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I am pleased that this designation will acknowledge the lifelong service of Scipio A. Jones as a civic leader, talented lawyer, skillful jurist and civil rights leader and for his remarkable courage and notable contributions to the advancement of social justice.

I would like to thank Chairman WAXMAN of the Oversight and Government Reform Committee for bringing H.R. 433 to the floor, and Denise Wilson of that committee for assistance in moving it forward. I also thank Representative LYNCH and Representative SHAYS for the kind words they offered during debate on the bill today, as well as James Savage, of my staff, for his work on this legislation.

A RESPONSIBLE EXIT STRATEGY IN IRAQ

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Maine (Mr. ALLEN) is recognized for 5 minutes.

Mr. ALLEN. Madam Speaker, our country faces great challenges: energy independence, global warming, economic competitiveness, health care, and widening income inequality. But when I visit with people in Maine, the first issue they bring up is Iraq.

We cannot address our other pressing issues unless we solve our most urgent problem: Iraq. We cannot make many needed investments in our future until we put our involvement in Iraq in the past. The war in Iraq is straining our military and compromising our ability to address vital priorities like global terrorism and nuclear proliferation. It is diverting attention from dealing with Iran, North Korea, and Afghanistan. Since the President will not, Congress must lead to force Iraqis to take responsibility for their own security by directing an orderly redeployment of troops and promoting a political solution in Iraq with a focus on transition to Iraqi control.

Recent experience shows that the U.S. must impose deadlines with consequences so that Iraqi leaders will be compelled to take responsibility. An unending U.S. military presence in Iraq creates a climate of dependency that undermines the goal of having the Iraqi Government control internal security.

There is a growing consensus that only a political solution, not a military one, will address the sectarian conflict in Iraq. Yet President Bush has rejected the wisdom of military commanders, the Iraq Study Group, and the voters by choosing to send more troops into the crossfire of a sectarian civil war. If the President won't provide an exit strategy, Congress must take the lead in ending the war.

To achieve this goal, I have cosponsored H.R. 645, a bill introduced by Representatives DAVID PRICE and BRAD MILLER. The bill would, by December 31, 2007, terminate the authorization for military operations in Iraq that passed, over my objection, in 2002.

The original mission Congress authorized, eliminating weapons of mass destruction and ousting Saddam Hussein, is no longer operative. If the President wants U.S. troops in Iraq beyond the end of this year, he should justify his plans and seek new approval from Congress. I am confident that the new Congress will not give the President a blank check, as the congressional majority wrongly did in 2002.

H.R. 645 also requires the President to submit a plan and timetable for phasing out troop deployments by December 31, 2007. It declares that U.S. policy is to withdraw forces in order to transfer responsibility to Iraqis; prohibits funding for permanent U.S. bases; authorizes employment, democracy, and governance programs; and creates a special envoy for Iraq regional security.

America's servicemen and -women in Iraq have served with skill, determination, and courage. We owe them and their families our gratitude and our unwavering support. Our legislation does not cut off funds for armor and protective equipment still needed by our troops in the war zone.

No exit strategy will succeed unless it has broad public support. I support H.R. 645 as a responsible approach to ending the war by focusing on U.S. policy and on the now outdated congressional authorization for the use of force. Citizens deserve to know where their elected officials stand on the war and not just on the escalation. I have let my constituents in Maine know where I stand and how I believe Congress should take a long overdue leadership role in ending this war.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Oregon (Mr. DEFAZIO) is recognized for 5 minutes.

(Mr. DEFAZIO addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

SUPPORT NATIONAL BLACK HIV/AIDS AWARENESS DAY

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Texas (Mr. AL GREEN) is recognized for 5 minutes.

Mr. AL GREEN of Texas. Madam Speaker, I would like to thank the Honorable BARBARA LEE for introducing the National Black HIV/AIDS Awareness Day resolution. I also thank the 396 Members who voted in support of this resolution in a true spirit of bipartisanship.

And I ask the question, why is it important to support National Black HIV/AIDS Awareness? Why? Because as of 2005, 188,000 African Americans were living with AIDS. Why? Because African Americans are 12 percent of the population and over 50 percent of the new cases diagnosed. Why is it important? Because for African Americans, HIV/AIDS is a leading cause of death.

