

that their wishes and rights with respect to end-of-life care are protected.

This is an issue I became involved with back in 1990 when I introduced the Patient Self-Determination Act in the House. Senators John Danforth and Pat Moynihan introduced the companion bill in the Senate. The measure became public law in 1991. Among other things, the Act requires all Medicare and Medicaid provider organizations, including hospitals, nursing facilities, home health agencies, and hospices to provide written information to patients at the time of admission concerning an individual's right under State law to make decisions concerning medical care, including the right to accept or refuse medical or surgical treatment and the right to formulate advance directives. It also required these organizations to provide written information to patients with respect to advance directives. But even with laws like the Patient Self-Determination Act in place, only about 29 percent of Americans have a living will.

Advance directives, which include a living will stating the individual's preferences for care and a power of attorney for health care, are critical documents that each of us should have. As important as it is to encourage Americans to prepare advance directives, Congress is in a position to do more to help families make these arrangements. Last year I introduced H.R. 2058, the Advance Directives Improvement and Education Act. This bipartisan bill would build on current advance directive laws to educate Americans about living wills, give people the opportunity to discuss options with their doctors, and ensure that their wishes are honored.

In a word, the purpose of H.R. 2058 is to encourage all Americans to think about, talk about and write down their wishes for medical care near the end of life should they become unable to make decisions for themselves. It would also ensure that people's advance directives are honored, even if the directive is issued in one state and end-of-life care is given in another. The bill also encourages all Medicare beneficiaries to prepare advance directives by providing a free physician office visit for the purpose of discussing end-of-life choices, and directs the Department of Health and Human Services to conduct a public education campaign to raise awareness of the importance of planning for care near the end of life.

Let me conclude by again stating my support for the resolution before the House with the hope that we can build on this effort in the next Congress.

Mr. PALLONE. Mr. Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Texas (Mr. BURGESS) that the House suspend the rules and agree to the resolution, H. Res. 934.

The question was taken; and (two-thirds of those voting having responded in the affirmative) the rules were suspended and the resolution was agreed to.

A motion to reconsider was laid on the table.

SOBER TRUTH ON PREVENTING UNDERAGE DRINKING ACT

Mr. BURGESS. Mr. Speaker, I move to suspend the rules and concur in the

Senate amendment to the bill (H.R. 864) to provide for programs and activities with respect to the prevention of underage drinking.

The Clerk read as follows:

Senate amendment:

Strike out all after the enacting clause and insert:

SECTION 1. SHORT TITLE.

This Act may be cited as the "Sober Truth on Preventing Underage Drinking Act" or the "STOP Act".

SEC. 2. AMENDMENT TO THE PUBLIC HEALTH SERVICE ACT.

Section 519B of the Public Health Service Act (42 U.S.C. 290bb-25b) is amended by striking subsections (a) through (f) and inserting the following:

"(a) DEFINITIONS.—For purposes of this section:

"(1) The term 'alcohol beverage industry' means the brewers, vintners, distillers, importers, distributors, and retail or online outlets that sell or serve beer, wine, and distilled spirits.

"(2) The term 'school-based prevention' means programs, which are institutionalized, and run by staff members or school-designated persons or organizations in any grade of school, kindergarten through 12th grade.

"(3) The term 'youth' means persons under the age of 21.

"(4) The term 'IOM report' means the report released in September 2003 by the National Research Council, Institute of Medicine, and entitled 'Reducing Underage Drinking: A Collective Responsibility'.

"(b) SENSE OF CONGRESS.—It is the sense of the Congress that:

"(1) A multi-faceted effort is needed to more successfully address the problem of underage drinking in the United States. A coordinated approach to prevention, intervention, treatment, enforcement, and research is key to making progress. This Act recognizes the need for a focused national effort, and addresses particulars of the Federal portion of that effort, as well as Federal support for State activities.

"(2) The Secretary of Health and Human Services shall continue to conduct research and collect data on the short and long-range impact of alcohol use and abuse upon adolescent brain development and other organ systems.

