□ 1845

LGBTQ+ RIGHTS ARE UNDER ATTACK

(Mrs. CAROLYN B. MALONEY of New York asked and was given permission to address the House for 1 minute.)

Mrs. CAROLYN B. MALONEY of New York. Mr. Speaker, between Florida's ''don't say gay or trans'' legislation and Alabama's ban on gender-affirming care for transgender youth, LGBTQ+ rights in this country are under attack.

Unfortunately, these attacks are not just limited to the States. Just 25 days ago, a rightwing majority overturned Roe v. Wade and indicated that contraception and marriage equality are likely next.

That is why I was so pleased that the House passed the Respect for Marriage Act today, which would repeal the discriminatory Defense of Marriage Act and ensure that marriage equality is protected across our country.

I have always been a strong supporter of LGBTQ+ rights. In 1986, I introduced the first domestic partnership legislation in New York State history while I was on the city council. We need to do everything we can to protect these fundamental rights.

WE WILL NOT GO BACK

(Ms. STANSBURY asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. STANSBURY. Mr. Speaker, it is hard to believe that in the year 2022, I rise to defend the right to access contraception. That is right, contraception.

Why? Because we have a renegade Supreme Court that has overturned a half century of settled law, stripping away our fundamental reproductive rights, and made it clear that they plan to not stop there.

In fact, Justice Thomas' concurring opinion in Dobbs makes it clear that the Supreme Court has its sights on overturning longstanding precedents that guarantee the right to access contraception and protect the right to same-sex marriage, which we just voted on.

These are basic human rights: the right to marry, the right to love who you love, the right to control your own body, the right to control your own health, the right to control your own family decisions, and your right to protect your own privacy.

Let me say it loud, and let me say it clear: We will not go back.

My great-grandmother was born in this country before she had the right to vote. My mother was a machine operator and entrepreneur. I stand here today as your Congresswoman and your committed Congresswoman to say we will not go back. These are our bodies, our rights, and we will continue to fight to protect them.

BOLSTERING EFFORTS TO BRING HOSTAGES AND WRONGFULLY DETAINED UNITED STATES NATIONALS HOME—MESSAGE FROM THE PRESIDENT OF THE UNITED STATES (H. DOC. NO. 117–132)

The SPEAKER pro tempore (Mr. AUCHINCLOSS) laid before the House the following message from the President of the United States; which was read and, together with the accompanying papers, referred to the Committee on Foreign Affairs and ordered to be printed:

To the Congress of the United States:

Pursuant to the International Emergency Economic Powers Act (50 U.S.C. 1701 et seq.), I hereby report that I have issued an Executive Order declaring a national emergency with respect to hostage-taking and the wrongful detention of United States nationals.

Hostage-taking and the wrongful detention of United States nationals are heinous acts that undermine the rule of law. Terrorist organizations, criminal groups, and other malicious actors who take hostages for financial, political, or other gain—as well as foreign states that engage in the practice of wrongful detention, including for political leverage or to seek concessions from the United States—threaten the integrity of the international political system and the safety of United States nationals and other persons abroad. I have determined that hostage-taking and the wrongful detention of United States nationals abroad constitute an unusual and extraordinary threat to the national security, foreign policy, and economy of the United States.

I am enclosing a copy of the Executive Order I have issued.

JOSEPH R. BIDEN, Jr.

THE WHITE HOUSE, *July 19, 2022.*

ELIMINATING FEDERAL EXCISE TAX ON FIREARMS AND AMMUNITION

(Mr. CLYDE asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. CLYDE. Mr. Speaker, several weeks ago, I introduced my landmark legislation, the RETURN our Constitutional Rights Act, which eliminates the Federal excise tax on firearms and ammunition because no American should be taxed on their enumerated constitutional rights.

Since this unconstitutional tax funds Pittman-Robertson conservation programs, my legislation replaces this revenue stream with a more stable source of funding by redirecting unallocated lease revenue generated by onshore and offshore energy development on Federal lands. Replacing this revenue is crucial to ensure Pittman-Robertson programs stay alive and well.

While the firearm tax revenue fluctuates annually based on firearms sales, it is also subject to the left's radical gun control agenda. You see, if we allow anti-Second Amendment lawmakers to achieve their dangerous dream of an unarmed America, there will be no firearms sold, so Pittman-Robertson funding will cease to exist, threatening wildlife conservation programs.

Therefore, the RETURN Act accomplishes both protecting Americans' Second Amendment rights and preserving Pittman-Robertson programs. We can and must do both.

HEALTHCARE SPENDING DRIVES OUR DEBT

The SPEAKER pro tempore. Under the Speaker's announced policy of January 4, 2021, the gentleman from Arizona (Mr. SCHWEIKERT) is recognized for 60 minutes as the designee of the minority leader.

Mr. SCHWEIKERT. Mr. Speaker, I have been coming behind this mike every week when we are here, sometimes for half an hour or an hour, and I have been basically taking the bark off our brothers and sisters on the left because of my belief that so much of the policy here hurts people.

I have shown over and over the working poor are getting poorer, the poor are getting poorer, the middle class—I mean, last week, I had charts here that showed that, in my Phoenix-Scottsdale area, we have the highest inflation in the continental United States. You get to work a month-and-a-half for free just because of the change in our inflation index. Even when you plug in any salary growth we have had in our marketplace, you are functionally donating over a month of labor that you get no purchasing power for, no compensation. That is inflation.

I have tried in those previous speeches to turn to my brothers and sisters in the majority, the Democrat side, and say: Hey, here are some things we could do policy-wise to take on inflation. Inflation is not just a monetary issue; it is also things we can do on policy, the fiscal side.

