

SEC. 5. There are authorized such sums as may be necessary for agency contributions related to the compensation of employees of the committee from March 1, 2009, through September 30, 2009; October 1, 2009, through September 30, 2010; and October 1, 2010, through February 28, 2011, to be paid from the Appropriations account for “Expenses of Inquiries and Investigations.”

SENATE RESOLUTION 37—A BILL CALLING ON OFFICIALS OF THE GOVERNMENT OF BRAZIL AND THE FEDERAL COURTS OF BRAZIL TO COMPLY WITH THE REQUIREMENTS OF THE CONVENTION ON THE CIVIL ASPECTS OF INTERNATIONAL CHILD ABDUCTION AND TO ASSIST IN THE SAFE RETURN OF SEAN GOLDMAN TO HIS FATHER, DAVID GOLDMAN

Mr. LAUTENBERG submitted the following resolution; which was referred to the Committee on Foreign Relations:

S. RES. 37

Whereas Sean Goldman is the son of David Goldman and Bruna Goldman, and is a United States citizen and a resident of Tinton Falls, New Jersey;

Whereas Bruna Goldman took Sean Goldman to Brazil on June 16, 2004;

Whereas, after Bruna and Sean Goldman arrived in Brazil, Bruna Goldman informed David Goldman that she would remain permanently in Brazil and would not return Sean Goldman to David Goldman in New Jersey;

Whereas, on August 26, 2004, the Superior Court of New Jersey issued a ruling awarding David Goldman physical and legal custody of Sean Goldman and ordering that Sean Goldman be immediately returned to the United States;

Whereas David Goldman initiated judicial proceedings in the Federal Court of Rio de Janeiro, under the Convention on the Civil Aspects of International Child Abduction, done at the Hague October 25, 1980 (TIAS 11670) (the “Convention”), to which both the United States and Brazil are parties;

Whereas the Convention requires that a child who is a habitual resident of a country that is a party to the Convention, and who has been removed from or retained in a country that is also a party to the Convention in violation of the custodial rights of a parent of that child, be returned to the country of habitual residence;

Whereas, despite the petition filed in the Federal Court of Rio de Janeiro by David Goldman for the return of his child, less than one year after Sean Goldman was taken to Brazil, David Goldman was prevented from exercising his legal custody of Sean Goldman by rulings of the Federal Regional Court and the 3rd Chamber of the Superior Court of Justice of Brazil;

Whereas Bruna Goldman passed away in August 2008, and her new husband filed a petition to replace the name of David Goldman with his own name on the birth certificate of Sean Goldman;

Whereas the new husband of Bruna Goldman filed a petition for custody of Sean Goldman with the 2nd Family Court of Brazil on August 28, 2008;

Whereas the 2nd Family Court of Brazil granted temporary custody to the new husband of Bruna Goldman, despite specific provisions in the Convention that prohibit action by a family court while a case brought under the Convention is pending;

Whereas Sean Goldman remains in the temporary custody of the new husband of Bruna Goldman;

Whereas David Goldman traveled to Rio de Janeiro, Brazil, in October 2008 for court-approved visitation with Sean Goldman;

Whereas the new husband of Bruna Goldman failed to present Sean Goldman for such visitation;

Whereas the Convention requires the Government of Brazil to “take all appropriate measures to secure within [its territory] the implementation of the objects of the Convention” and “to use the most expeditious procedures available”;

Whereas the Federal Court of Rio de Janeiro has failed to comply with the obligations of the Government of Brazil under article 11 of the Convention by failing to expeditiously adjudicate the petition of David Goldman under the Convention;

Whereas it is customary under international law to adjudicate a petition under the Convention within six weeks;

Whereas the Department of State reported in the 2008 report on compliance with the Convention, as required under section 2803 of the Foreign Affairs Reform and Restructuring Act of 1998 (42 U.S.C. 11611), that the judicial authorities of Brazil “continued to demonstrate patterns of noncompliance with the Convention”;

