

*Administration of Donald J. Trump, 2025*

## **Remarks on Signing an Executive Order on Increasing Medical Marijuana and Cannabidiol Research and an Exchange With Reporters**

*December 18, 2025*

*The President.* Well, this is a big day and many reasons—really, for many reasons. And I have a very distinguished group of people behind me, mostly medical people and brilliant people, and they really know what they're doing.

And I just want to thank them. They gave—truly gave their lives in terms of the time and all of the incredible work they've done over the years in arriving at the position they have now. Most respected people in the country.

Today I'm pleased to announce that I will be signing an Executive order to reschedule marijuana from a Schedule I to a Schedule III controlled substance with legitimate medical uses. We have people begging for me to do this, people that are in great pain.

For decades, this action has been requested by American patients suffering from extreme pain, incurable diseases, aggressive cancers, seizure disorders, neurological problems, and more, including numerous veterans with service-related injuries and older Americans who live with chronic medical problems that severely degrade their quality of life.

And it's so—really, I mean, just—I can't tell you, I think I probably have received more phone calls on this, on doing what we're doing. I don't think I received any calls on the other side of it.

But hopefully, this reclassification—which, by the way, polls at 82 percent—will help many of those patients live a far better life.

We're joined today by Secretary Robert F. Kennedy Jr., who's doing a fantastic job; Administrator of Centers for Medicare and Medicaid Services, Dr. Mehmet Oz; the FDA Commissioner, Dr. Marty Makary; Director of the National Institutes of Health, Dr. Jay Bhattacharya; and the Director of the National Institute on Drug Abuse, Dr. Nora Volkow; as well as Dr. Ilana Braun from the Dana-Farber Cancer Institute; Duke University's Dr. David Casarett; the national commander of the American Legion, Dan Wiley; and my friend Howard Kessler.

Howard, how are you feeling? Huh?

*Kessler Financial Services Cofounder Howard J. Kessler.* I'm feeling great. Thank you.

*The President.* You look—I'm telling you, he looks better than he did 20 years ago.  
[*Laughter*]

*Mr. Kessler.* Thank you.

*The President.* But I don't want to go through what you went through to get there. [*Laughter*]

*Mr. Kessler.* Okay.

*The President.* Right? But it looks like you're doing great.

*Mr. Kessler.* Appreciate it.

*The President.* I'm proud of you.

I want to emphasize that the order I am about to sign is not the legalization or it doesn't legalize marijuana in any way, shape, or form and in no way sanctions its use as a recreational drug. It has nothing to do with that.

Just as the prescription painkillers may have legitimate uses but can also do irreversible damage. You never—you know, if you look at some of the damage that can be caused, wreck lives, and—if it's abused.

It's never safe to use powerful controlled substances in recreational manners. And especially in this case, if you take a look: illegal and unregulated drugs—very, very bad thing.

So I've always told my children: "Don't take drugs. No drinking, no smoking, and just stay away from drugs." I have been—they would look at me, and they'd said, "Dad, would you stop saying that?" I would say it every time I looked at them, practically.

Young Americans are especially at risk. So, unless a drug is recommended by a doctor for medical reasons, just don't do it.

At the same time, the facts compel the Federal Government to recognize that marijuana can be legitimate in terms of medical applications when carefully administered. In some cases, this may include the use as a substitute for addictive and potentially lethal opioid painkillers, and they cause tremendous problems. This can do it in a much lesser way, can make people feel much better that are living through tremendous pain and problems.

Forty States and multiple U.S. territories have already recognized the use of medical marijuana. This reclassification order will make it far easier to conduct marijuana-related medical research, allowing us to study benefits, potential dangers, and future treatments. It's going to have a tremendously positive impact, I believe.

We're also asking Congress to reconsider its classification of hemp-derived CBD to ensure seniors can access CBD products they have found beneficial for pain and other reasons.

Some people are literally dying in their—dying with tremendous pain, and this can, in many cases, literally, stop it, and they have their senses about them, as opposed to painkillers, which don't allow that to—don't allow them to die with dignity, frankly.