I thought I would go to crazy town for a moment and show some things that are optimistic. The fact of the matter is that a lot of them aren't necessarily right or left. They are just technology adoption.

We have to stop doing the dumb—sorry, I think it is a break in decorum if I curse on the floor, so you can just fill in the blank there—but the virtue signaling, like we just did a half hour ago on the floor. It is theater.

I understand the polling numbers are miserable for my brothers and sisters on the left, so they are going to throw out every virtue signaling vote, whether it is actually legal or mechanically sensible or even has any place in reality. So let's go to what is really going on and some things that would be good that we could do together.

First off, we need to understand the scale of how much trouble we are in. This slide is almost a year old, but the

fact of the matter is that we are in a world right now where your government is an insurance company with an army. It is a way to think about it. We are an insurance company with an army.

Then you start to understand, over the next 30 years, Medicare and Social Security are 100 percent of future debt. That future debt, from last year's CBO number, is $112 trillion in today's value. If you add in inflation, our calculations are now blowing through $120 trillion of borrowed money.

Now, the fact of the matter is, almost every model says we can never get there; we blow up long before that. But you have to understand, mandatory—that is Social Security and Medicare and other things that we have made that are formula. Over here is the defense, and over here are other domestic programs. Only about 13—actually, I think this coming year it may be less of everything we spend is really—it is FBI. It is environment. It is research. It is this tiny sliver down here.

The reality is, what is driving that mandatory monster that is consuming everything? It is Medicare. About three-quarters of all the spending, about three-quarters of all the debt that is coming, is Medicare. The vast majority of Medicare comes out of the general fund. It is healthcare costs.

The brain trust around here—we will do things like the ACA, ObamaCare, the Republican alternative, Medicare for All. They are all financing bills. We play games around here. It is about who gets subsidized, who has to pay.

A number of the boards that I am going to show today are about healthcare disruption to change not who pays but what we pay.

There is a reason you don't go back to Blockbuster video anymore. There was a technology revolution where you no longer go wait in line at the local strip mall, get a little silver disc, and take it home. Half the time, three-quarters of the time, you couldn't get the silver disc you wanted because somebody else already had it.

Today, you go home and hit a button, and you have dozens of streaming services. That is a technology disruption. If Blockbuster video had hired enough lobbyists, this place would have slowed down the internet to make sure Netflix couldn't exist.

You need to think about what goes on here. Let's start to walk through and understand how much trouble we really are in.

This board is a year or 2 old. You start to add in. When you do Social Security and healthcare entitlements, it is this line. The rest of the budget is actually in decline or flat. Defense is down here. You can wipe out every dime of defense, and you can't keep up with the growth of the debt being caused by Social Security and Medicare.

That is not Republican or Democrat. We got old as a society. Does anyone ever hear about baby boomers? This place basically didn't figure out baby boomers existed until the last couple of years.

It is demographics, and it is happening all over the industrialized world. When you look at our numbers—and we are working on this right now in our office—of what has happened the last couple of years, sort of the post-COVID baby bust—remember, last year was the lowest fertility rate in U.S. history. The math is getting really ugly.

I am the ranking Republican over Social Security, and we had the Social Security actuary report come out a couple of weeks ago, saying: Hey, we added a whole year. We now have 11, 12 years before Social Security runs out of cash, and we just live on the revenues.

But they missed inflation. They also screwed up, I believe, on the fertility rates, population growth.

Let's start to walk through it. If healthcare costs are the primary driver of U.S. sovereign debt, what can you and I do? What could this place do? Some of this stuff will not work, but, damn it, we need to try.

We do enough virtue signaling here where we say pretty words, and then we walk off the floor and say: Well, that is never going to actually happen, but, damn it, it is a great campaign ad.

Maybe it is time we start to try to do some of the things that are really difficult.

Some basic math—first, come down to this line. Thirty-three percent of all healthcare spending is associated with diabetes. That is type 2 and some type 1, but mostly type 2, 33 percent of all healthcare spending and 31 percent of all Medicare spending. Why wouldn't you absolutely fixate?

Look, we won't call it Operation Warp Speed because that had something to do with Donald Trump, and the left despises him, so give it any damn name you want.

But come on, people. If I came to you and said 33 percent of all of our healthcare spending and 31 percent of all Medicare spending is diabetes and Medicare is the primary driver of U.S. sovereign debt, can't we hold hands together and jump and say we are going to throw everything we have at this because we know there has been a breakthrough?

Now, it is only like a half dozen people who have been cured of type 1 diabetes, and we don't have any long-term data on it, but it is optimism.

First, I want to go over my frustration. You will see this as a policy split on the way the brains around here work differently between my brothers and sisters on the left and those of us on the right.

A few weeks ago, this place committed to give, I think it was $36 billion—might be 38—but I think I remember $36 billion of cash subsidies to Big Pharma, which they were railing against, saying they are charging too much for insulin.

□ 1900

And the way we are going to stop these crazy insulin prices is, we are going to give a bunch of cash to the very people we think are charging too much.

Does anyone see the absurdity?

Instead of creating, Hey, we are going to incentivize competition. We are going to put more people in the marketplace. We are going to make the systems work—no, because the left is addicted to handing out cash.

Well, it turns out at the same time they are doing that, not too far from here, in Virginia, there is functionally a co-op that had been put together years ago that is in construction right now that is going to bring a number of generic insulins to market at less than the new subsidized price.

