

There was recently an article published in an eastern Kentucky magazine, the *Sentinel-Echo: Silver Edition*, which gave the public a glimpse into the groundbreaking work being done by the Highlands Center for Autism. Mr. President, I ask unanimous consent that the article be printed in the RECORD.

There being no objection, the article was ordered to appear in the RECORD as follows:

[From the *Sentinel-Echo: Silver Edition*, Nov. 2011]

HIGHLANDS CENTER FOR AUTISM

Kathy sits almost still at her desk as her teacher writes a word on an erasable pad, shows it to Kathy and says, "wagon." The 8-year-old little girl looks at the word and repeats, "wagon." "Good saying 'wagon!'" her teacher praises.

Five-year-old Jerry sways a bit back and forth, making noises his teacher doesn't understand. "Use your iPad to tell me what you want," she softly tells him. He points to icons on the device's screen and the words I WANT A DRINK OF WATER appear. "Good making a sentence!" she compliments.

Kathy and Jerry are students at the Highlands Center for Autism, and there is more than one amazing achievement going on here. It is amazing that Kathy is able to sit still and to read; it is amazing that Jerry is able to communicate his needs, and it is truly a miracle that the Center exists at all.

Autism is a term used to describe a group of complex developmental brain disorders that typically appear during the first three years of life. Very skilled professionals often can see autism signs as early as six months, but children are often not diagnosed until 12 to 18 months, and many times much later. Symptoms manifest a wide spectrum of behaviors impacting development of social interaction and communication skills. Every individual is affected differently. Many need to be taught what most people consider basic behaviors—nodding yes or no, making eye contact, eating with utensils, playing, potty training.

As recently as 10 years ago, the majority of people were completely unaware of the condition. Today, however, public awareness has risen as more children are being diagnosed, dramatically increasing the number of affected families. According to the Centers for Disease Control, one out of every 90 children will be diagnosed with autism. There is no known cause or cure, and children do not "outgrow" it, but research has shown that early intervention using Applied Behavior Analysis (ABA) has a dramatic impact on reducing symptoms and improving life quality.

A major problem with achieving that crucial early intervention is a lack of facilities providing help, especially in communities outside major metropolitan areas. Even getting into a diagnostic program can take a year or longer. Many families who can afford it move near a treatment center in order to get help for their children.

In early 2008, a group of local families approached Highlands Health System with the idea of forming a partnership to establish a local center for ABA treatment for their children who had been diagnosed with autism. They had been primarily on their own, searching first for a diagnosis of what was happening to their children and then, after diagnosis, seeking treatment. They knew that ABA is a proven, evidence-based treatment with decades of solid scientific research supporting its effectiveness.

After their meeting with the parents and additional research revealing that a re-

search-based program specifically for children diagnosed with autism did not exist anywhere in or near Kentucky, Highlands was prompted to move toward fulfilling this need. Their research also indicated that the Cleveland (Ohio) Clinic Center for Autism offered one of the most prestigious treatment programs in the country. After a visit to the Clinic by a group of representatives, Highlands was ready to work towards establishing the first program of its kind in Kentucky.

A community meeting revealed an astonishing amount of support from local families, schools, health departments, social-service agencies and government officials, leading to Highlands entering into a consulting agreement in September of 2008 with the Cleveland Center for Autism to work toward the goal of "mirroring" Cleveland's program in Prestonsburg.

Highlands owned an apartment building near the hospital which became the Center's facility. Next began the search for a director for the program. Another one of those "miracles" happened when they found Dr. Shelli Deskins, a Paintsville native who was working in Hazard treating children with post-traumatic stress disorder and who had an impressive educational background and experience in ABA.

Dr. Deskins was approached by the hospital in November of '08. She began at Highlands in January of '09 as the Center's only employee and with her office in a former elevator shaft in the main hospital building! Aided by Karen Sellers, assistant to Highlands's president, Dr. Deskins set about creating the Center for Autism. She did everything from helping with facility renovation, writing and establishing procedures, ordering supplies, interviewing and hiring staff, finding children anything necessary to create an outstanding and one-of-its-kind, facility-based treatment center. Even though she was already trained in ABA and had a doctoral degree, she also spent six weeks at Cleveland's Center to thoroughly absorb their program's procedures.

From the beginning, Dr. Deskins and Highlands have insisted that the Center be "The Best," with no shortcuts or cutting corners. The original staff went to the Cleveland Clinic for two weeks to train in the Clinic's methods and learn their procedures, and Cleveland staff members followed them back to Prestonsburg to help open the Center. The Highlands Center staff continues with follow-up training periodically. The children at Highlands receive one-on-one attention from the highly trained and dedicated instructors. Dr. Deskins says staff members know very quickly if working with children diagnosed with autism is something they want to do.