Whereas the Special Secretariat for Human Rights of the Presidency of the Republic of Brazil, the central authority for carrying out the Convention in Brazil, wrote to the Office of the Attorney General of Brazil to express concern with the manner in which the 2d Family Court of Brazil conducted the case of Sean Goldman and to state that the issuance of temporary custody rights by the 2d Family Court of Brazil was a violation of the Convention;

Whereas Sean Goldman is being deprived of his rightful opportunity to live with and be raised by his biological father, David Goldman; and

Whereas it is consistent with international law that Sean Goldman be reunited with his father, David Goldman, in New Jersey: Now, therefore, be it

Resolved, That the Senate calls on officials of the Government of Brazil and the federal courts of Brazil—

(1) to fulfill the obligations of Brazil under the Convention on the Civil Aspects of International Child Abduction, done at the Hague October 25, 1980 (TIAS 11670); and

(2) to assist in the safe return of Sean Goldman to his father, David Goldman, in the United States.

SENATE CONCURRENT RESOLUTION 6—EXPRESSING THE SENSE OF CONGRESS THAT NATIONAL HEALTH CARE REFORM SHOULD ENSURE THAT THE HEALTH CARE NEEDS OF WOMEN AND OF ALL INDIVIDUALS IN THE UNITED STATES ARE MET

Ms. STABENOW (for herself, Ms. KULSKI, Mrs. MURRAY, and Mr. SANDERS) submitted the following concurrent resolution; which was referred to the Committee on Health, Education, Labor, and Pensions:

S. CON. RES. 6

Whereas women often make health care decisions for themselves and their families;

Whereas women have expressed a desire to have affordable health care on which they can depend throughout their lives and through life transitions, including starting a family, changing jobs, working part-time or

full-time, divorce, caring for an elderly or sick family member, having a major disease, and retirement;

Whereas women with good health care coverage worry about maintaining such coverage and keeping their health care providers;

Whereas women are more likely than men to seek essential preventive and routine care, to have a chronic health condition, and to take a prescription drug on a daily basis;

Whereas women pay 68 percent more than men for out-of-pocket medical costs, due in large part to reproductive health care needs;

Whereas approximately 53 percent of underinsured individuals, and 68 percent of uninsured individuals, forgo needed care and approximately 45 percent of underinsured individuals, and 51 percent of uninsured individuals, report difficulty paying medical bills;

Whereas in 2004, 1 in 6 women with individual health care coverage reported that they postponed, or went without, needed health care because they could not afford such health care;

Whereas high-deductible health insurance plans often are marketed to young women as an inexpensive health care coverage option, but such plans often fail to cover pregnancy-related care, the most expensive health care event most young families face and the leading cause of hospital stays for young women;

Whereas in 2007, 42 percent of the under-65 population in the United States, approximately 75,000,000 adults, had either no insurance or inadequate insurance, up from 35 percent in 2003;

Whereas nearly 16 percent of people in the United States (approximately 47,000,000 people) are uninsured, including 18 percent of adult women aged 18 to 64 (approximately 17,000,000 women) and 12 percent of children (approximately 9,000,000 children);

Whereas the Institute of Medicine estimated that, in 2000, lack of health care coverage resulted in 18,000 excess deaths in the United States (a number that the Urban Institute estimated grew to 22,000 by 2006) and estimated that acquiring health insurance reduces mortality rates for previously uninsured individuals by 10 to 15 percent;

Whereas women rely on women’s health care providers throughout their lives, for comprehensive primary and preventive care, surgical care, and treatment and management of both acute and long-term health problems;

Whereas a “medical home” should ensure each woman direct access to women’s health care providers and care coordination throughout her lifetime;

Whereas uninsured women with breast cancer are 30 to 50 percent more likely than insured women with breast cancer to die from the disease, and uninsured women are 3 times less likely than insured women to have had a Pap test in the last 3 years, putting uninsured women at a 60 percent greater risk of late-stage cervical cancer;

Whereas 13 percent of all pregnant women are uninsured, making them less likely to seek prenatal care in the first trimester of their pregnancies, less likely to receive the optimal number of prenatal health care visits during their pregnancies, and 31 percent more likely to experience an adverse health outcome after giving birth;

