speeches about the border. To that Senator, I say this: That is because we are not here to just talk about the problem; we are here to do something about it.

By the way, that same Senator did not support the bipartisan border bill.

A group of House Republicans came to my State for what they called a "factfinding tour." What more facts do you need? That it is bad? Of course, it is. It would be better if Border Patrol agents had the resources and staffing and policy changes from the bipartisan border bill we could have passed. That would have helped them. But the folks who went on that trip didn't want to vote for that bill. So, no, this wasn't a factfinding tour; it was just another photo op, because they would rather keep talking about the problem instead of solving the problem. Who does that help? It doesn't help Border Patrolwho, by the way, supported this bipartisan bill. It doesn't help border communities that desperately need some relief.

The problems at the border do not go away when you fly back to Washington, DC. They just don't. And they don't go away when the TV camera stops rolling.

In Arizona, these aren't just talking points; it is a challenge that we face every day that strains our communities, and it strains law enforcement. That is why I am not going to stop working to solve these issues with our border and our immigration system.

Because while anybody can talk about a problem, those of us here in this building have the power to actually do something about it.

That is our job. That is what we were elected to do.

I yield the floor.

The PRESIDING OFFICER. The Senator from Washington.

ISRAEL

Mrs. MURRAY. Madam President, it has been several months now since Hamas carried out a truly heinous terrorist attack against Israel. The barbarity of October 7 should not be brushed aside and cannot ever be excused.

We are talking about terrorists gunning down innocent civilians—including in their homes—committing horrible acts of torture and sexual violence, and taking hostages, among them women and elderly people and infants

As I have said repeatedly, Israel has a clear right to defend itself and its people against the very real and continued threat that Hamas poses to Israeli civilians.

As I have also said many times, that has to be done in accordance with the laws of armed conflict and international humanitarian law.

I appreciate that this is a tough, emotional topic. War always is. But at times like this, we cannot let passion kill compassion. We cannot let the horrors of the present end the hope for a brighter future.

As Israel seeks to eliminate the threat posed by Hamas, it must make every effort to protect innocent civilians in Gaza, who make up the vast, overwhelming majority of people in the Gaza strip.

But as we have watched this conflict escalate, it has become increasingly clear that is not what is happening. Just consider, hundreds of Palestinians were injured or killed today after Israeli troops fired on civilians crowded near aid trucks desperate for something to eat. While we are still learning more about the details, you have to believe that this kind of bloodshed should be completely avoidable.

I come to the floor today as a friend of Israel. I understand the very real threats Israel—home to about half of the world's Jews—faces outside its borders and in keeping its population safe.

And I come to the floor as someone who feels very strongly that Israel absolutely must change course. The collective punishment in Gaza has got to stop, and Israel must do more to protect civilian life.

We need a mutually agreed-upon cease-fire to end the fighting as soon as possible. We need the return of all the hostages by Hamas. And we need a massive surge in humanitarian aid.

Israel needs to understand the casualties they have inflicted on the people of Gaza. The devastation they have caused cannot continue. It is not in line with American interests nor does it make Israel safer.

The prosecution of this war so far by Netanyahu's far-right government has been nothing short of an unquestionable strategic failure. Many of the families of hostages have been protesting Netanyahu themselves, demanding a mutually negotiated cease-fire to see their loved ones safely returned.

Let's consider what is actually happening in Gaza, the human reality on the ground. There are over 2 million people in Gaza who have been displaced from their homes and 1.7 million people facing imminent starvation.

Most of the water in Gaza is unfit for consumption, and two-thirds of the hospitals are no longer operating—there are only 11 left.

Think about that. Think about what that means for the countless people who are starving, who are sick, and who are scared, the survivors. Or better yet, listen to the firsthand accounts. I did.

There are more than 150,000 pregnant and lactating women in harm's way. Doctors who had worked on the ground in Gaza spoke to me about performing emergency C-sections on rubble or in tents without anesthesia and women bleeding out because they couldn't get medical care.

Since the start of the war, 66,000 Palestinians have been injured, 29,000 have been killed, and more than half of them are women and children.

We all understand that war is not a simple thing. But I will just say, I don't know how you call a military op-

eration targeted when there are 29,000 deaths.