Why is it important, Madam Speaker? Because AIDS is the number one cause of death for African American women 25 to 34.

However, Madam Speaker, notwithstanding the impending crisis, I am hopeful. I am hopeful that we will allocate more funds, more funds for medication, because this disease can be treated. More funds for counseling because this disease can be prevented. More funds for research because this disease can be cured. And, Madam Speaker, I believe that we must end AIDS because it has the potential to be our end.

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from the District of Columbia (Ms. NORTON) is recognized for 5 minutes.

(Ms. NORTON addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

CEDAW

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from New York (Mrs. MALONEY) is recognized for 5 minutes.

Mrs. MALONEY of New York. Madam Speaker, it is time that the U.S. ratify the Convention on the Elimination of All Forms of Discrimination against Women, or CEDAW.

The treaty has been in force since 1981 and has been ratified by 185 countries; 185 countries cannot be wrong, and they include such countries as Saudi Arabia, Rwanda, Nigeria, and Pakistan. The U.S. stands out as the only Western country that has not ratified the treaty and, in doing so, keeps company with Iran, Sudan, and Somalia.

Women continue to be subjected to severe human rights violations simply because of their gender. Women in many parts of the world are unable to receive a basic education, earn a living, own or inherit property, or protect themselves against HIV/AIDS. Violence against women continues to be a terrible problem in all corners of the globe.

In the Mexican cities of Juarez and Chihuahua, over 400 women have been killed since 1993. In Guatemala over 2,500 women and girls have been murdered since 2001.

Women are still stoned to death and killed by members of their family in the name of honor. In 2002 at least 270 women were murdered in "honor killings" in the Punjab Province of Pakistan alone.

Domestic violence continues to hurt and kill women at alarming rates. In Russia 70 percent of married women have been hurt in one form or another of violence from their husbands.

CEDAW is an important tool in combating discrimination and human rights abuses against women around the world. It seeks to ensure that

women have equal access to education, public health, credit, property rights, as well as prevent violence against women. There have been numerous positive changes because of the convention, such as the implementation of equality legislation, the eradication of harmful practices such as sex slavery, and changes in inheritance laws. But there is clearly a great deal more to do.

As one of the most powerful nations in the world, the U.S. must be the leader in the fight against these violations of women's human rights. Our refusal to ratify the treaty sends the message that CEDAW is not important and does not need to be enforced. There is no valid reason why the U.S. should not ratify CEDAW.

The Senate Foreign Relations Committee has voted twice to send the convention to the full Senate for ratification, first in 1994 and then again in 2002; but it has never been voted on by that body.

The U.S. is already substantially in compliance with the treaty and agrees with its fundamental principles of non-discrimination and equality for women. We cannot claim to be a defender of human rights without including over half of the world's population.

Ratifying CEDAW is something the U.S. can do that can make a difference in the lives of thousands of women around the globe. So what are we waiting for? We should move forward and ratify it.

RESPONSE TO PRESIDENT BUSH'S HEALTH CARE PROPOSAL

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from California (Ms. SOLIS) is recognized for 5 minutes.

Ms. SOLIS. Madam Speaker, today I rise to discuss the need to make access to health insurance for everyone a priority in our country.

As you know, 46 million Americans are uninsured, including more than 9 million children in the U.S. One in three people in the San Gabriel Valley, which I represent, is uninsured; and across the State of California, 6.5 million adults and 750,000 children lack health care insurance. Nationwide, 83 percent of the uninsured are from working families. Of uninsured Californians, more than two-thirds of those families have full-time jobs. Fourteen million uninsured are Latinos, including one in five children.

In the past 5 years, the number of Latinos without health insurance, as you know, has increased. According to the Kaiser Family Foundation, uninsured children are five times less likely to have visited a doctor or dentist in the past 2 years compared to those children who are insured. Fewer doctor visits can lead to serious illness and health problems, as well as avoidable costly emergency room visits. The Institute of Medicine estimates that each year at least 18,000 people die prematurely due to lack of health insurance.

But President Bush's proposal will not help the 46 million uninsured men, women, and children in our country. Instead of finding real solutions, President Bush wants to provide tax deductions to wealthy Americans who can already afford their health care insurance. Tax deductions, as you know, will not solve the real problem of skyrocketing health care costs. Tax deductions will not make it easier for low-income families and middle-class working families to purchase health care insurance. In fact, as you know, our families may be better off without the President's so-called help.

