

SENATE RESOLUTION 734—RECOGNIZING 30 YEARS SINCE THE INTERNATIONAL CONFERENCE ON POPULATION AND DEVELOPMENT IN CAIRO, EGYPT, AND REAFFIRMING THE GOALS AND IDEALS OF THE INTERNATIONAL CONFERENCE ON POPULATION AND DEVELOPMENT PROGRAMME OF ACTION, INCLUDING COMPREHENSIVE SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS

Mrs. SHAHEEN (for herself and Ms. DUCKWORTH) submitted the following resolution; which was referred to the Committee on Foreign Relations:

S. RES. 734

Whereas the United States played a central role in the creation of the United Nations in 1945 following World War II to promote international cooperation;

Whereas the United States encouraged the establishment of the United Nations Population Fund (in this preamble referred to as “UNFPA”) in 1969 and continues to serve on the Executive Board of the UNFPA;

Whereas the International Conference on Population and Development (in this preamble referred to as “ICPD”), which was attended by officials from the Executive Office of the President, Congress, and United States civil society and private sector organizations, was convened by the UNFPA and the Population Division of the United Nations Department for Economic and Social Information and Policy Analysis in Cairo, Egypt, from September 5 to September 13, 1994, for the purpose of addressing critical issues regarding population, development, and human rights;

Whereas the resulting ICPD Programme of Action, to which the United States is a signatory, asserts that the focus of development policy must be the human rights and dignity of individuals and the improvement of individual lives, measured by progress in addressing inequalities;

Whereas civil society played an indispensable role in shaping and executing the ICPD Programme of Action and continues to do so today;

Whereas, since the adoption of the ICPD Programme of Action in 1994, significant progress has been made towards universal access to sexual and reproductive health and rights, including—

(1) a global increase in voluntary access to modern contraception by 25 percent;

(2) a decline in the number of deaths due to unsafe abortion from 69,000 in 1990 to 22,800 in 2014, due to liberalization of abortion laws and increased access to safe, and effective methods of abortion across the globe;

(3) a decrease in maternal deaths by 34 percent globally; and

(4) enhanced access to medical advances, such as the development of antiretroviral therapies, which 29,800,000 people living with human immunodeficiency virus (HIV) accessed in 2022, contributing to significant decreases in HIV acquisition and transmission;

Whereas gaps and challenges in achieving the goals of the ICPD Programme of Action remain as progress has been unequal and fragmented and new challenges have emerged, such as—

(1) the 218,000,000 women globally who have unmet contraceptive needs;

(2) the 287,000 women who die annually from complications during pregnancy and childbirth globally, nearly all of which are preventable and 1 out of 4 of which could be prevented by access to contraception;

(3) the approximately 11 percent of maternal deaths that can be attributed to unsafe abortion;

(4) the more than 1,000,000 sexually transmitted infections (STIs) that are—

(A) acquired globally every day because access to education about STIs and STI testing is not universally available due to a lack of trained personnel, comprehensive sexual education, laboratory capacity, and medicines;

(B) too often untreated, as an estimated 133,000,000 women of reproductive age in low to middle income countries need but do not receive treatment for 1 of the 4 major curable STIs—chlamydia, gonorrhea, syphilis, and trichomoniasis; and

(C) exacerbated by the separation of STI services from other services, such as primary health care or family planning;

(5) the reduction in maternal mortality that has stalled in 133 countries and increase in maternal mortality in 17 countries from 2016 to 2020;

(6) the individuals living with HIV or at risk of HIV transmission, including the—

(A) 1,700,000 individuals who became newly infected with HIV in 2022, 54 percent of which are among key populations, and their sexual partners, whose risk of acquiring HIV is 22 times higher among men who have sex with men, 22 times higher among people who inject drugs, 21 times higher for sex workers, and 12 times higher for transgender individuals; and

(B) adolescent girls and young women (ages 15 to 24), who are at a higher risk of becoming infected with HIV and who account for 4 out of 5 new infections among all adolescents (aged 15 to 19) in sub-Saharan Africa;

