

(Mr. VAN HOLLEN) was added as a cosponsor of S. 2681, a bill to amend title 18, United States Code, to provide appropriate standards for the inclusion of a term of supervised release after imprisonment, and for other purposes.

S. 3740

At the request of Mr. CORNYN, the name of the Senator from Michigan (Mr. PETERS) was added as a cosponsor of S. 3740, a bill to amend the Omnibus Crime Control and Safe Streets Act of 1968 to reauthorize the residential substance use disorder treatment program, and for other purposes.

S. 4110

At the request of Mr. COONS, the name of the Senator from Virginia (Mr. WARNER) was added as a cosponsor of S. 4110, a bill to reauthorize the African Growth and Opportunity Act.

S. 4297

At the request of Mr. TUBERVILLE, the name of the Senator from Tennessee (Mrs. BLACKBURN) was added as a cosponsor of S. 4297, a bill to repeal the Corporate Transparency Act.

S. 5270

At the request of Mr. KELLY, the names of the Senator from Alaska (Mr. SULLIVAN) and the Senator from Minnesota (Ms. KLOBUCHAR) were added as cosponsors of S. 5270, a bill to amend the Office of National Drug Control Prevention Act of 1998 to include new requirements for assessments and reports, and for other purposes.

S. 5319

At the request of Mr. PETERS, the name of the Senator from Georgia (Mr. OSSOFF) was added as a cosponsor of S. 5319, a bill to amend the Homeland Security Act of 2002 to direct the Under Secretary for Intelligence and Analysis of the Department of Homeland Security to conduct an annual audit of the information systems and bulk data of the Office of Intelligence and Analysis of the Department, and for other purposes.

S. 5362

At the request of Mr. DURBIN, the name of the Senator from Virginia (Mr. WARNER) was added as a cosponsor of S. 5362, a bill to amend the Fair Labor Standards Act of 1938 regarding the application of wage and hour provisions to minor league baseball players, and for other purposes.

S. 5408

At the request of Mr. SCHUMER, the name of the Senator from Maryland (Mr. CARDIN) was added as a cosponsor of S. 5408, a bill to require the Secretary of the Treasury to mint commemorative coins in recognition of the life and legacy of Roberto Clemente.

S. 5463

At the request of Mr. PETERS, the name of the Senator from North Dakota (Mr. CRAMER) was added as a cosponsor of S. 5463, a bill to establish the Department of Homeland Security Northern Border Mission Center.

S. 5622

At the request of Mr. MARKEY, the name of the Senator from New Jersey

(Mr. BOOKER) was added as a cosponsor of S. 5622, a bill to amend the Energy Policy Act of 2005 to establish an energy efficient appliance rebate program to provide rebates for the manufacturing, distribution, contracting, installation, and servicing of certain building electrification products and industrial heat pumps, and for other purposes.

S.J. RES. 122

At the request of Mr. HOEVEN, the name of the Senator from Texas (Mr. CRUZ) was added as a cosponsor of S.J. Res. 122, a joint resolution providing for congressional disapproval under chapter 8 of title 5, United States Code, of the rule submitted by the Environmental Protection Agency relating to "Waste Emissions Charge for Petroleum and Natural Gas Systems: Procedures for Facilitating Compliance, Including Netting and Exemptions".

## SUBMITTED RESOLUTIONS

SENATE RESOLUTION 938—EXPRESSING THE SENSE OF THE SENATE THAT IT IS THE DUTY OF THE FEDERAL GOVERNMENT TO DRAMATICALLY EXPAND AND STRENGTHEN THE CARE ECONOMY

Ms. WARREN submitted the following resolution; which was referred to the Committee on Health, Education, Labor, and Pensions:

S. RES. 938

Whereas the preamble of the Constitution of the United States cites the duty to "promote the general Welfare", establishing care for the people of the United States as one of the pillars of our system of government;

Whereas, even before the novel coronavirus disease 2019 (COVID-19) pandemic and the recession it triggered—

(1) the United States was experiencing profound crises of care and well-being; and

(2) critical public services and programs in the United States were under-resourced or nonexistent;

Whereas we are interdependent and, at various stages of life, everyone will give or receive care;

Whereas care work makes all other work possible, and the economy of the United States cannot thrive without a healthy and robust foundation of care for all people;

Whereas over 3,500,000 children are born every year in the United States, and about 11,000 people in the United States reach retirement age each day;

Whereas, in 2019, the number of adults over 60 requiring long-term care was around 8,000,000 and that number was expected to triple by 2050;

Whereas, in 2019, more than 1 out of 5 adults in the United States had been an unpaid caregiver for an adult family member or friend, or for a child with disabilities, in the preceding 12 months;

