

“(1) building public awareness and education, and improving policies and practices;

“(2) providing training, tools and resources to develop the skills and capacity of parents (including foster parents), adult guardians, and professionals who interact directly with infants, children, and youth, and their families, as appropriate, in an organized or professional setting, including through the best practices developed under section 7132(d) of the SUPPORT for Patients and Communities Act (Public Law 115–271); and

“(3) providing technical assistance to communities, organizations, and public agencies on how to prevent and mitigate the impact of exposure to trauma, violence, and substance use.

“(c) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this section \$11,000,000 for each of fiscal years 2020 through 2024.”

SEC. 207. ESTABLISHMENT OF LAW ENFORCEMENT CHILD AND YOUTH TRAUMA COORDINATING CENTER.

(a) ESTABLISHMENT OF CENTER.—

(1) IN GENERAL.—The Attorney General shall establish a National Law Enforcement Child and Youth Trauma Coordinating Center (referred to in this section as the “Center”) to provide assistance to adult- and juvenile-serving State, local, and tribal law enforcement agencies (including those operated by Indian tribes and tribal organizations as such terms are defined in section 4 of the Indian Self-Determination Act and Education Assistance Act) in interacting with infants, children, and youth who have been exposed to violence or other trauma, and their families as appropriate.

(2) AGE RANGE.—The Center shall determine the age range of infants, children, and youth to be covered by the activities of the Center.

(b) DUTIES.—The Center shall provide assistance to adult- and juvenile-serving State, local, and tribal law enforcement agencies by—

(1) disseminating information on the best practices for law enforcement officers, which may include best practices based on evidence-based and evidence-informed models from programs of the Department of Justice and the Office of Justice Services of the Bureau of Indian Affairs or the best practices developed under section 7132(d) of the SUPPORT for Patients and Communities Act (Public Law 115–271), such as—

(A) models developed in partnership with national law enforcement organizations, Indian tribes, or clinical researchers; and

(B) models that include—

(i) trauma-informed approaches to conflict resolution, information gathering, forensic interviewing, de-escalation, and crisis intervention training;

(ii) early interventions that link child and youth witnesses and victims, and their families as appropriate, to age-appropriate trauma-informed services; and

(iii) preventing and supporting officers who experience secondary trauma;

(2) providing professional training and technical assistance; and

(3) awarding grants under subsection (c).

(c) GRANT PROGRAM.—

(1) IN GENERAL.—The Attorney General, acting through the Center, may award grants to State, local, and tribal law enforcement agencies or to multi-disciplinary consortia to—

(A) enhance the awareness of best practices for trauma-informed responses to infants, children, and youth who have been exposed to violence or other trauma, and their families as appropriate; and

(B) provide professional training and technical assistance in implementing the best practices described in subparagraph (A).

(2) APPLICATION.—Any State, local, or tribal law enforcement agency seeking a grant under this subsection shall submit an application to the Attorney General at such time, in such manner, and containing such information as the Attorney General may require.

(3) USE OF FUNDS.—A grant awarded under this subsection may be used to—

(A) provide training to law enforcement officers on best practices, including how to identify and appropriately respond to early signs of trauma and violence exposure when interacting with infants, children, and youth, and their families, as appropriate; and

(B) establish, operate, and evaluate a referral and partnership program with trauma-informed clinical mental health, substance use, health care, or social service professionals in the community in which the law enforcement agency serves.

(d) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to the Attorney General—

(1) \$6,000,000 for each of fiscal years 2020 through 2024 to award grants under subsection (c); and

(2) \$2,000,000 for each of fiscal years 2020 through 2024 for other activities of the Center.

SEC. 208. NATIONAL INSTITUTES OF HEALTH REPORT ON TRAUMA.

