

Funds. These funds give States certainty that they can meet their drinking water needs.

The bill is also fiscally responsible. The nonpartisan Congressional Budget Office said America's Water Infrastructure Act will authorize these important projects and reduce the deficit at the same time. America's Water Infrastructure Act has received broad bipartisan support from Democrats, Republicans, local governments, and stakeholders. It originally passed out of the Senate Environmental and Public Works Committee unanimously, by a vote of 21 to 0. After reaching this consensus agreement, the House of Representatives passed the updated bill unanimously by voice vote. Simply put, America's Water Infrastructure Act is good for the entire Nation.

President Trump called on Congress to pass major infrastructure legislation. America's Water Infrastructure Act answers that call. By reaching this bipartisan agreement, my home State of Wyoming and the Nation will see upgrades, reforms, and new initiatives that deliver on the President's commitment to rebuild our aging water system. Now is the time for the Senate to take up this important bill and send it to the President for his signature.

Thank you.

I yield the floor.

The PRESIDING OFFICER. The Senator from Iowa.

#### FUNDING THE GOVERNMENT

Mrs. ERNST. Mr. President, I rise today disappointed and frustrated.

Once again, we passed an ill-advised continuing resolution to fund much of our government. Once again, folks, we have passed the buck. Once again, we have failed to do our job.

One of Congress's most essential roles is to fund a responsible government that runs efficiently and effectively. We have a duty to taxpayers to not just simply give a thumbs-up on spending their money but to debate and consider whether programs are working to serve their needs. Unfortunately, we have been negligent in this solemn duty. Like myself, Americans are tired of this shortsighted habit of kicking the can down the road.

How did we get to this point, you might be asking yourself. After all, we worked across the aisle in an open and collaborative way and found a path forward to fund our national defense and the vital Departments of Labor, Health and Human Services, and Education. We recently passed a similar bill related to Energy and Water, Legislative Branch, Military Construction, and Veterans Affairs.

As we have seen, a continuing resolution was attached to this legislation for the rest of the government, including our vital Department of Homeland Security. Worse, this continuing resolution doesn't fund the government fully until the end of the fiscal year. No, it simply punts the ball to Decem-

ber 7. That is it. We will be back here before Christmas, and if experience is any sort of guide, multiple times after that before we can get the government fully funded.

I ultimately chose to vote yes on this continuing resolution because of what it means for our national security and our servicemembers who risk their lives every day for our security. Also, the continuing resolution included the Violence Against Women Act, a bill I could not allow to lapse given that this bill provides services for our most vulnerable. VAWA addresses the scourge of domestic violence that is so prevalent in our communities—crimes that often hurt women and children the most, often requiring them to be displaced from the only homes they know.

I believe we can strengthen this act in several ways by addressing changing circumstances since its last reauthorization 5 years ago by tailoring its language to better fit the needs of our communities. There are provisions we need to change and to work on, but we are not afforded that opportunity.

Tying our Nation's security and the Violence Against Women Act to the CR made it both the carrot and the stick. We are leaving services and programs that the American people rely upon open to partisan delay and political gerrymandering.

The people of Iowa elected me to come to Washington to be their voice and to instill much needed fiscal responsibility. Rather than pushing, procrastinating, and postponing for another 3 months, we should buckle down and build upon the great progress we have made this year by getting the remaining appropriations bills across the finish line.

We should debate the Violence Against Women Act in regular order so we can strengthen it and provide protections for those who need it the most. There are items I support in this continuing resolution, but we need to do our job. We need to fund the government. If we don't take action now, we will be back here month after month, year after year, doing the exact same thing.

Thank you.

I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER (Mr. BARASSO). The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

Mr. DONNELLY. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

#### SUICIDE PREVENTION

Mr. DONNELLY. Mr. President, I come to the floor to bring attention to suicide prevention, an issue of tremendous importance to families and communities across Indiana and our country.

The Senate will be introducing a resolution very soon recognizing suicide

as a serious public health problem and expressing support for designation of September as National Suicide Prevention Month.

Every year, we lose nearly 45,000 Americans to suicide. It is the 10th leading cause of death in this country and second leading cause for those ages 15 to 34. Think about that for a moment: 45,000 lives every year, 123 lives every day, 1 life every 12 minutes.

The American Foundation for Suicide Prevention champions the message: "Be The Voice . . . Stop Suicide."

Whether we are Senators or family or friends or coworkers or even strangers, we can all play a role in helping to prevent suicide. We all must "be the voice."

So what is our voice?