Whereas the lack, or inadequate receipt, of prenatal care is associated with pregnancy-related mortality 2 to 3 times higher, and infant mortality 6 times higher, than that of women receiving early prenatal care, and also is associated with an increased risk of low birth weight and preterm birth;

Whereas heart disease is the leading cause of death for both women and men, but women are less likely than men to receive

lifestyle counseling, diagnostic and therapeutic procedures, and cardiac rehabilitation and are more likely to die or have a second heart attack, demonstrating inequalities between women and men in access to health care;

Whereas persisting health care disparities also are evident in that Hispanic and Native American women and children are 3 times as likely, and African-American women are nearly twice as likely, to be uninsured than non-Hispanic white women;

Whereas in 2005, nearly 80 percent of the female population with HIV/AIDS was African-American or Hispanic, and HIV/AIDS incidence rates are dramatically higher for African-American and Hispanic women and adolescents (60.2 and 15.8 per 100,000, respectively) than for white women and adolescents (3.0 per 100,000);

Whereas women are less likely than men to receive health insurance through their employers and more likely than men to be insured as a dependent, making them more vulnerable than men to insurance loss in the event of divorce or death of a spouse;

Whereas 64 percent of uninsured women are in families with at least 1 adult working full-time;

Whereas health care costs are increasingly unaffordable for working families and employers, with employer-sponsored health insurance premiums having increased 87 percent between 2000 and 2006;

Whereas the approximately 9,100,000 women-owned businesses in the United States employ 27,500,000 individuals, contribute \$3,600,000,000,000 to the economy, and face serious obstacles in obtaining affordable health care coverage for their employees;

Whereas the lack of affordable health care coverage creates barriers for women who want to change jobs or create their own small businesses;

Whereas health care professionals, a significant portion of which are women, have a stake in achieving reform that allows them to provide the highest quality of care for their patients;

Whereas 56 percent of all health caregivers are women;

Whereas although the United States spends twice as much on health care as the median industrialized nation, among the 30 developed nations of the Organisation for Economic Co-operation and Development, the health care system of the United States ranks near the bottom on most measures of health status and ranks 37th in overall health performance among 191 nations; and

Whereas the Institute of Medicine estimates that the cost of achieving full health insurance coverage in the United States would be less than the loss in economic productivity from existing coverage gaps: Now, therefore, be it

Resolved by the Senate (the House of Representatives concurring), That Congress—

(1) commits to passing, not later than 18 months after the adoption of this resolution by Congress, legislation that guarantees health care for women and all individuals and establishes coverage that enables women to attain good health that they can maintain during their reproductive years and throughout their lives and that—

(A) recognizes the special role that women play as health care consumers, caregivers, and providers;

(B) guarantees a level of benefits and care, including comprehensive reproductive health care, pregnancy-related care, and infant care, that is necessary to achieve and maintain good health throughout a woman's lifetime and lessen the burdens caused by poor health;

(C) promotes primary and preventive care, including family planning, contraceptive equity, and care continuity;

(D) provides a choice of public and private health insurance plans and direct access to a choice of health care providers to ensure continuity of coverage and a delivery system that meets the needs of women;

(E) eliminates health disparities in coverage, treatment, and outcomes on the basis of gender, culture, race, ethnicity, socio-economic status, health status, and sexual orientation;

(F) shares responsibility for financing among employers, individuals, and the government, while taking into account the needs of small businesses;

(G) ensures that access to health care is affordable;

(H) enhances health care quality and patient safety;

(I) ensures a sufficient supply of qualified providers through expanded medical and public health education and adequate reimbursement;

(J) ensures every woman access to a woman's "medical home", including direct access to women's health care providers and care coordination, throughout each woman's lifetime;

(K) recognizes and promotes the role of women as providers of health care; and

(L) promotes administrative efficiency, reduces unnecessary paperwork, and is easy for health care consumers and providers to use; and

(2) urges the President to sign such legislation into law.