Not later than 1 year after the date of the enactment of this Act, the Director of the National Institutes of Health shall submit to Congress a report on the activities of the National Institutes of Health with respect to trauma (including trauma that stems from child abuse, exposure to violence, addiction and substance use, and toxic stress) and the implications of trauma for infants, children, and youth, and their families, as appropriate. Such report shall include—

(1) the comprehensive research agenda of the National Institutes of Health with respect to trauma;

(2) the capacity, expertise, and review mechanisms of the National Institutes of Health with respect to the evaluation and examination of research proposals related to child trauma, including coordination across institutes and centers and inclusion of trauma impact statements within relevant grants focused on serving children and families;

(3) the relevance of trauma to other diseases, outcomes, and domains;

(4) strategies to link and analyze data from multiple independent sources, including child welfare, health care (including mental health care), law enforcement, and education systems, to enhance research efforts and improve health outcomes;

(5) the efficacy of existing interventions, including clinical treatment methods, child- and family-focused prevention models, and community-based approaches, in mitigating the effects of experiencing trauma and improving health and societal outcomes; and

(6) identification of gaps in understanding in the field of trauma and areas of greatest need for further research related to trauma.

SUBMITTED RESOLUTIONS

SENATE RESOLUTION 240—RELATIVE TO THE DEATH OF DR. LLOYD JOHN OGILVIE, FORMER CHAPLAIN OF THE UNITED STATES SENATE

Mr. McCONNELL submitted the following resolution; which was considered and agreed to:

S. RES. 240

Whereas Dr. Lloyd John Ogilvie, a native of Kenosha, Wisconsin, earned degrees from Lake Forest College and Garrett Theological Seminary and pursued postgraduate studies at New College of the University of Edinburgh in Scotland;

Whereas Dr. Lloyd John Ogilvie served as a Presbyterian minister throughout his life in Illinois, Pennsylvania, and California;

Whereas Dr. Lloyd John Ogilvie authored many books and hosted nationally syndicated radio and television ministry;

Whereas Dr. Lloyd John Ogilvie became the 61st Senate Chaplain on March 11, 1995, and faithfully served the Senate for eight years as Senate Chaplain: Now, therefore, be it

Resolved, That the Senate has heard with profound sorrow and deep regret the announcement of the death of Dr. Lloyd John Ogilvie, former Chaplain of the Senate.

Resolved, That the Secretary of the Senate communicate these resolutions to the House of Representatives and transmit an enrolled copy thereof to the family of the deceased.

Resolved, That when the Senate adjourns today, it stand adjourned as a further mark of respect to the memory of Dr. Lloyd John Ogilvie.

SENATE RESOLUTION 241—DESIGNATING MAY 2019 AS “OLDER AMERICANS MONTH”

Ms. COLLINS (for herself, Mr. CASEY, Mr. BURR, Mrs. GILLIBRAND, Mr. RUBIO, Mr. BLUMENTHAL, Mr. SCOTT of South Carolina, Ms. WARREN, Mr. BRAUN, Mr. JONES, Mr. HAWLEY, Ms. ROSEN, Ms. MCSALLY, Ms. SINEMA, and Mr. SCOTT of Florida) submitted the following resolution; which was considered and agreed to:

S. RES. 241

Whereas President John F. Kennedy first designated May as “Senior Citizens Month” in 1963;

Whereas, in 1963, only approximately 17,000,000 individuals living in the United States were age 65 or older, approximately 1/3 of those individuals lived in poverty, and few programs existed to meet the needs of older individuals in the United States;

Whereas, in 2018, there were more than 52,431,193 individuals age 65 or older in the United States, and those individuals accounted for 16 percent of the total population of the United States;

Whereas approximately 10,000 individuals in the United States turn age 65 each day;

Whereas, in 2019, more than 9,056,000 veterans of the Armed Forces are age 65 or older;

Whereas older individuals in the United States rely on Federal programs, such as programs under the Social Security Act (42 U.S.C. 301 et seq.) (including the Medicare program under title XVIII of that Act (42 U.S.C. 1395 et seq.) and the Medicaid program under title XIX of that Act (42 U.S.C. 1396 et seq.)), for financial security and high-quality affordable health care;

Whereas the Older Americans Act of 1965 (42 U.S.C. 3001 et seq.) provides—

(1) supportive services to help individuals in the United States who are age 60 or older maintain maximum independence in the homes and communities of those individuals; and

(2) funding for programs, including nutrition services, transportation, and care management, to assist more than 11,000,000 older individuals in the United States each year;

