

I am urging the people in Egypt to go ahead and get those elections done so you get back to having a more democratic process, having a more republican form of government. I don't mean republican like the Republican Party. I am talking about Republic as Ben Franklin when the lady asked what have you given us, and he said, "A Republic, Madam, if you can keep it."

It was clear that Morsi was not going to allow the Egyptian people to keep their republic. The people rose up and demanded that they be able to keep their republic by having the military remove Morsi. They did remove him. I still can't find anyone in the media that is reporting what General al-Sisi said to me in the presence of our acting U.S. Ambassador to Egypt, in the presence of Democrat and Republican Members of Congress that, yes, they had evidence that Morsi was trying to contract to have General al-Sisi murdered before he was arrested.

Yet this administration, not only was very supportive of Muslim Brother Morsi, but when he was removed, they threatened to cut off aid if they didn't get him back. And after they refused to get him back, then this President cuts off all aid to Egypt. It is amazing because, as this article points out, it was not until Morsi was arrested that the Muslim Brotherhood started staging these violent acts—burning churches, killing Christians. They were persecuting anyone who disagreed with them. The military did a very good thing. They cracked down on the Muslim Brotherhood, they stopped the burning of churches, they stopped the killing of Christians. As the Egyptian Pope has told me:

They did a good thing. We are not threatened like we were before they stopped it all. Please, tell your government that the military has stopped the burning of churches and killing of people. It is a good thing.

How did this administration respond to the Egyptian people ensuring that the burning of churches and the killing of Christians stopped? It rewarded those noble efforts by cutting off aid.

As we keep hearing from allies in the Middle East, Muslim, other religious beliefs, you guys keep helping the wrong people. How can you not understand you are helping the people that hate you. Now they are cutting a deal with Iran, led by Wendy Sherman, who was the policy director for North Korea when President Clinton and Madeleine Albright made that atrocious deal to give them nuclear power plants, nuclear help, and in return all they had to do was promise not to develop nuclear weapons, which they readily did. In return, the Clinton administration agreed not to inspect their nuclear facilities for what amounted to about 5 years. It gave them plenty of time to develop nukes.

If someone is evil enough to behead, to brutalize, to persecute innocent people, to somehow think it is a noble thing to terrorize and kill innocent people, how do you not understand that

they are also capable of lying, as well? You want to trust people that want to kill you and have said so many times? I think it is time we wake up. The world is less safe because of some of the actions that we have taken. We need to be wise about what we do because just as Jesus said, To whom much is given, of him much will be required.

We have been given much. We have been blessed more than any nation in the world. We have more freedoms. We have more assets. We have been blessed more than any nation in history. Much is required, and part of that requirement is that we use wisdom and discernment in choosing those whom we wish to help; and we should not be helping people who choose to kill or brutalize, persecute people because of their religious beliefs, because of their tribe, because of their skin color, because of their national origin. That is un-American, and it is time we stopped helping people who are acting in ways contrary to what we hold dear.

Mr. Speaker, I yield back the balance of my time.

THE DECLINE IN U.S. RESEARCH

The SPEAKER pro tempore. Under the Speaker's announced policy of January 3, 2013, the gentlewoman from California (Ms. SPEIER) is recognized for 60 minutes as the designee of the minority leader.

Ms. SPEIER. Mr. Speaker, tonight we are going to discuss the National Institutes of Health.

In many respects, the National Institutes of Health is the goose that keeps laying the golden eggs, the golden eggs that help cure many of the maladies that many Americans suffer from, the goose that lays the golden eggs that create jobs, the goose that lays the golden eggs that help us bring down the cost of health care. But we are at the brink, we are at the tipping point of killing the goose that lays the golden eggs.

Let's put it in perspective. Not so long ago, then-President George Bush was part of a bipartisan effort to double the funding for the National Institutes of Health. It was \$21 billion. Doubling of the resources for the NIH was extraordinary and received with great fanfare and appreciation because there was so much that the researchers were ready to do with that money.

What have we done since then? Since then, in 2003 dollars, we have seen a gross decline in the money to fund the National Institutes of Health. Now it is down to the equivalent of \$17 billion. So for the next hour, we are going to talk about what that means to every American who is suffering from a cancer, for every American that is suffering with a chronic disease like diabetes, for every American who is suffering from Alzheimer's and whose family is trying to cope with it.

Former Republican Senator and Majority Leader Bill Frist recently wrote:

When Alzheimer's is cured, when HIV is cured, when MS is cured, I want it to be America that discovers the breakthroughs and shares it with the world.

I agree with Dr. Frist. I want to see that happen too. I would like to think that every Member in this House wants to see that too, but it is not going to happen if we keep starving the goose that lays the golden eggs.

Let me read you another quote:

Whenever you hear about a research breakthrough in anything to do with cancer, diabetes, heart disease, HIV/AIDS, influenza, whatever, in the United States, it's extremely likely that NIH supported that effort.

That was Dr. Francis Collins, head of the National Institutes of Health who made that statement. He also doesn't mince words. Recently, in response to sequester cuts to the NIH budget, he said:

I think we'll no longer be the world leader in the production of science, technology, and innovation. You can't look at the curves and say, Oh, well, it'll be fine, if we stay on this track. It will not be. China is coming up so fast, they are so convinced that this is their pathway towards world leadership; they're not going to slow down.

He recently recounted a trip that he took to China in 2011 where he was taken on a tour of a former shoe factory. You need to know a little bit about the history of Dr. Francis Collins. He is called the "father of the human genome project." He and a number of other scientists are responsible for absolutely unlocking DNA sequencing. So he was invited to China to see what they were doing.

