

nearly 16,000 deaths among people with diagnosed HIV in 2019, with the disease disproportionately affecting communities of color;

Whereas each year nearly 40,000 people become newly diagnosed with HIV in the United States;

Whereas communities of color are disproportionately affected by HIV in the United States;

Whereas, in order to address the HIV epidemic in the United States, on August 18, 1990, Congress enacted the Ryan White Comprehensive AIDS Resources Emergency Act (Public Law 101-381; commonly referred to as the “Ryan White CARE Act”) to provide primary medical care and essential support services for people living with HIV who are uninsured or underinsured;

Whereas the Ryan White HIV/AIDS Program provides services and support for over half of all people diagnosed with HIV in the United States;

Whereas to further focus attention on the HIV/AIDS epidemic among minority communities in the United States, in 1998 the Minority AIDS Initiative was established to provide funds to State and local institutions and organizations to best serve the health care costs and support the needs of racial and ethnic minorities living with HIV;

Whereas the United Nations Sustainable Development Goals established a global target to end AIDS as a public health threat by 2030;

Whereas, in order to further address the global HIV/AIDS epidemic, in 2003, Congress and the White House created the President’s Emergency Plan for AIDS Relief (PEPFAR);

Whereas the United States President’s Emergency Plan for AIDS Relief (PEPFAR) program remains the largest commitment in history by any country to combat a single disease;

Whereas, as of 2020, PEPFAR has supported treatment for approximately 17,200,000 people, and has enabled 2,800,000 infants of mothers living with HIV to be born HIV-free;

Whereas, in fiscal year 2020, PEPFAR directly supported HIV testing and counseling for 50,000,000 people;

Whereas the Global Fund to Fight AIDS, Tuberculosis and Malaria was launched in 2002, and, as of 2020, has helped provide antiretroviral therapy to approximately 21,900,000 people living with HIV/AIDS and to 686,000 pregnant women to prevent the transmission of HIV/AIDS to their children, saving an estimated 44,000,000 lives;

Whereas the United States is the largest donor to the Global Fund to Fight AIDS, Tuberculosis and Malaria, and every \$1 contributed by the United States leverages an additional \$2 from other donors, as required by law;

Whereas considerable progress has been made in the fight against HIV/AIDS, including a nearly 30-percent reduction in new HIV infections, an over 50-percent reduction in new HIV infections among children, and an over 45-percent reduction in the number of AIDS-related deaths between 2010 and 2020;

Whereas approximately 27,500,000 people had access to antiretroviral therapy in 2020, compared to only 7,800,000 people who had access to such therapy in 2010;

Whereas research funded by the National Institutes of Health found that HIV treatment not only saves the lives of people living with HIV, but people living with HIV on effective antiretroviral therapy and who are durably virally suppressed cannot sexually transmit HIV—proving that HIV treatment is prevention;

Whereas it is estimated that, without treatment, half of all infants living with HIV will die before their second birthday;

Whereas, despite the remarkable progress in combating HIV, significant challenges remain;

Whereas there were approximately 1,500,000 new HIV infections in 2020 globally, structural barriers continue to make testing and treatment programs inaccessible to highly vulnerable populations, and an estimated 6,100,000 people living with HIV globally still do not know their HIV status;

Whereas the Centers for Disease Control and Prevention reports that nearly 37,000 people were diagnosed with HIV in the United States in 2018 and 14 percent of the 1,200,000 people in the United States living with HIV are not aware of their HIV status;

Whereas men who have sex with men (MSM), particularly young MSM of color, are the population most affected by HIV in the United States;

Whereas southern States bear the greatest burden of HIV in the United States, accounting for 51 percent of new infections in 2018;

Whereas people living with HIV are frequently susceptible to other infections, such as hepatitis B and C and tuberculosis;

Whereas the opioid and heroin epidemics have led to increased numbers of new HIV infections among people who inject drugs, and the crisis has disproportionately affected nonurban areas, where HIV prevalence rates have been low historically and have limited services for HIV prevention and treatment and substance use disorder treatment;

Whereas the COVID-19 pandemic has placed a significant burden on the public health systems across the United States and the globe;

Whereas December 1 of each year is internationally recognized as “World AIDS Day”; and

Whereas, in 2021, commemorations for World AIDS Day recognize the need for “Ending the HIV Epidemic: Equitable Access, Everyone’s Voice”: Now, therefore, be it