And the fact of the matter is, what the Democrats did a few weeks ago in trying to subsidize Big Pharma's insulin production, may have blown up some of the economics and the financing behind this.

Why wouldn't we have said, for a fraction of the money—say we are going to set aside some money. We are going to help these folks get their permitting, their reviews. We are going to actually put FDA reviewers on site as they are building so that the day the clean rooms are up and ready, it can be in production.

Add competition, not subsidies. And it exists.

And think about this: They are talking about $55 for a whole box; $30 per vial. That is cheaper than the legislation we passed a few weeks ago where we are handing out, what, $36 billion in subsidies to Big Pharma.

You see the craziness around here. The virtue signaling was more important than actually something that made people's lives better, and actually added optionality and competition.

And this isn't a Republican or Democrat, this is a solution. But I guess there is a hell of a lot more power—maybe better fundraising opportunities—when you are handing $36 billion to the very people you rail against and then—wink wink, nod nod—here is the cash. This place has actually become perverse.

So back to where I was going. I have talked about this over and over because it is one of my personal fixations. The discussion of an end to insulin, where there has actually been—and we saw the first academic article on this last December, and we try to track it, functionally, every week, we try to follow what is going on.

One of the trials that is actually in the FDA phase is on hold right now as they are doing some safety efficacy. But the fact of the matter is, we have a half-dozen Americans, who through a stem cell and now the newest ladle is they are taking it and apparently tagging it with a CRISPR mechanism, so the body doesn't see it as foreign. The elegance of that is that means that this mechanism works.

You can do a production line of these insulin-producing cells—the islet cells. I always get made fun of because I mispronounce that. But the ability to get someone's body to produce insulin again, why isn't there just excitement around here?

Remember, 33 percent of all healthcare spending is associated with diabetes. If there is a potential, just a potential, we can cure our brothers and sisters—and yes, it is going to cause all sorts of difficult decisions around here when you start dealing with type 2. I represent the population with the second highest per capita population of diabetes in the Nation. My Tribal communities, Salt River Pima-Maricopa, amazing community; smart, well run. And genetically, they are number two and their sister Tribe is number one, they are a population that has diabetes.

Next year, we are going to be doing the farm bill. Within that there will be nutrition support. One of the ways this place has always passed the farm subsidy bills and nutrition support is they merge them together.

How about if I came to you and said, Let's just have a really uncomfortable conversation instead of the EBT card—which is sort of the modern-day food stamp. If you have someone who wants to sign up for the program, saying to them, We are going to try to cure your body and get your body to make insulin again, but you have to do the nutrition program with us. And that may be 2 years of a food box showing up three times a day at your house, where it is microwavable; Lyft can drop it off.

But what is more elegant? From a society standpoint, what is kinder is, Here is an EBT card, go to Jack in the Box—I love the onion rings—and you can use the EBT card at Jack in the Box.

Is that really making society healthy? Better? Because we have also been doing some experiments in the Joint Economic Committee, just trying to do math. And starting to realize health—the fact that you have a household member who has severe diabetes that may be heading to get a foot cut off is a component in income inequality. I thought that was the holy grail to my brothers and sisters on the left. Let's try to make our brothers and sisters healthier.

And the fact of the matter is, if there is something going on out there in the literature, why wouldn't we take some of the dollars we spend here, the things we put into pure theater, and say—this science is already in phase 1. Whether it be through tax incentives, whether it be through other types of incentives, how do we get this into the field? And then we, as a body, have to have really difficult discussions because you're not going to give someone stem cells to get their pancreas to start producing insulin again if they are still morbidly obese.

I mean, this is a big boy conversation—a big person conversation, knowing we are not allowed to use gender identity anymore.

But what is merciful? What would be great for the budget? What would be great for society? What would be great for productivity?

Because at the end of the speech, my hook is going to be inflation is killing our country. It is blowing up the future of young people. It is eating the savings of older people.

How do you get productivity back in the society? It is actually disruptions. It turns out if you can disrupt things like this, you have this virtuous circle. And how many times does this body even talk about doing big things that are actually really good for everyone.

And if it is true, you would think the majority here, who basically controls all the power, one of the first things they would have done is invited the researchers who had gotten together with CRISPR and the stem cell and brought them in here and said, Let's have a conversation.

How real is this? How far is it?

What resources, what incentives, what things could we do in the capital stack to get money to invest in it?

What could we do as a body?

Because if this is really 33 percent of all healthcare spending is associated with diabetes. Could you imagine? Even if it was a fraction of that population of our brothers and sisters, we are removed from the suffering.

I have pitched over and over and over to people with power in this body saying, Invite the researchers here. We need to understand this. And instead, over and over, my brothers and sisters on the left seem to say, no. We care more. We are going to build more diabetes clinics. We are going to build more community-based clinics.

And I am saying the disruption is the solution. Cure the damn disease. It is going to be hard. There will be things that will go wrong. There will be people who will call us names because we are trying to say, Well, we need to do the nutrition, and maybe some exercises, as we get ready to make this investment in you. But it is the moral thing to do for our society, and also economically really smart.

Let alone, also think of the economic expansion we get when we live in a society where we have so many of our brothers and sisters who can't participate in the economy because parts of their lives are miserable, their health issues. The cure is the solution. Patching people up is—it may be great virtue signaling but it is not that merciful.

So that is sort of the theme. I am going to walk through these boards.

Now, let's go through other things we could do as a society to disrupt.

So how many times have we all been here on the floor and we hear about the Build Back Better? Yes, we can spend more money and that would be good for inflation. And you sit there and scratch your head and say, My elementary school economics teacher was wrong. But they are working on it in the Senate.