"(3) States and communities, including colleges and universities, are encouraged to adopt comprehensive prevention approaches, including—

"(A) evidence-based screening, programs and curricula;

"(B) brief intervention strategies;

"(C) consistent policy enforcement; and

"(D) environmental changes that limit underage access to alcohol.

"(4) Public health groups, consumer groups, and the alcohol beverage industry should continue and expand evidence-based efforts to prevent and reduce underage drinking.

"(5) The entertainment industries have a powerful impact on youth, and they should use rating systems and marketing codes to reduce the likelihood that underage audiences will be exposed to movies, recordings, or television programs with unsuitable alcohol content.

"(6) The National Collegiate Athletic Association, its member colleges and universities, and athletic conferences should affirm a commitment to a policy of discouraging alcohol use among underage students and other young fans.

"(7) Alcohol is a unique product and should be regulated differently than other products by the States and Federal Government. States have primary authority to regulate alcohol distribution and sale, and the Federal Government should support and supplement these State efforts. States also have a responsibility to fight youth access to alcohol and reduce underage drinking. Continued State regulation and li-

censing of the manufacture, importation, sale, distribution, transportation and storage of alcoholic beverages are clearly in the public interest and are critical to promoting responsible consumption, preventing illegal access to alcohol by persons under 21 years of age from commercial and non-commercial sources, maintaining industry integrity and an orderly marketplace, and furthering effective State tax collection.

"(c) INTERAGENCY COORDINATING COMMITTEE; ANNUAL REPORT ON STATE UNDERAGE DRINKING PREVENTION AND ENFORCEMENT ACTIVITIES.—

"(1) INTERAGENCY COORDINATING COMMITTEE ON THE PREVENTION OF UNDERAGE DRINKING.—

"(A) IN GENERAL.—The Secretary, in collaboration with the Federal officials specified in subparagraph (B), shall formally establish and enhance the efforts of the interagency coordinating committee, that began operating in 2004, focusing on underage drinking (referred to in this subsection as the 'Committee').

"(B) OTHER AGENCIES.—The officials referred to in paragraph (1) are the Secretary of Education, the Attorney General, the Secretary of Transportation, the Secretary of the Treasury, the Secretary of Defense, the Surgeon General, the Director of the Centers for Disease Control and Prevention, the Director of the National Institute on Alcohol Abuse and Alcoholism, the Administrator of the Substance Abuse and Mental Health Services Administration, the Director of the National Institute on Drug Abuse, the Assistant Secretary for Children and Families, the Director of the Office of National Drug Control Policy, the Administrator of the National Highway Traffic Safety Administration, the Administrator of the Office of Juvenile Justice and Delinquency Prevention, the Chairman of the Federal Trade Commission, and such other Federal officials as the Secretary of Health and Human Services determines to be appropriate.

"(C) CHAIR.—The Secretary of Health and Human Services shall serve as the chair of the Committee.

"(D) DUTIES.—The Committee shall guide policy and program development across the Federal Government with respect to underage drinking, provided, however, that nothing in this section shall be construed as transferring regulatory or program authority from an Agency to the Coordinating Committee.

"(E) CONSULTATIONS.—The Committee shall actively seek the input of and shall consult with all appropriate and interested parties, including States, public health research and interest groups, foundations, and alcohol beverage industry trade associations and companies.

"(F) ANNUAL REPORT.—

"(i) IN GENERAL.—The Secretary, on behalf of the Committee, shall annually submit to the Congress a report that summarizes—

"(I) all programs and policies of Federal agencies designed to prevent and reduce underage drinking;

"(II) the extent of progress in preventing and reducing underage drinking nationally;

"(III) data that the Secretary shall collect with respect to the information specified in clause (ii); and

"(IV) such other information regarding underage drinking as the Secretary determines to be appropriate.

"(ii) CERTAIN INFORMATION.—The report under clause (i) shall include information on the following:

"(I) Patterns and consequences of underage drinking as reported in research and surveys such as, but not limited to Monitoring the Future, Youth Risk Behavior Surveillance System, the National Survey on Drug Use and Health, and the Fatality Analysis Reporting System.

