

had to make choices that most experienced and educated adults would find difficult. They have lived with fear and witnessed death. Some of them have lashed out. They have joined gangs, sold drugs, and, in some cases, inflicted pain on others. But they have played baseball and gone on dates and shot marbles and kept diaries. For, despite all they have seen and done, they are—and we must constantly remind ourselves of this—still children.”

During National Foster Care Month, I encourage you to log on to www.adoptuskids.org to learn more about the children who are waiting in our country and across the Nation for the safe, loving home they deserve. As Mistral said, “Many things we need can wait, the child cannot. To him we cannot say tomorrow. His name is today.”

RESIGNATION OF FTC COMMISSIONER ORSON SWINDLE

Mr. McCAIN. Mr. President, after over 7 years of service, Orson Swindle announced today his resignation as Commissioner of the Federal Trade Commission. Mr. Swindle has been dedicated to protecting the interests of the American consumer by promoting competition and fairness in the marketplace. He will be sorely missed.

Mr. Swindle's accomplishments at the FTC have been numerous, but his efforts to promote the vigorous development of the Internet and technology generally have been particularly important to our Nation's economy. His service with the Commission started shortly after the birth of electronic commerce, and it was thanks in part to Mr. Swindle's efforts to keep the Internet free of over-regulation that it is now such a robust and widely-used medium of communication, commerce, education, and political participation. All the while, Mr. Swindle has focused his efforts on educating consumers about the new online world in order to build their confidence in and knowledge of the Internet. He has also ensured that industry understands the need to self-regulate effectively or face the credible threat of Government interference and aggressive enforcement.

I commend Mr. Swindle and thank him for his outstanding service to this country, and I deeply hope that he will continue to build on his long and distinguished career as a public servant. Our Nation benefits greatly from the work of individuals such as Orson Swindle, whom I am proud to call my friend. He stands as an example for us all of commitment, achievement, and sacrifice on behalf of our Nation.

THE NATIONAL ALL SCHEDULES PRESCRIPTION ELECTRONIC REPORTING ACT

Mr. SESSIONS. Mr. President, I take a moment to bring attention to an important step that was taken yesterday in the Senate Committee on Health, Education, Labor, and Pensions. On

Wednesday morning, the HELP Committee unanimously passed S. 518, the National All Schedules Prescription Electronic Reporting Act, a bill designed to help states combat the growing scourge of prescription drug abuse and diversion.

I begin by thanking Senator ENZI, our chairman, for his excellent support in bringing this bill, the National All Schedules Prescription Electronic Reporting Act, before the committee for consideration. I also thank and commend the bill's original cosponsors, Senators KENNEDY, DURBIN, and DODD, and their staffs, for contributing to the productive, bipartisan process of developing this legislation.

The abuse and diversion of prescription drugs is a tremendous public health issue for our nation, and a growing one. An epidemic that first attracted public notice as a regional crisis has now spread to touch every kind of community, from major cities to the smallest rural hamlet. Prescription drugs now rank second only to marijuana in the incidence of abuse. Over 31 million American adults and adolescents have, at one time, abused pain relievers, and the number of first-time abusers has increased 336 percent since 1990.

As appalling as the numbers are, we can not permit them to obscure the human tragedy of drug abuse and dependence, or the toll that drug diversion takes on communities. In the case of individuals who become addicted to prescription medications, the addicted too often fall from the productive ranks of society into unemployment, disability, hospitalization, or even death. They may be drawn into criminal activities that lead to incarceration. Their families and communities suffer along with them. Those who engage in drug diversion feed an insidious black market that makes dangerous drugs available to children, as well as adults. On a societal level, taxpayers bear much of the expense of abused or illegally diverted drugs, and, subsequently, of treating the medical consequences of misuse and addiction.

I find particularly concerning the recent Partnership for a Drug-Free America finding that prescription medications are emerging as the most rapidly growing category of drugs abused by America's teenagers. According to this national study, released April 21st, approximately one in five teenagers—that is over 4 million kids nationally—has abused prescription painkillers, and 37 percent report that close friends have done so. Another 10 percent of teens have abused prescription stimulants, such as Ritalin. Surveys show that this dismal pattern is driven by, according to teens' own assessment, ease of access.