We are being told there is a pared back version coming. In that pared back version, would you believe there is a provision that you can't automate the ports in California? Huh?

You have to back up and think about this. So I have a White House—and some of my brothers and sisters here on the left, inflation isn't their fault. It is not the incredible amounts of spending; the trillions of dollars being handed out to people without any requirement for them to participate in the society or the economy. It is not their fault. It is supply chains. And one of the first things they really want to do is a piece of legislation that would restrict automating the ports. Huh?

There is a worker shortage. There is a technology shortage. We have ships parked, but the longshoremen write checks to Democrats so they will slow down—you can't have it both ways.

So the fact of the matter is, the language is there. I have had a number of people look at me and say, Oh, that can't be. No? That slipped in, and it is still over there in the Senate draft. This is absurd.

I will argue the disruption is the cure. So it is not only automating the ports, it is the second half.

There are some brilliant articles out there with some technology now that say that the rail spurs in the Port of Long Beach, the Port of Los Angeles—some of the others—and these are some former space engineers that have designed this—you take the container, you park it on the electric rail car, and you tell it where to go. And it just goes automatically to the spur, to drop it off, this and that.

Functionally, you go from an automated port to an automated travel delivery system. That is forward thinking. That is policy that is rule set that popped that productivity, popped the problems in the supply chain. Ta-da. You did something positive, and when you do that, you also take on inflation.

And instead, this body is trying to stop the very disruptions that would make our lives better. They are pandering to a group that writes them a check.

But it exists. I mean, there are fun articles about these automated freight train cars. And they are electric. You just, boom, put the container on it and tell it where to go.

Look, we have a demographic crisis. We have trouble with workers. We have all these things. The disruption is the solution. Do you see any attempt around here? Instead, we have debates here where we sound like it is still the 1990s.

So one of the other battles here is energy prices. And I have had an ongoing, reasonably friendly discussion with a Democrat who's from back East, who is a friend—and I will call him a friend: Oh, we have to stop hydrocarbon. Oh, natural gas isn't this clean. Oh, David, you don't understand.

Yes, natural gas when properly burned for energy, those things may be 40 to 50 percent cleaner than other fuel sources, but you have methane leakage.

Okay, I'll do that with you.

And we know the methane math on the latest calc is like 8.79 to 1 in its greenhouse effect if you do the math. But it also has—as we know, the new math has a much shorter half-life. That's why so many of the global warming models from a year or two ago are actually wrong because we are now recalculating methane.

But it turns out that some experiments have been going on the last two years of, functionally, a solution for capturing methane, particularly in oil and gas and pipelines. And I am going to be a little silly here because it is a dirt-cheap solution. It is clay. I think it's a copper-oxidized clay. It's like a sponge for methane.

Maybe it works, maybe it doesn't. But there are a couple good academic papers saying, Hey, you do realize we could functionally take kitty litter, pack it into wellheads, pack it into the pipe fittings, pack it into the other things, and it is a methane sponge.

Why wouldn't we take a run at this? Instead, the Malthusians around here that basically run this place, say, No, we are going to restrict ourselves because, oh, God, we can't have access to this.

No, the solution is in the disruption. I am just excited about this one because it is super cheap. It is not some of the grandiose, build a new regulatory body, build an inspection, build these huge tankers that sit on top of the wellheads and capture the methane. Turns out it could be functionally copper-oxidized kitty litter.

Does anyone around here read?

So I have had a proposal here, and for anyone who is bored out of their mind, go to Schweikert environmental crowdsourcing. There is a YouTube video I put together a couple years ago that basically said, look, we all walk around with these super computers in our pocket. What if I came to you tomorrow and said, Instead of the regulatory model we use right now to protect air quality and you can use those for water and other things, where functionally you fill out pieces of paper, you take them to your local regulatory body—your EPA, county air quality, whatever you have in your area—and they stick it in a file cabinet.

And everyone knows that file cabinets full of pieces of paper make the air quality better, right? No, it's documentation so one day someone can sue you.

□ 1915

What would happen if I came to you and said they exist today and they are not expensive. If you had a couple thousand people in your marketplace, a few thousand—something like Maricopa County, which is huge—had a little attachment on their phone and it does air quality samples?

You crowd source the problem. You no longer need people filling out pieces of paper for their permitting because if someone screws up, you catch them immediately. The elegance of this is the clowns that may be painting cars in their backyard behind your house, they are never getting a permit, they are never getting caught unless you had a crowd source model where the UPS driver, the soccer mom, everyone else is walking around with a little thing attached to their phone or a Bluetooth on their car or attached on the side.

The beauty of these things—they do PM10, they do volatile organics. There is even one out there, a little panel, that actually does radioactive, which there was a discussion of putting those on UPS vans.

The solutions are out there. Think of how different the world would be. I want to open up a motorcycle paint shop. I have to go get an engineer to stamp my air quality permit. I have to go get the scrubbers. I have to do this, do this, do this, do this.

What if the solution is, hey, here are the things you have to do. You don't need a permit because the moment you screw up, we catch you that same day. It is a living. Do any of you use Waze when you go driving? It is a living crowd source model. These ideas exist out there.

In Detroit where they had the water issue. There is a little ring out there that is like $39. If you put it under the sink, you would have caught it. You could have crowd-sourced the information and not gone through multibillion dollars of misery. The unwillingness of this place to understand what century we are in. If someone gets bored, take a look at that YouTube video, it sort of explains the concept.