"(II) Measures of the availability of alcohol from commercial and non-commercial sources to underage populations.

"(III) Measures of the exposure of underage populations to messages regarding alcohol in advertising and the entertainment media as reported by the Federal Trade Commission.

“(IV) Surveillance data, including information on the onset and prevalence of underage drinking, consumption patterns and the means of underage access. The Secretary shall develop a plan to improve the collection, measurement and consistency of reporting Federal underage alcohol data.

“(V) Any additional findings resulting from research conducted or supported under subsection (f).

“(VI) Evidence-based best practices to prevent and reduce underage drinking and provide treatment services to those youth who need them.

“(2) ANNUAL REPORT ON STATE UNDERAGE DRINKING PREVENTION AND ENFORCEMENT ACTIVITIES.—

“(A) IN GENERAL.—The Secretary shall, with input and collaboration from other appropriate Federal agencies, States, Indian tribes, territories, and public health, consumer, and alcohol beverage industry groups, annually issue a report on each State’s performance in enacting, enforcing, and creating laws, regulations, and programs to prevent or reduce underage drinking.

“(B) STATE PERFORMANCE MEASURES.—

“(i) IN GENERAL.—The Secretary shall develop, in consultation with the Committee, a set of measures to be used in preparing the report on best practices.

“(ii) CATEGORIES.—In developing these measures, the Secretary shall consider categories including, but not limited to:

“(I) Whether or not the State has comprehensive anti-underage drinking laws such as for the illegal sale, purchase, attempt to purchase, consumption, or possession of alcohol; illegal use of fraudulent ID; illegal furnishing or obtaining of alcohol for an individual under 21 years; the degree of strictness of the penalties for such offenses; and the prevalence of the enforcement of each of these infractions.

“(II) Whether or not the State has comprehensive liability statutes pertaining to underage access to alcohol such as dram shop, social host, and house party laws, and the prevalence of enforcement of each of these laws.

“(III) Whether or not the State encourages and conducts comprehensive enforcement efforts to prevent underage access to alcohol at retail outlets, such as random compliance checks and shoulder tap programs, and the number of compliance checks within alcohol retail outlets measured against the number of total alcohol retail outlets in each State, and the result of such checks.

“(IV) Whether or not the State encourages training on the proper selling and serving of alcohol for all sellers and servers of alcohol as a condition of employment.

“(V) Whether or not the State has policies and regulations with regard to direct sales to consumers and home delivery of alcoholic beverages.

“(VI) Whether or not the State has programs or laws to deter adults from purchasing alcohol for minors; and the number of adults targeted by these programs.

“(VII) Whether or not the State has programs targeted to youths, parents, and caregivers to deter underage drinking; and the number of individuals served by these programs.

“(VIII) Whether or not the State has enacted graduated drivers licenses and the extent of those provisions.

“(IX) The amount that the State invests, per youth capita, on the prevention of underage drinking, further broken down by the amount spent on—

“(aa) compliance check programs in retail outlets, including providing technology to prevent and detect the use of false identification by minors to make alcohol purchases;

“(bb) checkpoints and saturation patrols that include the goal of reducing and deterring underage drinking;

“(cc) community-based, school-based, and higher-education-based programs to prevent underage drinking;

“(dd) underage drinking prevention programs that target youth within the juvenile justice and child welfare systems; and

“(ee) other State efforts or programs as deemed appropriate.

“(3) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this subsection \$1,000,000 for fiscal year 2007, and \$1,000,000 for each of the fiscal years 2008 through 2010.

“(d) NATIONAL MEDIA CAMPAIGN TO PREVENT UNDERAGE DRINKING.—

“(1) SCOPE OF THE CAMPAIGN.—The Secretary shall continue to fund and oversee the production, broadcasting, and evaluation of the national adult-oriented media public service campaign if the Secretary determines that such campaign is effective in achieving the media campaign’s measurable objectives.

