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PN1402 NAVY nominations (4) beginning JACOB R. HILL, and ending WILLIAM R. WOODFIN, which nominations were received by the Senate and appeared in the Congressional Record of January 21, 2010.

PN1417 NAVY nominations (11) beginning DAVID W. TERHUNE, and ending DET R. SMITH, which nominations were received by the Senate and appeared in the Congressional Record of January 26, 2010.

PN1418 NAVY nominations (30) beginning ERIC R. AKINS, and ending SCOTT T. WILBUR, which nominations were received by the Senate and appeared in the Congressional Record of January 26, 2010.

#### LEGISLATIVE SESSION

The PRESIDING OFFICER. Under the previous order, the Senate will resume legislative session.

#### MORNING BUSINESS

Mr. CASEY. Mr. President, I ask unanimous consent that the Senate proceed to a period of morning business, with Senators permitted to speak for up to 10 minutes each.

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

#### CERVICAL CANCER AWARENESS

Mr. CARDIN. Mr. President, I rise today to call attention to a disease that is devastating to women nationwide. In 2009, the National Cancer Institute at NIH reported that cervical cancer was diagnosed in 11,250 women, and more than 4,000 women died from the disease. The U.S. Centers for Disease Control and Prevention, CDC, estimates that \$2 billion per year is spent on treatment of cervical cancer. Access to regular screening would not only prevent the disease in most cases, but would be a mere fraction of the cost of treatment.

Cervical cancer is mainly caused by HPV, a virus that currently infects about 20 million Americans. Another 6 million people become newly infected each year. By educating women and making regular Pap tests, HPV tests and the HPV vaccine affordable and accessible, we can significantly decrease the number of cases of cervical cancer in this Nation.

This message was brought to me last week by one of my constituents, Ms. Tamika Felder, and her "friends," a remarkable group of women who visited Capitol Hill to promote awareness of cervical cancer. Tamika was a successful young television producer in Washington, DC. At the age of 25, Tamika went to the doctor for a routine Pap test. She hadn't been to the doctor for a few years, partly due to a lack of health insurance. Her results came back, and the diagnosis was what she calls "the shock of her life"—advanced cervical cancer. As Tamika struggled to come to terms with her diagnosis, she became depressed and retreated from most of her friends. She could

only think about the end of her life, and the dreams that would go unfulfilled.

Doctors recommended a radical hysterectomy, which left Tamika heartbroken, knowing that she would never be able to give birth to children. Rounds of chemotherapy and radiation followed, and Tamika struggled to stay positive. She credits amazing family, friends, and coworkers with helping her through this difficult time. She emerged cancer-free, and is a 5-year survivor.

As Tamika was undergoing treatment, she spent a lot of time educating herself about HPV and cervical cancer, and her friends did the same. They learned that the disease was preventable, and they needed to get that message out to women around the country. Thus, the nonprofit organization Tamika and Friends was born. Tamika and Friends is based in Upper Marlboro, MD, and is dedicated to raising awareness about cervical cancer and its links to HPV.

Using the network of survivors and friends that they have established, they spread the essential message that through education, prevention, and treatment, cervical cancer can be entirely eliminated. They share their message in creative ways, including house parties that create a comfortable environment for women to have open discussions about HPV and cervical cancer and its causes. Their Web site has many survivors' stories to encourage other women that share their diagnosis.

When I learned that one of the reasons that Tamika did not have a regular Pap test was that she lacked health insurance, my conviction that we must achieve universal health coverage was strengthened. Her story is one of many that we have heard over the past year that emphasizes the critical need to cover the uninsured. If Tamika had had access to proper preventive testing, then her cancer might have been caught at an earlier stage. She may not have needed a radical hysterectomy, and her ability to have children, which she held so dear, might have been preserved.

The health care reform legislation passed by the Senate would ensure that women can afford a yearly Pap test. In the bill, preventive services for women, including a yearly exam and cervical cancer screenings are covered at no cost to patients. In addition, as part of the managers' amendment, the provision that I introduced as part of a Patients' Bill of Rights will allow women to designate an OB-GYN as their primary care physician. This will enable women to receive care from a physician that specializes in women's health and can reinforce efforts to educate women about the causes of cervical cancer and the importance of getting regular Pap and HPV tests.

To successfully eradicate cervical cancer, we must acknowledge and address that racial and ethnic minorities

are disproportionately affected. Cervical cancer is diagnosed at an early stage more often in Whites than in Blacks, and Black women have higher rates of mortality from cervical cancer than White women. According to the Centers for Disease Control and Prevention, Hispanic women were twice as likely as White women to be diagnosed with cervical cancer, and the rates of cervical cancer among Vietnamese American women are higher than those for any other ethnicity—more than five times higher than White women. These statistics highlight why it is so important to codify the Offices of Minority Health within HHS and its agencies. I advocated for this to be part of the managers' amendment to the Senate health care bill, and I will continue to push for it to be included in the health care reform legislation that is signed by President Obama.

I come to the floor today to raise awareness about cervical cancer and the need to cover preventive services for women, and to commend and thank Tamika and her friends for their efforts to educate all women about what they can do to remain healthy. Tamika's story could have been one of tragedy, but instead, she has turned it into a story of inspiration, strength, and hope.

In one of the informational brochures that Tamika and Friends hands out to women is a message from Tamika herself. It says "No matter how busy or broke you think you are—whether you have insurance or not—you must never, ever skip your Pap test and HPV test." As Members of the U.S. Senate, it is within our power to help women like Tamika and make sure that a lack of health insurance is not a barrier for women's health. We can all do our part to prevent cervical cancer and other diseases that can be caught early with proper preventive care.

#### SMALL BUSINESS CONTRACTING REVITALIZATION ACT

Ms. SNOWE. Mr. President, as ranking member of the Senate Committee on Small Business and Entrepreneurship, I rise today to discuss the Small Business Contracting Revitalization Act of 2010. This critical piece of legislation is the direct result of consensus-building and compromise, and continues the bipartisan tradition of the Small Business Committee. I also wish to thank Chair LANDRIEU for her partnership with me in forging this truly crucial measure as we work toward contracting parity for small business, and for her tireless leadership on all concerns confronting small businesses today.

The Small Business Revitalization Act of 2010 retains critical procurement provisions that originate in the comprehensive contracting bills I introduced or cosponsored in the 109th and 110th Congresses which were unanimously voted out of the Small Business Committee. This particular legislation