For those of us in the West, this is a crazy one but it's worth thinking about. Maybe it works, maybe it doesn't. Desalinization. You know we know there is a number of desalinization plants along the coast of California. There are even some discussions of some in Mexico and other places and around the world, but there is always an issue of the brine. You have got to really spread the brine out, so you don't create intense areas.

Now, there are some researchers out there that are going, hey, that brine—did you know, there may be all sorts of really neat stuff in that. There may be rare earths. As the desalinization plant is mining potable water, we could be mining the brine for rare earths.

I am just begging the people around here—think—think a little more creatively because this place is absolutely dystopian anymore, and there are solutions out there. Is this Republican or Democrat?

I am sure someone will make a contribution to one side or the other and then immediately the other side will say, oh, that is a Republican idea. The fact of the matter is it is worth at least understanding.

It turns out, I have an absolute fascination with carbon capture. There is actually a tax credit in those things that I am the lead author on that is out there in law and other things. The break-throughs—it turns out we are getting really good at this.

There is ambient where they are actually pulling in the air. There is point source. There is a power generation outside of Houston called an Allam cycle where they actually blow up the natural gas, and they don't heat up steam to throw the turbine, they use the actual gas from the burn. It has no smokestack; they capture every bit of it.

We are actually getting really good. And all over the world there are researchers spending time on this. There was even an amazing paper about 2 years ago, MIT came up with a nanotube electric-charged plate that goes on, off, on, off, but it actually crashed the cost of capturing—and they were doing it ambient. They were just blowing air across it, and it crashed the energy to do carbon capture.

Okay. So my brothers and sisters on the left say they are the ones that care about the environment. Okay. But we are the ones actually doing the policy that is practical that works, that we don't actually put ourselves back in the stone age, and options to grab the carbon.

There are multiple versions of this. This is actually—there is an actual facility, and I think this one may actually be in Canada—and, yes, it has Gates Foundation money and others. This is an active ambient capture. It apparently does amazing things. This technology is only a couple years old, and it is already out of date.

The technology is moving so fast. This isn't pie in the sky. This isn't theoretical—they exist. What could we do policy-wise other than me doing the 45 on the tax code to try to say, hey, we are going to give you a tax credit for carbon you have captured if you sequester it or put it in concrete or other things.

Are there things we could do?

This becomes a moment where those of us who believe the use of hydrocarbons is basically keeping a society prosperous. My brothers and sisters on the left that want to eliminate hydrocarbons—maybe there is a technology solution that brings us together. It is worth understanding and working on.

How many detailed hearings have we seen here where we brought in the engineers?

Not the talking heads, not the lobbyists. Not another idiot doing virtue signaling for us, but the actual engineers. You know, those types where you have to have a conversation where you own a calculator. This stuff exists.

There are other revolutions happening around us that are incredible opportunities—very scary, very wonderful. We are going to do the farm bill next year. I grabbed this article almost 2 years ago and we have been tracking it, and they have had some success. I

am going to geek out for a couple seconds. I will try to do this as quickly and lightly as I can.

Do you all remember your high school biology class—C4 plants, C3 plants. These plants actually need a carbon molecule to grow because they turned it into a sugar. But the dear Lord—there is actually this weird little glitch where sometimes the plant grabs an oxygen molecule, and it goes: Oh, I don't need this. And it spends its energy purging the oxygen molecule and going back trying to get a carbon.

What would happen if researchers—through a little synthetic biology—could tweak it so every time it grabbed the carbon?

Some of the researchers think for some plants that could be a 40—now, on some of the other articles I am reading it is down, in some others plants it might be in the 20s, 25, 28, there is a 30. Think about it.

If I had a crop that could grow 40 percent more efficiently—40 percent less land, 40 percent less fertilizer, 40 percent less water. The disruption to the world—you basically just fed the world for the next century.

Worldwide agriculture functionally produces 2.2 times more global greenhouse gases—I guess is the term the left uses—than every car on Earth—2.2 times more. So if I had a 40 percent improvement, just this synthetic biology on plants would be equal to removing every car off the face of the Earth.

Now, we all know the math is going to turn out that way—yes, there will be lots of people who resist it because they are scared of technology. Why wouldn't we have this part of our conversation if we care about—those of us that live in drought-prone areas—care about the environment and care about feeding the world.

This is the future. What is the chance anything like this will be part of the farm bill next year?

Pretty much zero because it is a disruption of technology, and this place basically has become a protection racket. We protect incumbents. Not incumbent Members of Congress, incumbent business models, incumbent associations, incumbent bureaucracies. We don't ask them to leap into the future. This is the future.

This one I use on occasion, it is fairly snarky, but I think it makes a point. How many care about plastic in the ocean? Oh, the hands go up. Here in D.C. I don't think we are allowed to use plastic straws because everyone knows D.C. plastic straws were critical to ocean-wide plastic except there is almost no plastic from North America in the ocean.

It turns out that 90 percent of the plastic in the ocean comes from 10 rivers—8 in Asia, 2 in Africa. Ninety percent of the plastic in the ocean comes from 10 rivers, 8 in Asia and 2 in Africa.

If you actually cared about plastic in the ocean, would you be writing your checks—or in this case, your credit card—to groups that go out and say, we are going to go out and capture plastic. Great. Or wouldn't we adjust some of our technical foreign aid, our response in environmental aid? Saying, we are going to go to those 10 rivers, 8 in Asia and 2 in Africa, and we are going to do something like we are going to create a value for the plastic. All of a sudden, I have an economic solution. Instead of dumping it into the river, we are going to collect it.