He was taken to this old shoe factory, except it is not a shoe factory anymore. Inside that factory were 3,000 scientists who were focused on sequencing the human genome and the medical and economic potential of this technology. In fact, the capacity at that one factory is more than all of the genome sequencing centers in the United States.

Dr. Collins said to me with great sadness, Within 3 to 5 years, China will eclipse us.

Mind you, we have invested billions and billions of dollars in unlocking the human genome with the intent of seeing great strides made; but we are on the verge, we are at the tipping point of seeing this all come to a screeching halt if we continue to ignore the fact that we are starving the NIH.

Here is an interesting chart. This shows how much R&D spending is going on around the world. China from 2012 to 2013 had an increase of 15 percent.

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Germany, up 5 percent, Japan up 5 percent, South Korea up 5 percent, Canada down 3 percent, the United States down 5 percent.

This says it all. If we don't want to see the outsourcing of medicine in this country, the outsourcing of science in this country, we have got a huge wake-up call that we must listen to.

I am joined this evening by my good friend from San Diego, SCOTT PETERS, who I want to engage with him and have him speak a little bit to this issue as well. I yield to the gentleman from California (Mr. PETERS).

Mr. PETERS of California. Thank you, Ms. SPEIER. I would like to thank you, my colleague from California, for organizing this discussion and for your continued efforts to end the assault on NIH funding.

Mr. Speaker, for decades, our country has been at the forefront of scientific discovery. We have had the friendliest atmosphere for scientists to do their work, for innovators to start their new ventures, and for universities to invest in research laboratories.

We are in danger of losing that competitive advantage, and the across-the-board sequester cuts, which I adamantly opposed during my time here, is only amplifying the decline.

Now, instead of supporting and promoting our country's robust backing for scientific and health research, we are undercutting it through congressional gridlock and government shutdowns.

This inability to find bipartisan agreement has undoubtedly harmed our national reputation and limits our ability to bring the best and brightest here from around the world.

Earlier this year, I toured the National Institutes of Health in Bethesda to visit some of their labs, to meet with patients and hear from its director, Dr. Francis Collins, about the work that NIH does and how the sequester has affected them.

Dr. Collins, as Ms. SPEIER said, has been a constant voice against the sequester and has vocalized the impact it has had on the ability of NIH to invest in necessary research and grants. Just this year, more than 700 grants were cut and the agency was forced to pare down its operations by \$1.5 billion.

Dr. Collins told Sam Stein of the Huffington Post on the 10-year outlook, should sequester not end, and I quote, I think we may have just heard this quote:

I think we will no longer be the world leader in the production of science, technology, and innovation.

As the largest funder of biomedical research in the world, the NIH is not only a significant driver of research and innovation, leading to improvements in quality of life and better patient care, but it also drives job creation in related fields.

In 2011, more than 400,000 jobs and \$62 billion of economic activity came from NIH research funding. And on a health level, advances from NIH research can have enormous economic benefit for the global economy.

A 1 percent reduction in cancer deaths has \$500 billion in economic value. Imagine what the power would be of delaying the onset of chronic diseases or finding cures to various types of cancer.

Importantly, NIH is also a significant funder of research universities across

the country through its competitive grants. According to NIH documents, more than 80 percent of their budget is awarded to our country's universities and institutes, including \$884 million in grants to San Diego institutions just in 2012.

In the last fiscal year, institutions in my district received more than 1,300 NIH grants. UC San Diego received almost \$400 million through 802 grants in 2012 alone, supporting thousands of jobs in the San Diego region, and advancing our local innovation economy.

San Diego, depending on how you calculate it, is either the second or third largest life science cluster in the country. These companies and research institutions make up approximately one-third of San Diego's regional economy, generating more than 200,000 jobs.

Nationwide, life sciences companies support more than 7 million jobs, adding \$69 billion in activity to our national economy.

Locally, Amplyx Pharmaceuticals received more than \$1.5 million in NIH grants to research and develop new drugs to fight functional infections, and Digital Proteomics received a grant to research antibodies that target specific antigens, leading to better treatments for numerous diseases.

Other examples are the La Jolla Institute for Allergy and Immunology, where they are researching breakthrough vaccines to some of the world's most damaging immune diseases, including type 1 diabetes and various types of cancer, and the Veterans Medical Research Foundation, where studies on PTSD and brain imaging are underway to better understand the impact of violence and conflict on the body and brain. These institutions have received numerous grants this year, totaling more than \$30 million.

As the last local example, in 2011, the Sanford-Burnham Medical Research Institute received more than \$70 million in NIH funding as part of its research in metabolic rates and obesity. And Scripps Research, also in San Diego, was awarded more than \$200 million, part of which went to their research on determining the structure of H1N1, also known as the swine flu.

Mr. Speaker, there are countless examples across San Diego and the country like the ones I just named where researchers are doing groundbreaking research that has the potential to improve and extend lives. That is good for our economy, for the American people, and for the health of people across the world.

Clearly, not all scientific research can or should be funded by the Federal Government or NIH. I wouldn't advocate that, nor my colleagues, but I can't stand for continuing down the path of sequester, where we cut support for the hardworking scientists and researchers who have brought the United States to the front of the pack.

Later this week, I will be introducing a bill to extend the research and development tax credit and lower the bar-

rier to collaborative research by encouraging collaboration and consortia. That is just one piece of a larger discussion we have to have as we look to reform the Tax Code so we incentivize innovators, entrepreneurs, and researchers to start their endeavors here in the United States.

Sam Stein also reported in the Huffington Post in August that nearly 20 percent of scientists were contemplating moving their operations overseas in part due to the sequester.

