

has been provided to Supreme Court Justices. Our goal has been to understand how specific individuals and groups with business before the Court have used undisclosed gifts to gain private access to Justices—access not afforded to others.

For months, Crow has refused to fully comply with the committee's requests, and Leo has completely stonewalled the committee. Only now, under threat of subpoena, Mr. Arkley has stepped forward, and we are looking forward to continuing our conversation with him this week.

The fact that we have to go to this length is unacceptable but necessary. The Senate and the American people deserve to know the full extent of how billionaires with interests before the Court use their immense wealth to buy private access to our Supreme Court.

That is why, on Thursday, the Judiciary Committee will vote to authorize subpoenas for these individuals. The vote is a critical step in the committee's exercise of its constitutional right and duty to conduct oversight of the Federal judiciary. It is critical to the committee's effort to restore the Court's reputation. The highest Court in the land should not have the lowest standard of ethics.

This is not a fight I wanted, but now that it has come to this, the Judiciary Committee will not back down.

Most Americans are shocked to know or to learn that the nine Justices on the Supreme Court are the only high-ranking Federal officials in the United States of America who are beyond the reach of a code of ethics. How do you explain that?

How can you explain that every Federal judge in America is bound by a code of ethics except for the nine Supreme Court Justices?

What is so special about them? The Constitution makes it clear that we don't have royalty in this country. They are acting like they belong to some legal fraternity or sorority. That has got to come to an end.

When you look at the situation, Members of Congress are held to standards—and I am not complaining. I knew what I was getting into when I signed up for this job—held to standards of disclosure and limitation on gifts.

I cannot tell you how many times I have said to a person: Is this worth more than 50 bucks? If they answer: Well, maybe, it might be, I say: Well, keep it and thanks for thinking of me.

That is the kind of thing that just becomes a routine part of public service. These lavish gifts, particularly from individuals who have business before the Court, are just unacceptable and inexplicable.

It is important for us to have a response when people ask: What are you doing to clean up things at the Supreme Court?

The first thing we did, I think, was the responsible and respectable thing to do. We invited the Chief Justice of

the Supreme Court to appear before our committee and tell us his thoughts on the subject and what he believes should be done to deal with this bad publicity and these disclosures. He declined the invitation. I don't hold it against him. He explained, in my presence, a few weeks ago why he did. I understand it. I disagree with it, but I understand it.

But 11 years ago, was the first time I contacted the Chief Justice and said: This has got to come to an end. Tell us what you are going to do about establishing a code of ethics on the Supreme Court. Eleven years ago and nothing—nothing—has happened since.

I want to salute and commend my colleague Senator SHELDON WHITEHOUSE of the State of Rhode Island. He has been a leader on this topic in the subcommittee which he chairs on the Judiciary Committee, and we have co-operated in this effort.

We will meet this week. This is not the first time the Judiciary Committee will be asked to issue subpoenas. They happened before under Republican leadership as well in a much different type of case. But the fact of the matter is, we have tried carefully and studiously to come up with this information the right way, and, unfortunately, we have not gotten the kind of results we wanted. A subpoena, we hope, will jar loose the information to explain exactly what happened with the gift-giving by several individuals.

#### ISRAEL

Mr. President, one of my extraordinary friends in Chicago is Dr. Sahloul. Dr. Sahloul is a Syrian American. He is an exceptional man, and his wife Suzanne is also an extraordinary person. He has created an organization called MedGlobal. The best way to summarize what it does is to think of doctors without frontiers and how they travel across the world and go to some of the most dangerous places and volunteer medical assistance. Dr. Sahloul, through MedGlobal, has done the same thing.

Many of the doctors who volunteer for MedGlobal are Muslim and from the Middle East themselves, but they can be found in any spot in the world. He calls me from places, and I have run into him in places and seen him. I just can't believe what this man does. He risks his life to go to war zones to treat people who have been injured. I think so highly of him.

He has a friend in Gaza—a friend, a doctor—who was highlighted in the New York Times several days ago, Dr. Hussam Abu Safiyya, the director of the pediatric ward at Kamal Adwan Hospital. Many of the casualties from the Jabalia strikes were taken to that hospital. I read this article, and I have reread it many times. I try to understand what is happening on the ground in Gaza. Let me start at the beginning.

What the terrorist group Hamas did to Israel was an atrocity. The attack on October 7 cannot be rationalized, explained, or, for that matter, forgiven

for what they did to the innocent victims in Israel. The fact that Israel is defending itself is perfectly right in my eyes. They have a right to do that. Of course, Hamas continues to be a terrorist threat to them, and to try to stop Hamas and this activity is understood.

At the same time, it is important that they accept the standards which civilized nations accept even in the conduct of warfare. That is the message that has been delivered by President Biden and again by Antony Blinken, our Secretary of State, over and over: Be careful that your ultimate reaction is consistent with the threat and used to the basic standards of civilization. That has been a request over and over again.

