

State workers who are showing up to ensure that individuals get the essential paycheck or the expanded unemployment insurance that we fought to make sure they can receive, and they are showing up, as well.

I, too, stand with my colleague because I think it is important that we recognize not only our healthcare workers but some of those who need extra help from this legislature. We have spent, unfortunately, the last 3 years of this administration attacking them. These are our immigrants in Nevada and across this country who are actually going out every day and risking their lives to help others in need, and they are working in our healthcare.

One of them I rise to talk about today is Anna Ledesma. She is a DACA recipient in Nevada, and she works in a pediatric ICU in Nevada as a nurse, in Las Vegas. Anna has been in the United States since she was 7 years old. She got interested in medicine because an aunt who was a nurse thought it would be the perfect career for her. Her aunt was right. Anna loves biology and she loves learning how disease process works. But, most of all, Anna loves her patients. She said: "I love connecting with them over Disney stuff." Anna will tell you: "I think I'm a good pediatric nurse because at heart, I'm still a kid too."

All across Nevada, immigrants like Anna are working on the frontlines to help others in need during this healthcare crisis. They are working as teachers for children learning from home. They are staffing retirement homes, taking care of at-risk seniors in the middle of a pandemic that targets our elders. They are harvesting, they are shelving, and they are cooking food for all of us.

More than 200,000 DACA recipients in the United States are on the frontlines of healthcare, education, agriculture, and other essential jobs. There are almost 5,000 of them in Nevada alone among the 12,000 Nevada DACA recipients. These are our friends, and they are our neighbors.

Yet this administration continues to demonize them with anti-immigrant rhetoric and has turned their lives upside down by trying to end DACA. These are the young professionals at risk if the Supreme Court upholds President Trump's decision to terminate DACA.

These young men and women have grown up in our communities, and they are giving back. Even in the face of their uncertain futures, they are still showing up to work each shift and still demonstrating by their everyday heroism that they belong here.

Now, more than ever, we need to understand that those who come to America in search of a better life don't diminish us. They enrich us. You can see how cruel and twisted the immigration debate in this country has become if you just think about this: In the middle of a worldwide health crisis, when

they should be focused on keeping their patients alive and limiting their own exposure, the 27,000 DACA recipients in healthcare have to worry about their own legal status.

Anna says that the health crisis her hospital is facing has almost managed to push out the fear that is always in the back of her mind about attacks on DACA and attacks on her future—almost, because it never really goes away. A few weeks ago, Anna was transferred to other parts of the hospital to help adult patients with COVID-19. She told me about the utter isolation of these patients who are fighting for their lives far from their loved ones. She told me about former University Medical Center friends and colleagues, now in New York and in Seattle, who are witnessing the same scenes.

Lately, the number of children suffering from COVID-19 has increased in Nevada. Anna is back in the pediatric ICU, where patients are mostly asymptomatic. With these healthier patients, it is easier to do what she does best, which is to teach kids the things they need to know about a procedure or an operation they are facing, distracting them and making them laugh.

We need to let Anna do her job. We need to let the thousands of immigrants who are on the frontline right now continue to do their jobs. We must allow her to keep serving the only community she has ever known. We need to create a pathway for citizenship for so many like Anna. We need to give them all the tools they need to keep themselves and the rest of us healthy.

Anna's story is an American story—one of struggle, courage, and sacrifice for your community in order to build a brighter future for those who come after.

I am going to continue to fight for DACA recipients and immigrants like Anna and everyone else who has contributed, not just in my State but in this country, to not only enrich all of our lives but to continue to contribute to our economy and to make our lives better. The least we can do is to give them peace of mind and let them know that the only country they have ever known is one they can stay in forever. That is my fight. I hope that is the Presiding Officer's fight and of many of my colleagues. This is something that must be done. We have to pass legislation to make sure Dreamers in this country and their parents have every opportunity to stay and find that pathway to citizenship. They are already contributing.

I yield the floor.