I promised to be the president of common sense, and that is exactly what we're doing. This is really something having to do with common sense, and it's something having to do with the fact that so many people that I respect asked me to do it—people that are having problems, big problems—they are having big problems with illness, with cancer, in particular.

I now want to ask Dr. Oz to say a few words, followed by Dr. Braun, Dr. Casarett, Dan Wiley, and Dr. Volkow. And we'll sign the order soon as they're complete, and we'll take some questions.

Please, go ahead.

*Administrator of the Centers for Medicare and Medicaid Services Mehmet Oz.* Mr. President, thank you for always bravely pushing for commonsense change, as you call it.

So President Trump, Secretary Kennedy have been pushing for change. They're passionate in their desire to help the American people and have relentlessly pursued this agenda throughout this administration. This also includes a deep passion for research—"gold-standard research," as Secretary Kennedy also says.

But there's another side to the President that often isn't reflected in media reports, and that's the deep passion he has for the people in his life. And he has called me frequently about the

people who are calling him, as he alluded to, who are saying that they're—have got problems and they got relief from some of the solutions we're talking about today.

Howard Kessler—who's standing behind me here, who's a mutual friend of ours—was an early caller of the President. Many others, how—however, reached out as well. And Howard has been a passionate advocate for avoiding narcotics, especially in seniors, and particularly seniors suffering from cancer. And that's a population that is a very important one, and it's a sympathetic population that's like—that's desirous of trying new ways, besides some of the conventional approaches that have been tested by pharmaceutical companies but have untoward side effects.

At the beginning of the year, one of the first things the President told me—he doesn't actually tell you; he demanded from me—that the—my agency, CMS——

*The President.* Nobody demands from him. Nobody. You have to know him. [Laughter]

*Administrator Oz.* That's right.

*The President.* Go ahead.

*Administrator Oz.* ——use the whole tools at its wherewithal to find a better way to help seniors, a passion for a population that has left—gotten left behind with these discussions. I promised that we would find an answer, even though it had not been done before. And today we are delivering on that promise.

Today our Innovation Center at CMS is announcing a new model and additional actions to give seniors access to cannabinoids. These are CBDs. They're nonaddictive, which many are already using to manage pain. There's some clinical evidence that's showing that CBDs provide relief from common conditions that affect Americans, including cancer symptoms and chronic pain and a slew of other problems that affect disproportionately seniors and our veterans.

[At this point, Administrator Oz continued his remarks, concluding as follows.]

I want to thank not just the Secretary, but Marty Makary—we want a lot of companies who are doing this research that approach the FDA for formal approval. That is the right way to move forward. And Jay Bhattacharya, who's hiding in the back—he rarely hides—but Jay runs NIH, and he's agreed to support initiatives to study the data that we're collecting.

Howard Kessler, God bless you for being a pain in our sides. [Laughter] Mr. President, he's promised to stop calling you—[laughter]—but appr- —on this issue. He'll call you on other issues.

And I thank you again, from the bottom of my heart——

*The President.* Thank you.

*Administrator Oz.* ——for taking a difficult stance.

*The President.* Thank you, Oz, very much.

Okay.

*Dana-Farber Cancer Institute Division of Adult Psychosocial Oncology Chief Ilana M. Braun.* Mr. President, members of the Cabinet. Thank you so much for the opportunity to be here and for your leadership in rescheduling cannabis from Schedule I to Schedule III. This decision will accelerate scientific research and expand what can responsibly be studied.

I'm a cancer psychiatrist and medical cannabis researcher at the Dana-Farber Cancer Institute. Over the past decade, federal investment in research has helped transform cancer care. People are living longer than ever before. But cancer care is not only about treating the tumor, it's also about addressing the anxiety, the fear, the stress that can come with a diagnosis, symptoms

that can interfere with treatment and make recovery much more difficult. Many medications we use for acute anxiety carry significant risks, particularly in the older adults.