Formally recognizing Suicide Prevention Month is a start, and I am proud to have cosponsored that resolution. Yet it can't just be about a day or a week or a month on which we pause to reflect. This is a heartbreaking challenge for our communities, and we must be working year-round and across the aisle—there are no Democrats or Republicans in this—to find the solutions that provide Americans with the help they need to get through their most trying times.

Over the past several years, Congress has found a number of bipartisan solutions to help address this tragic problem, but our work is far from done. There are still 45,000 Americans every year and their families and their friends who need our help. They need our action.

As I started my time in the Senate, I made it a focus to find bipartisan approaches to suicide prevention. In Indiana, suicide claims over 1,000 lives every year. That is one Hoosier lost every 8 hours. In 2013, my fellow Hoosier Jeff Sexton reached out to me to share the tragic story of his son Jake. Specialist Jacob Sexton, an Indiana National Guardsman, tragically took his own life in 2009 while on leave from a deployment to Afghanistan.

His story is far too familiar for Active, Guard, and Reserve servicemembers and for veterans as well. Despite representing less than 10 percent of the population, these Americans comprise almost 20 percent of the suicides. Their communities lose over 7,000 members every year as they struggle with the stresses of the military service that we as a nation and as a Congress ask of them.

So the question is, What can we do to help them and to prevent these tragedies?

Hoping to answer that question, the first bill I introduced in the Senate focused on suicide prevention in the military and in our veteran communities. Introduced in 2013 and signed into law in the 2014 National Defense Authorization Act, my Jacob Sexton Military Suicide Prevention Act addressed a critical gap in mental healthcare for our troops. All too often, many of our

servicemembers would go years without having any mental health assessment, without having a medical professional ask: How are you doing? How are you feeling? If you are feeling a little off or a little unsure, we have all the means you need to get help.

Congress worked together to pass that bill into law, and now we have ensured that every servicemember, Active, Guard, and Reserve alike, receives an annual mental health assessment—a professional look to make sure the member isn't fighting a battle he or she can't win on his or her own. That is why I was pleased to hear from every service Secretary and Chief last fall that annual mental health assessments have been 100 percent implemented throughout the services.

Even with an avenue for help, though, many servicemembers were cautious about reaching out for assistance. They feared the stigma could hurt them professionally or personally. They feared repercussions to their deployability, their promotions, or their security clearances. We also made sure to include privacy protections as a part of the Sexton act. It is critically important that these brave men and women who come forward can get the support they need without suffering professionally for just seeking help.

In building upon the Sexton act, my Servicemember and Veteran Mental Health Care Package, which was signed into law as part of the national defense bill in 2015, is a three-part, bipartisan effort to ensure servicemembers and vets have access to quality mental healthcare, whether they seek it through providers in their communities, the Department of Defense, or the Department of Veterans Affairs.

First, the Military and Veterans Mental Health Provider Assessment Act guarantees that the Department of Defense's primary care and mental health providers are trained to recognize signs of suicide risk and other mental healthcare best practices.

Next, the Community Provider Readiness Recognition Act developed a new designation for community healthcare providers that demonstrates a strong knowledge of military culture and mental treatments that are focused on servicemembers and veterans, specifically pertaining to mental health.

Finally, the Frontline Mental Health Provider Training Act helped the Department of Defense establish a pilot program to expand the availability of physician assistants to meet the increasing need for mental healthcare evaluations and services for servicemembers and military families.

I am proud to have helped pass each of these efforts, and I believe they are some of the Senate's most important achievements in the past 5 years as the demand for military mental health services has never been greater. It is extremely important that we leverage all of our assets in support of our veterans, servicemembers, and military

families through legislation like the Sexton act and the Care Package. It is critical that our support for mental health extends beyond Active, Guard, and Reserve duty and that we continue to honor this commitment to our veterans.

Another piece of bipartisan legislation that I was proud to work on was the Clay Hunt Suicide Prevention for American Veterans Act, which was signed into law in 2015. This law is key to getting timely and effective mental healthcare to prevent suicide in our veteran communities. The bill's namesake, Clay Hunt, was a decorated veteran of Iraq and Afghanistan who tragically took his own life after he struggled with PTSD and depression. The Clay Hunt SAV Act requires annual third-party evaluations of VA mental health and suicide prevention programs. It creates a centralized website that provides information on VA mental health services, and it requires the VA to collaborate on suicide prevention efforts with nonprofit mental health organizations.

As our country still faces a rate of more than 20 veterans who take their lives every day, we must continue to find opportunities like these to help prevent veteran suicide and improve the mental healthcare services that are available to our heroes.

It shouldn't come as a surprise that the law enforcement officers who keep our communities safe often face some of the same stresses that affect our servicemembers and our veterans. It is becoming increasingly common for them to repeatedly experience challenging and even horrific situations on the job. Protecting the psychological health and well-being of those who serve our communities is a critically important issue.

