

One of the most vivid reminders of the importance of the flag is the Battle of Iwo Jima during World War II some 53 years ago. On the fourth day of the battle, after our troops fought their way onto the beaches and over dangerous terrain, six men raised a United States flag on the highest ridge on Mount Suribachi. That was February 23, 1945, but the battle raged on until March 15, 1945. During those weeks of fighting, the flag served as an inspiration for our troops to keep pressing forward to victory.

Many times, American soldiers have put their lives on the line to defend what the flag represents. We have a duty to honor their sacrifices by giving the flag the Constitutional protection it deserves.

Since we will not be able to turn to this amendment in the closing days of this session, this issue will have to wait for the next Congress. We must not be deterred. I am firmly committed to fighting for this amendment until we are successful.

HEALTH PROFESSIONS EDUCATION PARTNERSHIPS ACT OF 1998

Mr. DASCHLE. Mr. President, I am pleased to report that, after years of waiting, families facing the tragedy of alcohol-related birth defects can finally expect a coordinated federal response to their needs. The Fetal Alcohol Syndrome and Fetal Alcohol Effect Prevention and Services Act, which has been included as part of S. 1754, the Health Professions Education Partnerships Act, will establish a national task force to address FAS and FAE, and a competitive grant program to fund prevention and intervention for affected children and their families.

The Fetal Alcohol Syndrome and Fetal Alcohol Effect Prevention and Services Act was introduced as S. 1875 earlier this year and, with today's Senate passage, will be cleared for the President's signature. It is a modest measure, but its implications—in terms of children saved, families saved, and dollars saved—are dramatic.

Alcohol-related birth defects, commonly known as Fetal Alcohol Syndrome (FAS) and Fetal Alcohol Effect (FAE), wreak havoc on the lives of affected children and their families. The neurological damage done by fetal exposure to alcohol is irreversible and extensive, undercutting normal intellectual capacity and emotional development. A child with FAS or FAE may be unable to think clearly, to discern right from wrong, to form relationships, to act responsibly, to live independently.

The complicated and debilitating array of mental, physical, and behavioral problems associated with FAS and FAE can lead to continual use of medical, mental health, and social services—as well as difficulty learning basic skills and remaining in school, alarming rates of anti-social behavior and incarceration, and a heightened

risk of alcohol and drug abuse. FAS is the leading cause of mental retardation in the United States.

And it is 100 percent preventable. FAS is completely preventable, yet, each year in the United States, some 12,000 children are born with FAS. The rate of FAE may be 3 times that. Researchers believe these conditions are often missed—or misdiagnosed—so the actual number of victims is almost certainly higher.

The incidence of FAS is nearly double that of Down's syndrome and almost 5 times that of spina bifida. In some Native American communities, one of every 100 children is diagnosed with FAS.

It has been more than 30 years since researchers identified a direct link between maternal consumption of alcohol and serious birth defects. Yet, the rate of alcohol use among pregnant women has not declined, nor has the rate of alcohol-related birth defects. In fact, both are increasing over time.

The Centers for Disease Control (CDC) reported a sixfold increase in the percentage of babies with FAS born between 1980 and 1995. This increase is consistent with the CDC's finding that rates of alcohol use during pregnancy, especially the rates of "frequent drinking," increased significantly between 1991 and 1995. These findings defy the Surgeon General's warning against drinking while pregnant as well as a strongly worded advisory issued in 1991 by the American Medical Association urging women to abstain from all alcohol during pregnancy. Clearly, we need to do more to discourage women from jeopardizing their children's future by drinking while pregnant.

In addition to the tragic consequences for thousands of children and their families, these disturbing trends have a staggering fiscal impact. The Centers for Disease Control and Prevention estimates the lifetime private and public cost of treating an individual with FAS at almost \$1.4 million. The total cost in terms of health care and social services to treat all Americans with FAS was estimated at \$2.7 billion in 1995. This is an extraordinary and unnecessary expense.

We know FAS and FAE are not "minor" problems. They are prevalent; they are irreversible; they are devastating to the victim and his or her family; and they are a drain on societal resources. We know the word is not getting out—or maybe it's not getting through—that drinking alcohol during pregnancy is a tremendous and senseless risk. We know children with FAS and FAE and their families are not receiving appropriate services, and we are all paying the consequences.

Given what we know about FAS and FAE, our governmental and societal response to date are clearly inadequate. With this legislation, we are finally strengthening that response.

To the extent we can prevent FAS and FAE and help parents respond appropriately to the special needs of their

children, we can reduce institutionalizations, incarcerations and the repeated use of medical, mental health and social services that otherwise may be inevitable. It makes fiscal sense, but, far more importantly, it is what we need to do for the children and families who suffer its impact.

The legislation we are sending to the President will establish a national task force of parents, educators, researchers and representatives from relevant federal, state and local agencies. That task force will tell us how to raise awareness about FAS and FAE—how to prevent it and how to deliver the kinds of services that will enable children and adults with FAS and FAE, and their families, to cope with its devastating effects.

A national task force with membership from outside of, as well as within, the federal government is our best bet if we want to take a realistic look at this problem and address it. The true experts on these conditions are the parents and professionals who deal with the cause and effects of these conditions day in and day out. If we want to respond appropriately, parents, teachers, social workers, and researchers should have a place at the table. A national task force will also provide the opportunity for communities to share best practices, preventing states that are newer to this problem from having to "reinvent the wheel."

In conjunction with the task force efforts, the Secretary will establish a competitive grants program. This \$25 million program will provide the resources necessary to operationalize the task force recommendations by supporting education and public awareness, coordination between agencies that interact with affected individuals and their families, and applied research to identify effective prevention strategies and FAS/FAE services.

Mr. President, responding to the tragedy of alcohol-related birth defects is an urgent cause. I'd like to thank the many concerned parents, researchers, educators, advocacy organizations and federal agencies for their invaluable input on this legislation. I am confident this initiative will deliver profound benefits to the Nation, and I am thrilled to see us moving toward its enactment.

TUG AND BARGE SAFETY

Mr. CHAFEE. Mr. President, I rise today to thank the managers of the 1998 Coast Guard Authorization Act for their help in addressing an issue of great importance in Rhode Island: the safety of the tug and barge industry. The managers' amendment to the Coast Guard Authorization Act that passed the Senate on Monday included a provision that will strengthen the regulation of transportation of petroleum by barges in the waters of the Northeast.

I appreciate the cooperation of Commerce Committee Chairman MCCAIN,