The establishment, by the states, of programs to monitor prescriptions for controlled substances can help curb inappropriate, illegal access to these potentially dangerous drugs. At the present time, 20 states have operating

prescription drug monitoring programs. In general, monitoring programs collect, from dispensers, a basic set of information on prescriptions that are issued for controlled substances. In the most effective programs, providers, including physicians and pharmacists, may request the prescription histories of their patients, permitting them to avoid providing controlled substances to “doctor shoppers” seeking multiple prescriptions to feed addiction or for diversion to the black market.

These monitoring programs, appropriately designed, not only help healthcare providers to better deliver appropriate, effective treatment of pain and other conditions that require the use of “scheduled” drugs, but also provide an important tool that permits doctors to identify and, if appropriate, refer for treatment patients whose prescription history suggests that they are at high risk of addiction.

In addition, they offer an opportunity to repair the physician-patient relationship in the face of a growing addiction problem that has created an atmosphere in which physicians fear that prescribing “high risk” medications could inadvertently injure patients or lead to civil or criminal liability or professional discipline. This situation has created yet another class of victims, patients who are finding it too difficult to obtain timely, effective treatment for pain and other legitimate medical needs. Much to their credit, physicians have recognized the tremendous potential here and have been the leading advocates for national legislation supporting the broader adoption of well-designed prescription drug monitoring programs.

I would like to particularly commend the American Society of Interventional Pain Physicians, and Dr. Laxmaiah Manchikanti, their CEO, for the tremendous effort they have put forth to educate members and the public regarding the need for this legislation. ASIPP has, in recent days, been joined in their strong advocacy for the NASPER bill by the American Society of Anesthesiology and the American Osteopathic Association, and I expect that others will soon follow. Those physicians who have stepped forward to advocate for a balanced and effective solution to this problem are truly acting in a manner consistent with the highest ideals of the medical profession.

The bill we are considering today, National All Schedules Prescription Electronic Reporting Act, establishes a federal grant program, to be administered by the Department of Health and Human Services, that would support both the creation of new state programs and the improvement of existing ones. Participating programs would be designed according to a “best practices” model, and would adopt applicable health information technology standards.

It also addresses the important barriers that continue to hamper the full

realization of these programs' potential: the fact that there are not enough of them, and in a time when patients regularly cross state lines seeking treatment, existing program can not yet effectively share information across state lines.

This bill provides states with the resources and guidance they need to make important progress toward minimizing the abuse and diversion of prescription medications while ensuring patients' access to timely, effective treatment, and I urge you to join us in supporting it.

ADDITIONAL STATEMENTS

NINTH ANNUAL WORLD CONGRESS IN AMMAN, JORDAN

• Mr. CHAFEE. Mr. President, next week, from June 2–6, 2005, the Center for Civic Education will host the Ninth Annual World Congress on Civic Education in Amman, Jordan. Nearly 200 civic education leaders will attend this event, representing 58 countries and 28 U.S. States.

The purpose of the World Congress is to share information about the best practices and materials developed through Civitas: An International Civic Education Exchange Program, an authorized program of the No Child Left Behind Act. The program addresses the full range of civic education activities. These include the development of educational policy, standards, curricular frameworks, and materials, as well as teacher education, classroom implementation, and research and evaluation.

One program developed through Civitas is Project Citizen, a middle school level program on public policy in the United States. Project Citizen is now being used in more than fifty countries, and is one of the most effective programs in promoting the development of a political culture supportive of democratic values, principles, institutions, and participation.

Another important component of Civitas is the series of exchanges among leaders in civic education in the United States and those in emerging and established democracies worldwide. The purpose of the exchanges is for civic education leaders to learn from and assist each other in improving education for democracy in their home nations.

Therefore, I think it is an important step that for the first time the World Congress on Civic Education will be hosted in the Middle East. Joining the Center for Civic Education in hosting this year's World Congress is Arab Civitas—a regional network of nine Arab countries in the Middle East—and the Jordanian Center for Civic Education Studies.

Arab Civitas, which is funded through the Middle East Partnership Initiative at the State Department, administers a program of citizenship edu-

cation in elementary and secondary schools in the Middle East. Civic educators in Jordan, Egypt, the West Bank, Lebanon, Tunisia, Morocco, Algeria, Yemen, Bahrain, and recently Saudi Arabia, work with the Center for Civic Education through Arab Civitas. The goal of the program is to help students understand and respect the core concepts of freedom and democracy such as free expression, pluralism and the rule of law, and human rights.