“(2) REPORT.—The Secretary shall provide a report to the Congress annually detailing the production, broadcasting, and evaluation of the campaign referred to in paragraph (1), and to detail in the report the effectiveness of the campaign in reducing underage drinking, the need for and likely effectiveness of an expanded adult-oriented media campaign, and the feasibility and the likely effectiveness of a national youth-focused media campaign to combat underage drinking.

“(3) CONSULTATION REQUIREMENT.—In carrying out the media campaign, the Secretary shall direct the entity carrying out the national adult-oriented media public service campaign to consult with interested parties including both the alcohol beverage industry and public health and consumer groups. The progress of this consultative process is to be covered in the report under paragraph (2).

“(4) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this subsection, \$1,000,000 for fiscal year 2007 and \$1,000,000 for each of the fiscal years 2008 through 2010.

“(e) INTERVENTIONS.—

“(1) COMMUNITY-BASED COALITION ENHANCEMENT GRANTS TO PREVENT UNDERAGE DRINKING.—

“(A) AUTHORIZATION OF PROGRAM.—The Administrator of the Substance Abuse and Mental Health Services Administration, in consultation with the Director of the Office of National Drug Control Policy, shall award, if the Administrator determines that the Department of Health and Human Services is not currently conducting activities that duplicate activities of the type described in this subsection, ‘enhancement grants’ to eligible entities to design, test, evaluate and disseminate effective strategies to maximize the effectiveness of community-wide approaches to preventing and reducing underage drinking. This subsection is subject to the availability of appropriations.

“(B) PURPOSES.—The purposes of this paragraph are to—

“(i) prevent and reduce alcohol use among youth in communities throughout the United States;

“(ii) strengthen collaboration among communities, the Federal Government, and State, local, and tribal governments;

“(iii) enhance intergovernmental cooperation and coordination on the issue of alcohol use among youth;

“(iv) serve as a catalyst for increased citizen participation and greater collaboration among all sectors and organizations of a community that first demonstrates a long-term commitment to reducing alcohol use among youth;

“(v) disseminate to communities timely information regarding state-of-the-art practices and initiatives that have proven to be effective in preventing and reducing alcohol use among youth; and

“(vi) enhance, not supplant, effective local community initiatives for preventing and reducing alcohol use among youth.

“(C) APPLICATION.—An eligible entity desiring an enhancement grant under this paragraph

shall submit an application to the Administrator at such time, and in such manner, and accompanied by such information as the Administrator may require. Each application shall include—

“(i) a complete description of the entity’s current underage alcohol use prevention initiatives and how the grant will appropriately enhance the focus on underage drinking issues; or

“(ii) a complete description of the entity’s current initiatives, and how it will use this grant to enhance those initiatives by adding a focus on underage drinking prevention.

“(D) USES OF FUNDS.—Each eligible entity that receives a grant under this paragraph shall use the grant funds to carry out the activities described in such entity’s application submitted pursuant to subparagraph (C). Grants under this paragraph shall not exceed \$50,000 per year and may not exceed four years.

“(E) SUPPLEMENT NOT SUPPLANT.—Grant funds provided under this paragraph shall be used to supplement, not supplant, Federal and non-Federal funds available for carrying out the activities described in this paragraph.

“(F) EVALUATION.—Grants under this paragraph shall be subject to the same evaluation requirements and procedures as the evaluation requirements and procedures imposed on recipients of drug free community grants.

“(G) DEFINITIONS.—For purposes of this paragraph, the term ‘eligible entity’ means an organization that is currently receiving or has received grant funds under the Drug-Free Communities Act of 1997 (21 U.S.C. 1521 et seq.).

“(H) ADMINISTRATIVE EXPENSES.—Not more than 6 percent of a grant under this paragraph may be expended for administrative expenses.

“(I) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this paragraph \$5,000,000 for fiscal year 2007, and \$5,000,000 for each of the fiscal years 2008 through 2010.

