

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

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DOCTOR TO CONGRESS AND SUPREME COURT  
TOILS TO SIDESTEP POLITICS AMID PANDEMIC

DR. BRIAN P. MONAHAN HAS FOUND HIMSELF IN THE MIDDLE OF POLITICIZED DEBATES OVER HOW QUICKLY TO REOPEN THE COUNTRY AND WHO SHOULD BE TESTING FOR COVID-19

(By Emily Cochrane)

WASHINGTON.—When Senator John Barrasso, Republican of Wyoming, sought guidance on how to protect his family, including his 94-year-old father-in-law, when he returned home from the nation's capital amid the coronavirus pandemic, a doctor offered him some blunt advice.

Don't go home just yet, Dr. Brian P. Monahan, the attending physician of Congress, told Mr. Barrasso, directing him to quarantine for 14 days before rejoining his family. "You're a visitor," Dr. Monahan said.

But when House Democratic leaders wanted counsel on whether they could safely reconvene in the Capitol with Covid-19 still spreading—a debate with political dimensions as a partisan divide was emerging across the country over how quickly to reopen—Dr. Monahan was less absolute. Returning to Washington carried health risks he would not recommend taking, he told Speaker Nancy Pelosi of California and Representative Steny H. Hoyer of Maryland, the majority leader. But it was up to them to decide what to do.

They opted to delay their return, and on Friday, partly because of Dr. Monahan's warnings, moved forward with plans to institute remote voting in the future.

It was typical of Dr. Monahan, the 59-year-old Navy rear admiral who is known in the halls of the Capitol as much for his meticulous attention to medical detail as he is for his efforts to stay completely out of politics.

"He is both an executive with lots of health care responsibilities—particularly now—and also has the unique relationship with members that a small-town doctor would have with the patients he knows and sees," said Senator Roy Blunt, Republican of Missouri and chairman of the Senate Rules Committee. "He's in a unique role at a unique time."

As government doctors have emerged as trusted public voices and political figures in the face of a fearsome pandemic—appearing in White House news conferences and as witnesses at marquee hearings—Dr. Monahan has maintained an uncommonly low profile.

He never issued a public statement offering his opinion on whether Congress should reconvene, although he shared his warnings with House leaders and privately told senior Republican officials that his office did not have the capacity to screen all 100 senators for the coronavirus when they returned to work. When Alex M. Azar II, the health secretary, said he would send 1,000 tests to Capitol Hill to accommodate them, Ms. Pelosi and Senator Mitch McConnell, Republican of Kentucky and the majority leader, turned down the offer, wary of the optics of receiving special treatment at a time when testing was scarce—and prompting President Trump to suggest on Twitter that "maybe you need a new Doctor over there."

Dr. Monahan, who declined to be interviewed, has been a calm and professional voice of reason during the pandemic, according to interviews with more than two dozen lawmakers, Capitol officials and medical professionals who know him. They say he has taken a personal interest in his influential clientele, which also includes the nine

Supreme Court justices, even as he fields politically charged questions about reopening, testing and precautionary measures.

Operating out of a nondescript clinic tucked away in the heart of the Capitol, Dr. Monahan and a small staff have been exceedingly busy since the pandemic took hold, consulting with lawmakers who have contracted Covid-19 or exposed to someone infected with it, doling out health recommendations in detailed memos ahead of votes, and producing a series of videos released on an internal website to educate lawmakers and their staff on how to protect themselves.

Dr. Monahan has filmed and produced the videos by himself in his office, often seated next to an elaborate bouquet of white flowers and a tiny plastic model of a pangolin, the scaly mammal that may have been an intermediary carrier of the virus.

In the videos, he typically walks through the most recent recommendations offered by the Centers for Disease Control and Prevention and demonstrates medical equipment, such as a thermometer and a variety of masks (including one made by his wife, using a black shopping bag and a sewing machine).

"He has a big job—two houses of Congress, two parties to deal with—but he's not political in any way," Ms. Pelosi said. "He treats us all with respect, and we respect his judgment in return."