As the chairman of the Senate Committee on Foreign Relations Subcommittee on Near Eastern and South Asian Affairs, it is my strong belief that many of the conflicts and problems in the world, and particularly in the Middle East, could be lessened by strong investments in education. I am particularly supportive of education programs which seek to improve tolerance and understanding of others. Thus, the theme of this year's congress is of particular interest to me: Advancing Peace and Stability through Active Citizenship.

Mr. President, I think we can all agree that this is exciting work that the Center for Civic Education is accomplishing. Its work in strengthening democracy, and promoting tolerance and moderation, in the United States and throughout the world, is admirable. I hope and expect the attendees will have a successful Ninth Annual World Congress on Civic Education.●

DEAF WEST THEATER PRODUCTION OF "BIG RIVER"

• Mr. HARKIN. Mr. President, I recently had the pleasure of attending a truly unique theater production at Ford's Theater—a production that is a testament to the Positive impact of Federal funding of the arts. The Deaf West Theater production of *Big River: The Adventures of Huckleberry Finn*, in conjunction with the Roundabout Theater Company and the Mark Taper Forum, utilizes American Sign Language and a cast of hearing and deaf actors working seamlessly together to tell this classic Mark Twain story. The exceptional quality of this production was recognized with a 2004 Tony Honor for Excellence in the Theater.

This production of *Big River* is a superb example of how the performing arts can lead by example, in this case, by offering a dramatic example of people who bridge the gap between the deaf and hearing communities. Deaf and hearing actors are an integral part of the show. Deaf and hearing audiences have an equal opportunity to enjoy the production. And the perspective of deaf culture is seamlessly integrated into the performance.

Federal funding was critical in achieving these important goals. Authorization for grant funding of deaf theater has been in Federal law, in one form or another, since 1967. In the case of the current production of *Big River*, grants from the U.S. Department of Education's Office of Special Education

and Rehabilitative Services supported the training of deaf actors in the show, allowed the production to reach national audiences through touring, and helped to fund educational outreach.

I understand that our distinguished majority leader, Senator FRIST, recently saw the production, and was as dazzled by it as I was. So I encourage all of our colleagues, their families, and staffs to go see *Big River*, which will be at Ford's Theater until June 4. And I also encourage my colleagues to join with me in working to restore funding to keep Deaf West's work alive for audiences in the future.●

HONORING NEW IBERIA MAIN STREET

• Ms. LANDRIEU. Mr. President, today I rise to honor a city from my home State of Louisiana and am delighted to recognize its achievement before this body.

The City of New Iberia, LA, was recently selected by The National Trust for Historic Preservation to receive a 2005 Great American Main Street Award. New Iberia won this prestigious award because of its successful downtown revitalization. In addition to being recognized as one of only five winning communities nationwide, New Iberia is the only community in Louisiana to ever receive this distinction. As a champion of sustainable and quality community development, I can personally attest to this well-deserved honor. New Iberia's Main Street creates a unique sense of place through the beauty of its architecture, landscaping, and natural integration with Bayou Teche. The residents of New Iberia identify with this special place, and it contributes to the quality of life and sense of community pride shared by them.

Founded in 1779, New Iberia was a prosperous antebellum community that matured into a modern city. By the mid 1960s, New Iberia's Main Street began experiencing decline typical of many communities in the United States at that time. Recognizing the role of Main Street in the life of a community, New Iberia's business leaders, elected officials, and citizens started a progressive downtown revitalization effort known as Operation Impact in the early 1970s. This focus on Main Street continued, and in the 1990s, New Iberia further enhanced its efforts by initiating an officially designated Main Street Program. The unified commitment, hard work, and enthusiasm of the people of New Iberia over nearly 40 years has reestablished their downtown as a vibrant nucleus of culture, commerce, and tourism. It has also fittingly earned them national acclaim.

In the few years since the Main Street Program began in New Iberia, the city has seen over 115 new businesses established, over 420 new jobs created, and more than \$19 million in private investment with total investment exceeding \$24 million.