

and improving the well-being of individuals and families affected by HHT through research, outreach, education, and support;

(3) supports the designation of June 2010 as National Hereditary Hemorrhagic Telangiectasia (HHT) month, to increase awareness of HHT;

(4) acknowledges the need to identify the approximately 90 percent of the HHT population that has not yet been diagnosed and is at risk for death or disability due to sudden rupture of the blood vessels in major organs in the body;

(5) recognizes the importance of comprehensive care centers in providing complete care and treatment for each patient with HHT;

(6) recognizes that stroke, lung, and brain hemorrhages can be prevented through early diagnosis, screening, and treatment of HHT;

(7) recognizes severe hemorrhages in the nose and gastrointestinal tract can be controlled through intervention, and that heart failure can be managed through proper diagnosis of HHT and treatments;

(8) recognizes that a leading medical and academic institution estimated that \$6,600,000,000 of 1-time health care costs can be saved through aggressive management of HHT in the at-risk population; and

(9) encourages the people of the United States and interested groups to observe and support the month through appropriate programs and activities that promote public awareness of HHT and potential treatments for it.

SENATE RESOLUTION 509—DESIGNATING APRIL 2010 AS “NATIONAL STD AWARENESS MONTH”

Mr. BURRIS submitted the following resolution; which was referred to the Committee on the Judiciary.

S. RES. 509

Whereas sexually transmitted infections (referred to in this preamble as “STIs”) (also commonly known as sexually transmitted diseases, or “STDs”) are a major public health challenge for the United States in economic and human terms;

Whereas the United States has the highest rate of people with STIs in the industrialized world, with an estimated 19,000,000 new cases occurring each year;

Whereas, each year, approximately 1/2 of the new cases of STIs occur in young people between the ages of 15 to 24;

Whereas all people of the United States have an interest in STIs because every community is impacted and everyone pays for the cost of the infections, either directly or indirectly;

Whereas, according to the Centers for Disease Control and Prevention (referred to in this preamble as “CDC”), STIs impose a tremendous economic burden on the United States, with direct medical costs for treating STIs as high as \$15,900,000 per year;

Whereas, in 2008, the CDC estimated that 1 in 4 young women between the ages of 14 and 19 in the United States, or 3,200,000 teenage girls, and nearly 1 in 2 African-American young women are infected with 1 or more of the most common sexually transmitted infections, including the human papillomavirus (referred to in this preamble as “HPV”), chlamydia, herpes simplex virus, and trichomoniasis;

Whereas, in 2010, CDC data indicated that 1 in 6 Americans between the ages of 14 and 49 years old are infected with type 2 of the herpes simplex virus, a lifelong and incurable infection, and that of the group of infected Americans, African-American women were the most affected group, with a prevalence rate of 48 percent;

Whereas poverty and lack of access to quality health care exacerbate the rate of infection with the human immunodeficiency virus (referred to in this preamble as “HIV”) and other STIs;

Whereas men who have sex with men continue to be disproportionately impacted by STIs, accounting for 63 percent of all syphilis cases in 2008 as compared to only 4 percent of STIs in 2000;

Whereas racial disparities in rates of STIs are among the worst health disparities in the United States for any health condition;

Whereas most STIs have been associated with increased risk of HIV transmission and are likely contributing to the ongoing HIV epidemic in the United States;

Whereas the CDC reports that the 2 most common STIs among young women are HPV, with 18 percent infected, and chlamydia, with 4 percent infected;

Whereas the long-term health effects of HPV and chlamydia are especially severe for women and include infertility and cervical cancer;

Whereas vaccination, screening, and early treatment can prevent some of the most devastating effects of STIs;

Whereas high STI infection rates in the United States demonstrate the need for better ways to reach the individuals most at risk for infection;

Whereas the CDC recommends—

(1) annual chlamydia screenings for sexually active women 25 years of age and younger;

(2) HPV vaccination for girls and women between the ages of 11 and 26 who have not been vaccinated, or who have not completed the full series of shots; and

(3) screening for HIV, syphilis, chlamydia, and gonorrhea at least once a year for men who have sex with men and who are not in a long-term, mutually monogamous relationship;