With fellow Hoosier Senator TODD YOUNG, I was proud to introduce the Law Enforcement Mental Health and Wellness Act in early April 2017, to help get it through the Senate unanimously in May of 2017, and signed into law by President Trump this past January. This bill was inspired, in part, by Lebanon, IN, Police Officer Taylor Nielsen, who, in 2016, was called to a horrific crime scene. With the gruesome images of the scene etched in her mind, Taylor began to suffer from post-traumatic stress disorder and, at one point, sought to take her own life. Fortunately, her fellow officers recognized her situation, sought help for her, and saved her life before it was too late.

The Law Enforcement Mental Health and Wellness Act helps our law enforcement officers get access to the mental healthcare they need as they keep our communities safe every day. The law authorizes grants to initiate peer-mentoring pilot programs. It directs the Departments of Justice and Health and Human Services to develop resources for mental health providers based on the specific mental health challenges that are faced by law enforcement, and it studies the effectiveness of crisis

hotlines and annual mental health checks. It also directs the Departments of Defense and Justice and Veterans Affairs to confer about existing DOD and VA mental health practices and services that could be adopted by our law enforcement agencies.

In working together with my colleagues, I am proud of these successes, but mental health issues and suicide impact every part of our Nation; they don't discriminate. We must look for ways to ensure that our workplaces, our schools, and our rural communities have the mental health care and treatment resources they need.

One critical resource is the national suicide hotline. By calling 1-800-273-8255, every American can access free and confidential emotional support 24 hours a day, 7 days a week. It is a wonderful service, and we are working to make it even better.

The bipartisan National Suicide Hotline Improvement Act, which I introduced with my friend Senator HATCH, was signed into law a month ago. It will increase the effectiveness of the current suicide prevention lifeline system and the Veterans Crisis Line by requiring the Federal Communications Commission to study the system and to make recommendations on how we can improve it. One of these improvements is in seeing whether we can include a three-digit hotline number that would better connect folks to crucial crisis resources.

Now, in the time I have been on the Senate floor today—just in this short time—we have likely lost another American life to suicide. At the current rate, in 12 more minutes, we will, heartbreakingly, lose another. As a parent, this is so heartbreaking and so tragic that we have to do whatever we can to prevent these tragedies—123 Americans every day, 45,000 every year—of people who can make our lives and our country so much brighter and so much better every day. It doesn't have to be that way—that they will be gone.

It is incumbent on all of us to harness the sobering reminder of this National Suicide Prevention Month and ensure that every American knows there is hope and that support is just a call or a conversation away.

There are people and there are resources that are available to help you get through any challenges that you have. You are loved, and you are cared about. We want to make sure you have everything you need to get through whatever difficult time you may be facing.

I am proud of these efforts—proud that we have put aside any party politics to address this issue that affects all of us. Our job is not done though. We have to exhaust every avenue to provide all Americans the support they need to prevent suicide. Let's tackle this program together. Let's "be the voice."

I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

Mr. CORNYN. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER (Mr. HOEVEN). Without objection, it is so ordered.

#### NOMINATION OF BRETT KAVANAUGH

Mr. CORNYN. Mr. President, last night, the Senate Judiciary Committee announced that there would be an additional public hearing to address the allegations of misconduct that had been made against Judge Brett Kavanaugh, who has been nominated to the U.S. Supreme Court. So far, all we have is an accusation—one that, frankly, has a lot of holes in it as far as the time and circumstances under which this alleged event occurred. Nonetheless, it is a very serious allegation about misconduct that one claims happened about 36 years ago when she, Judge Kavanaugh, and others were involved as teenagers.

Judge Kavanaugh and the other individual allegedly involved have said that this incident did not happen. They unequivocally deny the claim, and, thus far, no other individuals have corroborated the accuser's statement.

The reason we find ourselves in this very unusual situation, where we have actually had the confirmation hearing of the nominee and we find it necessary to have a supplemental or additional hearing is that our Democratic colleagues failed to raise this accusation so that it could be handled in a bipartisan, regular manner in which the Judiciary Committee handles background investigations, understanding that when somebody goes through a background investigation, sometimes information comes up that is particularly sensitive, sometimes embarrassing; maybe it is about financial matters or other personal matters. So the practice of the Judiciary Committee is to have those background investigations handled with great care by specially cleared individuals. Then, following the hearing, the open hearing, that information will be shared with members of the committee, and they can then ask any questions they may want to ask in a closed session.