Other countries, China, Brazil, Germany, South Korea, Japan, Israel, they are making investments in science and in research and development that will threaten to leave us in the dust. Brain drain will be a reality if we do not act quickly, a phenomena that would affect many communities across the country in a very negative way, including my own.

On first read, the budget deal proposed last night by Senator MURRAY and Congressman RYAN, if it passes Congress later this week, would allow the NIH more flexibility. It would potentially bring back some funding to NIH and NSF over the next 2 years.

But let's be clear. Scientists, universities, and institutions are still looking at unstable long-term budgets where sequester looms over their head. And as lawmakers, we can't rest on this foolish sequester cut until these cuts are fully reversed.

Again, I want to thank Ms. SPEIER for organizing this Special Order. NIH funding and our Nation's overall support for basic scientific research funding and the innovation economy are central to the economic future of San Diego, of California, and of the entire country.

So I appreciate the opportunity to speak about ending the sequester, about promoting and increasing funding for basic scientific research, especially at NIH, and to a continued discussion here in Congress.

Ms. SPEIER. I thank the gentleman from California for his articulation of what profound impacts it has certainly to the economy of California, but also to the country. And the point he made about having some kind of continuity and some certainty is critical to the future of science in this country.

All we have to do is look back to what then-President George Bush did when he and a bipartisan group of Members of Congress supported doubling the budget for the NIH. That was a plan conceived of where it was going to take place over 5 years. So there was continuity and there was a sense of certainty that funding would be there for the near and the long term.

So what does a moderate investment in NIH have as a catalyst, so to speak, for economic growth?

Well, it is similar to what happened when the government invested in the Internet and spurred dramatic growth in the previous decades. Where would we be today if the government had not funded the research that created the Internet?

Before “google” became a verb and we actually had to write and mail letters to our friends and families and call the doctor to find out about medical symptoms, before there was the Internet, there was, in fact, the U.S. Government standing behind sound science and research. So let’s talk about what the NIH-funded research has meant for our economy and for our lives.

The U.S. medical innovation sector employs 1 million Americans, generates \$84 billion in salaries annually, and exports \$90 billion in goods and services. The economic value of gains in the U.S. life expectancy has been estimated at roughly \$95 trillion from 1970 to 2000.

Now, that is looking at it from dollars and cents. But think about it in terms of people’s lives, extending their lives. That is what is truly significant about this.

Now, since 1990, our Nation has gained about 1 year of longevity every 6 years with the help of NIH research. Medical research, the most advanced of which is often done here in the U.S., has saved millions of lives over the last few decades. Death rates for heart disease have dropped 65 percent over the last 60 years. That is a phenomenal number. Deaths from heart disease have dropped 65 percent over the last 60 years, in part, in a great part, due to NIH funding.

The stent that we use so commonly now with heart disease, discovered, created at NIH. Death rates from cancer down 12 percent, and death rates from strokes down 34 percent, all because of medical research going on right here in the United States, spurred by the help of NIH funding.

I yield to my colleague from California, ERIC SWALWELL, to speak about issues from his perspective.

Mr. SWALWELL of California. Thank you. And I do wish to thank Ms. SPEIER, my neighbor across the San Mateo Bridge, for hosting this Special Order hour on NIH funding.

This is not the first time I have had the opportunity to work with Ms. SPEIER on these issues. In fact, in my short year in Congress, Ms. SPEIER has hosted a number of different roundtables, informal and formal, on the importance of NIH funding, and it is appropriate for her district, having the birthplace of the United States’ biotechnology research.

But it is also important that we want the biotech research to stay in the South San Francisco area, to stay in the East Bay area. And the folks in the district who are making advances that will hopefully bend the health care cost curves are counting on the United States Congress to keep NIH funding from being cut. And actually, it is my hope that we can increase it.

The cuts to the NIH mean that there are fewer opportunities right now for biomedical research in the United States. It means that the decline in funding is meaning that there are more promising paths outside the United

States for the promising minds who are putting their careers into this research.

Faculty at top universities across the country are reporting cutting labor spending by 7 percent and operating with skeleton staffs, severely limiting job opportunities for any researcher that would want to go into this field. Over 50 percent of university scientists surveyed by the American Society for Biochemistry and Molecular Biology said that they had a colleague who had lost their job or expects to soon because of sequester cuts to NIH funding.

Also, in the United States, while we have been cutting funding, even before the sequester, other countries are increasing and expanding up their biomedical engineering sectors. A study this year found that nearly 20 percent of scientists are considering moving their careers abroad.

I have worked in my first year in Congress to support the NIH, signing on to a letter circulated by Representative ROYBAL-ALLARD from southern California supporting the NIH behavioral and social science research.

I also signed on to a letter supported by Representatives JAN SCHAKOWSKY and BILL YOUNG supporting research at NIH, including through the BRAIN Initiative and, finally, signed on to a letter to the Appropriations Committee asking for support for funding of NIH.

This afternoon, I distributed a letter to my colleagues in the bipartisan United Solutions Caucus, a freshman group of 30 Republican and Democratic freshmen Members, and we are asking them to support this new compromise budget, not because it does what we want, because I would like to see NIH funding go up, but because it will roll back some of the sequester cuts and restore some of the funding at NIH.

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In my district, Ms. SPEIER’s district, and across California, scientists are counting on us to restore the NIH funding, to actually increase it with the long-term goal of using NIH funding—the technology and the research that we can put in to bend the health care cost curves. If we don’t do that, we are going to continue to see the discretionary spending in the United States continue to contract, and nondiscretionary spending for Medicare costs and Medicaid costs will continue to rise and balloon unless we get a hold by putting funding and research dollars into what can control these diseases and ailments that people in our districts are suffering from. And that only happens by putting research dollars into NIH.

