

DIVERSITY, EQUITY, AND
INCLUSION

The SPEAKER pro tempore (Ms. DE LA CRUZ). Under the Speaker's announced policy of January 9, 2023, the gentlewoman from Ohio (Mrs. BEATTY) is recognized for 60 minutes as the designee of the minority leader.

Mrs. BEATTY. Madam Speaker, I rise today to sound the alarm regarding attempts to eliminate diversity, equity, and inclusion, referred to as "DEI," initiatives in medical education.

Any anti-DEI efforts endanger our Nation's healthcare and threaten our global leadership in medical science.

Many in this Chamber owe their health and lives to the groundbreaking work of physicians of color, specifically today, Black physicians. Many of our loved ones are living healthier and longer lives thanks to Black physicians and medical pioneers.

Madam Speaker, let me just ask this Chamber and those watching to listen and then you be the judge when I say to you: Let's start with Dr. Kizzy Corbett, who led in the development of the Moderna COVID vaccine.

Now, Madam Speaker, many in this very Chamber, Republicans, Democrats, and those in leadership, received the vaccine, and we can thank her for her pioneering leadership, for not contracting COVID or being hospitalized or dying from severe COVID symptoms.

What are we afraid of for physicians of color to be in medical schools that receive Federal funding and that the school is sensitive to cultural needs, to DE and I?

One in eight women in the United States will be diagnosed with breast cancer during her lifetime. Whether you are Republican or Democrat, if you or a loved one have benefited from early breast cancer detection, it is thanks to Dr. Myra Logan, a Black woman. She developed early methods for breast cancer detection and treatment, along with new antibiotics.

Others have benefited from advancements in chemotherapy because of Dr. Jane Wright who pioneered this vital cancer treatment in 1949 when it was still experimental.

Madam Speaker, there are people in this Chamber who have gone through chemotherapy. There are Members of this Chamber, Democrats and Republicans, who have benefited from the pioneering efforts of Black physicians.

Now, we want to say that we will remove Federal funding if a medical school wants to have programs for the underserved, for those who are representing the great diversity in this America in which we live?

Simply put, doctors of color, and Black medical doctors in particular, have shaped medical science, saving countless lives globally. Despite their essential medical contributions, systemic barriers cause their underrepresentation in the ranks of medical doctors.

As a result, DEI programs and practices are key to their increased partici-

pation in our Nation's healthcare system.

Listen to this, Madam Speaker, 60 percent of physicians in the United States are White, compared to just 5.7 percent of Black physicians, and that is with the support of DE and I programs and practices.

The question today is: What are Republicans afraid of? DEI offices in medical schools promote racial diversity and cultural competencies among physicians. Both improve healthcare for all Americans—all Americans, especially underserved communities of color.

DE and I practices and training help correct biases about racial differences that adversely impact medical judgments, treatment decisions, and patient interactions, regardless of socioeconomic status.

We, therefore, need to be doing more. Let me say this again. We, therefore, need to be doing more and not less to ensure that our Nation's healthcare workforce is diverse and culturally competent.

Why am I doing this today? Why do I take this hour to come to this floor in this Chamber where we will make decisions that affect the lives of all Americans? We celebrate our rich history, the 70th anniversary of Brown versus the Board of Education of Topeka, which is all about the education of our children. You would think in 70 years that we would have moved away from the systemic racism, that we would have moved away from not wanting us to be culturally sensitive to help us serve all Americans.

I am here today because some of my Republican colleagues supporting this bill, the so-called education act, which would cut off Federal funding to medical schools pursuing DE and I initiatives.

Let me say this again. I know it is hard to believe for those who are watching me in this Chamber, this Chamber where we are elected to represent all people—we know there is not a competitive edge. You have already heard the facts that only 5.7 percent of the physicians are Black Americans. This so-called education act, again, would cut off Federal funding to medical schools pursuing DE and I initiatives.

This harmful legislation and similar DE and I threats prioritize intolerance over innovation and stifle cultural competencies in the medical profession.

What if I suggested and wrote legislation that would say we will withdraw Federal funding from medical schools that fail to implement culturally sensitive and DE and I policies and practices?

What if?

Madam Speaker, oh, let's take it a step forward this morning. What if I were to say that legacy programs at medical schools should be abolished and that relatives and donors who simply write a check to have their name

listed on the wing of a medical school, that their children could not go there, that they would not be able to have a legacy program where simply because of writing a check you could be admitted to a medical school? Should they receive or should they not receive preferential treatment in medical admissions?