Whereas 60 percent of unpaid caregivers worked for pay outside the home, and most were women;

Whereas over 3,600,000 children and young people in the United States had also been caregivers for adults;

Whereas, in 2023, women in the United States performed nearly 296 hours per year of unpaid care work on average, amounting to

nearly two-thirds of all unpaid care work performed and about 102 annual hours of care more than men on average, and Asian women and Latinas spent about an hour a day providing unpaid care on average, more than any other group;

Whereas the estimated size of the care economy, including both unpaid and paid caregiving, is up to \$6 trillion, approaching a quarter of total United States gross domestic product (GDP);

Whereas just as our country's physical infrastructure is crumbling, the Federal and State programs constituting our care infrastructure are an outdated patchwork, and quality care is inaccessible for millions of people in the United States;

Whereas the United States does not guarantee paid time off to give and receive care, and is the only industrialized country in the world without a national paid family and medical leave program;

Whereas States throughout the country have created sustainable paid family and medical leave models that could meet the needs of all people in the United States;

Whereas, in 2023, only 27 percent of the United States private sector workforce had access to paid family leave through their employer, while only 6 percent of the lowest wage workers, who are predominantly women and workers of color, had access to paid family leave;

Whereas Federal law in the United States does not guarantee paid sick days for workers and, in 2023, 22 percent of workers in the private sector workforce did not have even a single paid sick day;

Whereas the ability for workers to use paid sick time during the COVID-19 pandemic prevented 400 confirmed cases of COVID-19 per State per day;

Whereas the median cost of a private room in a nursing home facility is \$120,304 per year;

Whereas Medicaid—

(1) covers long-term care needs, but with strict income and asset eligibility requirements; and

(2) has an institutional bias, requiring State programs to cover care in congregate facilities, while home and community-based services are optional or limited;

Whereas Medicare generally does not cover long-term services and supports;

Whereas only 7 percent of individuals in the United States aged 50 or older are covered by private long-term care insurance, which is often prohibitively expensive while providing inadequate coverage;

Whereas, in 2024, nearly 27,000,000 people, including 3,800,000 children, did not have health insurance in the United States, over half of them people of color, and tens of millions more people were underinsured;

Whereas childcare is one of the highest expenses for families in much of the United States, and public childcare assistance is limited;

Whereas, in 2020, 30 percent of all children under the age of 14 were potentially eligible to receive childcare assistance through the Child Care and Development Block Grant (CCDBG) based on Federal income eligibility, but only 10 percent of these children had access to assistance;

Whereas the median annual pay of childcare and home care workers is \$30,370 and \$33,530, respectively, leading to high turnover and reliance on public assistance;

Whereas childcare workers are 95 percent women, and home care workers are 87 percent women, and both are disproportionately Black and Hispanic;

Whereas, in 2023, according to the Bureau of Labor Statistics, less than 8 percent of health care support workers and 4.3 percent

of personal care and service workers were members of unions;

Whereas these conditions have historical roots, as—

(1) in the decades following the abolition of slavery in the United States, Black people primarily worked as domestic and agricultural laborers; and

(2) during the New Deal-era, domestic and agricultural workers were excluded from social programs and labor protections, particularly those created by—

(A) the Social Security Act (42 U.S.C. 301 et seq.);

(B) the National Labor Relations Act (29 U.S.C. 151 et seq.); and

(C) the Fair Labor Standards Act of 1938 (29 U.S.C. 201 et seq.);

Whereas the COVID-19 pandemic underscored that frontline work, including direct care, childcare, nursing, health care, public and community health, mental health, domestic, social assistance, education, service, retail, delivery, food, restaurant, agricultural, and other work, is essential to the functioning and flourishing of the United States, and to the well-being of all people;

Whereas, throughout the COVID-19 pandemic and the following recovery period, it was necessary for frontline workers to engage in numerous strikes and work stoppages to obtain safe workplaces, personal protective equipment, the right to shelter in place, and other basic protections for their health and safety;

Whereas domestic workers, mostly from the global South, were the most common victims of labor trafficking reported in the United States between 2007 and 2017;

Whereas care and domestic workers who are migrants or immigrants are especially likely to face wage theft, abuse, and other forms of exploitation;

Whereas hospitals in the United States are understaffed, and most of the country does not require minimum nurse-to-patient ratios that save lives;

Whereas health care and social assistance workers suffer from the highest rates of injuries due to workplace violence;

Whereas the closure of rural hospitals is accelerating, and 136 rural hospitals closed between 2010 and 2021;