So, again, I want to thank the gentle lady across the San Mateo bridge for her leadership on this issue.

Ms. SPEIER. I thank the gentleman from California. And I thank him for recognizing so early in his career here in Congress the critical need we have not only to support NIH but also the biotechnology companies that are part

and parcel of what California has become.

I am now joined by my distinguished colleague from California as well, from the San Diego area, SUSAN DAVIS, who has much more to tell us from her perspective and from her neck of the woods.

Mrs. DAVIS of California. I thank Congresswoman SPEIER for having this Special Order today because the focus on NIH—you know, for so many families, it actually comes down to care for their loved one. That is what they know can happen as a result of proper granting at appropriate levels for the NIH. Simply put, it is really vital to the Nation’s health. Without NIH funding, we will not see the breakthroughs that we have seen in the past. NIH funding has led to cures. It has led to treatments and preventions for truly some of the most horrific diseases of our day afflicting everyone.

You know, diseases don’t pick and choose between infants and seniors, lower, middle and, we might say, upper class. They don’t distinguish. It is kind of equal opportunity for all, and that is why they have to be targeted.

I have been a consistent coleader of the annual NIH appropriations letter, requesting that the House appropriate full funding for the NIH, and the return to full funding is absolutely essential.

NIH is unique in its function. We know that we have an active private sector in our country. That is wonderful. And we certainly see that in my community of San Diego, and my colleague Congressman PETERS talked about this earlier.

But the private sector simply does not have the ability to replace public investment in the NIH. They don’t have it. That kind of basic research in science has to come from the United States Government. That is where it has always come from. It has come from there when we even look at the advancements that we have had in technology. And it certainly makes a difference when we think about what we are doing and what our friends, our allies around the world, and even some who are not allies, are doing in this area. So we have got to be competitive. It doesn’t make any sense not to be.

We know that the NIH conducts and funds research that is just too expensive—too expensive and too risky for private industry to undertake a loan; and it has led us to major advancements in the understanding of diseases like Alzheimer’s, cancer, and Parkinson’s.

The research coming out of and the grants coming from NIH are a huge driver of our biotechnology industry; and that, in turn, contributes heavily to our economy. Particularly in San Diego, we see that every single day because that is where the hundreds of jobs, good-paying jobs that allow people to really reach their potential and be purposeful about their work, that is where that comes from.

NIH funding keeps researchers and graduate students employed doing

what they do best, investigating answers to our most complex medical mysteries: cancer, premature birth, heart disease, and so on. I have had these young scientists in my office talking about the fact that they may not stay with the field, a field that they love, because they can't get the grants. As we cut back, only the most experienced scientists get those grants, and they are good. But our young people may be even better, but we have got to give them a chance. We have got to give them a chance to move forward and do that.

More than 80 percent of the NIH budget goes to over 300,000 research personnel at more than 2,500 universities and research institutions throughout the United States. So that is affecting a lot more than California. It is affecting our colleagues around the country, and maybe they don't even realize what an impact that has.

In San Diego, we are fortunate. We have got a lot of researchers, a lot of scientists working hard; and they received \$1.13 billion in NIH funding in 2012. It has sparked major breakthroughs, brings jobs to the region, and creates potential breakthroughs for millions around the country.

So we are doing our part; but, tragically, the sequestration requires NIH to cut 5 percent, or \$1.55 billion, of its fiscal year 2013 budget. NIH must apply the cut evenly across the board, the way things are today. That is why we have to change that. I hope we will be able to do that. NIH must apply the cut evenly across all programs, projects, and activities which are primarily NIH institutes and centers. This means that every area of medical research will be affected by that. Every area. Not just the few that maybe we think don't need the help, but every area. This is an irrational, backwards-thinking policy that will harm millions of Americans—current patients and future ones—and cost us millions in economic output.

As a result of the sequester and the slashing of NIH funding, already approximately 640 fewer competitive research project grants will be issued from what we have already done; approximately 750 fewer new patients admitted to the NIH Clinical Center; no increase in stipends for National Research Service Award recipients in 2013; and a delay in medical progress.

You know, these medical breakthroughs that we have that benefit many of our patients, many of our constituents—and I know I have friends who have been the beneficiaries of some of those breakthroughs—they just don't happen overnight. In almost all instances, those discoveries result from years of incremental research to understand how diseases start and progress. Even after the cause and the potential drug target of disease is discovered, it takes an average of 13 years and \$1 billion to develop a treatment for that target.

And what is difficult is that we know that a lot of people are waiting for

some of those clinical trials because you have to be careful how that is done, and that takes time. It takes enough patience, enough people willing to take that risk so that we can see what happens over time. That is so important. And when we start breaking this up, the whole process doesn't work.

Cuts to research are delaying progress in medical breakthroughs, including development of better cancer drugs that zero in on a tumor with fewer side effects; research on a universal flu vaccine that could fight every strain of influenza without even needing a yearly shot; and the prevention of debilitating chronic conditions that are costly to society and delay development of more effective treatments for common and rare diseases affecting millions of Americans.

And, as I mentioned earlier, we lose the promising, accomplished scientists and researchers who are leaving the industry because of the loss or inability to get grants.

We see that faculty at top universities across the country are reporting cutting labor spending by 7 percent and operating with skeleton staffs, severely limiting job opportunities for new researchers. Over 50 percent of scientists surveyed by the American Society for Biochemistry and Molecular Biology said they had a colleague who has lost his job or expects to soon. Some of the scientists are not coming back. They are going elsewhere. They are going to those areas where we are competing because they can take a more stable position outside of the research sector here in the United States.