The Center for Autism is a private, year-round day school and has seven students enrolled at this time, but expects to be at their capacity of 10 by summer. Currently, the children range in age from 3 to 14, and include students whose families have moved here from Alabama, Virginia, and Texas.

The Highlands Center is not a place where you can drop off your child to be "fixed" it requires total commitment from the parents. Home visits are made by Dr. Deskins and each child has a data book recording daily progress. Home communication notes are sent home on a daily basis.

The Center is guided by the principle that all children deserve the opportunity to laugh and play and to become healthy, happy, and productive adults. The Highlands Center for Autism is well on its way to becoming a regional and national resource for the diagnosis and treatment of children with autism.

REMEMBERING STACEY SACHS

Mr. KERRY. Mr. President, at its best, the Senate is an extended family—we spend an unbelievable amount of time working here, Senator to Senator, staff to staff. And in the course of those efforts, we get to know each other not as members of a party or as ideological caricatures or cutouts but as people. In particular, we get to know and appreciate on a personal level not just our staff but the staffs of our State delegations. There are staffers from the Massachusetts delegation who have been here as long as I have. And certainly on my late colleague Ted Kennedy's staff there were professionals I knew as friends and turned to as easily as Teddy himself did for so many years.

That is why I know Ted himself would be here this morning doing what I am doing in his place, which is acknowledging with sadness the passing on Saturday, April 21 of Stacey Sachs—a longtime health care staffer for Ted—whom we lost to complications from a hard-fought battle with cancer. Stacey was just 50 years old.

For many of us, Stacey was a steady and unchanging sight in this ever-changing institution. She spent more than a decade on Capitol Hill as senior health counsel on the Senate Health, Education, Labor, and Pensions, HELP, Committee. She came to the Hill to play a role in making universal health care reform a reality; her life's work—as it was for Ted—is a legacy she leaves behind that should be a gift to last.

But it is not her only legacy. Over the years, I came to know Stacey, and I came to know firsthand so much of what impressed and inspired her friends and her colleagues: her health care expertise, her honesty, and her dedication. She devoted her career to making sure Americans had access to health care coverage. It was that simple. For her, that work was personal. It was not statistics or spreadsheets or the arcane minutiae of legislation. For Stacey, she cared first and foremost about the effect public policy has on everyday Americans, and she touched the lives of countless people who never met her. But every American, in part, can thank her for real changes that made their lives better.

I am not just talking about legislation, but I could be. Stacey's outsized role in the Medicare Modernization Act of 2003 and the recently enacted Affordable Care Act of 2010 were just two examples of the ways she focused and made a real difference on a wide range of issues during her time on the HELP Committee. She worked on Medicare prescription drugs, Medicare reimbursement, health insurance coverage and reimbursement, Medicaid, the Health Insurance Portability and Accountability Act, and the Employee Retirement Income Security Act. In each instance and every effort, Stacey brought to the task at hand not just her policy expertise but her compassion and professionalism. The same could be said about an effort that came

to be associated with Ted Kennedy and then-Governor Romney but with which Stacey was unbelievably engaged: the development of the Massachusetts health reform law in 2006. That law provided the Commonwealth with the highest rates of health care coverage in the Nation and served as the blueprint for national health reform. While the rate of the uninsured grew by millions in our country, today in Massachusetts, 98.1 percent of our residents have health insurance, including 99.8 percent of our children. And if Ted Kennedy were here today, I know he would share with all of us that without Stacey, it wouldn't have gotten across the finish line.

Still, there was more to Stacey than big legislation. She saw government and public service not just with a human face but on a human scale. Despite the breadth of her legislative portfolio, Stacey became most widely known among fellow staffers, constituents, and friends for her ability and willingness to help individual patients identify and secure the personal health care services they desperately needed in times of crisis. She was the person you turned to when someone could not find the right doctor, reach the right specialist, or make an insurance company do the right thing. And whether that person was from Massachusetts or Montana, Stacey fought for them with the same ferocity as she would have for Ted Kennedy or for the most landmark piece of legislation because for Stacey Sachs, it was pretty fundamental—if you were in government to solve big problems for the whole country, why wouldn't you work equally hard to solve those problems for the average person who came to you looking for help?

Mr. President, as so many know, after Senator Kennedy passed away, Stacey continued her Senate service working for Chairman HARKIN on the HELP Committee. She was determined to finish the job of health reform—and finish it she did, even as she went on to, in a tragic irony, fight her own battle for life itself against the same disease which took Ted Kennedy away from us all.

Today, we are all fortunate for Stacey's dedication to public service and the example of her commitment as we continue in the work of her life. Stacey was a member of our extended Senate family, but we should remember what she meant not just to us but to her own family. Our thoughts and prayers are with Stacey's mother, Sandy Sachs, and her two brothers, Bruce and Howard, during this unbelievably difficult time.