Whereas, compared to older individuals in the United States in past generations, older

individuals in the United States in 2019 are working longer, living longer, and enjoying healthier, more active, and more independent lifestyles;

Whereas, in 2018, an estimated 5,976,000 individuals in the United States age 65 or older continued to work as full-time, year-round employees;

Whereas older individuals in the United States play an important role in society by continuing to contribute their experience, knowledge, wisdom, and accomplishments;

Whereas older individuals in the United States play vital roles in their communities and remain involved in volunteer work, the arts, cultural activities, and activities relating to mentorship and civic engagement; and

Whereas a society that recognizes the success of older individuals and continues to enhance the access of older individuals to quality and affordable health care will—

(1) encourage the ongoing participation and heightened independence of those individuals; and

(2) ensure the continued safety and well-being of those individuals: Now, therefore, be it

Resolved, That the Senate—

(1) designates May 2019 as “Older Americans Month”; and

(2) encourages the people of the United States to provide opportunities for older individuals to continue to flourish by—

(A) emphasizing the importance and leadership of older individuals through public recognition of the ongoing achievements of the older individuals;

(B) presenting opportunities for older individuals to share their wisdom, experience, and skills with younger generations; and

(C) recognizing older individuals as valuable assets in strengthening communities across the United States.

SENATE RESOLUTION 242—DESIGNATING JUNE 15, 2019, AS “WORLD ELDER ABUSE AWARENESS DAY”

Mr. GRASSLEY (for himself, Mr. BLUMENTHAL, Ms. COLLINS, Ms. HASSAN, Mr. LANKFORD, and Mr. WYDEN) submitted the following resolution; which was referred to the Committee on the Judiciary:

S. RES. 242

Whereas, as of 2016, there were approximately 52,400,000 individuals in the United States age 65 or older, according to the Bureau of the Census;

Whereas the Bureau of the Census projects that, by 2030, 1 in every 5 individuals in the United States, or 20.6 percent of the population of the United States, will be age 65 or older;

Whereas the population of aging individuals in the United States has steadily increased over the past century;

Whereas elder abuse can come in many different forms, often manifesting as physical, sexual, or psychological abuse, financial exploitation, neglect, and social media abuse;

Whereas the Federal Government estimates that more than 1 in 10 individuals in the United States (approximately 5,000,000 people) over the age of 60 experience abuse each year, and many of them experience abuse in multiple forms, according to the American Journal of Public Health;

Whereas elderly individuals in the United States who experience cognitive impairment, physical disabilities, and isolation are 4 to 10 times more likely to become the victims of abuse than those without disabilities, according to geriatric medical research at

Rush University Medical Center in Chicago, Illinois;

Whereas close to 50 percent of elderly individuals suffering from dementia will experience abuse during their lifetime, according to the Department of Justice;

Whereas abuse, neglect, and exploitation of older adults in the United States are unidentified and unreported because of an inability to report or a fear of reporting;

Whereas only 1 in 23.5 cases of elder abuse are reported to the authorities, including 1 in 44 cases of financial abuse and 1 in 57 cases of neglect, according to Weill Cornell Medical Center;

Whereas at least \$2,900,000,000 is taken from older adults each year due to financial abuse and exploitation, according to the Government Accountability Office;

Whereas elder abuse, neglect, and exploitation have no boundaries and cross all racial, social, class, gender, and geographic lines;

Whereas approximately 1 in 3 people in the United States cared for an elderly parent, spouse, or loved one between 2011 and 2017, according to the Centers for Disease Control;

Whereas older adults who are abused are 3 times more likely to die before older adults of the same age who are not abused, according to the Surgeon General;

Whereas there is evidence of an increase in elder abuse, neglect, and financial exploitation linked to individuals with opioid addiction, according to the Administration for Community Living, the Elder Justice Coalition, the Center for Gerontology at Virginia Tech, and the National Adult Protective Services Association;

Whereas the Elder Abuse Prevention and Prosecution Act (34 U.S.C. 21701 et seq.) was signed into law on October 18, 2017, but there is still more that can be done to stop elder abuse;

Whereas financial abuse of older adults has consistently been 1 of the top 10 complaints made each year to the fraud hotline of the Special Committee on Aging of the Senate;