“(2) GRANTS DIRECTED AT PREVENTING AND REDUCING ALCOHOL ABUSE AT INSTITUTIONS OF HIGHER EDUCATION.—

“(A) AUTHORIZATION OF PROGRAM.—The Secretary shall award grants to eligible entities to enable the entities to prevent and reduce the rate of underage alcohol consumption including binge drinking among students at institutions of higher education.

“(B) APPLICATIONS.—An eligible entity that desires to receive a grant under this paragraph shall submit an application to the Secretary at such time, in such manner, and accompanied by such information as the Secretary may require. Each application shall include—

“(i) a description of how the eligible entity will work to enhance an existing, or where none exists to build a, statewide coalition;

“(ii) a description of how the eligible entity will target underage students in the State;

“(iii) a description of how the eligible entity intends to ensure that the statewide coalition is actually implementing the purpose of this section and moving toward indicators described in subparagraph (D);

“(iv) a list of the members of the statewide coalition or interested parties involved in the work of the eligible entity;

“(v) a description of how the eligible entity intends to work with State agencies on substance abuse prevention and education;

“(vi) the anticipated impact of funds provided under this paragraph in preventing and reducing the rates of underage alcohol use;

“(vii) outreach strategies, including ways in which the eligible entity proposes to—

“(I) reach out to students and community stakeholders;

“(II) promote the purpose of this paragraph;

“(III) address the range of needs of the students and the surrounding communities; and

“(IV) address community norms for underage students regarding alcohol use; and

“(viii) such additional information as required by the Secretary.

“(C) USES OF FUNDS.—Each eligible entity that receives a grant under this paragraph shall use the grant funds to carry out the activities described in such entity’s application submitted pursuant to subparagraph (B).

“(D) ACCOUNTABILITY.—On the date on which the Secretary first publishes a notice in the Federal Register soliciting applications for grants under this paragraph, the Secretary shall include in the notice achievement indicators for the program authorized under this paragraph. The achievement indicators shall be designed—

“(i) to measure the impact that the statewide coalitions assisted under this paragraph are having on the institutions of higher education and the surrounding communities, including changes in the number of incidents of any kind in which students have abused alcohol or consumed alcohol while under the age of 21 (including violations, physical assaults, sexual assaults, reports of intimidation, disruptions of school functions, disruptions of student studies, mental health referrals, illnesses, or deaths);

“(ii) to measure the quality and accessibility of the programs or information offered by the eligible entity; and

“(iii) to provide such other measures of program impact as the Secretary determines appropriate.

“(E) SUPPLEMENT NOT SUPPLANT.—Grant funds provided under this paragraph shall be used to supplement, and not supplant, Federal and non-Federal funds available for carrying out the activities described in this paragraph.

“(F) DEFINITIONS.—For purposes of this paragraph:

“(i) ELIGIBLE ENTITY.—The term ‘eligible entity’ means a State, institution of higher education, or nonprofit entity.

“(ii) INSTITUTION OF HIGHER EDUCATION.—The term ‘institution of higher education’ has the meaning given the term in section 101(a) of the Higher Education Act of 1965 (20 U.S.C. 1001(a)).

“(iii) SECRETARY.—The term ‘Secretary’ means the Secretary of Education.

“(iv) STATE.—The term ‘State’ means each of the 50 States, the District of Columbia, and the Commonwealth of Puerto Rico.

“(v) STATEWIDE COALITION.—The term ‘statewide coalition’ means a coalition that—

“(I) includes, but is not limited to—

“(aa) institutions of higher education within a State; and

“(bb) a nonprofit group, a community underage drinking prevention coalition, or another substance abuse prevention group within a State; and

“(II) works toward lowering the alcohol abuse rate by targeting underage students at institutions of higher education throughout the State and in the surrounding communities.

“(vi) SURROUNDING COMMUNITY.—The term ‘surrounding community’ means the community—

“(I) that surrounds an institution of higher education participating in a statewide coalition;

“(II) where the students from the institution of higher education take part in the community; and

“(III) where students from the institution of higher education live in off-campus housing.