The PRESIDING OFFICER. The Senator from Illinois.

Mr. DURBIN. Mr. President, I want to thank my colleague from Nevada. Anna's story is so touching. This young girl, concerned about her own future, worried about deportation, gets into a giving, caring profession and risks her life in caring for those who may be suffering from COVID-19. To think some-

one would question whether we want that kind of person in America's future is beyond me.

Thank you for telling that story. It is an important part of the RECORD.

CORONAVIRUS

Mr. DURBIN. This week, amid the devastating coronavirus pandemic, we saw what world powers are supposed to do—join forces to raise funds to research, manufacture, and distribute a vaccine and treatments. This makes obvious strategic and lifesaving sense, being both the moral and strategic thing to do. All of us joining forces and working together will help speed up efforts and the eventual discovery and distribution of a coronavirus vaccine that we all desperately seek. Many of us believe that until that day comes when that vaccine proves to be effective and safe and is widely distributed, we are going to still see what we call our normal lives compromised. So there is no greater priority. This effort will save lives around America and around the world.

Who knows where that vaccine is going to be discovered, produced, or distributed? I want America in on this conversation from the start and end on the collective efforts. Clearly, other world leaders understand this. So when there was an effort to raise \$8 billion for the discovery of this new vaccine, they had a virtual global telephone conference. Our allies in the European Union and Norway offered to give \$1 billion each toward this goal. Who was absent from this critical effort to save lives around the world, to discover this vaccine, including the distribution of it to those who need it in every corner of the world? Which country did not participate in this global virtual telephone conference? The United States of America.

In yet another shortsighted, missed opportunity to address the coronavirus, this administration refused to participate. America was missing in action when leaders around the world came together with the determination to find and distribute a vaccine against coronavirus. The President's supporters in Congress said nothing, focusing instead on judicial appointments and other things on their mind.

Given this President's penchant for blaming others but not himself for any mishandling of this viral contagion, maybe his dereliction of duty in this global conference should come as no surprise, but it does because of the devastating consequences that could result. What does this mean for America if the United States sits on the sidelines while other countries set out to discover this lifesaving vaccine?

Well, we still continue to have some of the best researchers in the world at the National Institutes of Health, the Centers for Disease Control and Prevention, and the many university and private researchers around this country. Many NIH-funded researchers have

spent years studying coronaviruses. Perhaps their knowledge could be helpful with these other countries in quickly developing an effective vaccine. In fact, some clinical trials are already now under way by the National Institutes of Health. I want to commend Dr. Francis Collins, who heads up NIH, and, of course, Dr. Anthony Fauci, a friend of many years, for their amazing work. But it is quite plausible—it is even possible—that the best vaccine may turn up in another country.

There are efforts under way in England and Germany and in many other countries to find this vaccine, as well. In a rush to research and validate a vaccine, ramp up production, address global allocation and supply needs and ensure affordability and access worldwide, will the United States be standing on the sidelines again? When the United States pursues a go-it-alone—not just “America first” but “America only”—approach, while the rest of the world is working together, where does that leave us?

Remember, it hasn't been that long ago when the United States first opted to develop and distribute its own American coronavirus test kits that turned out to be faulty, instead of choosing the World Health Organization's test kit, which was available at the time. That set our Nation back at least a month, up to 6 weeks. In fact, many believe we still haven't recovered from that critical first misstep by this administration.

Even when his own incompetent response was increasingly obvious, President Trump turned and tried to place all the blame on the World Health Organization, even cutting off all U.S. funding to this critical international body with decades of experience in dealing with pandemics.

The New York Times columnist Nick Kristof starkly wrote last month: “Thousands of Americans would be alive today if President Trump had spent more time listening to the World Health Organization instead of trying to destroy it.”

Don't get me wrong, WHO and many international bodies are imperfect and make mistakes, and they are often only as strong as their member states are willing to help make them or help fund them.