Whereas public awareness has the potential to increase the identification and reporting of elder abuse by the public, professionals, and victims, and can act as a catalyst to promote issue-based education and long-term prevention;

Whereas private individuals and public agencies must work together on the Federal, State, and local levels to combat increasing occurrences of abuse, neglect, exploitation, crime, and violence against vulnerable adults, including vulnerable older adults, particularly in light of limited resources for vital protective services; and

Whereas 2019 is the 14th anniversary of World Elder Abuse Awareness Day: Now, therefore, be it

Resolved, That the Senate—

(1) designates June 15, 2019, as “World Elder Abuse Awareness Day”;

(2) recognizes those individuals who originated World Elder Abuse Awareness Day, which brings much needed attention around the globe to the issue of elder abuse;

(3) recognizes judges, lawyers, adult protective services professionals, law enforcement officers, long-term care ombudsmen, social workers, health care providers, advocates for victims, and other professionals and agencies for their efforts to advance awareness of elder abuse; and

(4) encourages members of the public and professionals who work with older adults to act as catalysts to promote awareness and long-term prevention of elder abuse—

(A) by reaching out to local adult protective services agencies, long-term care ombudsman programs, and the National Center on Elder Abuse; and

(B) by learning to recognize, detect, report, and respond to elder abuse.

SENATE RESOLUTION 243—REQUESTING INFORMATION ON SAUDI ARABIA'S HUMAN RIGHTS PRACTICES IN YEMEN PURSUANT TO SECTION 502B(C) OF THE FOREIGN ASSISTANCE ACT OF 1961

Mr. MURPHY (for himself, Mr. YOUNG, Ms. COLLINS, and Mrs. SHAHEEN) submitted the following resolution; which was referred to the Committee on Foreign Relations:

S. RES. 243

Resolved,

SECTION 1. REQUEST FOR INFORMATION ON SAUDI ARABIA'S HUMAN RIGHTS PRACTICES IN YEMEN.

(a) STATEMENT REQUIRED.—Not later than 30 days after the date of the adoption of this resolution, the Secretary of State shall, pursuant to section 502B(c) of the Foreign Assistance Act of 1961 (22 U.S.C. 2304(c)), transmit to the Committee on Foreign Relations of the Senate and the Committee on Foreign Affairs of the House of Representatives a statement, prepared with the assistance of the Assistant Secretary of State for Democracy, Human Rights, and Labor and the Office of the Legal Adviser, with respect to Saudi Arabia.

(b) ELEMENTS.—The statement submitted under subsection (a) shall include the following elements:

(1) All available credible information concerning alleged violations of internationally recognized human rights by the Kingdom of Saudi Arabia or members of the Saudi-led coalition in Yemen, including the denial of the right to life in the context of the armed conflict in Yemen caused by indiscriminate or disproportionate operations.

(2) A description of the steps the United States Government has taken—

(A) to promote respect for and observance of human rights as part of the Kingdom of Saudi Arabia's activities in Yemen and discourage any practices that are inimical to internationally recognized human rights; and

(B) to publicly or privately call attention to, and disassociate the United States and any security assistance provided for the Kingdom of Saudi Arabia from, such practices.

(3) An assessment, notwithstanding any such practices, whether extraordinary circumstances exist that necessitate a continuation of security assistance for the Kingdom of Saudi Arabia, and, if so, a description of the circumstances and the extent to which the assistance should be continued (subject to such conditions as Congress may impose under section 502B of the Foreign Assistance Act of 1961 (22 U.S.C. 2304)).

(4) Other information, including—

(A) an assessment from the Secretary of State of the likelihood that United States security assistance, as defined in section 502B(d) of the Foreign Assistance Act of 1961 (22 U.S.C. 2304(d)), will be used in Yemen;

(B) a description of the violations of the Arms Export Control Act (22 U.S.C. 2751 et seq.) (AECA), as noted in the Secretary of State's certification to Congress pursuant to section 1290 of the John S. McCain National Defense Authorization Act for Fiscal Year 2019 (Public Law 115-232), including—

(i) whether the violation resulted from the re-transfer of United States defense articles or services without prior authorization or the use of defense articles or services against