Dr. Monahan in 2009 became the seventh man to serve as attending physician, taking up a position that has always been held by a Navy doctor. The House first approved a Navy officer to work out of the Democratic cloakroom in 1928 after one lawmaker died and two collapsed, with several hours passing before a doctor could arrive in each case. Two years later, the Senate extended that doctor's jurisdiction to include its own members, leading to the establishment of the Office of the Attending Physician.

The office provides care to lawmakers for a fee, as well as offering some services and emergency care to staff and tourists. The first physician, Dr. George W. Calver, who began his work just before the start of the Great Depression, displayed placards in cloakrooms and elevators across the Capitol with his nine "Commandments of Health," including "Accept Inevitables (don't worry)" and "Relax Completely."

Dr. Monahan was born in Connecticut, the son of Irish immigrants who came to the United States in the 1950s. His mother grew up in Kilkee, while his father grew up in a house with a thatched roof without running water or electricity in Lissycasey. The first in his family to attend college, he worked full-time at a supermarket while commuting in a yellow Volkswagen Beetle to Fairfield University, a Jesuit college—an education, he would tell graduates in 2011, that meant, "you are called to be 'men and women for others.'"

He studied biology and chemistry, and after graduating, joined the Navy through its Health Professions Scholarship Program, enticed in part by the offer of free tuition and a living allowance in exchange for a commitment to three years of service.

"Brian was always the smartest kid in the class," said Dr. William Dahut, a medical oncologist who spent time with him in both medical school and the Navy. "If there was a publication or data, Brian knew that data and knew that well."

In 1989, as a resident in the cardiology ward in what was then the National Naval Medical Center in Bethesda, Md., he treated a 39-year-old woman for potentially fatal cardiac arrhythmias. The patient had taken the popular antihistamine Seldane, and his contribution to research on that medicine—and its connection to the arrhythmias—later helped lead to its removal from the market.

Dr. Monahan rose through the ranks of the Navy, becoming a professor of medicine and pathology at the Uniformed Services University of the Health Sciences in Maryland, as well as participating in a number of national organizations related to cancer, oncology and hematology.

While serving as the Chairman of the Department of Medicine at the university, he received a call for a meeting in which officials with congressional leadership asked him to become the attending physician on Capitol Hill when his predecessor retired.

He has since become a fixture on Capitol Hill, participating in congressional trips and functions and releasing health assessments for presidential and vice-presidential contenders, including Senators Bernie Sanders, the Vermont independent, and Tim Kaine, Democrat of Virginia. (Mr. Kaine also asked him for "a tuneup" before hiking the Virginia section of the Appalachian Trail.)

In 2016, it was Dr. Monahan's assessment of Justice Antonin Scalia's health at the time of his death—including sleep apnea, coronary artery disease, obesity and diabetes—that influenced the decision to decline an autopsy of the justice. The Associated Press reported at the time.

"He was the one who advised me to go to the hospital," said Representative Ben McAdams, Democrat of Utah and one of the first lawmakers to contract the virus, said of Dr. Monahan. "He was clear: 'I strongly recommend you go to the hospital—this is serious.'"

The congressman has spoken with the doctor at least a dozen times since, he said in an interview on Thursday—but had yet to meet Dr. Monahan in person.

An avid photographer, Dr. Monahan's photos are present in offices around the Capitol—and he has been known to offer advice on how to best capture a scenic landmark or vista on trips overseas.

He checks in with his powerful patients frequently, including long after they have recovered.

"I've been around for a long period of time, and he just takes more of a personal interest than anyone else I've ever known in that position," said Senator James M. Inhofe, Republican of Oklahoma and chairman of the Senate Armed Services Committee, who has been on Capitol Hill for more than three decades. "He just seems to be genuinely interested in me—and he's that way with everybody."

## ADDITIONAL STATEMENTS

### RECOGNIZING THE STUDENT ARTISTS WINNING THE STATE OF THE ARTS AWARDS

● Mr. CRAMER. Mr. President, I want to recognize four talented North Dakota students whose artwork will be on display in my State offices this year.

They are the winners of the State of the Arts Awards in this year's North Dakota Juried Student Art Show. Hosted by the Taube Museum of Art in Minot, this year's contest had more than 300 entries from students across North Dakota. The four State of the Arts awards are among 116 awards presented to our State's young artists in this competition.