NOTICE OF HEARING

COMMITTEE ON ENERGY AND NATURAL RESOURCES

Mr. BINGAMAN. Mr. President, I would like to announce for the information of the Senate and the public that a hearing has been scheduled before the Committee on Energy and Natural Resources. The hearing will be held on Thursday, February 26, 2009, at 2:15 p.m., in room SD-366 of the Dirksen Senate Office Building.

The purpose of the hearing is to provide recommendations for reducing energy consumption in buildings through improved implementation of authorized DOE programs and through other innovative federal energy efficiency policies and programs.

Because of the limited time available for the hearing, witnesses may testify by invitation only. However, those wishing to submit written testimony for the hearing record may do so by sending it to the Committee on Energy and Natural Resources, United States Senate, Washington, D.C. 20510-6150, or by e-mail to Rosemarie_Calabro@energy.senate.gov.

For further information, please contact Deborah Estes at (202) 224-5360 or Rosemarie Calabro at (202) 224-5039.

AUTHORITY FOR COMMITTEES TO MEET

COMMITTEE ON ENERGY AND NATURAL RESOURCES

Ms. STABENOW. Mr. President, I ask unanimous consent that the Committee on Energy and Natural Resources be authorized to meet during

the session of the Senate on Wednesday, February 11, 2009, at 11:30 a.m., in room SD366 of the Dirksen Senate Office Building.

The PRESIDING OFFICER. Without objection, it is so ordered.

COMMITTEE ON FOREIGN RELATIONS

Ms. STABENOW. Mr. President, I ask unanimous consent that the Committee on Foreign Relations be authorized to meet during the session of the Senate on Wednesday, February 11, 2009, at 2:30 p.m., to hold a roundtable entitled "Foreign Policy Implications of the Global Economic Crisis."

The PRESIDING OFFICER. Without objection, it is so ordered.

COMMITTEE ON HEALTH, EDUCATION, LABOR, AND PENSIONS

Ms. STABENOW. Mr. President, I ask unanimous consent that the Committee on Health, Education, Labor, and Pensions be authorized to meet during the session of the Senate on Wednesday, February 11, 2009, at 5 p.m.

The PRESIDING OFFICER. Without objection, it is so ordered.

COMMITTEE ON HOMELAND SECURITY AND GOVERNMENTAL AFFAIRS

Ms. STABENOW. Mr. President, I ask unanimous consent that the Committee on Homeland Security and Governmental Affairs be authorized to meet during the session of the Senate on Wednesday, February 11, 2009, at 10 a.m.

The PRESIDING OFFICER. Without objection, it is so ordered.

COMMITTEE ON THE JUDICIARY

Ms. STABENOW. Mr. President, I ask unanimous consent that the Senate Committee on the Judiciary be authorized to meet during the session of the Senate, to conduct a hearing entitled "The Need for Increased Fraud Enforcement in the Wake of the Economic Downturn" on Wednesday, February 11, 2009, at 10 a.m., in room SD-226 of the Dirksen Senate Office Building.

The PRESIDING OFFICER. Without objection, it is so ordered.

COMMITTEE ON RULES AND ADMINISTRATION

Ms. STABENOW. Mr. President, I ask unanimous consent that the Committee on Rules and Administration be authorized to meet during the session of the Senate on Wednesday, February 11, 2009, at 10:30 a.m.

The PRESIDING OFFICER. Without objection, it is so ordered.

COMMITTEE ON VETERANS' AFFAIRS

Ms. STABENOW. Mr. President, I ask unanimous consent for the Committee on Veterans' Affairs to be authorized to meet during the session of the Senate on Wednesday, February 11, 2009, to conduct a hearing to review veterans' disability compensation and the appeals process. The Committee will meet in 418 Russell Senate Office Building, at 9:30 a.m.

The PRESIDING OFFICER. Without objection, it is so ordered.

SELECT COMMITTEE ON INTELLIGENCE

Ms. STABENOW. Mr. President, I ask unanimous consent that the Select