The World Health Organization first warned of the coronavirus on January 4, issuing increasingly urgent warnings in February, while the President was saying publicly that the issue “was totally under control.” American personnel at the World Health Organization were also sending warnings back to Washington about the threat. What was the President's response? On February 10, he said of the coronavirus: “When it gets a little warmer, it miraculously goes away.”

On February 27, the President said: “It's going to disappear. One day, it's like a miracle, it will disappear.”

Well, more than 2 months later, we are still waiting for that and praying

for that, and 70,000 Americans have died. The WHO is a critical lifesaving body that helps eradicate polio, reduce the number of women and children who die in childbirth, and stem malnutrition. The WHO has led the historic global vaccination campaign to eradicate small pox.

When it was issuing coronavirus warnings, the President and all of us should have been listening. Instead, the President ignored them and chose to walk away from the World Health Organization, undermining its international efforts and, ultimately, giving more global leadership to, of all nations, China, which is only more than happy to step in when the United States steps away.

We should be increasing our investment and leadership at the World Health Organization as one of the many efforts to stem this virus and not cover our ears and walking away from it.

The World Health Organization's efforts to halt Ebola are an example of what its work can do to save lives at the outbreak of a pandemic and stop one from reaching the United States.

Presidents Obama and George W. Bush understood this need for global health engagement. I was proud to rally to President Bush's call to stem the scourge of AIDS around the world through the historic PEPFAR program. It was a bipartisan, international, global effort—the world first, not just America first. Many of my Republican friends in the Senate supported these efforts, and we need them now with this coronavirus outbreak.

I was equally proud of President Obama's efforts to set up infectious disease prevention systems and his leadership on the Ebola crisis.

Presidents Bush and Obama understood the traditional leadership role of the United States in such matters and how important it was for the world to know that we were engaged and involved.

Sadly, so much of the world looks at us in dismay today as President Trump undermines American Governors who are doing their best to try and save lives, and refuses to take any responsibility, snubs our allies, and withdraws from global efforts.

That is why I plan to introduce a resolution here in the Senate calling on the United States to join this important global vaccine and treatment effort—something I hope my colleagues on both sides of the aisle will support.

Can we put aside our political differences for a moment and agree on one basic thing? Wherever this vaccine is to be discovered, we pray that it will be done quickly, effectively, and safely. We want the United States in on the effort, whether it is discovered here in our country or in another country. We want to be at the table to help support the research and development efforts. We want to be at the table when the good news of the discovery of this vaccine is delivered. We certainly want to

be at the table when it comes to questions of manufacturing and distributing this vaccine around the world, and especially here in the United States.

Standing by on the sidelines with our arms folded, chins jutted out, and saying it is America first or else—this is the wrong moment for it. This is a global challenge. It is a global solution. We don't know which country God will bless with the ability to come up with this vaccine. Whatever it is, we want to be at that table with them in its development and distribution.

Let's remember that this global pandemic and any real solution involves more than just our great country. We cannot isolate ourselves from this international race to find treatments and develop a vaccine. Doing anything else will only waste more time and cost lives.

Mr. President, I ask unanimous consent to have printed in the RECORD a Washington Post article of May 5, 2020, on the subject.

There being no objection, the material was ordered to be printed in the RECORD, as follows:

[From the Washington Post, May 5, 2020]
U.S. SKIPS VIRTUAL VACCINE SUMMIT AS WORLD LEADERS PLEDGE BILLIONS TO EFFORTS

(By William Booth, Carolyn Y. Johnson and Carol Morello)

LONDON—World leaders came together in a virtual summit Monday to pledge billions of dollars to quickly develop vaccines and drugs to fight the coronavirus.

Missing from the roster was the Trump administration, which declined to participate but highlighted from Washington what one official called its “whole-of-america” efforts in the United States and its generosity to global health efforts.

The online conference, led by European Commission President Ursula von der Leyen and a halfdozen countries, was set to raise \$8.2 billion from governments, philanthropies and the private sector to fund research and mass-produce drugs, vaccines and testing kits to combat the virus, which has killed more than 250,000 people worldwide.