The students whose art was selected for my offices are: Matthew Upton, Artwork Title: "Eagle," Grade 8, South Middle School, Grand Forks; Ashlynn

Hartsell, Artwork Title: "Heart Sunset," Grade 5, Washington Elementary, Valley City; Sydney Nelson, Artwork Title: "Welding in the Fall," Grade 12, Valley City High School, Valley City, and Olivia Dorsher, Artwork Title: "Good Boring Days," Grade 11, Grand Forks Central High School, Grand Forks.

I congratulate these students and thank them for sharing their talents with my North Dakota constituents who will visit my State offices this year. They are an inspiration to all of us who appreciate the gift artists have for capturing the beauty all around us. I also commend those who judge this annual competition and the teachers and parents who have nurtured the emerging skills of these young North Dakota artists.●

#### VERMONT STATE OF THE UNION ESSAY WINNERS

● Mr. SANDERS. Mr. President, since 2010 I have sponsored a State of the Union essay contest for Vermont high school students. This contest gives students in my State the opportunity to articulate what issues they would prioritize if they were President of the United States.

This is the contest's 10th year, and I would like to congratulate the 536 students who participated. It is truly heartening to see so many young people engaged in finding solutions for the problems that face our country. To my mind, this is what democracy is all about.

A volunteer panel of Vermont teachers reviewed the essays, and chose Isabelle Hiller as this year's winner. Isabelle, a junior at Woodstock Union High School, wrote about reforming our incarceration system. Lucas Whitaker, a sophomore at Hazen Union High School, was the second place winner. Lucas wrote about youth suicide and the need for comprehensive mental health care. Maya Marcy, a junior at Long Trail School, was the third place winner, with an essay on the cost of college.

I am very proud to enter into the CONGRESSIONAL RECORD the essays submitted by Isabelle, Lucas and Maya:

WINNER, ISABELLE HILLER, WOODSTOCK UNION HIGH SCHOOL, JUNIOR, EDUCATION IN INCARCERATION

Our country's federal prison system is stuck in an ethical rut. We seem to focus on securing institutions and confining offenders like savage dogs in a pound to "protect the public," and disregard the fact that 44,000 prisoners return to society each year. The Federal Bureau of Prisons (BOP) claims that public safety is the goal of detention, but without any mental shift in convicts, all we do is press pause on their potential harm to society until their release. Currently, we have one of the highest prison populations in the world. Unless we plan to incarcerate all convicts for life, our approach to detainment should shift from 'prison' to 'rehabilitation', focusing on equipping prisoners with the skills to be mentally stable and financially and lawfully successful.

To do so, all prisoners should not only have access to academic resources, but be re-

quired to attend a set number of courses each year. Just a few decades ago, Finland had one of the highest imprisonment rates in Europe. Because of this, researchers started investigating its cause. They concluded that punishment does not help reduce crime. As a result, Finland began 'decarceration,' which was better for the prisoners and crime rates didn't increase. Without teaching prisoners skills or continuing their education, we merely take them out of their lives and throw them back with no change, and no basis to be stable in any realm.

In the United States, prisoners have a higher likelihood of returning to illegal markets and returning to prison. As of October 2017, the BOP found that only 32 percent of the entire designated inmate population was enrolled in one or more education or recreation programs. Furthermore, participation decreases 16 percent in the recidivism population. The only academic requirement in our federal prison system is that inmates without a high school diploma or a General Education Development have to enroll in a literacy program, and need to be successful for good conduct time. However, even for this requirement alone, there is a stoppage to access the program due to overflow of over 16,000 inmates—that's a lot of potential students. Plus, although mock job and resume builder courses are offered, inmates do not take advantage of them—even with the knowledge that occupational training program participants are 33 percent less likely to recidivate.

