adding up to more than 700,000 babies with CDH since 2000. According to the CDC, babies born with CDH experience a high mortality rate ranging from 20 to 60 percent depending on the severity of the defect and the treatments available at delivery, yet most people have never heard of CDH.

Researchers are making great progress to determine the cause of this birth defect and to identify optimal treatment methods. In fiscal year 2017, the National Institutes of Health funded approximately \$4 million in CDH research, an increase of \$700,000 from fiscal year 2015. There is still much progress to be made, however. The cause of CDH remains unknown, and there currently is no cure. CDH survivors often endure long-term complications such as congenital heart defects and developmental delays and the average CDH survivor will face postnatal care of more than \$100,000.

Last month, members from the Association of Congenital Diaphragmatic Hernia Research, Awareness and Support, also known as CHERUBS, visited my office. Among them were David and Allison Finger and their daughter Vivienne from Hyattsville, MD. Vivienne was born with CDH and had to spend 60 days in the newborn intensive care unit after birth and had to have surgery to repair the hernia when she was only 3 weeks old. On March 18, 2017, Vivienne celebrated her second birthday and is doing very well. Babies like Vivienne, born with CDH, today have a better chance of survival due to early detection and research on treatment options.

For these reasons, I am proud my colleague the junior Senator from Alabama, Senator STRANGE, has joined me in introducing a bill designating April 2017 as National Congenital Diaphragmatic Hernia Awareness Month. In previous years, I was pleased to work with his predecessor; Senator Sessions, on this legislation. Designating this month in this fashion provides an opportunity to raise public awareness about CDH; promote quality prenatal care and ultrasounds to detect CDH in utero; and support funding for the research necessary to improve screening and treatment of CDH, discover the causes of CDH, and develop a cure for CDH.