“(G) ADMINISTRATIVE EXPENSES.—Not more than 5 percent of a grant under this paragraph may be expended for administrative expenses.

“(H) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this paragraph \$5,000,000 for fiscal year 2007, and \$5,000,000 for each of the fiscal years 2008 through 2010.

“(f) ADDITIONAL RESEARCH.—

“(1) ADDITIONAL RESEARCH ON UNDERAGE DRINKING.—

“(A) IN GENERAL.—The Secretary shall, subject to the availability of appropriations, collect data, and conduct or support research that is not duplicative of research currently being conducted or supported by the Department of

Health and Human Services, on underage drinking, with respect to the following:

“(i) Comprehensive community-based programs or strategies and statewide systems to prevent and reduce underage drinking, across the underage years from early childhood to age 21, including programs funded and implemented by government entities, public health interest groups and foundations, and alcohol beverage companies and trade associations.

“(ii) Annually obtain and report more precise information than is currently collected on the scope of the underage drinking problem and patterns of underage alcohol consumption, including improved knowledge about the problem and progress in preventing, reducing and treating underage drinking; as well as information on the rate of exposure of youth to advertising and other media messages encouraging and discouraging alcohol consumption.

“(iii) Compiling information on the involvement of alcohol in unnatural deaths of persons ages 12 to 20 in the United States, including suicides, homicides, and unintentional injuries such as falls, drownings, burns, poisonings, and motor vehicle crash deaths.

“(B) CERTAIN MATTERS.—The Secretary shall carry out activities toward the following objectives with respect to underage drinking:

“(i) Obtaining new epidemiological data within the national or targeted surveys that identify alcohol use and attitudes about alcohol use during pre- and early adolescence, including harm caused to self or others as a result of adolescent alcohol use such as violence, date rape, risky sexual behavior, and prenatal alcohol exposure.

“(ii) Developing or identifying successful clinical treatments for youth with alcohol problems.

“(C) PEEER REVIEW.—Research under subparagraph (A) shall meet current Federal standards for scientific peer review.

“(2) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this subsection \$6,000,000 for fiscal year 2007, and \$6,000,000 for each of the fiscal years 2008 through 2010.”

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Texas (Mr. BURGESS) and the gentleman from New Jersey (Mr. PALLONE) each will control 20 minutes.

The Chair recognizes the gentleman from Texas.

GENERAL LEAVE

Mr. BURGESS. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks on this legislation and to insert extraneous material on the bill.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Texas?

There was no objection.

Mr. BURGESS. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I am pleased to rise in support of H.R. 864, as amended, the STOP Underage Drinking Act. This legislation takes crucial steps to address the problem of underage drinking at the national level. The Senate-passed version of H.R. 864 contains several beneficial changes to the House bill which I am pleased to support.

At this time I would like to recognize Representative ROYBAL-ALLARD, lead sponsor of the bill, as well as Representative Tom Osborne of Nebraska for their hard work on this important piece of legislation.

Mr. Speaker, I reserve the balance of my time.

Mr. PALLONE. Mr. Speaker, I yield myself such time as I may consume.

I rise in support of H.R. 864, the Sober Truth on Preventing Underage Drinking Act, the STOP Act. The STOP Act is being reintroduced today with technical changes to further clarify the intent of this important legislation. When originally brought to the House floor on November 14 of this year, H.R. 864 passed by a vote of 373-23.

Underage drinking is a major public health concern in communities throughout our Nation. The Centers for Disease Control and Prevention has estimated that annually there are over 142,000 emergency room visits by youth, ages 12 to 20, for unintentional injuries and other health-related concerns caused by alcohol consumption. H.R. 864 is a great start in moving our Nation toward the goal of decreasing youth access to, and consumption of, alcohol.

This bill authorizes coalitions on the issue of underage drinking, funds national media campaigns about the dangers of underage drinking, and creates grant programs for preventing and reducing alcohol abuse in institutions of higher education and surrounding communities.