According to Families USA, President Bush's plan is "like throwing a 50-foot rope to someone in a 40-foot hole." And for the majority of uninsured people, his plan is like throwing them nothing at all.

People without employer-sponsored coverage, such as people who work in small businesses, who make up the majority of those individuals in some of our districts, will not benefit from Bush's tax breaks. Even White House officials admit that only 3 to 5 million uninsured people would actually become insured under Bush's proposal. The President's plan, as you know, fails to relieve the problems that most uninsured adults and children face.

We have to do better for the American people. And we must ensure that everyone has access to affordable and quality health care insurance and that programs are easily accessible by all. Programs such as the State Children's Health Insurance Programs, as you know, are very important. We call them the SCHIP program, and in the State of California they are known as the Healthy Families Program. Across the Nation, Medicaid and SCHIP provide coverage for more than 34 million children. These programs must be adequately funded and include needed tools to reach all eligible populations.

However, as you know, millions more children are eligible for these programs but are not enrolled. In fact, 74 percent of the uninsured children are eligible but are not somehow showing up on these enrollment applications. Many are low income. They come from families that are poor and unaware of the fact that they are eligible even for these services. And recent research shows that the SCHIP program may be failing to reach the hardest to reach subpopulations of the uninsured children like Latinos. And according to Families USA, distrust of the health care system, language, culture, these are all barriers that are confusing to our families, and those eligibility rules are high obstacles for families to enroll.

Community health care workers, such as the promotoras, play key roles in overcoming these barriers to enrollment for public programs. Promotoras, as you know, exist in the State of California and along the frontera, along the border on the U.S. side. They are qualified people who could help pa-

tients access and navigate the complex and confusing health care system. They can reach racial and ethnic minorities that would otherwise remain locked out of our system.

A recent report by the Journal of the American Academy of Pediatrics compared the effectiveness of community workers with traditional Medicaid and SCHIP outreach enrollment. The report found that families who interacted with community health workers such as the promotoras were eight times more likely to obtain health insurance.

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Almost 96 percent of children who work with promotoras in the study obtained health insurance. Seventy-eight percent were insured continuously. The study provides that community health workers can reduce the number of uninsured children, and we should move forward asking for the SCHIP program to also provide for assistance through the promotoras program.

I know that the gentlewoman from California understands what I am talking about, because those promotoras also exist in her district as well.

We need to make sure that President Bush plans for a significant funds for those children that are uninsured, and I would ask that our colleagues please continue to provide funding for the SCHIP program and to expand that in those needed areas.

PUBLICATION OF THE RULES OF THE COMMITTEE ON VETERANS' AFFAIRS, 110TH CONGRESS

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from California (Mr. FILNER) is recognized for 5 minutes.

Mr. FILNER. Madam Speaker, in accordance with clause 2(a)(2) of Rule XI of the Rules of the House of Representatives, I respectfully submit the rules of the Committee on Veterans' Affairs for printing in the CONGRESSIONAL RECORD. The Committee on Veterans' Affairs adopted these Rules by voice vote, with a quorum being present, at our organizational meeting on January 30, 2007.

RULES OF THE COMMITTEE ON VETERANS' AFFAIRS, U.S. HOUSE OF REPRESENTATIVES, FOR THE 110TH CONGRESS (ADOPTED JANUARY 30, 2007)

RULE 1—GENERAL PROVISIONS

(a) **Applicability of House Rules**—The Rules of the House are the rules of the Committee on Veterans' Affairs and its subcommittees so far as applicable, except that a motion to recess from day to day, and a motion to dispense with the first reading (in full) of a bill or resolution, if printed copies are available, are non-debatable privileged motions in Committees and subcommittees.

(b) **Subcommittees**—Each subcommittee of the Committee is a part of the Committee and is subject to the authority and direction of the Committee and to its rules so far as applicable.

(c) **Incorporation of House Rule on Committee Procedure**—Rule XI of the Rules of the House, which pertains entirely to Committee procedure, is incorporated and made part of the rules of the Committee to the extent applicable. Pursuant to clause 2(a)(3) of