(7) the 35 percent of women globally who have experienced physical or sexual intimate partner violence or sexual violence, or sexual violence by a non-partner at some point in their lives, a vulnerability that may increase as a result of characteristics such as sexual orientation, disability status, HIV status, and pregnancy, or contextual factors, such as humanitarian crises and conflict; and

(8) the 48,000,000 women and girls of reproductive age who are in need of humanitarian assistance;

Whereas the ICPD Programme of Action and other international human rights standards recognize that access to evidence-based, comprehensive sexual and reproductive health care, including abortion, is an essential human right, and that ending gender-based violence and the prevention and treatment of HIV are key priorities to advancing sexual and reproductive health and rights for all people, and attaining the ICPD Programme of Action milestones and the Sustainable Development Goals [of the United Nations Department of Economic and Social Affairs];

Whereas the ICPD Programme of Action calls for the right of all people to have a satisfying and safe sex life, the capability to reproduce, and the freedom to decide if, when, and how often to do so;

Whereas the ICPD Programme of Action calls for the right of all people to be informed and to have access to safe, effective, affordable and acceptable methods of family planning of their choice, free of coercion, violence, misinformation, and discrimination;

Whereas the ICPD called on governments to commit, at the highest political level, to achieving the goals and objectives of the Programme of Action and to take a leading role in coordinating the implementation, monitoring, and evaluation of follow-up actions;

Whereas the United Nations General Assembly—

(1) endorsed the ICPD Programme of Action in 1995;

(2) affirmed that governments should commit themselves to the goals and objectives of the Programme of Action; and

(3) called upon all governments to give the widest possible dissemination of the Programme of Action and seek public support for the goals, objectives, and actions of the Programme of Action;

Whereas 400 youth delegates from 60 countries, including the United States—

(1) met for the ICPD30 Global Youth Dialogue in Cotonou, Benin, on April 4 to 5, 2024, to reaffirm the pivotal and active role young people have played globally in promoting, protecting, and delivering the ICPD Programme of Action and through the resulting Cotonou Youth Action Agenda; and

(2) called on all United Nations Member States, duty bearers, and stakeholders to implement, resource, and institutionalize global commitments that provide youth-centered, accessible, safe, gender-responsive, quality sexual and reproductive health services, and supplies within universal health coverage programs, including menstrual health management, the full range of modern contraceptives, comprehensive abortion care services, HIV services, and self-managed care;

Whereas members of parliament from all regions of the world, with presence from the House of Representatives, met in Oslo, Norway, on April 10 to 12, 2024, for the eighth International Parliamentarians' Conference on the Implementation (in this preamble referred to as “IPCI”) of the International Conference on Population and Development and through the resulting Oslo Statement of Commitment, members expressed deep concern about the global backlash against the sexual and reproductive health and rights agenda that has been observed in multiple countries, including the lack of agency for women and girls, which deepens social inequalities and undermines human rights, democracy, gender equality, and the collective efforts to build more inclusive and resilient societies;

Whereas, in the 2024 State of the World Population Report, UNFPA reviewed progress in achieving the ICPD Programme of Action, indicating that significant progress has been made, but entrenched inequalities deprive millions of individuals from fundamental sexual and reproductive health and rights;

Whereas the inability of the international community to reach the most marginalized individuals globally is largely due to unwillingness to confront the legacies of gender inequality, racial discrimination, and misinformation that underlie health systems;

Whereas the United States Government, in its Statement at UN Commission on Population and Development's 57th Annual Session on April 30, 2024, affirmed that reproductive rights are central to an inclusive, thriving society, and that seeking to achieve such rights unequivocally transforms the lives of women and girls, in all of their diversity, around the world, for the better; and

Whereas the Blueprint for Sexual and Reproductive Health, Rights, and Justice calls on the United States Government to mark the 30th anniversary of ICPD with a high level event that recommits the United States Government to the ICPD Programme of Action and delivers sexual and reproductive health and rights for all through rhetoric and action on programs, policy, and funding; Now, therefore, be it

Resolved, That the Senate—

(1) commends the notable progress made in achieving the goals set in 1994 at the International Conference on Population and Development (referred to in this resolution as the “ICPD”) and the follow up and outcomes of subsequent review conferences;

(2) recommits to the achievement of the goals of the ICPD;