That's why we're studying specific natural compounds found in cannabis, including the nonaddictive cannabidiol, to understand whether they can safely and effectively help manage anxiety during cancer treatment.

Rescheduling allows us to ask these questions rigorously about dosing, about safety, and who may benefit most. This research reflects the best of federal investment, helping people not only live longer but live better.

Thank you, Mr. President, for supporting careful, science-based research that puts patients first.

*The President.* Thank you. Thank you, Doctor. That's beautiful. Thank you.

*Duke University Palliative Care Section Chief David J. Casarett.* I'll add my vote of thanks, Mr. President.

I never really thought this day would come. I met a patient about 20 years ago—a retired professor named Elizabeth—who came to my clinic. She was dying of pancreatic cancer, and she asked me then whether cannabis might help her. And I said no, because that's what I learned in medical school. She reached into her briefcase, took out a three-inch tall stack of articles, put them down on my desk, and said: "Really? Doctor, you should read these. You might learn something."

And I did read those articles—every single one—and found a bunch more. And I did learn something. I learned that there actually is some medical benefit to cannabis that I had not anticipated, never heard about in medical school. Second, I learned that there was a lot we don't know. And third, I learned it's really, really, really difficult to do high-quality randomized control trials of a substance that's federally illegal.

This rescheduling has the potential to change all of that and to rewrite the way that we do research related to cannabis in the United States in three ways. First of all, it will democratize the research process so that all academic institutions can participate in research, not just elite academic medical centers. Number two, it will give patients and researchers access to highly refined, reliable sources of cannabis, rather than relying on one or two sources around the country.

And last, but not least, it will let us do the sorts of large-scale, randomized control trials that we do in oncology and in cardiology—not dozens of patients, but hundreds or thousands of patients. That's how we learn. That's how we produce valuable knowledge that's useful in guiding treatment decisions.

Mr. President, without you, this never would have been possible. And my patients and I and all of our families are grateful. Thank you.

*The President.* Thank you, Doctor, very much. Thank you very much.

*American Legion National Commander Dan K. Wiley.* Mr. President, I am Dan Wiley, national commander of the American Legion, representing 1.5 million veterans. We are the biggest, largest veterans organization.

*The President.* That's right.

*Mr. Wiley.* We have 2.5 million members of our American Legion family.

And I want to start by thanking you for your leadership on this issue. This issue is extremely important to the American Legion. And thank I want to thank—thank you on behalf of the veterans who are going to benefit from, potentially, the research regarding this issue.

I also want to thank you for your VA Secretary, Secretary Collins, and his work on difficult veterans issues with us.

This past year, the VA has worked with us on our "Be the One" mission, which is a mission to fight the epidemic of veteran suicide. Veterans are disproportionately affected by conditions such as PTSD, TBI, depression, and chronic pain.

And with this reclassification, it will allow research to be conducted with regard to cannabis. There is anecdotal evidence that cannabis benefits these conditions, and now we'll have an opportunity to see if research does prove that it is effective, and if it is so, then it will open up a whole new method of treatment for our veterans with regard to this particular issue.

And so, again, I just want to thank you——

*The President.* Thank you.

*Mr. Wiley.* ——for your leadership, and thank you on behalf of the American Legion for this Executive order.

*The President.* Thank you. Such great people——

*Mr. Wiley.* Thank you very much, Mr. President.

*The President.* ——that have suffered and will suffer a lot less now.

*Mr. Wiley.* You're right.

*The President.* It's to—what I hear.

Anybody else?

*National Institute on Drug Abuse Director Nora Volkow.* Good afternoon.

*The President.* Please.

*Director Volkow.* I'm Nora Volkow. I'm director of National Institute on Drug Abuse. And for us, that rescheduling opens the door to actually be able to accelerate the rate at which we can do research and discovery.

And research is crucial in order us—for us to, for example, understand what may be and for whom the dangers of cannabis. Yes, cannabis can be addictive, and certainly people—adolescents and children—may be the most vulnerable. But we cannot close our eyes to research and the opportunity that we are hearing from patients that for some of them, cannabis can solve their problem.