The STOP Act has the endorsement of key public health advocates, as well as the alcohol beverage industry. Both endorse this legislation on the basis that it recognizes that a multifaceted national effort is key to making progress in curbing underage alcohol consumption.

The issue of underage drinking deserves our immediate consideration and support. So I urge my colleagues to support this bill for a second time.

But I particularly want to thank Congresswoman ROYBAL-ALLARD and the other lead sponsors of this bill, and I know she is here to speak.

Mr. Speaker, I reserve the balance of my time.

Mr. BURGESS. Mr. Speaker, I yield 4 minutes to the gentleman from Nebraska, the sponsor of this bill.

Mr. OSBORNE. Mr. Speaker, underage drinking currently costs the United States \$53 billion annually, according to one study. According to the American Medical Association that figure should be \$61 billion. And in the State of Nebraska, which I represent, that translates to over \$2,000 per youth in the State of Nebraska, is what the cost to the United States is.

But the cost is really counted in more than financial aspects. The Centers for Disease Control and Prevention estimates the number of underage deaths due to excessive alcohol is roughly \$4,500 a year, which is six times the death rate that we are experiencing annually in Iraq. An estimated 3 million teenagers are full-blown alcoholics and several million more have severe drinking problems. Alcohol kills six times more young people than all other illegal drugs combined. Let me say that again: it kills

six times what cocaine, methamphetamine, heroin, marijuana does combined. And yet the Federal Government considerably underfunds the efforts to combat underage drinking. We currently spend \$1.8 billion on hard drugs and only \$71 million on underage drinking. That is a ratio of 25 to 1. That needs to be corrected.

Recent studies have found that heavy exposure to the adolescent brain to alcohol may interfere with brain development. One study found that young alcohol-dependent 15 and 16 year olds who drank heavily in early and middle adolescents performed worse on both verbal and nonverbal memory tasks, and I think it has a tremendous impact on the dropout rate in this country, which is about 30 percent. So this is certainly an educational academic problem as well.

According to an analysis performed in 2004, the average age at which 12- to 17-year-old young people begin drinking is age 13. Young people binge drink. Ninety-two percent of the alcohol consumed by 12 to 14 year olds is consumed when they are having five or more drinks on a single occasion. And on and on. So the scope of the problem is truly massive.

And the current bill, the STOP Underage Drinking bill, has been sponsored by Congresswoman ROYBAL-ALLARD, Congressmen WAMP, WOLF, ROSA DELAURO, and myself, and then Senators DEWINE and DODD in the Senate. And I am sure that there will be others who will explain, but there have been some minor technical changes. There has been an offset provided so that those who had some heartburn over the funding aspects of it should be satisfied at this point. But basically it does three or four things. It creates an Interagency Coordinating Committee to coordinate underage drinking programs, which now are kind of growing like Topsy. It also provides a national media campaign against underage drinking which is aimed at parents.

□ 1145

The fundamental fact as to whether a young person decides to use alcohol early in their life is parental attitudes. And so many parents think, well, if my young person is only using alcohol, then they will be protected from heroin and methamphetamine. And the research is exactly the opposite. It simply is a gateway drug.

The bill also does a number of other things. It provides some grants, particularly at the college campus. The number one cause of death on the college campus is underage drinking: 1,700 deaths each year. So we feel this is a good bill. It was passed before. We think the Senate has improved it.

I would like to thank those who have worked on it for a long period of time. We appreciate the bipartisan support.

Mr. PALLONE. Mr. Speaker, I yield 5 minutes to the lead sponsor of this legislation, the gentlewoman from California (Ms. ROYBAL-ALLARD).

Ms. ROYBAL-ALLARD. Mr. Speaker, the STOP Act is a result of an enormous commitment to the future well-being of our children by a bipartisan coalition of Democrats and Republicans from both Houses who have worked in partnership with our public health advocacy groups and the alcohol beverage industry.

I thank my Senate colleagues, CHRIS DODD and MIKE DEWINE, for their tireless support of this bill over the past 3 years.