Do we want that? I don't think so. Quite simply, we are inflicting decades of damage with the sequester policy that we have, and I hope that that is going to change. It is not rational to do that. It is cruel. It is backwards. It is insanity.

Let's join together and undo—what we can agree on in a bipartisan basis—a foolish policy with an untold number of victims from every State and every city and town in this country. Let us work together to restore NIH funding immediately.

I thank my colleague.

Ms. SPEIER. Would the gentlelady entertain a question?

You were here when then-President Bush worked in a bipartisan fashion with the House and the Senate, the Republicans and the Democrats, to double the funding for NIH; and all we have seen since then is just an absolute cliff decline in funding.

What happened then that isn't happening now? How can we reinstate that kind of bipartisan sentiment?

Mrs. DAVIS of California. Well, I think we saw the leadership coming from President Bush at that time. And because we also had—those of us here on this side of the aisle, I think, in support, it was a bipartisan effort. We saw that leadership coming from the top; and that is what made a difference, because it was written into the budget.

Now, I must say, we weren't able to sustain some of that because of a number of reasons. And we were fighting two wars and then had a number of other issues that we needed to look at. But the reality is that that was maybe unique in some ways because it really came from leadership at the top. It was here, on our side of the House, and the House was supportive. The Senate was supportive, and the President was supportive. So it was really altogether. We don't see that leadership right now from the other side of the aisle.

Ms. SPEIER. Well, I thank the gentlelady for her passionate and clear-minded commentary on how critical this is for the entire country and to all the lives that are at risk, should we not fund NIH at a level that is going to come up with the next cure, the next blockbuster drug that is going to save lives and create longevity for so many Americans.

Mrs. DAVIS of California. I thank my colleague.

Ms. SPEIER. We are joined by the Congressman from northern California, my colleague for many years, Congressman JOHN GARAMENDI, who is no stranger to this floor for Special Orders, I might add.

Mr. GARAMENDI. Representative SPEIER, thank you so very much. It is good to be on the floor. I noticed thus far it has been Californians, but this is far more than California. I see Chicago, Illinois, just arrived, and we will pick up on that.

This is an issue that touches every single American. It is not a California issue. I represent northern California, not far from the Bay Area. The University of California/Davis campus is in my area. There are major, major programs in research, not just with the National Institutes of Health and the health issues that we are talking about here, but agriculture, energy research, and on and on.

It turns out that that powerful engine of research is found in every part of America. So listen out there, those of you that are watching. This is not just a California issue. This is an American issue, and it is an international issue because this particular National Institutes of Health is dealing with the health of this entire world. Every person in the world is, in one way or another, affected by the research done by the National Institutes of Health, the funding that they, then, provide to the 250 universities all around this Nation to deal with illnesses, to deal with the human body and beyond.

For example, Davis, which was originally known as an agricultural research institution and continues to do that, has discovered that, interestingly enough, with the mad cow issue, there is a virus that can be identified specifically with that illness so that for the cattle industry, if some cow goes a little weird, you can find out whether it has mad cow disease or it is just weird. And the very same thing applies to the

human body. So this virus can be identified both in a cow—is it mad or not? Well, it may just be angry but not crazed—and in a human.

Dealing with a very, very serious human issue and also a serious economic issue for those of us in the cattle business. This is a big thing. And what has happened—I love charts.

Ms. SPEIER. As do I.

Mr. GARAMENDI. I noticed, Representative SPEIER, that you love charts too. So I borrowed this. I think you used it earlier today. This is instructive.

You were just talking with the Representative, our friend from San Diego, about the enormous increase that took place for the National Institutes of Health during the George W. Bush conservative period of time. It is right there, \$21 billion; and then over the years, it began to lose a little bit of its, I guess, interest. And then, as we went into the late years of the George Bush administration, it dropped down there. And then, of course, the great crash. A little bump here, which I think is the stimulus bill, pushing more money into research at the National Institutes of Health. And then we have seen, beginning in 2010, what has got to be one of the stupidest policies this Nation has engaged in.

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It happened to be in 2011, when the House changed from Democratic control to Republican control. We have seen a very steep decline—a \$1.5 billion reduction and annual decline in the National Institutes of Health.

This same decline in the last 3 years is what is the result of the austerity budgets that have been imposed upon us by the Republicans trying to solve the national deficit by cutting Federal expenditures. The entire European community has come to the conclusion that doesn't work. Austerity budgeting does not increase economic growth. It has caused stagnation. Certainly, in Europe we are beginning to see, I think, a large part of the slow growth in the United States caused by austerity budgets.

But specifically to the health care of Americans—our health, our well-being—this is really serious. This means people are going to have additional illnesses. You spoke earlier about some of those, like diabetes. Diabetic research funding is cut through the National Institutes of Health.

This one I really find frightening. I find this frightening because this is very personal. My mother-in-law spent the last 2 years of her life with a very, very serious case of Alzheimer's disease. She died in a hospice program in our home. We, I suppose, were a very small part of this because we took care of her. But right now we are spending \$200 billion a year dealing with Alzheimer's.

We know that the population is going to increase and the elderly population is going to skyrocket as the baby

boomers move into their later years. By 2050, it will be \$1.2 trillion for Alzheimer's.

Is there anybody in America, any family in America, that is not concerned about Alzheimer's? I don't know who they are. I know my family is concerned about it. Every family that I know—and I know many because I have been in public life for a long time and met perhaps thousands, or hundreds of thousands, of people—and every single one of them is concerned about Alzheimer's.