I don't know how you call it targeted when there are babies and children being pulled from the rubble. Who does this serve? It cannot continue this way. The situation in Gaza and in the West Bank where there has been a disturbing rise in brazen violence from rightwing Israeli settlers against Palestinian families does not lead to peace and security for Israelis or Palestinians. It just doesn't.

And the rhetoric and stated policies of the Netanyahu regime—like abandoning a two-state solution—have been nothing short of deeply dangerous and wildly counterproductive.

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I have voiced my strong support for the President's Executive order to allow sanctions on Israeli settlers in the West Bank who threaten or perpetrate violence against Palestinians.

I also want to make it crystal clear now: Indefinite Israeli control over Gaza is unacceptable, as is any contraction of territory for the Palestinians.

As someone who voted against the war in Iraq, I am acutely aware of mistakes our country made. You cannot defeat terrorism through sheer military force alone. That much is clear. And it is my hope that Israel can heed that lesson.

Winning a war against terrorism isn't a matter of how many people you kill. That approach isn't just bloody and brutal; it can be self-defeating. Terrorists don't care how many people you kill. They certainly don't care how many civilians you kill, because terrorism is not a human enemy of flesh and blood. It is an idea, it is a hatred, a violence, and it thrives on suffering.

So while Israel must work to eliminate the threat posed by Hamas, that fight must be targeted if it is to be successful. You have to fight the hopelessness extremism feeds on. You have to fight the sprawl of violence that entrenches conflict. And you have to stay clear-eyed and strategic in pursuit of justice and in pursuit of lasting peace.

I may be just one of a hundred Senators here, but I have been using my voice to help move things in that direction. On humanitarian aid, I have pressed the Biden administration repeatedly in many conversations to take steps that would dramatically increase aid to Gaza.

And I made including humanitarian aid for Gaza in our national security package a red line for me as the Senate put together our bill—even as Republicans tried over and over again to chisel it away.

I also want to be clear about the fact that the taxpayer-funded military aid we provided for Israel for their self-defense is subject to the Leahy Law. I have insisted throughout many conversations that this law is implemented as intended and that civilians are protected and that international law is followed.

And, finally, on moving towards a lasting peace, as President Biden recently noted, talks are ongoing and

productive towards a mutually agreedupon cease-fire and the safe return of all the hostages. Recent developments like the deaths we saw today in Gaza City will likely make that more difficult, but diplomatic efforts must continue-even after this conflict-to ensure a lasting peace.

That is why I have backed efforts to reiterate America's longstanding policy of support for a two-state solution and will rebuff any statements by Netanyahu or his government that reject Palestinian sovereignty. It is why it is important to me that we don't just talk about fighting the enemy and winning the war but that we also talk facing $_{
m the}$ hatred, Islamophobia and anti-Semitism that have been on the rise in the wake of this conflict and doing the work of peace, creating a future that ensures dignity and security for both Palestinians and Israelis alike.

I want to close by saying a bit about what is happening here in America and in my home State of Washington. Because while this war may be happening across the world, it has been painful for our Arab and Jewish communities at home. They are seeing not just horrific news-including sometimes about relatives and friends—but also a horrific rise in anti-Arab and anti-Semitic vio-

Synagogues in my State have faced bomb threats. A 6-year-old Palestinian boy in Illinois was stabbed to death. And across the nation, there have been other disturbing reports of violence and threats against people perceived to be Arab, Muslim, or Jewish. It is heartbreaking, and it is incumbent upon all of us to stand against that hatred.

Our North Star has to be valuing the humanity in others and listening to the humanity in ourselves. That is my message today, and it is a message I am going to keep working to see put into action.

I yield the floor.

tal care.

The PRESIDING OFFICER. The Senator from Maryland.

LEGISLATIVE SESSION

Mr. CARDIN. Madam President, I ask unanimous consent that the Senate resume legislative session.

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

NATIONAL CHILDREN'S DENTAL HEALTH MONTH Mr. CARDIN. Madam President, I rise today to recognize February as National Children's Dental Health Month. Since 1981, this month has given us the chance to acknowledge the importance of dental health for children, recognize the progress we have made on this front, and renew our commitment to ensure that all children in our country have access to quality, affordable den-

Oral health is an aspect of health that is often overlooked, despite its critical role in the overall health of a person. As former U.S. Surgeon General C. Everett Koop once said, "There is no health without oral health."