We know that this happens.

Over 60 percent of the United States' doctors are White while White people comprise just over 50 percent of the population. You do the math. Who is overrepresented here? Look at the legacy admission policies and other forms of systemic racism, and you tell me who has an unfair advantage.

We should support and not stop initiatives that help diversity or help to diversify our physician pipeline, such as a program called Made for Medicine and Adtalem.

Made for Medicine supports Black middle and high school students interested in medicine with training and mentoring to best position them for success.

This program, Made for Medicine, is such an incredible program. Madam Speaker, it gives me great honor today because the founder of that program, a young, brilliant physician, who just happens to be a Black American, just happens to be someone that I have watched grow up. I have watched the dedication of Dr. Laura Espy-Bell who decided for all communities that it would be good to be able to have a program that educated our children, so they could see faces like them. The research shows when we go into a hospital when you are Black how great it is to see someone that looks like you, whether you are Hispanic to see someone like you or Asian American, and the list could go on, to be able to have that appreciation.

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The list could go on to be able to have that appreciation. You see, Mr. Speaker, not only is Dr. Laura Espy-Bell the founder of Made for Medicine, she could have just talked about herself, but she brought other doctors along with her. Some are photographed here. I have another photograph that we will get on the floor soon of Black male doctors.

You see, Madam Speaker, as shown in this photograph, you have a young physician. I call him Dr. B.J., Dr. B.J. Hicks. He is a cardiovascular neurologist. He did his internship and his residency at the Henry Ford Hospital. Not only is he a brilliant, brilliant neurologist, but he gives back through the national American Heart Association. He is revered in his field, one of the top in the Nation.

Guess what, Madam Speaker? He doesn't just serve Black Americans. He serves White and Brown Americans, like all of these physicians. This brilliant doctor, B.J. Hicks, comes from a line, a family line, of physicians. His father, a dear friend and constituent in

my Third Congressional District, the world would put his reputation as an oncologist among the best of White physicians and Black physicians.

Now, just think, Madam Speaker, for the young doctor, William Hicks and B.J. Hicks, coming up that we are denying that right for someone like Spencer, my grandson, or Leah, my granddaughter, who may want to follow in their footsteps if they went to a medical school that had Federal funding and said: We want to have DE and I programs.

B.J. Hicks' sister and dear friend is a doctor of dermatology. When you walk into her downtown medical practice, Dr. Shari Hicks-Graham's office is as diverse looking as if we looked to the left and right of this Chamber.

Again, we would not have brilliant doctors like the Hickses if this legislation goes forward. I could go on and on.

Madam Speaker, I could tell you about Dr. Joshua Joseph who did his internship and residency at Yale School of Medicine. I could tell you that he is an endocrinologist and his wife is a neurologist. They are two young Black physicians who are saving Black, Brown, and White lives.

Nevertheless, here we are today in this Chamber dealing with a piece of legislation that says that medical schools shouldn't be culturally sensitive and that medical schools should not have DE and I programs, yet our country is built on a history, thank goodness, of pioneers in medicine who have saved Black, Brown, and White lives, Democrat and Republican, and a Republican would bring to this House floor a bill that should not see the light of day.

Let me just say that these physicians and thousands more were trained at institutions, thank goodness, that understood teaching and practicing cultural sensitivity and having DE and I initiatives.

Adtalem is the leading healthcare educator that partners with organizations to address their future workforce needs. Eighty percent of their medical graduates serve low-income communities, and 44 percent are in medically underserved areas. When you look at these two programs, Madam Speaker, they are just a few examples of how DE and I initiatives can enrich our Nation's physician pipeline.

Earlier this month, I proudly filed a resolution with my colleague, Congresswoman KATHY CASTOR, that stands in stark contrast, Madam Speaker, to the so-called EDUCATE Act. Rather than cutting Federal funding to medical schools, pursuing DE and I initiatives is outlined in the EDUCATE Act, our resolution reaffirms the importance of DE and I efforts in medical education.

Our resolution is supported with over 25 medical and medical education organizations, including the Association of American Medical Colleges, the American College of Physicians, and the American Federation of Teachers.