See, this is an actual solution. The problem is the solution takes away the virtue signaling. This place lives on telling great stories demonstrating you care. It doesn't give a darn about actual solutions. Ninety percent of the ocean plastic comes from 10 rivers. Go to those rivers and let's deal with it.

Another thought experiment—and now I am going to do a lot more on healthcare. I accept a number of these will not work. I accept a number of these will make some people angry because it blows up their business model. Remember, money, power, vanity, but most of the time D.C. is about the money.

What is the single most powerful thing this place could do tomorrow?

If I said between now and the end of the year, I want to have a disruption in the cost of healthcare. But, David, that is only a few months. D.C. is not capable of actually setting off a revolution in a few months to do something powerful for the price of healthcare.

What if I came to you tomorrow and said: The models say—the research says—and this one we have known for years and years and years and years—16 percent of all healthcare spending is actually people not taking their medicine—not taking it properly or not taking it at all.

If you have hypertension and you don't take the calcium inhibitor. You have high cholesterol; you don't take your statin. It turns out you stroke out; you have a heart attack; you cost the system a fortune. You stay on your meds—actually, they are cheap, they are safe, they are very effective. We have decades and decades of history on their effectiveness; you stay healthy.

It turns out you could actually just say for certain types of health pharmaceuticals, put the 99 cent pill cap on it that beeps at you when you didn't open it today. If you want to do the fancy one—this slide's a little year or two old—there is the fancy one where the pill cap actually talks to your phone and the phone tells you you didn't take it.

Mr. Speaker, 16 percent of U.S. healthcare costs—it would be $570 billion a year—so over a half a trillion dollars a year. What would happen if tomorrow this place got together, and said: Hey, for some of our populations that we know are likely to miss taking their pills, or grandma is having some cognitive issues, or someone is just busy in their life, let's spend the 99 cents on the pill bottle, give them the thing that beeps when it is not open.

If that actually helped even a fraction—maybe it is not 16 percent, but what if we were able to do half of that? We are talking hundreds of billions of dollars. Is this Republican or Democrat?

It smacks us in the face. There is just no constituency here lobbying or writing us checks for this.

The solution is in the disruption. The disruption is part of the technology.

□ 1930

Before I do this slide, I need to tell a story and see if I can put this in perspective.

Mr. Speaker, there is a reason I seem to just annoy the hell out of so many folks here because this is a challenge to how we think. A few years ago, I was reading one of my crazy blogs. It is a material science blog, oddly enough. A professor, I think it was Duke, I may have the university wrong, she had been working on this breath biopsy where you could put breath across it, and it could designate if you have this category of flu. The model basically said that once we know that category, then we can bounce off your medical records on your phone, and it can just automatically work your antivirals. It has been worked on and worked on.

Think of this, Mr. Speaker. It is a flu kazoo. You blow into it, and it can designate, and the latest models and experiments now are picking up dead cancer proteins. When a cancer cell dies, it throws off a DNA strip. Some of the sensors are getting so good they can actually identify them.

What is the problem with something like a breath biopsy? I wish I had some brothers and sisters here in the body to yell at me. What is the problem with it? You blow into it, it bangs up your medical records, and it orders your antivirals.

What is the problem with it? It is illegal. I am allowing an algorithm to prescribe. The Social Security Act says I will see a doctor, not an algorithm. Now, the fact of the matter is wink, wink, nod, nod, if you have something with a diabetic pump, they already have an algorithm that is prescribing, and they have been doing it for years. This is not new. If you had it certified by the FDA—and there are algorithms certified by the FDA—why wouldn't we make them reimbursable?

Why wouldn't we do some simple conceptual ideas that you could have technology in your home medicine cabinet that you lick, you spit, you urinate, or you blow into—whatever it is—and you can monitor your health? That technology exists today.

One of the reasons the capital stack won't invest in it is it is functionally illegal, and they are basically betting that the lobbyist armies will keep it illegal here because—I have to be honest—it will change the foot traffic in many of our medical facilities. It will also save society from the debt implosion that is being driven by future healthcare costs.

So, you have to decide: Are you going to save us? Are we going to protect the world from disruption?

It is back to my Blockbuster example. Should Congress have stopped Netflix or streaming and protected the renting of the little silver disks? That is, functionally, what we do in healthcare.

There is technology out there coming. The newest version is of folks with the Apple watches. The reality is if I can know your O2, your temperature, your pulse rates, then the algorithm may say: Hey, you might have a problem here.

What happens with the new versions that are stunningly accurate? We have math for a number of these that are more accurate than a human. Yes, it is scary. Disruption always is. If we don't have a disruption in the cost of healthcare, then there is a technical economic term: We are screwed.

There are lots of these at-home biopsy-type tests. You have all seen the one because it had some great pop culture last year of an iPhone app where you could zoom in on a mole, and the algorithm behind it was stunningly accurate: Yes, you need to get that thing cut off because that is skin cancer.

Why aren't we promoting things here?

Mr. Speaker, I have been at war since I got here on telehealth. I had a piece of legislation over and over, and I could never get a hearing on it for telemedicine, telehealth, until the pandemic hit. Then, they functionally took our language—I was actually doing this with a couple of my Democrat colleagues. They took our telehealth expansion language and put it into law for the pandemic. Mr. Speaker, do you know that the expansion of telehealth goes away the day the pandemic is declared over?

The argument used to be: Well, David, you don't understand. Seniors aren't going to figure out how to hit the button and use FaceTime to talk to their doctor. Seniors aren't going to figure out how to put something on their wrist or on their chest or blow into it. You don't understand.

It turns out they were wrong.