*Resolved*, That the Senate—

(1) supports the goals and ideals of World AIDS Day, including the goal to achieve zero new HIV infections, zero discrimination, and zero AIDS-related deaths;

(2) commends the efforts and achievements in combating HIV/AIDS through the Ryan White HIV/AIDS Treatment Extension Act, the Minority HIV/AIDS Initiative, the Centers for Disease Control and Prevention, the National Institutes of Health, the Substance Abuse and Mental Health Services Administration, the Office of Minority Health, and the Office of the Secretary of Health and Human Services;

(3) commends the efforts and achievements in combating HIV/AIDS made by PEPFAR, the Global Fund to Fight AIDS, Tuberculosis and Malaria, and the Joint United Nations Programme on HIV/AIDS;

(4) supports efforts to end the HIV epidemic in the United States and around the world by 2030;

(5) supports continued funding for prevention, care, and treatment services, and research programs for communities impacted by HIV and people living with HIV in the United States and globally;

(6) urges, in order to ensure that an AIDS-free generation is achievable, rapid action by all countries toward further expansion and scale-up of antiretroviral treatment programs, including efforts to reduce disparities and improve access for children to life-saving medications;

(7) encourages the scaling up of comprehensive prevention services, including biomedical and structural interventions, to ensure inclusive access to programs and appropriate protections for all people at risk of contracting HIV, especially in communities disproportionately impacted;

(8) calls for greater focus on the HIV-related vulnerabilities of women and girls, including women and girls at risk for or who have survived violence or faced discrimination as a result of the disease;

(9) supports continued leadership by the United States in domestic, bilateral, multilateral, and private sector efforts to fight HIV;

(10) encourages input from civil society in the development and implementation of domestic and global HIV policies and programs that guide the response;

(11) encourages and supports greater degrees of ownership and shared responsibility by developing countries in order to ensure the sustainability of the domestic responses to HIV/AIDS by those countries; and

(12) urges other members of the international community to sustain and scale up their support for and financial contributions to efforts around the world to combat HIV.

#### SENATE RESOLUTION 462—DESIGNATING NOVEMBER 2021 AS “NATIONAL LUNG CANCER AWARENESS MONTH” AND EXPRESSING SUPPORT FOR EARLY DETECTION AND TREATMENT OF LUNG CANCER

Ms. SMITH (for herself, Mr. RUBIO, Mr. VAN HOLLEN, Mrs. CAPITO, and Mr. SCOTT of South Carolina) submitted the following resolution; which was considered and agreed to:

S. RES. 462

Whereas lung cancer is the leading cause of cancer-related death among men and women in the United States, accounting for more deaths than colon cancer, breast cancer, and prostate cancer combined;

Whereas 1 in 15 men and 1 in 17 women in the United States will develop lung cancer during their lifetime;

Whereas it is estimated that, in 2021, 235,760 individuals in the United States will be diagnosed with lung cancer, and 131,880 individuals will die from the disease;

Whereas lung cancer incidence is decreasing twice as fast in men as in women, each year more women die from lung cancer than breast cancer, and by 2035, it is estimated that more women will die from lung cancer than men;

Whereas disparities in lung cancer screening, diagnosis, treatment, and mortality are well-documented, and Black men have the highest incidence of lung cancer and the highest mortality rate from lung cancer of any racial or ethnic group;

Whereas, annually, lung cancer in individuals who have never smoked is the seventh leading cause of cancer-related death and accounts for between 17,000 and 26,000 deaths in the United States;

Whereas women who have never smoked are more likely to be diagnosed with lung cancer than men who have never smoked;

Whereas, in the United States, the proportion of lung cancers diagnosed in individuals who have never smoked is increasing;

Whereas the 5-year survival rate for localized lung cancer is 60 percent, yet only about 18 percent of lung cancers are diagnosed at this stage;

Whereas screening individuals at high risk of lung cancer using low-dose computed tomography can detect lung cancer earlier than other forms of screening and ultimately save lives;

Whereas lung cancer screening can effectively reduce lung cancer mortality, but, annually, only between 2.8 and 7.2 percent of individuals in the United States eligible for

lung cancer screening undergo lung cancer screening with low-dose computed tomography;