(3) champions the right to bodily autonomy and self-determination for all people;

(4) recognizes that sexual and reproductive health and rights, including safe abortion, are human rights, and that sexual and reproductive health and rights are a precondition for the empowerment of women, gender equality, and the well-being and prosperity of all people;

(5) commits to advocating for and providing comprehensive and factual information and a full range of sexual and reproductive health care services that are accessible, affordable, acceptable, of good quality, and convenient to all individuals;

(6) acknowledges that without a clear commitment to a human rights-based approach to development, reproductive health, and gender equality, meeting the goals of either the ICPD or the Sustainable Development Goals will not be possible;

(7) acknowledges and condemns the recent backsliding that—

(A) has occurred domestically and the egregious impact such backsliding has had globally, particularly regarding abortion access and the rights of the LGBTQIA+ community; and

(B) is contrary to evidence-based health practices and established human rights norms and could set back the progress made on reducing unsafe abortions, reducing maternal mortality, and reducing stigma against treatment for the human immunodeficiency virus and acquired immunodeficiency syndrome;

(8) accepts the responsibility of the United States, as the largest funder of global health, to uphold the goals of ICPD and set a global example through United States funding and policies, which affirmatively advance Federal development commitments and the realization of human rights;

(9) supports the urgent need to scale up funding for bilateral international family planning and reproductive health programs and the United States contribution to United Nations Population Fund, which have been flat funded for 14 years, and to permanently end harmful policies like the global gag rule and Helms Amendment, which undermine global access to comprehensive health care information and services and the ability to achieve the vision laid out in the ICPD Programme of Action;

(10) opposes and condemns reproductive coercion in all forms, consistent with the ICPD Programme of Action, including—

(A) the use of incentives or disincentives to lower or raise fertility;

(B) the use of incentives or targets for the uptake of specific contraceptive methods;

(C) withholding of information on reproductive health options; and

(D) forced abortion, forced sterilization, and forced pregnancy; and

(11) calls on the Administration of President Joseph R. Biden, Jr., to fully implement the National Strategy on Gender Equity and Equality, including the strategic priority to “Protect, Improve, and Expand Access to Health Care, including Sexual and Reproductive Health Care”.

SENATE RESOLUTION 735—DESIGNATING JULY 17, 2024, AS “GLIOBLASTOMA AWARENESS DAY”

Mr. GRAHAM (for himself, Ms. SINEMA, Mr. SCOTT of South Carolina, Mr. KELLY, Mr. VAN HOLLEN, Mr. WARNOCK, Mr. RUBIO, Mr. MARKEY, Ms. WARREN, Mr. COONS, and Mr. BARASSO) submitted the following resolution;

tion; which was considered and agreed to:

S. RES. 735

Whereas approximately 14,490 new cases of glioblastoma were diagnosed in the United States in 2023;

Whereas glioblastoma is—

(1) the most common malignant (cancerous) brain tumor, accounting for approximately 1/2 of all primary malignant brain tumors; and

(2) the most aggressive, complex, difficult to treat, and deadly type of brain tumor;

Whereas it is estimated that more than 10,000 individuals in the United States will succumb to glioblastoma each year;

Whereas the 5-year survival rate for glioblastoma patients is only 6.9 percent, and the median length of survival for glioblastoma patients is only 8 months;

Whereas glioblastoma is described as a disease that affects the “essence of self”, as the treatment and removal of glioblastoma presents significant challenges due to the uniquely complex and fragile nature of the brain, the primary organ in the human body that controls not only cognitive ability, but also the actions of every organ and limb;

Whereas patients and caregivers play a critical role in furthering research for glioblastoma;

Whereas, relative to the patients of other types of cancers, brain cancer patients pay the second highest out-of-pocket costs for medical services in both the initial and end-of-life phases of care;

Whereas, although research advances may fuel the development of new treatments for glioblastoma, challenging obstacles to accelerating progress toward new treatments for glioblastoma remain, and there are no screening or early detection methods;

Whereas, in 2021, the World Health Organization reclassified brain tumors and made significant changes to the molecular characteristics of a glioblastoma diagnosis, necessitating critical biomarker testing for patients suspected of having glioblastoma;