I am looking forward to this body deciding: Are you going to be with the lobbyists or the expansion of access to healthcare through telehealth? Because this goes away when the pandemic is declared over.

Here is another example. It is just another breath biopsy. These things exist. They have put them together. What is fascinating is this slide is about a year or so old, and it keeps going and going. They are working now on a number where it is a breath biopsy to detect different types of cancers.

Why doesn't this place find joy and embrace the solutions?

Mr. Speaker, you start to understand that, outside the folks that politicized messenger RNA and didn't understand the mechanisms and all those things—but we are getting so close to treating so many diseases, whether it be my fascination with the stem cell being able to set off insulin production again, to the fact—I am going to show a number of slides here where an incredible number of the cancers, particularly soft cell, we can set off your body to fight them now using messenger RNA. We are getting right on the cusp.

If I came to you right now, Mr. Speaker, and said: Hey, malaria, certain cancers, HIV, influenza, heart disease—the heart disease one is fascinating, teaching your body through a messenger RNA how to build certain protein stacks to help rebuild heart damage. It is here.

How much discussion do you have in this body? How many experts have we brought in saying that technology is the cure if healthcare is what is chewing us alive? Do we do another bill on who is going to get subsidized and who has to pay? Do we do another group saying: Oh, there is a group out there we are not taxing enough. We need their cash to throw into Medicare because we all know the crisis that is happening on Medicare financing.

Why is this place incapable of having a conversation about crashing the price of healthcare?

I am going to go through a number of these because I collect these. I spend 10 hours a week on an airplane, and I get bored easily. I read a lot of things. I keep coming across these.

This one is really interesting. It is immunotherapy for brain cancer. Now, it is not the solid tumor, but they think they have had amazing success on this. This was one of those we didn't think we could do anything with, and it looks like there is an immunotherapy for brain cancer.

Here is one. I have not read the details on this because I just saw this on my flight, I think, a couple of days ago. A drug cures 100 percent of colorectal cancer patients in a small initial trial.

Maybe it works, maybe it doesn't. But this is what we need to be fixating on. Instead, what we are going to do here is watch the bill that comes from the Senate, where they are going to blow up the capital stack for the very research that finances these sorts of things.

A couple more, just for the fun of it. Biotech—and I think this one is already out in phase one, in multiple phase ones; I don't know if it has reached phase two—malaria. You do understand, Mr. Speaker, for much of the world, malaria is just a brutal, vicious disease. I saw some data a couple of months ago. They were only about 30 percent effective. Believe it or not, that is actually terrific because if they have hit 30 percent effective, we can through adjustments and through other factors. Could you imagine the amount of misery you could end in the world? They could get a 50 percent effective vaccine for malaria.

Instead, we will do certain types of foreign aid. Instead, it turns out one of the most powerful things we could do for the world is our intellectual property, fixing what we incentivize, and it is not handouts of cash. It is to fix the regulatory model here, fix the capital stacks, fix the tax incentive, and you do amazing things for the world.

I did a presentation on sickle cell anemia last year, and I got a little over the top on getting a little technical. I used to have about a dozen slides on this one. But it turns out we think we know how to do a certain type of gene editing with a couple of other optionalities for sickle cell anemia, and this one is out there in trials.

Isn't that a moral thing to do? The fact of the matter is, do you try to help people maintain their misery? Or when you actually see data that says there is a path, do you pursue the cure?

My argument here is the cure is better for us as a society financially, productivity-wise. Just from a purely ethical and moral standpoint, removing someone's misery is a pretty neat thing to do.

This is a heart disease one. I just found it fascinating that through a functioning CAR T, which is the derivative of the mRNA, you are setting off your body. In this case, instead of it going after a disease, it is actually repairing damage. I think this one is coming out of the Boston area. There is a reason that these folks have Nobel Prizes.

When you start to understand these infectious diseases, herpes, diabetes, the other things, we are on the cusp of having cures, and the misery that I believe the last 16 months of really bad policy here have brought to this country, the damage inflation is doing, the damage that is going on at the border of my State, the homelessness, the fentanyl, imagine, Mr. Speaker, if this place would set aside some of the virtue signaling legislation—oh, this is going to get the other side in the next legislation; oh, that just writes a great ad—and you brought in the engineers and experts in the different areas that we all claim to pretend we know something about and say: Here is what the future looks like, and if we get it right, the future is amazing.

A little while ago, Mr. Speaker, you saw a little girl behind me. I have a 6-year-old. Two weeks ago, out of nowhere, my phone rang, and the birth mother of my little girl had a little boy. Now, my wife and I have a little boy. I have a 3-week-old.

It is my primary reason for running again. I have to find a way to beat this body into submission to understand there are good things out there, but it doesn't work into our current political construct. It doesn't work in the way this place raises political money or keeps certain friends. The cures are disruptive, and disruption is the future.

Disruption makes society healthier, better, wealthier, and more productive. That productivity solves the inflation problem, and it solves so many other things.

How do we move this body to stop being terrified of its own shadow and saying, screw it, we are going to do what is right, not necessarily what is easy or political?

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

CHANGING MINDSET ON MENTAL HEALTH

The SPEAKER pro tempore. Under the Speaker's announced policy of January 4, 2021, the gentleman from Illinois (Mr. SCHNEIDER) is recognized for 60 minutes as the designee of the majority leader.

Mr. SCHNEIDER. Mr. Speaker, I rise today to talk about mental health in general and the need for a different mindset about mental health and care in this country specifically. I stand up tonight for the countless family members, friends, and neighbors across the country as they endure struggles with mental health, either for themselves or for a family member.