Whereas the increased acquisition of healthcare services by profit-driven private equity firms is rapidly driving up the costs of healthcare and compromising quality of care across the country;

Whereas 3 of the largest childcare providers in the United States are owned by profit-driven private equity firms, which creates further risks for care affordability and quality and worker well-being;

Whereas the decision of the Supreme Court of the United States in *Olmstead v. L.C.*, 527 U.S. 581 (1999), established the right of people with disabilities to be independent and supported in their homes and communities;

Whereas lack of access to technology and broadband internet among people of color, communities with low-income, communities in rural areas, older adults, and people with disabilities has negatively impacted the well-being of those people, particularly during the COVID-19 pandemic;

Whereas, on any given night in 2023, well over 650,000 people were unhoused in the United States;

Whereas, in 2022, in the United States, 16.3 percent of children, 19.6 percent of Latino children, 18.8 percent of American Indian and Alaska Native children, and 18.4 percent of Black children lived in poverty;

Whereas youth suicide rates are rising, and suicide attempts by Black adolescents increased by 144 percent between 2007 and 2020;

Whereas in the 2020–2021 school year, the Federal Head Start program reached only 30

percent of eligible children from families with low incomes, and Early Head Start reached only 9 percent;

Whereas access to high quality childcare and early childhood programs is associated with—

(1) better long-term socioeconomic, academic, and health-related outcomes for children; and

(2) increased labor force participation and higher earnings for parents and families, especially for mothers;

Whereas the historic funds provided for childcare through the American Rescue Plan led to increased childcare access and increased labor force participation for women, and the expiration of these resources has led to a slowdown of that progress;

Whereas a 2019 report found that 14,000,000 students attended schools with a police officer but no counselor, nurse, psychologist, or social worker;

Whereas mental health professionals, such as school psychologists and counselors, are best equipped to maintain school safety without pushing children into the school-to-prison pipeline;

Whereas the youth mental health crisis has been exacerbated by the climate crisis, COVID-19 pandemic, increased social isolation, and economic collapse;

Whereas Black, Brown, Indigenous, and low-income communities have borne the brunt of health impacts arising from fossil fuel use, industrial pollution, and crumbling infrastructure;

Whereas, increasingly, climate disasters and extreme weather events are leaving behind communities suffering from widespread trauma and in need of mental health care;

Whereas nurses, care and social assistance workers, and educators—

(1) have been first responders during climate disasters and extreme weather events;

(2) are essential for responding to other forms of environmental harm; and

(3) have taken grave personal risks to help the people they serve;

Whereas worsening climate impacts will make care work more necessary and care more difficult to administer, disproportionately impacting children, older adults, and people with disabilities, who risk being separated from their regular care workers and caregivers;

Whereas, despite the prevalence of low wages and difficult conditions, direct care jobs, including home care, residential care, and nursing assistant jobs, are already among the fastest growing in the United States and represent the largest occupational group in the country;

Whereas estimates indicate that, globally, adequately investing in care work and expanding care services could create nearly 300,000,000 jobs by 2035;

Whereas communities devastated by deindustrialization and disinvestment are particularly reliant on care and social assistance work for employment;

Whereas many care, social assistance, and education jobs are relatively low-carbon occupations, and can quickly become green jobs as certain physical infrastructures decarbonize, especially transit systems, health care facilities, and public buildings;

Whereas a robust care workforce will also be required to support a just transition to a healthy, zero-carbon economy, as other workers shift to new industries, move across the country, and develop new care needs;

Whereas the multiple crises now facing the United States require not only unprecedented investments in physical infrastructure, but also similarly sized investments in social infrastructure, including care infrastructure;

Whereas public investment in care work supports care workers' increased economic activity, creating additional jobs throughout the economy;

Whereas we have a historic opportunity to finally build care infrastructure that is equitable and inclusive, and one in which all people can thrive, prosper, weather future disruptions, and age with dignity in their own homes and communities; and

Whereas in the context of addressing and defeating the lasting repercussions of the COVID-19 pandemic, future public health emergencies, compounding economic crises, stark income and wealth inequalities, systemic racism, and climate change, and taking seriously the mandate to "promote the general Welfare", bold investments in care can anchor the rebirth of our country: Now, therefore, be it

*Resolved*, That it is the sense of the Senate that—

(1) it is the duty of the Federal Government to dramatically expand and strengthen the care economy, healing and supporting the country as we continue to recover from the COVID-19 pandemic and face the challenges of the 21st century and beyond;

(2) the obligation described in paragraph (1) can only be met with far-reaching public investments, designed to achieve the goals of—