With the money came soaring rhetoric about international solidarity and a good bit of boasting about each country's efforts and achievements, live and prerecorded, by Germany's Angela Merkel, France's Emmanuel Macron, Britain's Boris Johnson, Japan's Shinzo Abe—alongside Israel's Benjamin Netanyahu and Turkey's Recep Tayyip Erdogan.

“The more we pull together and share our expertise, the faster our scientists will succeed,” said Johnson, who was so stricken by the virus that he thought he might never leave the intensive care unit alive last month. “The race to discover the vaccine to defeat this virus is not a competition between countries but the most urgent shared endeavor of our lifetimes.”

A senior Trump administration official said Monday the United States “welcomes” the efforts of the conference participants. He did not explain why the United States did not join them.

“Many of the organizations and programs this pledging conference seeks to support already receive very significant funding and support from the U.S. government and private sector,” said the official, who spoke on the condition of anonymity under White House rules for briefing reporters.

Public health officials and researchers expressed surprise.

"It's the first time that I can think of where you have had a major international pledging conference for a global crisis of this kind of importance, and the U.S. is just absent," said Jeremy Konyndyk, who worked on the Ebola response in the Obama administration.

Given that no one knows which vaccines will succeed, he said, it's crucial to back multiple efforts working in parallel.

"Against that kind of uncertainty we should be trying to position ourselves to be supporting—and potentially benefiting from—all of them," said Konyndyk, a senior policy fellow at the Center for Global Development. "And instead we seem to be just focused on trying to win the race, in the hopes we happen to get one of the successful ones."

Conference participants expressed a need for unity.

"We can't just have the wealthiest countries have a vaccine and not share it with the world," Canadian Prime Minister Justin Trudeau said.

"Let us in the international community unite to overcome this crisis," Abe said.

Russia and India also did not participate. Chinese premier Li Keqiang was replaced at the last minute by Zhang Ming, Beijing's ambassador to the European Union.

The U.S. official said the United States "is the single largest health and humanitarian donor in world. And the American people have continued that legacy of generosity in the global fight against covid19."

"And we would welcome additional high-quality, transparent contributions from others," he said.

Asked three more times to explain why the United States did not attend, the official said he already had given an answer.

The U.S. government has provided \$775 million in emergency health, humanitarian, economic and development aid for governments, international organizations and charities fighting the pandemic. The official said the United States is in the process of giving about twice that amount in additional funding.

There was one major American player at the virtual summit: the Bill and Melinda Gates Foundation, which promised to spend \$125 million in the fight.

"This virus doesn't care what nationality you are," Melinda Gates told the gathering. As long as the virus is somewhere, she said, it's everywhere.

Scientists are working around-the-clock to find a cure or treatment for the coronavirus. The World Health Organization says eight vaccines have entered human trials and another 94 are in development.

But finding an effective vaccine is only part of the challenge. When it's discovered, infectious disease experts are predicting a scramble for limited doses, because there won't be enough to vaccinate everyone on Day One. And deploying it could be difficult, particularly in countries that lack robust medical infrastructure.

Those that have begun human trials include a research project at Oxford University in England, which hopes to have its vaccine ready in the fall. The university started human trials on April 23. "In normal times," British Health Secretary Matt Hancock said, "reaching this stage would take years."

Conference participants expressed hope that by working together, the world will find solutions more quickly—and they can then be dispersed to all countries, not only the wealthy, or those that developed vaccines first.

Many of the leaders stressed their support for the WHO. President Trump announced last month he was cutting off U.S. funding

for the WHO because he said it had sided too closely with China, where the coronavirus arose. Trump says Chinese leaders underplayed the threat and hid crucial facts.

Public health analysts have shared some of those criticisms but have also criticized Trump for cutting off funding.