Whereas current lung cancer screening guidelines help catch cancer early for individuals at high risk of lung cancer, leading to a higher likelihood of successful treatment, but can preclude screening for individuals who develop lung cancer, including individuals who have never smoked but have other risk factors, such as family history of lung cancer, exposure to secondhand smoke, or exposure to radon, which is the second leading cause of lung cancer; and

Whereas educational efforts can increase awareness of lung cancer and lung cancer screening among the general public, patients and their families, and health care workers, thereby increasing the early detection of lung cancer; Now, therefore, be it

*Resolved*, That the Senate—

(1) designates November 2021 as “National Lung Cancer Awareness Month”;

(2) supports the purposes and ideals of National Lung Cancer Awareness Month;

(3) promotes efforts to increase awareness of, and education about, lung cancer among individuals in the United States;

(4) champions efforts to increase lung cancer screening by raising awareness among, and improving access for, individuals who are eligible for lung cancer screening;

(5) recognizes the need for research on the early screening, diagnosis, and treatment of lung cancer; and

(6) encourages the people of the United States to observe National Lung Cancer Awareness Month with appropriate awareness and educational activities.

#### SENATE RESOLUTION 463—EX-PRESSING SUPPORT FOR THE GOALS OF STOMACH CANCER AWARENESS MONTH

Mr. YOUNG (for himself, Mr. CARDIN, and Mr. BRAUN) submitted the following resolution; which was considered and agreed to:

S. RES. 463

Whereas stomach cancer, also known as gastric cancer, is one of the most difficult cancers to detect in the early stages of the disease, which contributes to high mortality rates;

Whereas stomach cancer occurs when cancer cells develop in the lining of the stomach;

Whereas stomach cancer is the fifth most common type of cancer worldwide;

Whereas, in 2021, an estimated—

(1) 26,560 cases of stomach cancer will be diagnosed in the United States; and

(2) 11,180 people in the United States will die from stomach cancer;

Whereas the estimated 5-year survival rate for stomach cancer is only 32.4 percent;

Whereas, in the United States, stomach cancer is more prevalent among racial and ethnic minorities;

Whereas increased awareness of, and education about, stomach cancer among patients and health care providers could improve timely recognition of stomach cancer symptoms;

Whereas more research into early diagnosis, screening, and treatment for stomach cancer is needed; and

Whereas November 2021 is an appropriate month to observe Stomach Cancer Awareness Month; Now, therefore, be it

*Resolved*, That the Senate—

(1) supports the goals of Stomach Cancer Awareness Month;

(2) supports efforts to increase awareness of, and education about, stomach cancer

among the general public of the United States;

(3) recognizes the need for additional research into early diagnosis, screening, and treatment for stomach cancer; and

(4) encourages States, territories, and localities of the United States to support the goals of Stomach Cancer Awareness Month.

#### SENATE RESOLUTION 464—EX-PRESSING SUPPORT FOR THE GOALS OF NATIONAL ADOPTION MONTH AND NATIONAL ADOPTION DAY BY PROMOTING NATIONAL AWARENESS OF ADOPTION AND THE CHILDREN WAITING FOR ADOPTION, CELEBRATING CHILDREN AND FAMILIES INVOLVED IN ADOPTION, AND ENCOURAGING THE PEOPLE OF THE UNITED STATES TO SECURE SAFETY, PERMANENCY, AND WELL-BEING FOR ALL CHILDREN

Mr. BLUNT (for himself, Ms. KLOBUCHAR, Mr. GRASSLEY, Ms. WARREN, Mr. PORTMAN, Ms. HASSAN, Mr. TILLIS, Mr. MANCHIN, Mrs. HYDE-SMITH, Ms. ROSEN, Mr. RISCH, Ms. SMITH, Mr. MORAN, Mr. WYDEN, Mr. INHOFE, Mr. BOOKER, Mr. CRAMER, Mr. KING, Mr. TUBERVILLE, Mr. VAN HOLLEN, Mrs. BLACKBURN, Mr. BENNET, Mr. THUNE, Mr. CASEY, Mr. BARRASSO, Mr. WHITEHOUSE, Mr. HOEVEN, Mrs. FEINSTEIN, Mr. SCOTT of South Carolina, Mr. BOOZMAN, Mr. COONS, Mr. BROWN, Mrs. FISCHER, Mr. WARNOCK, Mr. BURR, Mr. WICKER, Mr. SCOTT of Florida, Mr. HAWLEY, Ms. LUMMIS, Mrs. CAPITO, Mr. HAGERTY, Ms. DUCKWORTH, Mr. BLUMENTHAL, Mr. LANKFORD, and Ms. STABENOW) submitted the following resolution; which was considered and agreed to:

S. RES. 464

Whereas there are far too many children outside of permanent family care and in the United States foster care system, who are waiting to be adopted;

Whereas the Children's Bureau, an office of the Administration for Children and Families within the Department of Health and Human Services, supports programs, research, and monitoring to help eliminate barriers to adoption and find permanent families for children;

Whereas, every day, loving and nurturing families are strengthened and expanded when committed and dedicated individuals make an important difference in the life of a child through adoption;

Whereas the coronavirus disease 2019 (COVID-19) pandemic has presented unprecedented challenges to—

(1) the United States;

(2) the foster care system, including kinship care;

(3) prospective adoptive parents; and

(4) the children awaiting permanency;

Whereas foster care systems, prospective adoptive parents, and the children awaiting permanency have stepped up in brave and inspiring ways in order to meet these challenges;

Whereas the President traditionally issues an annual proclamation to declare the month of November as National Adoption Month, and the President has proclaimed November 2021 as National Adoption Month;

Whereas National Adoption Day has been celebrated as a collective national effort to

find permanent and loving families for children in the foster care system; and

Whereas the Saturday before Thanksgiving has been recognized as National Adoption Day since at least 2000, and in 2021, the Saturday before Thanksgiving is November 20; Now, therefore, be it

*Resolved*, That the Senate—

(1) supports the goals and ideals of National Adoption Month and National Adoption Day;

(2) recognizes that every child should have a permanent and loving family; and

(3) encourages the people of the United States to consider adoption during the month of November and throughout the year.

#### AMENDMENTS SUBMITTED AND PROPOSED

SA 4861. Mr. BLUMENTHAL (for himself, Mr. GRAHAM, Ms. ERNST, Mr. COONS, Mr. RUBIO, and Mr. WARNOCK) submitted an amendment intended to be proposed to amendment SA 3867 proposed by Mr. REED to the bill H.R. 4350, to authorize appropriations for fiscal year 2022 for military activities of the Department of Defense, for military construction, and for defense activities of the Department of Energy, to prescribe military personnel strengths for such fiscal year, and for other purposes; which was ordered to lie on the table.

SA 4862. Mrs. FEINSTEIN (for herself and Ms. ERNST) submitted an amendment intended to be proposed to amendment SA 3867 proposed by Mr. REED to the bill H.R. 4350, supra; which was ordered to lie on the table.

#### TEXT OF AMENDMENTS

SA 4861. Mr. BLUMENTHAL (for himself, Mr. GRAHAM, Ms. ERNST, Mr. COONS, Mr. RUBIO, and Mr. WARNOCK) submitted an amendment intended to be proposed to amendment SA 3867 proposed by Mr. REED to the bill H.R. 4350, to authorize appropriations for fiscal year 2022 for military activities of the Department of Defense, for military construction, and for defense activities of the Department of Energy, to prescribe military personnel strengths for such fiscal year, and for other purposes; which was ordered to lie on the table; as follows:

At the end of subtitle B of title XII, insert the following:

#### SEC. 1216. STRATEGY TO SUPPORT NATIONALS OF AFGHANISTAN WHO ARE APPLICANTS FOR SPECIAL IMMIGRANT VISAS OR FOR REFERRAL TO THE UNITED STATES REFUGEE ADMISSIONS PROGRAM.

(a) SENSE OF CONGRESS.—It is the sense of Congress that the United States should increase support for nationals of Afghanistan who aided the United States mission in Afghanistan during the past 20 years and are now under threat from the Taliban, specifically such nationals of Afghanistan, in Afghanistan or third countries, who are applicants for—

(1) special immigrant visas under the Afghan Allies Protection Act of 2009 (8 U.S.C. 1101 note; Public Law 111-8) or section 1059 of the National Defense Authorization Act for Fiscal Year 2006 (8 U.S.C. 1101 note; Public Law 109-163); or

(2) referral to the United States Refugee Admissions Program as refugees (as defined in section 101(a)(42) of the Immigration and Nationality Act (8 U.S.C. 1101(a)(42))), including as Priority 2 refugees.