Mr. GARAMENDI. If I might just add to that, it is my understanding—and I get this from the University of California-Davis-that they are losing their new Ph.D.s to other countries, particularly to China and to India, because those countries are not only increasing their total research but they are also providing these very bright, innovative, forward-thinking Ph.D.s with a full laboratory and all of the support that they might need to continue to conduct their research not only on the issue of health care but also in all of the sciences and technologies, from high technology, energy, and so forth.

So we really need to get on it.

My final point is here twofold. First of all, if we are going to build this economy, there are five things we have to do consistently through time. And they require public investment.

First of all, education. You have got to have the best educated workforce in the world.

Secondly, you have to have the best, most advanced research because that is where the future is. That is where the future economic growth will come from.

You need to make the things that come from that. You need to have the infrastructure, and you need to think globally. We are not doing that.

The budgets that have been put forth by our colleagues on the Republican side go exactly the other direction. They cut educational funding, beginning with early childhood education. They cut the funding for research. You see it here.

Tomorrow, we are going to take up the new budget. It continues to cut research across the board, the National Institutes of Health probably included. It goes on and on. Transportation, infrastructure—forget it, there is no money for it.

We have got to turn that around. These are the fundamental investments of economic growth and, more important, social justice.

Congresswoman SPEIER, thank you so much. You have been at this, beating this drum. Don't stop. You stay with this. This is a message that the American public has to understand. These are the investments about our own personal health, our children's health, and our future economic growth, as well as addressing worldwide problems.

Thank you so very much for what you are doing here and for loaning me your charts.

Ms. SPEIER. I thank the gentleman from California for lending his support and his articulation of this issue.

To his point about the jobs being lost, this year's sequester cuts were estimated to result in the loss of more than 20,000 jobs and \$3 billion in economic activity.

The three scientists who won the Nobel Prize for medicine this year for their research on how cells swap proteins all received NIH funding at some time during their careers. Nobel Prize winner Rothman said he probably would not have started his research had NIH funding not been available.

So that, I think, speaks volumes about how important NIH funding is to young scientists.

I am now joined by my great friend, a great, passionate leader on so many issues before this House, my colleague from Illinois (Ms. Schakowsky).

Ms. SCHAKOWSKY. Thank you. I want to thank Congresswoman SPEIER for leading this really important de-

We have been talking lately about how we are not going to be able to compete for the economic development in research and biotechnology and all the things that we do at the NIH. But I also want to show how economically—with one of your charts—it really doesn't work for us here at home as well

Pretty much all you can see are the red lines, which are the costs every year in the United States of common diseases.

As my colleague, Congressman GARAMENDI, pointed out, we have \$203 billion a year that Alzheimer's costs our society as a whole. This is cancer, \$158 billion. We have hypertension, \$131 billion; diabetes, \$116 billion; obesity, \$109 billion; heart disease, \$95.6 billion; stroke, \$18.8 billion, Parkinson's disease, \$6 billion.

So it is really easy to see these red

Teeny, tiny, and I think maybe the only one you can see here well is the amount of money that we are spending to address these diseases. NIH research funding and annual cost of care for major diseases in the U.S. is what this chart is about.

We spend \$5.5 billion on cancer research. On Alzheimer's disease it has not even been a billion dollars. It is half a billion dollars for a disease that costs \$200 billion to our economy. And on and on.

The teeny, tiny blue lines are barely very visible of how much we are actually investing in trying to deal with these diseases and diminish the tremendous costs to families and costs to government through our public health programs.

And so if we are smart investors, wise investors in how we can save ourselves money, we would put money into this kind of research.

I just want to give an example from my district of lack of being penny wise and pound foolish.

Northwestern University is developing one of the first major studies to look at the impact of contaminants from superfund sites—those are the most polluted sites in our country—on our reproductive health.

So Northwestern, which is in Evanston, Illinois, and I am proud to say in my district—a constituent of mine—proposed a study to examine the reproductive health impacts of exposure to metals, including zinc and lead, that are present in the DePue superfund site in Illinois—a very dirty site.

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Initially, in the fall of 2012, the Northwestern University Superfund Research program, led by Dr. Teresa Woodruff, was awarded a positive score with a good chance of receiving funding in response to the NIH research application. Mind you, if we had been able to research this particular Superfund contaminated site, it would have helped all over the country where we have these kinds of contaminations.