Peter Jay Hotez, dean of the National School of Tropical Medicine at Baylor College of Medicine, said the United States has always been the primary funder of new products for global health. The country invested \$1.8 billion in neglected diseases in 2018, according to Policy Cures Research, more than two-thirds of the worldwide total.

Hotez said the United States shoulders the burden of investing in global health technologies, while countries such as China do not step up.

"More than one mechanism for supporting global health technologies—that may not be such as a bad thing," he said. "If it was all under one umbrella, you risk that some strong-willed opinions would carry the day and you might not fund the best technology."

Hotez is working on a coronavirus vaccine that uses an existing, low-cost technology, previously used for the hepatitis B vaccine, precisely because he is worried about equitable distribution of the vaccine.

"I'm not very confident that some of the cutting-edge technologies going into clinical trials, which have never led to a licensed vaccine before, are going to filter down to low- and middle-income countries anytime soon," Hotez said. "I'm really worried."

Mr. DURBIN. Mr. President, I would like to add one last thing. Yesterday, we had a telephone conference with Bill and Melinda Gates. They were part of the summit that the U.S. Government boycotted, and they pledged to spend \$125 million of their own money in this fight to find a virus vaccine as quickly as possible. Let's join them. Let's join them as a nation—Democrats, Republicans, Independents, those who vote and those who don't—all of us who understand that the sooner this vaccine is found, the sooner it is proven safe, and the sooner it is distributed, it will be the best for America and for the rest of the world. It isn't just America first. It is America involved, America committed, America willing to work with the world to find a solution to one of the greatest public health crises of our time.

I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Ms. KLOBUCHAR. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

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

IMMIGRATION

Ms. KLOBUCHAR. Mr. President, I come to the floor today in the midst of this national crisis, this pandemic, to talk about one hero among, of course, many.

First, I thank my friend Senator DURBIN for his tireless leadership on a very important topic—and that is the topic of immigration—and for his tak-

ing the lead in bringing us together today to recognize heroes in healthcare during this coronavirus pandemic.

As many of you know, this pandemic is personal for me. My husband John was hospitalized with the coronavirus not too long ago, and although he is a great person and I am so proud of him for coming through it all and giving his plasma recently, he is actually not the hero I am referring to. I am talking about an immigrant doctor who is on the frontlines of the coronavirus pandemic in Rochester, MN. She has asked that her name not be used publicly because she is applying for a green card. She came to the United States from her home country for postgraduate medical training and completed not one but two fellowships in critical care and pulmonary diseases at the Mayo Clinic, which happens to be where my husband gave the plasma, which we hope will save other lives.

Under normal circumstances, an immigrant doctor who completes his or her postgraduate training in the United States has to leave the country for at least 2 years when their residency is complete. Now, let's look at that again. They have studied in an American medical school, they have completed their postgraduate training in the United States, but then they have to leave the country for 2 years when their residency is complete, just at a time when we need more doctors and more healthcare professionals and not less. Why? Because our immigration laws require them to be outside of the country for 2 years before they can apply to come back here on a work visa. But under the Conrad 30 program, doctors—and that is named after Kent Conrad, the Senator who once represented North Dakota. Since he left, I have taken this on, with many of my colleagues, to continue this program and make sure it gets reauthorized, and we would like to see it expanded.

Why did he get involved in this in North Dakota? Well, that is because they had a shortage of doctors in rural areas, and under the Conrad 30 program, doctors who commit to caring for patients in an underserved area like rural communities or other areas that may be underserved, including urban areas, if they face a shortage of doctors, these doctors are allowed to start practicing in the United States immediately without having to wait 2 years.

I just keep repeating this. They got their training in the United States. They got degrees in the United States. That is why for years I have led bipartisan legislation—which has been endorsed by the American Medical Association, the American Hospital Association, and the National Rural Health Association—that would extend this program and allow international doctors trained in the United States to remain in the country if—if they practice in underserved areas.

It was through this program that this hero I am talking about today, this immigrant doctor, was able to stay in