This is the financial side of it. The human side of it, I can tell you, is serious. I can tell you the effect it has.

Ms. SPEIER. Will the gentleman yield?

Mr. GARAMENDI. I would.

Ms. SPEIER. To your point, this \$1.2 trillion in the year 2050 is coming from all the taxpayers in this country. Because these are Medicare patients. These are Medicaid patients. What would be really stunning is to understand that if we were able to delay the onset or progression of Alzheimer's by 6 years, it could produce an annual savings of \$51 billion in 2015, \$126 billion in 2025, and a whopping \$444 billion—almost half a trillion dollars—in the year 2050, when that cost is going to skyrocket to \$1.2 trillion.

Mr. GARAMENDI. I am so glad you interrupted because that is an extremely important fact.

Let's go back and look at that. In 2015, the savings are how much?

Ms. SPEIER. They are \$51 billion.

Mr. GARAMENDI. They are \$51 billion. We are going through this budget exercise where, by the way, the sequestration cut continues, although the across-the-board is eliminated. Half of the sequestration cut will continue because of this budget, but we will be able to try to balance out the prioritization.

But the total savings in 2015 is less than the \$50 billion that you have suggested could be saved if we could extend the onset and the severity of Alzheimer's. We watched this very closely in my family. The fact of the matter is that the National Institutes of Health's funding for Alzheimer's is coming to understand the nature of Alzheimer's and, therefore, how to deal with it.

Mr. WAXMAN. I thank you for yielding. Both of you are absolutely right. It is so shortsighted to have us cut back on funding for the National Institutes of Health and their research agenda. When you make a cut in this area one year, it isn't like you can make it up the next year. Researchers go on to other fields.

It is shortsighted to make these kinds of cuts.

I also wanted to comment on the fact that every day members of the Safe Climate Caucus have come to this House floor and talked about the shortsightedness of the leadership of the House of Representatives in ignoring the science on climate change. And so every day we have had speakers—the

gentleman from California has been one of them—to just use a minute to talk about this pressing issue.

Yesterday, The Wall Street Journal reported that China has released a national blueprint for adapting to climate change. This follows the International Energy Agency's recent prediction that China will install more renewable energy over the next two decades than the U.S. and Europe combined. And China has recently implemented a series of regional cap-and-trade programs which are putting a price on carbon in China.

According to the Chinese Government—and I thank the gentleman for giving me this opportunity—climate change has already cost its people tens of billions of dollars and potentially thousands of lives. These developments in China are important because China is the world's largest emitter of carbon pollution, and we are the second largest. Our two countries need to play a leading role in addressing this global threat.

President Obama is committed to global leadership. His climate action plan calls for working with China and other nations to bend the post-2020 emissions trajectory. He is bringing in John Podesta, an experienced leader with a deep understanding of climate issues, to help him succeed.

We in the House need to stop being part of the problem and start being part of the solution. We need to start taking the climate threat seriously and work to find solutions. If China can take action on climate change, so can the U.S. If we don't, we will lose the race to develop the clean energy technologies that will power the future.

Let's not be shortsighted. Let's invest in research—research to protect our health and research to protect our planet.

I thank the gentleman.

Mr. GARAMENDI. Thank you, Mr. WAXMAN, for bringing up the leadership that China has.

I notice that the leader of our hour talked about China's leadership in another field.

Let me turn back to our leader, Representative SPEIER.

Ms. SPEIER. I just point out that China is eating our lunch, so to speak.

This is just the funding from 2012 and 2013. We referenced this earlier. And Congressman WAXMAN was talking about what they are doing relative to climate change. Look what they are doing in R&D spending in the last 2 years. It is up 15 percent. Germany, Japan, and South Korea are up 5 percent. Where is the United States, Mr. GARAMENDI?

Mr. GARAMENDI. In the red, going down.

Ms. SPEIER. That is right: a cut of 5 percent. So another example of how China is going to eclipse us in more ways than one. And those young researchers that we have been talking about are going to be going to China to do their research.

Mr. GARAMENDI. If I might just add to that, it is my understanding—and I get this from the University of California-Davis—that they are losing their new Ph.D.s to other countries, particularly to China and to India, because those countries are not only increasing their total research but they are also providing these very bright, innovative, forward-thinking Ph.D.s with a full laboratory and all of the support that they might need to continue to conduct their research not only on the issue of health care but also in all of the sciences and technologies, from high technology, energy, and so forth.

So we really need to get on it.

My final point is here twofold. First of all, if we are going to build this economy, there are five things we have to do consistently through time. And they require public investment.

First of all, education. You have got to have the best educated workforce in the world.

Secondly, you have to have the best, most advanced research because that is where the future is. That is where the future economic growth will come from.

You need to make the things that come from that. You need to have the infrastructure, and you need to think globally. We are not doing that.

The budgets that have been put forth by our colleagues on the Republican side go exactly the other direction. They cut educational funding, beginning with early childhood education. They cut the funding for research. You see it here.

Tomorrow, we are going to take up the new budget. It continues to cut research across the board, the National Institutes of Health probably included. It goes on and on. Transportation, infrastructure—forget it, there is no money for it.

We have got to turn that around. These are the fundamental investments of economic growth and, more important, social justice.

Congresswoman SPEIER, thank you so much. You have been at this, beating this drum. Don't stop. You stay with this. This is a message that the American public has to understand. These are the investments about our own personal health, our children's health, and our future economic growth, as well as addressing worldwide problems.

Thank you so very much for what you are doing here and for loaning me your charts.