And so what we need to do is do research, number one, to understand what are those conditions; number two, in order to be able to optimally learn how to use it; and to understand, number three, who is at danger.

And it is knowledge that will allow us to optimally benefit—take the benefits that may be behind cannabis, as research shows, but on the other hand, also enable us better to do prevention interventions to protect those that are most vulnerable.

So thanks very much.

*The President.* Great job. Thank you very much. Thank you, Doctor.

Bobby, do you have something to say? [*Laughter*]

*Secretary of Health and Human Services Robert F. Kennedy, Jr.* I'll just echo—thank you, Mr. President. Thank you for your leadership and vision and finally getting to closure on this issue.

This is a question—a scientific question, that has divided our country for many, many years. And there are valid claims on both sides. On one side, patients and physicians, attest that this—that cannabinoids and—and THC can be—have miraculous effects on chronic pain, on epilepsy, on PTSD, on chemotherapy-induced nausea.

My friend Howard Kessler, without whom we wouldn't be here today, has drove this—this change in the schedule. And he did it because of his own experience in mitigating the impacts of chemotherapy. He has nothing to gain from this. He just saw something that worked for him, that worked for thousands of other Americans, and he wants to make it available to them.

On the other side, there are valid claims about the negative impacts, about addiction, about psychosis, about adverse public health impacts and impacts particularly on young people.

So we haven't been—the evidence on all of these is anecdotal and it's hypothetical because we have not been able to do scientific studies. There is no standardized dosing, and if you don't have standardized dosing, any study that you do is comparing apples to pears. And we don't know the difference between botanicals and synthetics and all of these questions we're now going to be able to answer.

Five administrations have promised to act on this issue. The Biden administration promised to do this, and the proposal began during the Biden administration. It got mired down in the chaos and inertia and disorganization of that.

And I want to thank President Trump, who made the promise during the 2024 election that he was going to come in and solve this issue, that he was going to take decisive action. And he has kept that promise today. And so thank you for—President Trump——

*The President.* Thank you, Bobby.

*Secretary Kennedy.* ——for your vision. And for—and because of that, we will have answers very soon. This will finally allow us to study this issue and to answer these questions for the American people.

*The President.* Thank you very much, Bobby.

So, just in finishing, Howard Kessler, a friend of mine, one of the most successful people in the country, came to see me—on more than one occasion, actually—and he had some real difficulty about 3½, 4 years ago, and he went through hell. And during his going through hell, he probably sampled everything you can sample when you're going through that, Howard.

*Mr. Kessler.* For sure.

*The President.* And he came to me and said, "There's been nothing like this, and we're going to have to take a good, strong look at it." And that's what he asked me to do. And others have likewise said that—many others, many.

I mean, you know, again, it's—I've never been inundated by so many people as I have about this particular reclassification.

And I don't know that you have anything to say, Howard. If you'd like, you could say whatever you like.

*Mr. Kessler.* I just want to help the people 65 and over and make a difference in their lives. And we have machines and talent that could do it not in 8-year clinical trials but in a year. And we're going to prove that to be—may change the world, really, and health care.

So thank you, Mr. President.

*The President.* And I'm far younger than 65, so this does not pertain to me. [Laughter]  
Thank you.

I don't want it. Okay? [Laughter] I'm not going to be taking it. But a lot of people do want it. A lot of people need it.

And thank you, Howard, for——

*Mr. Kessler.* I appreciate it.

*The President.* ——really opening a lot of eyes.

Okay. We'll sign it. We'll take some questions from the press. You can ask the doctors some questions. And it's an honor to do this.

[*The President signed the Executive order.*]

That's a good one. [Laughter] We rate them.

Howard—[inaudible].

*Mr. Kessler.* Thank you. [Inaudible]

*The President.* Thank you. Thank you very much, everybody.

Any questions, please?

### *Health Insurance Reforms/Patient Protection and Affordable Care Act*

*Q.* Mr. President——

*The President.* Yes.