Whereas, although glioblastoma was first described in medical and scientific literature in the 1920s, and despite its devastating prognosis, only 5 drugs and 1 medical device have been approved by the Food and Drug Administration to specifically treat glioblastoma since the 1920s, and the mortality rates associated with glioblastoma have changed little during the past 30 years;

Whereas, since the first Glioblastoma Awareness Day, the National Cancer Institute established the Glioblastoma Therapeutics Network in 2020, a network of multi-institutional teams that enhance and support the discovery and development of glioblastoma therapies by driving therapeutic agents through pre-clinical studies and early-phase clinical trials, which are necessary to rapidly evaluate potential treatments to advance toward cures and improved quality of life; and

Whereas there is a need for greater public awareness of glioblastoma, including awareness of both—

(1) the urgent unmet medical needs of glioblastoma patients; and

(2) the opportunities for research of, and treatment advances for, glioblastoma: Now, therefore, be it

Resolved, That the Senate—

(1) designates July 17, 2024, as “Glioblastoma Awareness Day”;;

(2) encourages increased public awareness of glioblastoma;

(3) honors the individuals who have died from the devastating disease of glioblastoma or are currently living with the disease;

(4) supports efforts to develop better treatments for glioblastoma that will improve the

long-term prognosis for, and the quality of life of, individuals diagnosed with the disease;

(5) recognizes the importance of molecular biomarker testing to the diagnosis and treatment of glioblastoma;

(6) expresses support for the individuals who are battling brain tumors, as well as the families, friends, and caregivers of those individuals;

(7) urges a collaborative approach to brain tumor research among governmental, private, and nonprofit organizations, which is a promising means of advancing the understanding and treatment of glioblastoma; and

(8) encourages continued investments in glioblastoma research and treatments, including through the Glioblastoma Therapeutics Network and other existing brain tumor research resources.

SENATE RESOLUTION 736—RECOGNIZING THE IMPORTANCE OF TRADEMARKS IN THE ECONOMY AND THE ROLE OF TRADEMARKS IN PROTECTING CONSUMER SAFETY, BY DESIGNATING THE MONTH OF JULY AS “NATIONAL ANTI-COUNTERFEITING AND CONSUMER EDUCATION AND AWARENESS MONTH”

Mr. COONS (for himself, Mr. GRASSLEY, Ms. HIRONO, and Mr. TILLIS) submitted the following resolution; which was referred to the Committee on the Judiciary:

S. RES. 736

Whereas public awareness is crucial to safeguard consumers and businesses from unsafe and unreliable products that, through illicit activity, threaten intellectual property rights, the economic market, and even the health and well-being of consumers;

Whereas Federal statutes such as the Act of July 5, 1946 (commonly referred to as the “Trademark Act of 1946” or the “Lanham Act”) (60 Stat. 427, chapter 540; 15 U.S.C. 1051 et seq.) (referred to in this preamble as the “Lanham Act”) and the Trademark Counterfeiting Act of 1984 (Public Law 98-473; 98 Stat. 2178) regulate the unlawful act of producing and selling counterfeit products;

Whereas the Lanham Act provided the foundation for modern Federal trademark protection, creating legal rights and remedies for brand owners suffering from trademark infringement, helping consumers make informed choices by reducing the amount of confusingly similar products, and making the marketplace more fair, competitive, and safe for all;

Whereas October 12, 2024, marks the 40th anniversary of the enactment of the Trademark Counterfeiting Act of 1984 (Public Law 98-473; 98 Stat. 2178);

Whereas, according to the World Intellectual Property Organization, there was an estimated 82,500,000 active trademark registrations around the world in 2022, a 9.4 percent increase from the previous year;

Whereas counterfeit products undermine laws, including the Lanham Act, that ensure the safety of consumers, businesses, and brand owners against illegitimate products in the marketplace, from which criminal groups and bad actors are benefitting at the expense of the public and private sector;

Whereas counterfeiters use different online platforms to attract consumers to buy illegitimate goods, usually enticing consumers through cheaper prices;

Whereas the growth of both global commerce and electronic commerce has expedited the evolving problem because it has