Ms. SPEIER. I thank the gentleman from California for lending his support and his articulation of this issue.

To his point about the jobs being lost, this year's sequester cuts were estimated to result in the loss of more than 20,000 jobs and \$3 billion in economic activity.

The three scientists who won the Nobel Prize for medicine this year for their research on how cells swap proteins all received NIH funding at some time during their careers. Nobel Prize

winner Rothman said he probably would not have started his research had NIH funding not been available.

So that, I think, speaks volumes about how important NIH funding is to young scientists.

I am now joined by my great friend, a great, passionate leader on so many issues before this House, my colleague from Illinois (Ms. SCHAKOWSKY).

Ms. SCHAKOWSKY. Thank you. I want to thank Congresswoman SPEIER for leading this really important debate.

We have been talking lately about how we are not going to be able to compete for the economic development in research and biotechnology and all the things that we do at the NIH. But I also want to show how economically—with one of your charts—it really doesn't work for us here at home as well.

Pretty much all you can see are the red lines, which are the costs every year in the United States of common diseases.

As my colleague, Congressman GARAMENDI, pointed out, we have \$203 billion a year that Alzheimer's costs our society as a whole. This is cancer, \$158 billion. We have hypertension, \$131 billion; diabetes, \$116 billion; obesity, \$109 billion; heart disease, \$95.6 billion; stroke, \$18.8 billion, Parkinson's disease, \$6 billion.

So it is really easy to see these red lines.

Teeny, tiny, and I think maybe the only one you can see here well is the amount of money that we are spending to address these diseases. NIH research funding and annual cost of care for major diseases in the U.S. is what this chart is about.

We spend \$5.5 billion on cancer research. On Alzheimer's disease it has not even been a billion dollars. It is half a billion dollars for a disease that costs \$200 billion to our economy. And on and on.

The teeny, tiny blue lines are barely very visible of how much we are actually investing in trying to deal with these diseases and diminish the tremendous costs to families and costs to government through our public health programs.

And so if we are smart investors, wise investors in how we can save ourselves money, we would put money into this kind of research.

I just want to give an example from my district of lack of being penny wise and pound foolish.

Northwestern University is developing one of the first major studies to look at the impact of contaminants from superfund sites—those are the most polluted sites in our country—on our reproductive health.

So Northwestern, which is in Evanston, Illinois, and I am proud to say in my district—a constituent of mine—proposed a study to examine the reproductive health impacts of exposure to metals, including zinc and lead, that are present in the DePue superfund site in Illinois—a very dirty site.

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Initially, in the fall of 2012, the Northwestern University Superfund Research program, led by Dr. Teresa Woodruff, was awarded a positive score with a good chance of receiving funding in response to the NIH research application. Mind you, if we had been able to research this particular Superfund contaminated site, it would have helped all over the country where we have these kinds of contaminations.

Due to limited funding—due to the sequestration—in March of 2013, Dr. Woodruff and her colleague were informally given the option to receive a reduced amount for a reduced period of time since their application was deemed, in fact, meritorious. After electing to accept the reduced funding, the NIH informed the Northwestern University Superfund Research program that, due to the sequester cuts, their project would not be funded.

This lack of funding means Dr. Woodruff and her team are unable to perform this critical research which would be helpful all over the country to help us gain a better understanding of the reproductive health risks of Superfund sites and to help us determine the best practices for the future disposal of those toxic chemicals.

We are absolutely putting hands behind our backs in order to address critical health issues that are facing our country. We are hamstringing our ability to compete globally. We are hurting the health of Americans and of future Americans in not funding the study of reproductive health. It just makes no sense. It makes absolutely no sense to cut the funding from the National Institutes of Health. It is hard to figure out what that argument would be. You certainly can't say this is frivolous spending, excessive spending.

So I really thank you for calling attention to the one of many ways that the sequester has hurt our country, but it is a very significant one. I appreciate your leadership.

Ms. SPEIER. You, too, were here in Congress during the Bush administration when there was an extraordinary increase in the budget for the NIH. The Republicans at that time recognized the value of keeping the NIH robust in the funds that it had in order for it to do cutting-edge research and move us forward.

What is it going to take? What was it like then that we don't have today that might be able to enlighten us?

Ms. SCHAKOWSKY. There was some common sense on both sides of the aisle of things that were essential investments for our country, that it made sense from every angle at which you looked at this to make those kinds of investments in the National Institutes of Health.

I think, right now, we are dealing with some of our colleagues across the aisle who believe that government spending, regardless, is not a smart investment, that the sequester cuts, which are meat-ax cuts across the

board, do not distinguish in any way among the programs and that that is a smart way to go.

The chairman of the Appropriations Committee, Congressman ROGERS, doesn't agree with that—the sequestration, he agrees, hurts us—but, unfortunately, we don't have the same kind of bipartisan consensus. I think Democrats see the wisdom of this and that we need help from our colleagues. We had it then. We don't now.

Ms. SPEIER. I thank the gentlelady for her support and for her involvement in this very critical issue.

I am really very grateful for the conversation we have had this hour on the National Institutes of Health, but I am also anxious for the millions of Americans across this country who are suffering with some diabolical disease—some cancer—some disease that has no cure, whether it is heart disease or glioblastomas or breast cancer. There are millions of Americans right now who are dealing with stage 4 cancers, who are holding on by just their fingernails, hoping against hope that there will be some cure, some breakthrough drug, some clinical trial they can participate in.