The number of Americans battling mental illness or disorder is not small. In fact, over one-half of adults will deal with mental health issues, and one in five children has or will have a debilitating mental illness.

Suicide is now ranked as the second leading cause of death among children ages 10 to 14. Think about that: Suicide is the second leading cause of death.

This is more than simply heartbreaking. We have a problem. That is nearly one death every 11 minutes.

Suicide is a tragic outcome for people dealing with mental crises, but across the country, there are so many dealing in other ways, especially in the midst of this pandemic: working parents trying to make it through the day juggling; parents not working, trying to find ways to make ends meet; kids in remote school losing the opportunity for the social-emotional learning that is so critical for their development; and families juggling remote work and remote school at the same time. All of these have contributed to what is truly a mental health crisis in the country.

In fact, as we think about it, in the same way that young kids and babies born during the Depression were forever known as Depression babies, it is very likely that this generation enduring the pandemic will be COVID babies throughout their lives. It will have an impact.

□ 1945

Beyond that we have the issues of mass violence. I live in Highland Park. Two weeks ago, we experienced something that no community should ever have to go through, but, unfortunately, too many communities have and continue to do so.

Highland Park, Uvalde, we can go back to Sandy Hook, and so many others, it is too long a list to give a comprehensive naming of every single community that has suffered from mass violence.

But, at its core, there is something about these kids committing and perpetrating these heinous crimes, monstrous crimes—if we can reach them at an earlier age, maybe we can reduce some of that violence.

Nor is this an exhaustive list of all the things, all the aspects of mental health that affect people.

We know that the pandemic has made all of us painfully aware of the inadequacies and inequalities of our mental health system. Too late in the process, our system steps in to deal with crises, rather than working on helping people have a strong and confident, healthful life and tackle challenges as they occur. We should be providing holistic mental healthcare and provide support early and often.

At the baseline, Americans are experiencing anxiety and depression at higher rates, and the number of services available just aren't keeping up, putting a crisis on top of a crisis.

For those already suffering from mental health issues, the pandemic has increased their symptoms, and experts worry that we will deal with the stressors and effects long after the official end of this pandemic.

Everywhere I go, in my district, and around the country, I hear stories, some heartbreaking, some just simply frustrating, about people's struggles getting care for themselves and their loved ones. It is not a new problem.

In fact, sharing just a couple of personal stories, my first experience of tragedy in the context of mental health, my best friend as a young child in elementary school, was a boy named David Segal. He was special, kind heart, a brilliant young man. As he aged, we moved apart in middle school. And then I learned that, at age 21, he took his own life.

His parents were told that he felt as if he was locked in a box. He was so smart, and he could see the possibilities available to his friends. He wanted more than anything else what he saw everyone else had, but he knew that it would never be available to him because of the box in which he was locked in. His pain was unbearable and, at 21, he took his life.

Years later, I lost a cousin, Jeff, whose pain was also all-consuming. He tried many times to escape his pain. His family tried to help. We all tried to help. He sought therapy, but, again, that pain was so all-consuming that, ultimately, as a relatively young man, he died by suicide.

Let me come back to the present moment. I have heard from the Ann & Robert H. Lurie Children's Hospital of Chicago that the pandemic has increased the severity of the mental health crisis in children.

During the pandemic, suicide attempts jumped from a pre-pandemic level of two to three per month to two to three each and every day. Before the pandemic, Lurie Children's would get maybe 50 calls a week for new appointments. At the height of the pandemic, they were receiving 50 calls every single day.

A third of clinicians are reporting a 3-month wait time for an appointment, if they even have the room to begin with. In many places, the wait is much, much longer. This massive mismatch of supply and demand impacts the quality of care those with appointments are able to receive.

Providers have empathy and compassion fatigue, emotional exhaustion, and are less personal and less connected with their patients.

Older Americans, some of the most vulnerable in our society, are at an increased risk. High levels of isolation increase their risk of depression, cognitive decline, and dementia. Already, 20 percent—20 percent of those 55 or older typically experience some form of anxiety and depression to severe cognitive impairment.

Additionally, mental health does not only afflict those who have been diagnosed, it touches many other parts of our society. In 2008, Thomas R. Insel, then the leader of the National Institute of Mental Health, estimated that mental illness costs our economy about $193 billion—$193 billion each year in lost earnings.

8.4 million Americans are providing about 32 hours of uncompensated care per week to those with mental healthcare needs, whether family or friends. Leaving mental illness unaddressed results in the increased incarceration of people with unmet mental health needs. Those dealing with stressors related to mental health are left more susceptible to the overuse of drugs and alcohol.

Despite the pervasiveness of mental health issues, less than half of adults with any mental health condition received treatment in 2020. For Americans of color, the rate of those getting treatment is even less than the national average.

I find the current landscape of mental health in America simply unacceptable. Every day we fail to take strong action to bolster mental healthcare services is another day closer to failing our friends, our family, our neighbors. That is why making access to the appropriate mental health resources cheaper and easier is critical.

I want to share with you one example of how the mental health crisis affects one of our most important population groups, our youth.

Last year, I received a letter from a high school senior outlining her findings about the disparities in mental health resources at her school. She highlighted the value placed on new gym flooring and new scoreboards, but the lack of investment in mental health counselors.

She shared that they lost a classmate early in the year to suicide. She had also become more aware of so-called suicide websites and social media's influence on our children's mental health.

I applaud the initiative of that high schooler writing to me and voicing her concern. Each of us has a responsibility to not only reach out for help, but to advocate for our neighbors who feel powerless and are left to struggle.