We did not have that opportunity because the ranking member did not even alert members of her own party about the existence of this accusation that she had had for some 6 weeks. So we weren't able to do the sort of due diligence that has come to be the practice of the Judiciary Committee on a bipartisan basis. The ranking member, who was forwarded the allegation, did not even attend the closed session where we considered the background investigation that had been done on Judge Kavanaugh, and, as I said, she didn't do anything with the allegation for almost 2 months.

What is clear is that this allegation has been handled—or I should say egregiously mishandled—up until now. But that is no excuse for us to continue to do the same. We need to return this process to its ordinary rules and procedures. We will take these accusations with the seriousness they deserve, and that is in a way that is fair to both the alleged victim and the judge himself.

Because of our friends on the other side's fondness for gotcha moments and political theater throughout the confirmation process, so far that fairness has mostly been lost. It has been denied the victim, who said that she wanted privacy, and it has been denied Judge Kavanaugh, who has flatly disavowed the claims. He had no opportunity during his confirmation hearing, either in open or in closed session, to answer questions about these allegations. This has really been a drive-by attack on the character of this judge.

Again, it is a serious accusation that we will take—and have taken—seriously, but, unfortunately, this process has gotten away from being about getting to the truth and has been more about gamesmanship and delay. The timing and the way in which this allegation was sprung attest to that. That is why, initially, I was somewhat skeptical about rewarding this bad behavior by calling for another public hearing. I had confidence in the committee's usual process for dealing with situations like this, which would ensure that both sides would be heard and that sensitive matters would be handled with the sensitivity they deserve.

When I spoke to him yesterday, Judge Kavanaugh's commitment to transparency and eagerness to address these false allegations head-on was clear.

When members of the committee met yesterday to discuss a possible path forward, we agreed that a supplemental hearing was in order. I went along with that consensus point of view.

I want to commend Chairman GRASSLEY for his leadership, and I certainly support his decision to hold an additional hearing next Monday. As he said yesterday, anyone who comes forward under circumstances like this deserves to be heard in an "appropriate, precedented and respectful manner." How our colleagues across the aisle conduct themselves will prove whether they are actually interested in getting to the truth of these allegations or whether this is just an exercise in character assassination.

#### OPIOID CRISIS RESPONSE ACT

Mr. CORNYN. Mr. President, on another matter, last night we voted on a very important piece of legislation called the Opioid Crisis Response Act, which came to us from the HELP Committee; that is, the Health, Education, Labor, and Pensions Committee.

Thanks to Chairman ALEXANDER, the chairman of the HELP Committee, and as a result of his hard work and the

contributions of 70 Senators and 5 standing committees, we were able to come up with a package that had overwhelming support. I believe it was 99 to 1, if I am not mistaken.

The House has already passed its version of this legislation, so it was important that we do the same and get the bill to the President soon. I am happy to report that we have now done that.

Included in this Opioid Crisis Response Act was something called the STOP Act, which is a bipartisan piece of legislation that imposes new requirements on the U.S. Postal Service and Customs and Border Protection. It will close loopholes that are currently being exploited by drug traffickers to evade detection when shipping synthetic opioids, like fentanyl, because so few of those postal packages are actually inspected to find out whether they include drugs like fentanyl.

The package we voted on also includes a bill I sponsored with the senior Senator from California called the Substance Abuse Prevention Act, believing that we need to do something, not only about the supply side of the problem but the demand side as well. This piece of legislation is important because it will reauthorize the Office of National Drug Control Policy. We need a strategy, and we need an Office of National Drug Control Policy, not only to articulate but also to help execute that strategy.

This bill will also seek to reduce demand for illegal drugs in a variety of ways: education for medical providers, expanding drug awareness campaigns, and funding drug courts and nonprofits that provide interventions to people struggling with addiction.

I have seen drug courts in action, and they actually work. People who commit offenses involving illegal drugs can actually be monitored and given wrap-around care and support not only to help them deal with their addiction but also to help them reenter a productive society.

Unfortunately, Texas is no stranger when it comes to illegal drugs. In fact, one in three Texans responded to a recent poll saying that they knew somebody addicted to painkillers. One in three said they knew somebody addicted to painkillers. Last year, close to 3,000 Texans died from drug overdoses. That is nearly triple the number in 2000. That is simply unacceptable. Eighteen years have passed, and the number is three times higher.

Experts have said it is estimated to rise again by 6 percent this year. Those numbers are about real human beings and are a tragedy. Clearly, something is not working.

That suspicion is confirmed by the researchers who are saying that overdoses are now the leading cause of maternal deaths in my State. In Texas, emergency room personnel have said that they are seeing younger and younger children gaining access to these addictive opioids, and patients