*Q.* ——a health-related question on—on your health care plan. You've said you want to make direct payments to Americans.

*The President.* Yes.

*Q.* But these Obamacare subsidies are expiring now in a matter of just a few days. More than 20 million Americans are now bracing for their premiums to skyrocket. Are you going to let this happen——

*The President.* Because of Obamacare.

*Q.* ——or will you intervene?

*The President.* Yes, because—yes, they will skyrocket, because it was never any good. I'd like to see the money that is going to the insurance companies by the hundreds of billions of dollars—you know, their stocks are up 1,400 percent, 1,800 percent, and 1,624 percent. Their stocks are up through the roof over a fairly short period of time because they're getting vast amounts of money.

I want that money to go to the people directly and let the people buy their own health care, and they'll get much better health care than they get with the "Unaffordable Care Act," as it's known by a lot of people. It is virtually unaffordable for people. It's a bad thing. We can have a great thing.

Let the money go directly to the people, and let them buy their own health care.

*Q.* But this is an urgent problem, Mr. President. Is there anything you can do now, Mr. President?

*Administrator Oz.* Can I answer, Mr. President?

*The President.* This is going to be—this is going to be right now, as far as I'm concerned.

Go ahead.

*Administrator Oz.* We just got data today. We have Federal exchanges where people come shopping for the ACA. And the President hasn't heard this yet, but we've talked to the team: The percentage change from last year was down 2.7 to 2.8 percent, not the massive numbers that have been predicted.

And there's many possible reasons for this, but right now Americans are signing up for these programs, despite all the things that have been going on. Two-point-eight percent is a tiny fraction of what many had claimed would happen. And I think it speaks to the fact the American people appreciate these ACA plans are already subsidized over 80 percent.

So it's a good deal, even if you don't get the extra 15, 20 percent.

*The President.* It's a great solution to much better health care at a much lower cost.

Yes, please.

*Q.* And when will we see that?

### *Health Insurance Reforms*

*Q.* But do you want Congress to extend these ACA subsidies or not?

*The President.* Well, I'd like not to be able to do it. I'd like to get right into this. And I'd ask Oz this question, in particular, but I'd like to see us get right into this. I don't know why we have to extend. This could be done rapidly if the Democrats would come along.

We have a problem: The insurance companies own the Democrat Party. They own it. And the Democrats are having a hard time. They give a lot of money to the Democrats. Very little money to Republicans, by the way. A lot of money to Democrats. And they're going to have to decide: Do they want to do the right thing, or do they want to be beholden to the, you know, insurance companies? They're making a fortune. I want the money to go to the people.

Go ahead there, Oz. How would you say that?

*Administrator Oz.* I agree with the President. We have some ideas out there. Congress is working through some concepts.

But I just want to emphasize that the ACAs are not imploding, based on the data we just received from the Federal marketplace.

*The President.* This can go very quickly, actually.

Yes, please.

### *Federal Reserve Board of Governors Member Christopher J. Waller/Federal Reserve System Leadership*

*Q.* Mr. President, can I ask you—clarify something for me on the Federal Reserve. How many people are you interviewing for the Fed Chairman? And what did you think of Chris Waller, the——

*The President.* I think he's great. I mean, he's a—been a man who's been there a long time, somebody that I was very involved with, in the sense of his career. And he's a fantastic man. I met him yesterday again.

*Q.* So how many people are you looking at?

*The President.* We're talking to three or four. I think every one of them would be a good choice, honestly. We'll be making——

*Q.* So Michelle Bowman——

*The President.* We'll be making a decision pretty quickly.

*Federal Reserve Board of Governors Vice Chair for Supervision Michelle W. Bowman*

*Q.* Is Michelle Bowman on that list too? Are you going to interview her?

*The President.* She's fantastic. She's a fantastic person.

*Q.* Thank you, Mr. President.

*The President.* Please.

*Medical Marijuana and Cannabidiol Research*

*Q.* Some GOP lawmakers have written to you in recent days saying they're concerned this Executive order could normalize drug use for youth. How would you respond to them?