OBSERVING ALCOHOL AWARENESS MONTH

Mr. AKAKA. Mr. President, I wish to recognize the 26th Alcohol Awareness Month this April, sponsored by the National Council on Alcoholism and Drug Dependence, Inc., NCADD. Since 1987,

NCADD has been working to raise public awareness and understanding of alcoholism, specifically to reduce the stigma associated with alcoholism, which too often prevents individuals and families from admitting abuse and finding resources to help.

According to NCADD, more than 18 million individuals, or 8.5 percent of Americans, suffer from alcohol-use disorders. In addition to those directly affected by alcohol, there are millions more who feel the effects of alcohol abuse by a loved one in their everyday lives—spouses, children, other family members, and friends. The prevalence of alcohol abuse in this country is astounding, with one out of every four U.S. children having been exposed to alcohol-use disorders in their family.

One of the most troubling aspects of alcoholism is that it often has severe effects on those closest to the person addicted and their community. It takes an enormous emotional, physical, and financial toll on the family members of those addicted to alcohol. Statistics show that 75 percent of domestic abuse is committed while one or both members are intoxicated, and family members utilize health care twice as much as families without alcohol problems.

This year's theme, "Healthy Choices, Healthy Communities: Prevent Underage Drinking," is meant to draw particular attention to the severe impact that alcohol and alcohol-related problems have on young people, their friends, their families, and as a result, our communities. Underage drinking is quickly becoming a serious concern in my home State of Hawaii, and across the country.

Alcohol is currently the No. 1 drug of choice for America's young people, higher than tobacco, marijuana, or other illicit drugs. Teens who begin drinking before age 15 are four times more likely to develop alcoholism than their peers who wait until the age of 21. Unfortunately, underage drinking is getting worse with 7,000 kids in the United States under the age of 16 taking their first drink each day, which costs the Nation an estimated \$62 billion annually.

To combat this deepening problem and curb these disturbing trends, education, awareness, and prevention programs, like the events going on this month, are critically important. In addition, parents can help to reduce their children's risk of problem drinking by simply educating their kids and keeping a more watchful eye on them, especially as they enter middle schools and high school.

As we continue to observe this year's Alcohol Awareness Month, I urge everyone to take an active role in reducing the incidence of underage drinking across the country: do not contribute to events where minors and alcohol are involved without supervision, be aware of your influence on the children close to you, and encourage minors to stay alcohol free. Together, we can all help to reverse recent trends in the United

States and keep our children from the harmful, lasting effects of alcohol abuse.

TRIBUTE TO DR. RELLA P. CHRISTENSEN

Mr. HATCH. Mr. President, I am honored today to be able to pay tribute to a truly remarkable woman, and world-renowned dental consultant—Dr. Rella P. Christensen. Appropriately, at its 35th Anniversary Celebration in Las Vegas, on May 18, 2012, the Board of Directors of the CR Foundation will honor the life's work of Dr. Christensen.

Born on September 27, 1938, Rella received a Bachelor of Science in Dental Hygiene from the University of Southern California in 1960, and practiced dental hygiene for more than 25 years. She established and became the Director of the Bachelor's Degree in Dental Hygiene at the University of Colorado in 1970. Later, in 1986, she earned a PhD in physiology, with an emphasis on microbiology, from Brigham Young University and completed a post-graduate course in anaerobic microbiology at Virginia Polytechnic State University.

Rella co-founded Clinical Research Associates, now known as the CR Foundation, in 1976 with her husband Gordon, a world renowned and respected dentist and educator. For 27 years Rella directed this influential dental products testing institute as a full time volunteer. Her additional responsibilities included being the lead researcher and Editor-in-Chief of the CRA Newsletter which was published in 10 languages under her leadership with a worldwide circulation in 92 countries.

She went on to serve as Chairman of CR's Board of Directors for 2 years. Currently she volunteers as the team leader of Technologies in Restoratives and Caries Research section of CR.

Rella has been a steady, humble, but significant influence in the profession of dentistry, worldwide, for over a third of a century. Helping others in dentistry to find tools and concepts that really work is a passion for Rella. She has presented over one thousand dental continuing education programs, totaling over 5,200 hours, at national and international locations. Guided by her research discoveries, lectures, and writings, dentists are better able to secure their own professional development and understanding of materials, methods, dental products, and their own dental missions.

Dr. Rella Christensen has received numerous honors for her commitment to her field. In 2001 she was selected as the Distinguished Alumnus of Brigham Young University's School of Life Sciences, and now serves on its National Advisory Board.

In 2002 Rella received an Honorary Doctorate from Utah Valley State University. In 2011, Rella was named one of the Dental Products Report "Top 25 Women in Dentistry" and one of the