Due to limited funding—due to the sequestration—in March of 2013, Dr. Woodruff and her colleague were informally given the option to receive a reduced amount for a reduced period of time since their application was deemed, in fact, meritorious. After electing to accept the reduced funding, the NIH informed the Northwestern University Superfund Research program that, due to the sequester cuts, their project would not be funded.

This lack of funding means Dr. Woodruff and her team are unable to perform this critical research which would be helpful all over the country to help us gain a better understanding of the reproductive health risks of Superfund sites and to help us determine the best practices for the future disposal of those toxic chemicals

We are absolutely putting hands behind our backs in order to address critical health issues that are facing our country. We are hamstringing our ability to compete globally. We are hurting the health of Americans and of future Americans in not funding the study of reproductive health. It just makes no sense. It makes absolutely no sense to cut the funding from the National Institutes of Health. It is hard to figure out what that argument would be. You certainly can't say this is frivolous spending, excessive spending.

So I really thank you for calling attention to the one of many ways that the sequester has hurt our country, but it is a very significant one. I appreciate

your leadership.

Ms. SPEIER. You, too, were here in Congress during the Bush administration when there was an extraordinary increase in the budget for the NIH. The Republicans at that time recognized the value of keeping the NIH robust in the funds that it had in order for it to do cutting-edge research and move us forward.

What is it going to take? What was it like then that we don't have today that might be able to enlighten us?

Ms. SCHAKOWSKY. There was some common sense on both sides of the aisle of things that were essential investments for our country, that it made sense from every angle at which you looked at this to make those kinds of investments in the National Institutes of Health.

I think, right now, we are dealing with some of our colleagues across the aisle who believe that government spending, regardless, is not a smart investment, that the sequester cuts, which are meat-ax cuts across the

board, do not distinguish in any way among the programs and that that is a smart way to go.

The chairman of the Appropriations Committee, Congressman ROGERS, doesn't agree with that—the sequestration, he agrees, hurts us—but, unfortunately, we don't have the same kind of bipartisan consensus. I think Democrats see the wisdom of this and that we need help from our colleagues. We had it then. We don't now.

Ms. SPEIER. I thank the gentlelady for her support and for her involvement in this very critical issue.

I am really very grateful for the conversation we have had this hour on the National Institutes of Health, but I am also anxious for the millions of Americans across this country who are suffering with some diabolical disease some cancer-some disease that has no cure, whether it is heart disease or glioblastomas or breast cancer. There are millions of Americans right now who are dealing with stage 4 cancers, who are holding on by just their fingernails, hoping against hope that there will be some cure, some breakthrough drug, some clinical trial they can participate in.

I think, for each and every one of us in this House, we have to think about those people in our districts, and there are thousands of them in each of our districts. If they knew that we were tying the hands of the National Institutes of Health in doing that kind of cutting-edge research, I think they would be so disappointed—more than disappointed. They would be so angry that the lives of their loved ones were in the offing.

I would like to continue with a brief discussion on our academic health centers in the United States. They are, really, the pulse of so much of the research that goes on when it comes to advanced medical research. Many of them are funded through the NIH, as was mentioned earlier-thousands of them across this country. I am going to tell you about one such researcher. Her name is Dr. Valerie Weaver. She is a professor in the UCSF Departments Surgery, Anatomy and engineering and Therapeutic Sciences.

She does think outside the box. Her lab is investigating not only tumors, themselves, found in patients afflicted with breast cancer, pancreatic cancer, or brain cancer, but the neighborhood of tissues and cells where those tumors take up residence. Unfortunately, her quest for cutting-edge solutions to rapidly improve cancer treatments is threatened by the sequestration of the NIH budget. Because of reduced funding on her existing grants, Dr. Weaver has had to lay off three existing personnel and has had to cancel three new hires. "The only people I can take are those with their own funding. Each year, you get less and less, and you are asked to do more and more," she said, "and you try to get more creative, but wonder what you are supposed to do."
As a scientist, she finds herself

As a scientist, she finds herself spending less time thinking about how to battle cancer in the lab and more time struggling against funding cuts. "I spend way too much time writing grants. My grant writing time has doubled," Weaver said, but added she still pushes to move her research forward. "I have to do some type of science every day, at least once a day, even if it's only an hour. It should be the other way around—I hour of administration and 12 hours of science—but it's not. That breaks my heart," she says.