*The President.* You're talking about this particular today?

*Q.* Yes.

*The President.* Well, I think I'd let one of the doctors respond to it, because they can do it a lot better than me.

But I can only tell you that when you see polls of 82 percent of the people want this, when I have friends that are really, really sick and they've gone through—I guess you could say, I'm—fortunately, I don't want to become too involved in it, because I don't want it happening. But these are people that really what's going to—very smart people.

This is one of the most successful people in the country and a very brilliant guy. And when they go through this horrible ordeal of cancer or other things, and they realize that this is something that makes them feel better without all of the side effects of some of the drugs, where you're just totally knocked out and out of it.

But I'd like to have one of the doctors maybe respond, because you people do it better than anybody.

*Director Volkow.* I'm happy to respond.

*The President.* Yes.

*Director Volkow.* I mean, and my answer is: We have had cannabis scheduled for how long? And it hasn't protect neither the adolescents nor the adults. We have 20 million people in the United States with a cannabis-use disorder.

This is not legalizing it. It's making easier to do research so that we can use it when it is indicated and optimal.

*The President.* So it's—also a big part of this is research. In other words, you'll now have a much larger sample, and you'll be able to see if it's as good as many people say it is. I mean, people say it is beyond good, and you'll be able to find that out now.

*Housing Affordability/Housing Market*

*Q.* On housing. You talked in your address last night about housing.

*The President.* Yes.

*Q.* Are you still considering a national emergency over housing?

*The President.* I'm looking at it, yes.

*Q.* And what would that look like?

*The President.* I'm looking at it.

*Q.* What would that mobilize?

*The President.* You know, I have two—there's two thoughts on housing. You have a lot of people have housing that, because we have such a strong time and such a strong market, their houses are very valuable. It's a big part of their net worth, their house. I don't want to knock those numbers down, because I want them to continue to have a big value for their house.

At the same time, I want to make it possible for young people out there and other people to buy housing.

In a way, they're at conflict. In other words, you create a lot of housing all of a sudden, and it drives the housing prices down.

So I want to take care of the people that have houses that have a value to—you know, to the house that they never thought possible, that have sort of made them wealthy and happy. And, you know, especially in their later years. Got to be careful with that. I want to keep them up.

At the same time, I want to make it possible for people to go buy houses.

Daniel [Daniel Baldwin, One America News Network], please.

### *Proposed "Warriors Dividend" Payments*

*Q.* Mr. President, you announced the warriors dividend——

*The President.* Yes.

*Q.* ——last night in your prime-time speech. Very patriotic. Very generous. What was the rationale and thought process? How'd you come up with the idea? What made you want to give back to our troops?

*The President.* Well, the 1776 was easier to come up with, because we're actually at 1775. [Laughter] You know, the number was 1775, and I said, "Wow, I think we can afford 1 more dollar." [Laughter] But we actually—they came up to me. It was, you know, \$1,775, so I said: "Well, let's add a dollar to it. I think we can find that."

And very simple: We've had a military that, in my opinion, by other Presidents, was not treated well. They're incredible. They're our finest people. They're protecting us.

And because of tariffs, we're taking in billions and billions of dollars more than we ever have before—with no inflation, by the way. With no inflation. You saw the inflation numbers. They just came out today. What great timing. Practically no inflation. And yet we're taking in hundreds of billions of dollars.

And this is small potatoes by comparison, but it's a way of taking care of our warriors, our soldiers.

And I appreciate that question, Daniel.

*Q.* Yes. And Karoline Leavitt just posted——

*The President.* That was an easy one.

*John F. Kennedy Center for the Performing Arts/Kennedy Center Honors Program*

*Q.* She just posted on X—your Press Secretary—that the Board members——

*The President.* Yes.

*Q.* ——of the Kennedy Center voted unanimously to rename it the Trump-Kennedy Center. What is your reaction to that?

*The President.* Well, I was honored by it. It's—the Board is a very distinguished Board, most distinguished people in the country. And I was surprised by it. I was honored by it.