The reason I come to the floor is because I got a call this morning from Dr. Sahloul, and he spoke this morning to Dr. Hussam again about the situation at this hospital. What the doctor had to say is basically what was in the article in The New York Times.

I ask unanimous consent that this article be printed in the RECORD at this point.

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

#### GAZA DOCTOR WITNESSING NIGHTMARISH SITUATION

(By Hiba Yazbek and Karen Zraick)

The Jabaliya neighborhood north of Gaza City was pummeled with Israeli airstrikes for a third consecutive day on Thursday, while doctors treating the victims described nightmarish scenes of operating without basic supplies or anesthesia.

Dr. Hussam Abu Safiyya, director of the pediatric ward at Kamal Adwan Hospital, where many of the casualties from the Jabaliya strikes were taken, said the majority of the people arriving were children. Many were severely burned or were missing limbs.

On Tuesday, after the first strike in Jabaliya, the hospital received about 40 people who did not survive, and 250 others who were wounded, he said. The numbers were nearly the same on Wednesday, when another strike hit. On Thursday, a strike damaged a United Nations school being used as a shelter and sent in another wave of patients: 10 dead and 80 others wounded.

"I've never in my life seen injuries this bad," Dr. Abu Safiyya said on Thursday by phone, adding, "We saw children without heads."

The U.N. agency for Palestinian refugees, UNRWA, which runs the school, said that the school had been among four of its shelters—housing nearly 20,000 people total—that had been damaged in the previous 24 hours. Twenty people were reported to have been killed at the Jabaliya shelter, the agency said, along with three people in other strikes at the Shati and Bureij camps.

The Israeli military said that in its strikes on Jabaliya, it had been targeting Hamas commanders who played key roles in the attacks on Oct. 7, which Israeli officials said killed more than 1,400 people. The military also said that Hamas had an extensive tunnel network in Jabaliya.

On Wednesday, Dr. Abu Safiyya said, he was working with a colleague in the hospital's neonatal intensive-care unit—one of two units that still had power amid a severe fuel shortage—when casualties from Jabaliya started arriving.

When they rushed down to the emergency room to help, he said, his colleague was stunned to see that two of her own children were among the dead. Her 9-year-old and 7-year-old had been killed in their home, he said, along with several of her siblings and relatives.

"We are working at a place where at any moment we expect our children, spouses, siblings or friends to come in in pieces," he said.

Some children could not be identified because of the severity of their injuries, he said. The hospital's morgue was so full that people were stacking bodies on top of one another.

"We wish for death," said Dr. Abu Safyia. "It is easier than seeing the horrific scenes we're witnessing."

He later added: "Live images are being broadcast to the whole world of people blown up into pieces, of women and children who are being murdered, for what? What did they do wrong?"

The hospital, which is in the city of Beit Lahia, just north of Jabaliya, was running extremely low on medical supplies, like all others in the Gaza Strip, he said. With no anesthesia, doctors were operating on people with severe injuries using over-the-counter painkillers like paracetamol to help ease the pain. They had a limited supply of antibiotics and were using vinegar and chlorine to disinfect wounds, the doctor added.

"The children's screams during surgeries can be heard from outside," Dr. Abu Safyia said. "We are operating on people's skulls without anesthesia."

Doctors and nurses were using the flashlights on their phones to operate in the dark because a severe shortage of fuel had left the hospital's generators able to power only two departments—the neonatal intensive-care unit and the pediatric emergency room, where 12 children are on ventilators, he said. If the fuel runs out, he added, "the hospital will turn into a mass grave."

Hours earlier, Dr. Ashraf Al-Qudra, a spokesman for the Hamas-run Gazan Health Ministry, had held up the body of a dead child wrapped in a shroud at a news conference at Al-Shifa Hospital as he described the growing death toll.

The ministry said that more than 9,000 people had been killed since the start of Israel's relentless bombardment of Gaza, including more than 3,000 children. Many others remain missing or buried under the rubble.

Dr. Ghassan Abu-Sittah, a British-Palestinian plastic surgeon volunteering at Shifa's burn treatment unit, said the hospital—the largest in Gaza—had received about 70 patients from the strikes on Jabaliya since Tuesday, and many had no homes to return to.

Medical workers were being stretched to the breaking point, and normally preventable deaths had begun to soar, he said. Each surgery was turning into a grueling exercise of trying to use the fewest resources possible, he said.

The Gazan Health Ministry said 16 of the 35 hospitals in the Strip were already out of service from damage or lack of power. The maternity ward at Shifa was being used to treat the wounded, and expectant mothers had been moved to Al-Hilo Hospital, which the ministry said was damaged by bombardment on Wednesday night.

Communications with Gaza City remained spotty to nonexistent on Thursday, after a blackout for much of Wednesday left ambulances and rescue workers unable to find the injured, the U.N. Office for the Coordination of Humanitarian Affairs said.

Ahmad Sardah, a Jabaliya resident who said his home had been damaged by the

strike on Wednesday, was able to send a quick message during a fleeting moment of internet connection before contact was lost again.