I think, for each and every one of us in this House, we have to think about those people in our districts, and there are thousands of them in each of our districts. If they knew that we were tying the hands of the National Institutes of Health in doing that kind of cutting-edge research, I think they would be so disappointed—more than disappointed. They would be so angry that the lives of their loved ones were in the offing.

I would like to continue with a brief discussion on our academic health centers in the United States. They are, really, the pulse of so much of the research that goes on when it comes to advanced medical research. Many of them are funded through the NIH, as was mentioned earlier—thousands of them across this country. I am going to tell you about one such researcher. Her name is Dr. Valerie Weaver. She is a professor in the UCSF Departments of Surgery, Anatomy and Bioengineering and Therapeutic Sciences.

She does think outside the box. Her lab is investigating not only tumors, themselves, found in patients afflicted with breast cancer, pancreatic cancer, or brain cancer, but the neighborhood of tissues and cells where those tumors take up residence. Unfortunately, her quest for cutting-edge solutions to rapidly improve cancer treatments is threatened by the sequestration of the NIH budget. Because of reduced funding on her existing grants, Dr. Weaver has had to lay off three existing personnel and has had to cancel three new hires. “The only people I can take are those with their own funding. Each year, you get less and less, and you are asked to do more and more,” she said, “and you try to get more creative, but wonder what you are supposed to do.”

As a scientist, she finds herself spending less time thinking about how

to battle cancer in the lab and more time struggling against funding cuts. “I spend way too much time writing grants. My grant writing time has doubled,” Weaver said, but added she still pushes to move her research forward. “I have to do some type of science every day, at least once a day, even if it's only an hour. It should be the other way around—1 hour of administration and 12 hours of science—but it's not. That breaks my heart,” she says.

For those suffering from the forms of cancer that Dr. Weaver hopes to treat, she points out that time is of the essence. Patients with brain tumors and pancreatic cancer, in particular, frequently live only a short time after diagnosis. “Some of the studies we're doing in the next 4 to 5 years will have a direct impact on the clinic,” she said. “This could have huge implications for saving patients.”

Weaver also worries about the impact that sequestration is having on the next generation of talented researchers. “You think: you can't let these people go under. If they go under, you lose them, because they don't come back,” she stated soberly.

In truth, there is so much at stake that we must recognize that the sequestration of the NIH is killing the goose that lays the golden egg—that saves American lives, that creates opportunities for great trade, that provides us with, yet again, more and more and more research that leads to more and more cures. Alzheimer's alone will choke us—will choke the Medicare system—if we don't do more research in that area.

So I want to close by saying that the funding of the NIH is not a political issue. It is an economic and a medical imperative. Medical research makes Americans and the rest of the world healthier. It grows our economy, and it produces valuable jobs here at home. It is time for us to take the shackles off the NIH, to restore the funding that was there when George Bush was President and to regain the position that we have had for so long in terms of fine medical research.

With that, Mr. Speaker, I yield back the balance of my time.

COMPREHENSIVE IMMIGRATION REFORM

The SPEAKER pro tempore (Mr. COTTON). Under the Speaker's announced policy of January 3, 2013, the Chair recognizes the gentleman from Florida (Mr. GARCIA) for 30 minutes.

Mr. GARCIA. Mr. Speaker, I want to thank the gentleman from Colorado, who has been having these sessions now for all the month of November. We began at the end of October and then have gone through the session in December. He has been an ardent champion of this issue. He has been a leader in our caucus. He has been doing the right thing, and I am very thankful for his efforts on our behalf.

I want to mention that, last week, when we were doing this, the Speaker

made a ruling of something that I probably did incorrectly in my speech; but I want to now yield to the gentleman from Colorado because he spoke for millions of those who have no voice, who cannot come to this floor and claim something that is so American—a system that works, a system that makes sense, a system that is fair to all its citizens, in fact, to all of its people.

Mr. POLIS. I thank the gentleman from Florida. I will speak briefly, and then I will have more later.

Mr. Speaker, there are so many activists in our country who are fasting, who are sitting in offices, who are writing their Congresspeople, who are demanding action—action to unite their families, action to stop the deportations of family members—and answers to emerge from this indefinite state of limbo that has frozen the lives of so many would-be Americans that H.R. 15 and comprehensive immigration reform would address.

Today, I am disappointed that our Republican friends didn't show up to discuss and to debate the most pressing issue of our time—immigration reform. We extended an invitation to our friends on the other side of the aisle to join us today and have a discussion. Sadly, there is no one here to yield to. There are no solutions from the empty Chamber on the right. Some responded that they were double booked. Others responded that they had other engagements. Some simply didn't respond at all. The American people, Mr. Speaker, are demanding a response.

Just as House Speaker BOEHNER plans to close for business on Friday while hundreds of millions of Americans continue to have to work another week before Christmas, we have Reverend Samuel Rodriguez, who will mark the 40th day of his fast for immigration reform. He is chair of the National Hispanic Christian Leadership Conference. He will be 40 days and nights—approaching fast—without solid food.

As the reverend said recently:

There are 11 million people here right now who require intervention. We looked the other way when they came in. We use them on our farms; we use them in our hotels; and we use them in our restaurants. Then we have the audacity to deport them. It is morally reprehensible to play politics with 11 million people.

So said Reverend Samuel Rodriguez in his nearing his 40th day in fast.

Yet, in the entire first part of the 113th Congress—in the entire first session, in the entire year of 2013—there was only one vote on the floor on any measure relating to immigration. Was it a bill that would address even part of the immigration problem or any piece of the meal that was being promised? No. It was a bill to defund DACA, to defund the Deferred Action program, subjecting hundreds of thousands of DREAMers to deportation—a bill that Republicans voted for and that passed in this body.