We—you know, we've—we're saving the building. We saved the building. The building was in such bad shape, both physically, financially, and every other way. And now it's very solid, very strong.

We have something going on television, I guess on the 23d of December. I think it's going to get very big ratings.

And the Kennedy Center is really—really back strongly. It was in very bad shape—very, very bad shape physically. And we're also to get Congress to put up a lot of money and other people to put up a lot of money. We had a lot of donors come in for record-setting numbers. So we saved the Kennedy Center.

And I was really—this was brought up by one of the very distinguished Board members, and they voted on it. And there's a lot of Board members, and they voted unanimously. So I was very honored by it.

Thank you.

Yes, please.

*Venezuela*

*Q.* Mr. President, will you be seeking any authorization from Congress for any land attacks on cartels in Venezuela?

*The President.* For any what?

*Q.* For any land attacks on drug cartels in Venezuela.

*The President.* I wouldn't mind telling them. But you know, it's not a big deal. I don't have to tell them. That's been proven. But it wouldn't—I wouldn't mind at all. I just hope they wouldn't leak it. You know, you'll have people leak it. They are politicians, and they leak like a sieve. But I'd have no problem doing that.

*Q.* On that, Mr. President—Mr. President——

*The President.* Yes, please.

*Ukraine/Russia/U.S. Diplomatic Efforts*

*Q.* Mr. President, there's a meeting this weekend on Ukraine in Florida. What are you hoping will come out of that meeting?

*The President.* Well, they're getting close to something. But I hope Ukraine moves quickly. I hope Ukraine moves quickly, because Russia is there. And you know, every time they take too much time, then Russia changes their mind.

Twenty-seven thousand soldiers were killed last month. Think of that. What do you think of that, doctors? Twenty-seven thousand—that's, like, a half a football stadium—were killed in one

month. And it's that way. It's anywhere between 20- and 30,000, mostly soldiers. Also, some people from Kyiv and other people—places. But largely, it's the soldiers. They're losing their lives. Nobody's ever seen anything like it. It's the worst since World War II.

And, you know, you've heard me say: I settled eight wars, some going on for 35 years, one going on for 37, one going on for 32. And eight wars, and I thought this would be an easier one. This is—because of the animosity, the hatred, it's a little bit more difficult than we thought. But there's a chance we can get this done maybe soon.

*Q.* Sir.

*The President.* Remember that: 25- to 30,000 people being killed a month—young people being killed a month.

Steve [Steve A. Holland, Reuters], please.

### *Federal Reserve System Leadership*

*Q.* When do you expect to make your announcement about the new Fed Chair, sir? Before the end of the year? What are you thinking?

*The President.* Over the next couple of weeks. I mean, I don't know before the end of the year, but pretty soon.

### *The President's Scheduled Remarks in Rocky Mount, North Carolina/Border Security/Federal Law Enforcement Support in the District of Columbia*

*Q.* And then the—Rocky Mount, North Carolina, tomorrow night. Tell us what your message is going to be there, sir.

*The President.* Say what?

*Q.* Rocky—when you go to Rocky Mount, North Carolina, tomorrow night—

*The President.* Oh.

*Q.* —what's your message going to be there?

*The President.* Well, it's not going to be that much different from what I did last night. I mean, we've had tremendous success. We're bringing prices down.

We inherited a mess, and part of what we inherited was the worst inflation in 48 years—I say history, but we had the worst inflation. It drove prices up, and now we're bringing those prices down.

But I'll be talking about that. I'll be talking about the fact that we secured the border where literally nobody can come into our country illegally anymore. They came in from prisons and mental institutions and drug dealers and, you know, a lot of bad people from all over the world. Venezuela emptied their prisons into our country.

We had Tren de Aragua, which supposedly—the doctors don't know this—it's the meanest gang of them all. Okay, Doctor? You don't have to know about it. You've got other problems. [Laughter] But they let a lot of bad people in here.