Make no mistake, the EDUCATE Act is yet another misguided Republican effort to diminish the quality of healthcare of all Americans, especially communities of color.

Whether it is proposing a voucher-like system for Medicare, reducing the Affordable Care Act protections for individuals with preexisting conditions, or attempting to substitute the ACA coverage for Medicaid recipients, Republicans continue to attack equitable, quality healthcare access.

Meanwhile, my side of the aisle continues to work for accessibility and affordable healthcare by lowering the cost of prescription drugs. I could tell you, Madam Speaker, how many people are diabetic and went to get their insulin and could not afford it. Madam Speaker, that is just not Black Americans, that is Black, Brown, and White. Someone in the gallery today is diabetic, and when we were able for our seniors to lower that cost to \$35 a month, we did not care whether they were Democrat, Republican, Black, Brown, or White. It was about putting people over politics. It was about serving the wonderful America that I have the opportunity to serve.

If it seems like I am passionate today, I am. I lost my late husband just a few years ago unexpectedly, but I am thankful that there were doctors there in his time of need, Black and White physicians. Yes, they went to medical schools that had Federal funding. Yes, they understood our life and our culture because they were sensitive to cultural and diversity issues.

All I am asking today of my colleagues is to just look at what is right for our children and for our families. Today, we had 300-some students in the eighth grade here in this Chamber. A week ago, I had 200-some eighth graders in this Chamber touring this wonderful institution.

Madam Speaker, do you know how proud I was to be able to tell them about the rich culture and the rich history? How proud I was to be able to tell them how I am fighting for civility, how I am fighting for us to work together, and how the days of Rosa Parks not sitting in that seventh row in the seat for colored women and colored men without being arrested are over?

We should be far beyond 1955, far beyond 70 years ago when we couldn't attend the same schools because of segregation. Here in this House is no place for us to deny Black physicians who serve Black, White, and Brown constituents the opportunity to matriculate in a medical school because that medical school, thank goodness, believed in serving all people and believed in training brilliant minds, like these physicians, to go out in the world and not, not understand the value of taking care medically and socially people of all colors, of all ethnicities, and of all races?

Today, in this Chamber we have Members who want to take away the rights of medical schools to be able to

teach cultural sensitivity and to have DE and I programs.

I am so grateful to have had this opportunity and this hour to share my views, to share my passions, and, Madam Speaker, to ask this Chamber to not allow that bill to see the light of day.

Madam Speaker, for the people and putting people over politics, I yield back.

ISSUES OF THE DAY

The SPEAKER pro tempore. Under the Speaker's announced policy of January 9, 2023, the gentleman from California (Mr. KILEY) is recognized for 60 minutes as the designee of the majority leader.

Mr. KILEY. Madam Speaker, I would like to share a remarkable moment from a committee hearing this week with Health and Human Services Secretary Xavier Becerra.

Mr. Becerra began his testimony by saying that we can now manage COVID like we do the flu.

I asked Mr. Becerra: If that is true, then what about these 30 colleges and universities across the country that still have COVID-19 vaccine mandates?

That is, they require students to get a vaccine in order to enroll, and they will expel students who do not comply with that mandate.

I asked the Secretary: If it is true that we can now manage COVID like the flu, then will you call on these 30 universities that, right now in May of 2024, still have COVID vaccine mandates?

The Secretary refused to do it. He is just fine with these institutions continuing to impose these exclusionary policies.

Now, at this point in time, it is so beyond the pale to continue to have these mandates that I think it is important to specifically call out the universities that still have them. Of course, we now know there was never any public health justification for universities to have COVID vaccine mandates, and it certainly was not consistent with the values of our country or the values of higher education. Nevertheless, to still have them now is so beyond the pale and so utterly absurd that I think we should recognize each and every university that still has them.

There is Cal State University Cal Poly Humboldt, CSU Dominguez Hills, CSU San Francisco State, Harvey Mudd College, Mount Saint Mary's University, Pitzer College, Pomona College, University of San Francisco, Scripps College, Mitchell College, Trinity Washington University, Clark Atlanta University, Morehouse, Morris Brown College, Oglethorpe University, Spelman, Methodist College, Dillard University, Southern University System, Wellesley, Wayne State University, Franklin Pierce, Mount Saint Vincent, Kenyon, Oberlin, Wooster, Reed, Bryn Mawr, Haverford, and Swarthmore.