By increasing funding of education, we ensure equal accessibility to all courses for those 16,000 or more inmates wanting to take courses. Consequently the recidivism rate will reduce, decreasing our total prison population, and lower the overall government spending on imprisonment as a whole. By treating inmates like humans in their time of rehabilitation, with a lower recidivism rate, we more confidently ensure public safety when 44,000 convicts are released each year, strengthening the Department of Justice's prison system core ideologies. Although we have the right end goal, we need to rethink the process by which we get there for the sake of the public's safety and security.

SECOND PLACE, LUCAS WHITAKER, HAZEN UNION HIGH SCHOOL, SOPHOMORE

One of the biggest issues in America's society today is the mental health crisis in our youth, relating back to the lack of mental health services in our schools. In many cases, this leads to preventable death by suicide. According to a 2017 study by the American Foundation for Suicide Prevention (AFSP), suicide is the 10th leading cause of death in the U.S.

Paula Clayton, medical director of AFSP, states that 90% of youth that kill themselves have a treatable psychiatric disorder. She explains that even in suicide clusters, there's almost always an underlying disorder, whether it's due to at-home issues or anything else that may be going on, suicide is the last straw. From this information we can gather that mental health is a big part of losing students to suicide. There are several steps that can be taken to ensure that our youth are getting the help they need.

First of all, mental health professionals on campus is a priority. If funds are an issue, as they usually are, fundraisers are always an option. Schools tend to raise funds for their athletic and music departments, as well as others, but typically not for mental health. Money can be raised in fundraisers not unlike the ones that are used to raise money for extracurricular activities. This way mental health professionals can be on campus for students to speak with at any time, and hav-

ing the money for this wouldn't be such an issue. Fundraising aside, mental health services are important enough to be state/government-funded.

Another step that can be taken is the steady normalization of mental health discussions. In society today as a whole mental health is a touchy topic. But with proper approach, these conversations can be normalized so that people are comfortable asking for help without being faced with stereotypes or fear of judgment. This can start with general annual assemblies about the topic and good coverage of the topic in classes. Even a unit in health classes or professionals coming in to speak with students on the subject for a few days can be beneficial.

In a lot of cases, a student will end their life and it will result in suicide clusters, or what is more commonly known as 'copycat suicides'. It's like a trigger that sets off a line of students attempting suicide after another student succeeds. If there is ever a situation in a community where someone ends their life, schoolwide mental health screenings are crucial. There are many non-profit organizations that offer screening kits that ultimately lower suicide rates. These kits usually include short, non-diagnostic screens for signs of depression and suicide that could even be beneficial as an annual subject. These are usually completely anonymous and encourage students to seek help.

Mental health issues are undoubtedly crucial in our youth today. There are several ways we as a country can improve the quality of mental health services in our schools for a brighter future for our generation.

THIRD PLACE, MAYA MARCY, LONG TRAIL SCHOOL, JUNIOR

For many, college is a liberating opportunity to further one's academic career and pursue a lifelong passion, as well as create a substantial base to obtain an income and begin life in adulthood. As well, with the increasingly competitive workforce, a college degree is almost mandatory to make a living wage. However, accessibility to attend a post-high school institution continues to prove difficult for not only marginalized groups, but also students coming from the middle class. This difficulty arises from the injustice embedded within the education system, a lack of government responsibility, and the senseless and excessive cost attributed to college in the present day.

According to the National Center for Education Statistics, undergraduate enrollment in any post-secondary educational institution has increased from 53% to 94% in just the past 40 years. Accompanying the growth in attendance is the skyrocketing of tuition, a near 260% overall increase compared to a 120% average inflation consumer product increase, according to Business Insider. With this disparity in tuition cost vs. income, the difference has resulted in the form of \$1.5 trillion of student debt among more than 40 million Americans, as reported by TIME.

With this, why is so little of the federal budget set aside for such a vital part of our society? There is a simple solution. There is no reason, that in a time of peace, The United States should be spending upwards of \$690 billion per year on the military. According to the annual fiscal Department of Defense budget report, in the most recent proposal to Congress, President Donald Trump has introduced an almost 10% increase in military spending, increasing the budget to an astonishing \$750 billion. To put facts along with numbers, with a little over 10% of the entirety of the military spending budget—approximately \$80 billion—the United States could cover the cost of public 4-year college education for every aspiring student in the country. Putting this plan into action