In my state, like many others, we have witnessed firsthand the consequences of neglecting oral health in young people. One story that has shaped my view on this issue is that of Deamonte Driver, a 12-year-old Prince George's County resident who tragically died in 2007 due to a lack of comprehensive dental services. Deamonte's death was particularly heartbreaking because it was entirely preventable. What started out as a toothache turned into a severe brain infection that could have been prevented by an \$80 extraction. After multiple surgeries and a lengthy hospital stay, sadly, Deamonte passed away, 17 years ago this month.

Stories like this underscore the need for access to affordable oral health care for all Americans, particularly vulnerable and underserved commu-

While trends over the past several decades show promising reductions in tooth decay among young children, tooth decay remains one of the most common chronic diseases of childhood. About 1 in 4 preschool children experienced tooth decay in primary teeth and at least one in six children aged 6 to 11 years experienced dental tooth decay in permanent teeth. It is also important to note that neglecting oral health at a young age increases the need for more advanced and expensive dental services, which are even less accessible than more standard types of dental care.

There is a persistent pattern of oral health disparities, as children from lower-income and minority racial and ethnic groups generally experience more disease and have less access to treatment.

Children from low-income households are twice as likely to have cavities, compared with children from higher-income households. According to the Centers for Disease Control and Prevention, for children aged 2 to 5 years, about 33 percent of Mexican-American and 28 percent of non-Hispanic Black children have had cavities in their primary teeth, compared with 18 percent of non-Hispanic White children. For children aged 12 to 19, nearly 70 percent of Mexican-American children have had cavities in their permanent teeth, compared with 54 percent of non-His-

panic White children.

In its most recent Oral Health in America report, the National Institute of Dental and Craniofacial Research, one of National Institutes of Health, identified disparities as one of the primary challenges facing oral health in the United States. Last year, I held a hearing in the Senate Finance Health Care Subcommittee to focus on these issues. The hearing highlighted disparities in access to oral health care, which have persisted and have serious consequences for children, adults, families, and communities. I was proud to have Dr. Warren Brill, a distinguished pediatric dentist from Maryland who has long provided care to low-income children and provided valuable insights for our conversation, serve as a witness.

Poor dental health can have lasting impacts on children. Tooth and gum pain can impede a child's healthy development, including the ability to learn, play, and eat nutritious foods. Children who have poor oral health often miss more school and get lower grades than children who have good oral health.

While it might be easy to view oral health as an afterthought, it is clear that the issues resulting from a lack of care can have wide-ranging, serious impacts, especially when access to care is a struggle from a young age. Poor oral health can contribute to severe outcomes like the tragic story of Deamonte while also manifesting in broader disparities across racial and ethnic groups.

Since the loss of Deamonte, I am proud to say that we have made significant progress in improving access to pediatric dental care in our country and in my state. In 2009, Congress reauthorized the Children's Health Insurance Program, CHIP, with an important addition: a guaranteed pediatric dental benefit. Research shows that CHIP generally offers more comprehensive benefits at a much lower cost to families than private coverage.

Additionally, the Affordable Care Act, ACA, has significantly improved access to affordable dental care for millions of Americans by requiring most insurers to cover essential health benefits. I was particularly pleased that pediatric services, specifically pediatric dental care, were identified as part of the ten categories of healthcare services included in the EHB package. As a result, pediatric dental insurance coverage is available for purchase on all State-based insurance marketplaces and the federal marketplace. The dental coverage offered through ACA plans in all States covers a minimum set of benefits to ensure children have coverage for essential dental services.

Expansion of dental insurance coverage has enabled early intervention for more children from low-income households. Today, 9 in 10 children in the U.S. have dental insurance. Dental care is also a mandatory benefit in Medicaid for children since it is provided through the Early and Periodic Screening, Diagnosis, and Treatment Program. Still, research has found that although State Medicaid programs cover children's dental services, fewer than half of all publicly insured children get the recommended care.

This figure demonstrates that there is more we can do to ensure children are receiving proper dental care. This effort is a priority of mine and an area where I believe we can make tangible changes to the lives of many Americans

For several Congresses, Senator STA-BENOW and I have introduced the Ensuring Kids Have Access to Medically Necessary Dental Care Act. Our legislation would eliminate lifetime and annual limits for dental care for children under CHIP. The bill would also require