For those suffering from the forms of cancer that Dr. Weaver hopes to treat, she points out that time is of the essence. Patients with brain tumors and pancreatic cancer, in particular, frequently live only a short time after diagnosis. "Some of the studies we're doing in the next 4 to 5 years will have a direct impact on the clinic," she said. "This could have huge implications for saving patients."

Weaver also worries about the impact that sequestration is having on the next generation of talented researchers. "You think: you can't let these people go under. If they go under, you lose them, because they don't come back," she stated soberly.

In truth, there is so much at stake that we must recognize that the sequestration of the NIH is killing the goose that lays the golden egg—that saves American lives, that creates opportunities for great trade, that provides us with, yet again, more and more and more research that leads to more and more cures. Alzheimer's alone will choke us—will choke the Medicare system—if we don't do more research in that area.

So I want to close by saying that the funding of the NIH is not a political issue. It is an economic and a medical imperative. Medical research makes Americans and the rest of the world healthier. It grows our economy, and it produces valuable jobs here at home. It is time for us to take the shackles off the NIH, to restore the funding that was there when George Bush was President and to regain the position that we have had for so long in terms of fine medical research.

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

## $\begin{array}{c} \text{COMPREHENSIVE IMMIGRATION} \\ \text{REFORM} \end{array}$

The SPEAKER pro tempore (Mr. COTTON). Under the Speaker's announced policy of January 3, 2013, the Chair recognizes the gentleman from Florida (Mr. GARCIA) for 30 minutes.

Mr. GARCIA. Mr. Speaker, I want to thank the gentleman from Colorado, who has been having these sessions now for all the month of November. We began at the end of October and then have gone through the session in December. He has been an ardent champion of this issue. He has been a leader in our caucus. He has been doing the right thing, and I am very thankful for his efforts on our behalf.

I want to mention that, last week, when we were doing this, the Speaker made a ruling of something that I probably did incorrectly in my speech; but I want to now yield to the gentleman from Colorado because he spoke for millions of those who have no voice, who cannot come to this floor and claim something that is so American—a system that works, a system that makes sense, a system that is fair to all its citizens, in fact, to all of its peonle.

Mr. POLIS. I thank the gentleman from Florida. I will speak briefly, and then I will have more later.

Mr. Speaker, there are so many activists in our country who are fasting, who are sitting in offices, who are writing their Congresspeople, who are demanding action—action to unite their families, action to stop the deportations of family members—and answers to emerge from this indefinite state of limbo that has frozen the lives of so many would-be Americans that H.R. 15 and comprehensive immigration reform would address.

Today, I am disappointed that our Republican friends didn't show up to discuss and to debate the most pressing issue of our time—immigration reform. We extended an invitation to our friends on the other side of the aisle to join us today and have a discussion. Sadly, there is no one here to yield to. There are no solutions from the empty Chamber on the right. Some responded that they were double booked. Others responded that they had other engagements. Some simply didn't respond at all. The American people, Mr. Speaker, are demanding a response.

Just as House Speaker BOEHNER plans to close for business on Friday while hundreds of millions of Americans continue to have to work another week before Christmas, we have Reverend Samuel Rodriguez, who will mark the 40th day of his fast for immigration reform. He is chair of the National Hispanic Christian Leadership Conference. He will be 40 days and nights—approaching fast—without solid food.

As the reverend said recently:

There are 11 million people here right now who require intervention. We looked the other way when they came in. We use them on our farms; we use them in our hotels; and we use them in our restaurants. Then we have the audacity to deport them. It is morally reprehensible to play politics with 11 million people.

So said Reverend Samuel Rodriguez in his nearing his 40th day in fast.

Yet, in the entire first part of the 113th Congress—in the entire first session, in the entire year of 2013—there was only one vote on the floor on any measure relating to immigration. Was it a bill that would address even part of the immigration problem or any piece of the meal that was being promised? No. It was a bill to defund DACA, to defund the Deferred Action program, subjecting hundreds of thousands of DREAMers to deportation—a bill that Republicans voted for and that passed in this body.