He said in a Facebook post he managed to write on Thursday: "If only friends and relatives who are outside could tell us what is going on around us instead of asking us how we are doing, because without internet and phone lines, all we hear is airstrikes and bombs. Where, how, why, and who? None of us know."

Dr. Ghassan Khatib, a political scientist at Birzeit University in the occupied West Bank, said that Jabaliya—both the name of a town and a refugee camp next to it—had a reputation as a stronghold of resistance to Israeli occupation for years.

The first intifada, an uprising that lasted from 1987 to 1993, started there after camp residents were run over by an Israeli vehicle, he said. Their funerals became demonstrations that spread to the Balata refugee camp in the West Bank city of Nablus and elsewhere, he said.

Tamara Alrifai, an official with UNRWA, said in an online briefing Thursday that the agency believed that about 30,000 of the Jabaliya camp's 116,000 residents had remained after Israel's order to evacuate under threat of bombardment last month. It was unclear whether they had all gone to the south, as directed, or to other areas of northern Gaza.

People displaced throughout Gaza have flocked to hospitals, hoping for a greater chance at safety. The Kamal Adwan Hospital is also housing more than 3,000 displaced people. Dr. Abu Safyia is among them, and barely sleeping. He said he sometimes goes into an empty room, shuts the door and sobs.

"These are people who had dreams, they had lives, they had a future," he said. "It all ended."

Mr. DURBIN. Mr. President, here is the situation reported from the hospital in Gaza: They will be out of fuel and electricity in 24 hours. Dr. Hussam told Dr. Sahloul that at this point, five children will die. The ventilators that are keeping them alive will be turned off. They cannot be transported to a better or a safer place. Turning off the electricity in some areas of the hospital will cause great hardship and pain. There is no fuel at the other hospitals either. In the north, they have basically been cut off from any assistance. It is impossible to transfer to the south because they don't have transportation, and they don't have the wherewithal—the ambulances and such—to do so. The desperate situation they have reached includes performing amputations with no anesthesia—performing amputations with no anesthesia.

I asked Dr. Sahloul: What do they use?

He said: Tylenol.

Can you imagine? Tylenol? They use vinegar because they don't have any access to iodine to be able to clean the wounds before the operations. Vinegar.

Every day, 200 people show up at their hospital, sick from the contaminated water which they are forced to drink. They are begging for help. They are asking for a pause so that basics can be provided: food, electricity, fuel, medicines—the basics. I don't think that is an unreasonable request, and I am sorry that they have been turned

down in their efforts to get this kind of help. There are 150 patients in this hospital—twice the number as usual—with many of them sleeping on the floor. And surgeries are performed on the floor.

I read this article last Friday and kept a copy of it. Now I will enter it into the RECORD for others to read as well.

At one point, Dr. Abu Safyia said:

We wish for death. It is easier than seeing the horrific scenes we're witnessing.

Twice now, this refugee camp, Jabalia, has been attacked by the Israelis as a site of Hamas terrorism. Unfortunately, on the first day of the attack, 40 people did not survive and 250 others were brought to the hospital. Then the attack took a second day but, basically, was the same as the last.

The doctor said: I've never in my life seen injuries this bad. He added: We saw children decapitated as a result of these attacks.

Asking for a pause in the war for the purpose of humanitarian relief is not unreasonable; it is humane and civilized. The United States is begging both sides to take that step. I will join that effort. I hope that this ends well and soon.

In the meantime, these innocent, helpless victims need to have a helping hand from the rest of the world. We need to provide the basics so they can survive. I will do my best to follow this closely. I encourage the United States to continue its efforts to ask for this pause in the actions for relief of the victims. This sort of situation in any part of the world cannot be ignored.

I yield the floor.

(Mr. MARKEY assumed the Chair.)

The PRESIDING OFFICER (Mr. WELCH). The Senator from Massachusetts.

NOMINATION OF JULIA E. KOBICK

Mr. MARKEY. Mr. President, I come to the floor today to speak in support of the nomination of Ms. Julia Kobick to the United States Court for the District of Massachusetts.

Today, the Senate voted to invoke cloture on Ms. Kobick's nomination, and, soon, we will vote on her confirmation. With a successful vote, Ms. Kobick will become the 150th Biden nominee to be confirmed as a judge.

Julia Kobick is a rising star in Massachusetts legal circles. A Massachusetts native, she earned her bachelor's degree in government, with honors, from Harvard College. She began her career as a public schoolteacher to New York City's second and third graders. While teaching, she earned a master's in elementary education at Pace University. She went on to obtain her law degree, magna cum laude, at Harvard Law School.

Ms. Kobick then clerked at every level of the Federal judiciary—first, with Judge Dennis Saylor on the District Court of Massachusetts, then for Chief Judge Michael Chagares on the Third Circuit Court of Appeals, and, finally, for the great Justice Ruth Bader Ginsburg on the U.S. Supreme Court.