(A) repairing the wrongs of history, including by—

(i) acknowledging and addressing the legacies of exclusion and oppression faced by caregivers and care workers, particularly women of color and immigrants;

(ii) acknowledging and addressing the trauma of all those with unmet care needs, such as—

(I) people of color, including Black, Brown, and Indigenous people;

(II) Asian Americans, Native Hawaiians, and Pacific Islanders;

(III) immigrant, limited English proficiency, LGBTQIA+, older, low-income, rural, and deindustrialized communities;

(IV) people with disabilities;

(V) people who are unemployed, underemployed, and unhoused;

(VI) people who are incarcerated or who were formerly incarcerated;

(VII) veterans;

(VIII) survivors of abuse; and

(IX) children and young people coping with economic and climate disruption; and

(iii) approaching care policy as part of a broader agenda of dismantling systemic racism, sexism, economic inequality, and other forms of oppression, alongside efforts to achieve truth and reconciliation, reparations, decarceration, restorative justice, Indigenous sovereignty, a fair and humane immigration system, demilitarization, a Federal jobs guarantee, and economic, environmental, and climate justice for all;

(B) raising pay, benefits, protections, and standards for existing care workers, such that—

(i) care jobs are family sustaining, paying substantially more than \$17 an hour and offering generous benefits;

(ii) all care workers have—

(I) the right, and have pathways, to unionize;

(II) the ability to engage in collective action; and

(III) full labor protections, including those specified in the Domestic Workers Bill of Rights Act;

(iii) all care workers have access to adequate paid family and medical leave that includes paid safe leave and paid sick time;

(iv) all care workers who wish to form worker-owned cooperatives have access to resources and technical support with which to do so;

(v) all care workers have access to ample training opportunities, apprenticeships, and career ladders leading to higher compensation, along with other resources and support, including funding to facilitate those opportunities;

(vi) all care workers have the mandated employer protections they need to conduct their work safely in general, and in the event of a pandemic, infectious disease outbreak, or other disaster, including having optimal personal protective equipment, optimal isolation protocols, testing and contact tracing, and paid days off due to exposure or illness;

(vii) all care workers are safe from workplace violence, harassment, and threats to health; and

(viii) all undocumented workers have pathways to citizenship and full and equal access to all public benefits, including health, nutrition, and income support;

(C) creating millions of new care jobs over the next decade, including as part of existing and new public jobs programs, subject to the same principles in subparagraph (B), in the context of the Green New Deal, public health and emergency preparedness needs, and any similar efforts to meet the challenges and opportunities of the 21st century;

(D) building and expanding zero-carbon, non-polluting, climate-safe infrastructure, both physical infrastructure and social infrastructure, to guarantee care to all people throughout the life cycle, moving the United States toward universal, public programs ensuring—

(i) high-quality health care, including comprehensive and noncoercive mental health care coverage, substance use treatment, and reproductive care, free at the point of service;

(ii) free, high-quality home and community-based services, without income or asset tests and without waiting lists, which would fix the institutional bias of the current system, and allow people with disabilities and older adults to receive needed support and live self-directed lives;

(iii) free, high-quality childcare and early childhood education including appropriate attention to the unique needs of children and families in the focus on the first 1,000 days of life, and robust, culturally responsive, and diverse care settings to achieve healthy child development;

(iv) paid family and medical leave of at least 6 months, with full wage replacement, job protection, and a recognition of all types of families, as well as paid safe leave and paid sick time; and

(v) additional support for unpaid caregivers, people with disabilities, older adults, and children, with the goal of eradicating child poverty; and

(E) building and expanding other zero-carbon, non-polluting, climate-safe infrastructure and jobs that are intimately connected to the care infrastructure described in subparagraph (D), to meet the fundamental material, developmental, emotional, and social needs of all people, including—

(i) clean air and water;

(ii) public, permanently affordable, and dignified housing and transit systems, integrated with adequate social services to support residents of all ages and abilities;

(iii) safe, accessible infrastructure, including public accommodations, schools, workplaces, housing, transit, and streets allowing for full mobility for all people;

(iv) public education, with a focus on social and emotional learning, unleashing creativity in the arts and sciences, and educating and nurturing the whole child, and including fully funded programs for high-need students;

(v) healthy, nourishing, and sustainable food systems that provide affordable, accessible, and culturally appropriate foods;

(vi) comprehensive public health and emergency preparedness infrastructure, including equitable, democratic response and recovery efforts during and after climate disasters;

(vii) clear opportunities for, and the removal of barriers to, unionization and collective action in all economic sectors, including the service, technology, and gig work sectors;