And so I think I'll be talking about that. I think I'll be talking about the tremendous success we have by sending the National Guard into various cities.

And DC is the ultimate example. People walk to work, and they thank me all the time. People in the White House, they just walk to the White House from 10 blocks away. Before I came into office, they couldn't do that. They were getting badly hurt, in many cases, and beyond

hurt—killed. So we were losing people. We were losing, on average, a person a week. Can you believe it? More.

And now what—we haven't lost anybody in a long time. I consider the two people that got so badly hurt, the National Guard—that's a different situation—that was terrorism. That was terrorism. And probably terrorism—maybe terrorism because they were unhappy with the tremendous success we've had, because they don't want to see this country be successful.

But Washington, DC, now is a safe, beautiful city where the restaurants are booming. The town is booming. People walk to the restaurants with their wife or their children, and they have a good time.

We were losing all the restaurants. We were losing our life in this. We were just—the whole heritage of Washington, DC, was—was down the drain, and we brought it back. And now everybody's thrilled to be here. It's the hottest—it's a part of the hottest country anywhere in the world. We've become, in 10 months, the hottest country anywhere in the world. And we were a—and I say it all the time: We were a dead country 1½ years ago.

*Prime Minister Benjamin Netanyahu of Israel*

*Q.* Do you expect to meet Prime Minister Netanyahu while you're down in Palm Beach?

*The President.* Yes, he would like to see me. We haven't set it up formally, but he'd like to see me.

*Q.* And joined by the—

*The President.* We've had great success. Peace in the Middle East. Aside from everything else, we now have peace in the Middle East.

Yes, he'll probably come to see me in Florida.

*President Abdelfattah Said Elsisi of Egypt*

*Q.* The Egyptians, as well, or are they—is—are they coming too?

*The President.* I'd love to have them.

*Q.* Okay.

*The President.* Elsisi, he's a friend of mine. Yes, I'd love to have him.

Thank you very much, everybody. Thank you. Thank you very much.

NOTE: The President spoke at 1:43 p.m. in the Oval Office at the White House. In his remarks, he referred to U.S. Ambassador to India Sergio Gor, in his capacity as a member of the Board of Trustees for the John F. Kennedy Center for the Performing Arts; and Staff Sgt. Andrew Wolfe, USAF, a member of the West Virginia National Guard, who was shot in an ambush-style attack during a patrol near the White House in Washington, DC, on November 26.

*Categories:* Addresses and Remarks : Medical marijuana and cannabidiol research, expansion efforts, signing the Executive order; Interviews With the News Media : Exchanges with reporters, White House.

*Locations:* Washington, DC.

*Names:* Bhattacharya, Jay; Bowman, Michelle W.; Braun, Ilana M.; Casarett, David J.; Elsisi, Abdelfattah Said; Gor, Sergio; Kennedy, Robert F., Jr.; Kessler, Howard J.; Makary, Martin A.; Netanyahu, Benjamin; Oz, Mehmet; Volkow, Nora; Waller, Christopher J.; Wiley, Dan K.; Wolfe, Andrew.

*Subjects:* Border security; Centers for Medicare and Medicaid Services; District of Columbia, law enforcement improvement efforts; District of Columbia, shooting of National Guard servicemembers near White House; Egypt, President; Federal Reserve System; Food and Drugs Administration; Health care costs and affordability; Health insurance exchanges; Housing, affordability and access; Illegal immigration; India, U.S. Ambassador; Inflation; Infrastructure improvements; Israel, Prime Minister; John F. Kennedy Center for the Performing Arts; Marijuana, decriminalization efforts; Medical marijuana and cannabidiol research, expansion efforts; National Guard; National Institute on Drug Abuse; National Institutes of Health; Patient Protection and Affordable Care Act; Russia, conflict in Ukraine; Secretary of Health and Human Services; Tariffs; U.S. diplomatic efforts, expansion; U.S. servicemembers, service and dedication; Ukraine, Russian invasion and airstrikes; Venezuela, relations with U.S.; Venezuela, Tren de Aragua criminal organization.

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