Whereas chlamydia can lead to pelvic inflammatory disease, chronic pelvic pain, infertility, and tubular pregnancies, which can affect the health and well-being of a woman throughout her lifetime;

Whereas STIs can be transmitted from infected mothers to infants during childbirth and can cause severe health consequences in the infants;

Whereas STIs often cause social stigma and may have a serious psychological impact among the individuals who are infected;

Whereas people protect themselves against STIs through participation in programs that provide comprehensive and medically accurate health information and screening and treatment services, including title X of the Public Health Service Act (42 U.S.C. 300 et seq.) and the STI prevention program of the CDC;

Whereas school-based STI screening programs have been highly successful in cases in which the programs are implemented and are effective at preventing the spread of STIs among adolescents;

Whereas the sexual and reproductive health needs of men must be more thoroughly recognized and better addressed by the public health and medical provider community in order to more effectively combat the spread of STIs;

Whereas STI programs in State and local health departments that are funded through the Division of STD Prevention of the CDC are the frontline of the defense of the United States against the spread of STIs;

Whereas STI screening, vaccination, and other prevention strategies for sexually active women should be among the highest public health priorities; and

Whereas the CDC observes April as “National STD Awareness Month”: Now, therefore, be it

Resolved, That the Senate—

(1) designates April 2010 as “National STD Awareness Month”;

(2) encourages the Federal Government, States, localities, and nonprofit organizations to observe the month with appropriate programs and activities, with the goal of increasing public knowledge of the risks of sexually transmitted infections (referred to in this resolution as “STIs”) and protecting people of all ages;

(3) recognizes the human toll of STIs and the importance of making the prevention, diagnosis, and treatment of STIs an urgent public health priority;

(4) calls on all people of the United States to learn about STIs and the prevention approaches recommended for STIs; and

(5) encourages all sexually active individuals to get tested for STIs and to seek appropriate care if infected.

SENATE CONCURRENT RESOLUTION 62—CONGRATULATING THE OUTSTANDING PROFESSIONAL PUBLIC SERVANTS, BOTH PAST AND PRESENT, OF THE NATURAL RESOURCES CONSERVATION SERVICE ON THE OCCASION OF ITS 75TH ANNIVERSARY

Mrs. LINCOLN (for herself, Mr. CHAMBLISS, Mrs. MURRAY, Mr. PRYOR, Mr. BAUCUS, Mr. CASEY, Mr. DURBIN, Mr. REID, Mr. KOHL, Mr. HARKIN, Mr. BENNET, Mr. BROWBACK, Mr. GRASSLEY, Mr. CRAPO, Mr. LEAHY, and Mr. JOHANNIS) submitted the following concurrent resolution; which was considered and agreed to:

S. CON. RES. 62

Whereas the well-being of the United States is dependent on productive soils along with abundant and high-quality water and related natural resources;

Whereas the Natural Resources Conservation Service (in this resolution referred to as “NRCS”) was established as the Soil Conservation Service in the Department of Agriculture in 1935 to assist farmers, ranchers, and other landowners in protecting soil and water resources on private lands;

Whereas Hugh Hammond Bennett, the first Chief of the Soil Conservation Service and the “father of soil conservation”, led the creation of the modern soil conservation movement that established soil and water conservation as a national priority;

Whereas the NRCS, with the assistance of President Franklin D. Roosevelt, State governments, and local partners, developed a new mechanism of American conservation service delivery, which brings together private individuals with Federal, State, and local governments to achieve common conservation objectives;

Whereas the NRCS provides a vital public service by supplying technical expertise and financial assistance to cooperating private landowners for the conservation of soil and water resources;

Whereas the NRCS, as authorized by Congress, has developed and provided land conservation programs that have resulted in the restoration and preservation of millions of acres of wetlands, forests, and grasslands that provide innumerable benefits to the general public in the form of recreational opportunities, wildlife habitat, water quality, and reduced soil erosion;

Whereas the NRCS is the world leader in soil science and soil surveying;

Whereas the NRCS is the national leader in the inventory of natural resources on private