(viii) a Federal minimum wage of at least \$17 an hour, indexed to the cost of living, and the elimination of subminimum wages for people with disabilities, tipped workers, and all other workers;

(ix) expanded leisure time, with no loss in pay or benefits;

(x) generous paid sick time, paid safe leave, paid family and medical leave, and vacation time, with full wage replacement, job protection, and a recognition of all types of families;

(xi) support for worker ownership, worker-owned cooperatives, and safety and democracy in the workplace, so that workers have meaningful influence over their conditions of work and the decisions that affect their lives;

(xii) adequate public services and programs to support all people in navigating economic and social challenges, including navigating life on a rapidly warming planet, and to help all people unleash their full potential as human beings;

(xiii) public libraries, community centers, and other spaces that foster creativity, connection, well-being, and human development;

(xiv) support for practicing and aspiring artists, as well as institutions, venues, and platforms that empower and fairly compensate artists, bringing their work to wider audiences, and integrating the arts into community well-being, education, and resilience efforts;

(xv) access to nature, public space, diverse forms of public recreation, and technology, including public broadband internet; and

(xvi) mechanisms for democratic oversight of data, algorithmic, and technological systems, along with worker and community participation in the development and application of those systems, in service of expanding and improving care and social infrastructures;

(3) all public health, care-related, and economic legislation must prioritize and invest in care infrastructure as a down payment on building an interconnected, holistic caregiving system that—

(A) is the backbone of the economy and essential to all people; and

(B) celebrates the interdependence of all people;

(4) unpaid caregivers deserve pay and support, care workers deserve quality, high-paying, union jobs, people with disabilities and older adults deserve independence and self-determination, and every person, at every stage of life, deserves to live, work, play, and care with dignity; and

(5) our ultimate aim is to build an economy and society based on care for people, communities, and the planet we all share.

## SENATE RESOLUTION 939—COM- MENDING AND CONGRATU- LATING THE HUTCHINSON COM- MUNITY COLLEGE BLUE DRAG- ONS FOOTBALL TEAM FOR WIN- NING THE 2024 NATIONAL JUNIOR COLLEGE ATHLETIC ASSOCIA- TION FOOTBALL NATIONAL CHAMPIONSHIP

Mr. MORAN (for himself and Mr. MARSHALL) submitted the following resolution; which was referred to the Committee on Commerce, Science, and Transportation:

S. RES. 939

Whereas, on Wednesday, December 18, 2024, the Hutchinson Community College Blue Dragons football team (in this preamble referred to as the “Blue Dragons”) defeated the Iowa Western Community College Reivers by a score of 28 to 23 in the 2024 National Junior College Athletic Association (NJCAA) National Championship game;

Whereas the 2024 NJCAA National Championship is the second championship in the history of the Blue Dragons’ football program;

Whereas the Blue Dragons finished the 2024 season with an 11 wins to 1 loss record;

Whereas, during the championship game, the Blue Dragons outscored the Reivers 28 to 9 in the last 3 quarters, after trailing by 14 points in the first quarter;

Whereas quarterback Christian Johnson entered the game in the third quarter and completed a 34-yard pass to take the lead for the first time in the game;

Whereas the Blue Dragons defense held the Reivers to 6 points in the second half;

Whereas running back Waymond Jordan Jr. was named the NJCAA Player of the Year in 2024; and

Whereas head coach Drew Dallas won his second championship in 5 seasons as head coach of Hutchinson Community College: Now, therefore, be it

*Resolved*, That the Senate—

(1) commends the Hutchinson Community College Blue Dragons football team for winning the 2024 National Junior College Athletic Association Football National Championship;

(2) recognizes the players, coaches, and staff of the Hutchinson Community College Blue Dragons football team; and

(3) respectfully requests that the Secretary of the Senate transmit an enrolled copy of this resolution to—

(A) the president of Hutchinson Community College, Tricia Paramore;

(B) the athletic director of Hutchinson Community College, Josh Gooch; and

(C) the head coach of the Hutchinson Community College Blue Dragons football team, Drew Dallas.

## SENATE RESOLUTION 940—HON- ORING THE LIVES AND SERVICE OF NATALIE AND DAVY LLOYD AND EXPRESSING CONDOLENCES TO THE FAMILY OF NATALIE AND DAVY LLOYD

Mr. HAWLEY (for himself and Mr. SCHMITT) submitted the following resolution; which was referred to the Committee on the Judiciary:

S. RES. 940

Whereas Natalie Elizabeth Lloyd—

(1) was born on March 2, 2003, in Joplin, Missouri;

(2) graduated from Ozark Christian Academy and Ozark Bible Institute and College; and