And I also thank my colleague from the House, FRANK WOLF, for his early and steadfast support of this issue in the Appropriations Committee, as well as my colleagues TOM OSBORNE, ZACH WAMP, and ROSA DELAURO for their unwavering perseverance in addressing the problem of underage drinking in this country.

I particularly want to acknowledge TOM OSBORNE and thank him for his friendship and his support on this issue and for his lifetime commitment to building a better future for our youth. TOM, your legacy here in Congress will not soon be forgotten.

I would also like to thank my advocacy friends, as well as those in the industry, for their efforts to help pass this bill in this 109th Congress.

And finally, and but certainly not least, I would like to thank my staffer, Debbie Jessup, and especially my chief of staff, Ellen Riddleberger, who has worked with me on this issue for the past 7 years. Her many talents and knowledge of the issue are greatly responsible for this bill being before us today.

Mr. Speaker, 3 weeks ago, this House overwhelmingly passed H.R. 864. Last night the Senate unanimously passed this bill with an offset and language that addresses some of the technical concerns of our Senate and House colleagues. The substance of the bill, however, remains the same as the bill the House passed on November 14.

The bill makes permanent the national anti-underage drinking media campaign directed at parents. It authorizes research to find effective strategies to deter childhood drinking, as well as makes grants available for communities and colleges to address this crisis.

In addition, the STOP Act requires an annual report by the Secretary of HHS on the progress States are making to address underage drinking.

Mr. Speaker, this effort shows what can be accomplished when we put our differences aside and work together for the future of our children. I ask my colleagues in this House to join me and the sponsors of this bill in passing it today so that we can successfully address underage drinking and turn this tragedy into a public health success story.

Mr. BURGESS. Mr. Speaker, I reserve the balance of my time.

Mr. PALLONE. Mr. Speaker, I yield 2 minutes to the gentlewoman from Connecticut (Ms. DELAURO), who was a key sponsor of this bill.

Ms. DELAURO. Mr. Speaker, I want to thank all my colleagues for their many years of hard work to ensure that this bill reaches the floor: Congresswoman ROYBAL-ALLARD, Congressmen OSBORNE, WOLF and WAMP, as well as our colleagues in the other body, Senators DODD and DEWINE.

Passing the STOP Act, Congress has the opportunity to say here, enough. Enough to looking the other way when it comes to increasing problems of underage drinking. Enough of simply accepting that the average age that the kids start drinking is 13; that 7 million young people describe themselves as binge drinkers; and above all, we say enough to alcohol playing a role in the three leading causes of death among young people. It is time we do something about everyday young people engaging in behavior that leads to alcoholism.

So, Mr. Speaker, that is why we need this comprehensive bill. The STOP Act will increase resources for drinking prevention coalitions like Mothers Against Drunk Driving, which we know already have a positive impact on teenagers. It will fund additional research and create a committee that delivers a report card on the progress we are or are not making, and it will review alcohol advertisements targeted toward young people.

And lastly the STOP Act would help us fund a national media campaign directed at adults. Too often parents ignore signs in their own children. They refuse to believe their own child could have a problem, and we need to turn that around.

So I urge my colleagues, support the STOP Act. As a Member of Congress, as someone who has lost a loved one in a drunk driving accident, it is time that Congress spoke clearly and decisively about reducing underage drinking in our communities. With this bill, we can and we will.

Mr. BURGESS. Mr. Speaker, I reserve the balance of my time.

Mr. PALLONE. Mr. Speaker, I would urge support of the bill again, and I yield back the balance of my time.

Mr. BURGESS. Mr. Speaker, I have no further speakers.

I also would just like to point out what a privilege and an honor it has been to serve with TOM OSBORNE here in my short time in the House. And, Coach, we will miss you next year.

Mr. Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Texas (Mr. BURGESS) that the House suspend the rules and concur in the Senate amendment to the bill, H.R. 864.

The question was taken; and (two-thirds of those voting having responded in the affirmative) the rules were suspended and the Senate amendment was concurred in.

A motion to reconsider was laid on the table.