

CONCLUSION OF MORNING
BUSINESS

The PRESIDING OFFICER. Morning business is closed.

EXECUTIVE SESSION

EXECUTIVE CALENDAR

The PRESIDING OFFICER. Under the previous order, the Senate will proceed to executive session to resume consideration of the following nomination, which the clerk will report.

The senior executive legislative clerk read the nomination of Scott H. Rash, of Arizona, to be United States District Judge for the District of Arizona.

The PRESIDING OFFICER. The Senator from Illinois.

UNANIMOUS CONSENT REQUEST—S. RES. 579

Mr. DURBIN. Madam President, some of you at home may be old enough to remember a distinct circular scar on your upper arm. You may remember a parent or grandparent who had one. That mark was probably one of the world's greatest public health successes—the eradication of the deadly smallpox virus. That so many alive today no longer remember the death and misery caused by this disease is a testament to global efforts in a cooperative manner.

The smallpox virus likely originated more than 3,000 years ago and was one of the most devastating diseases ever in the history of humanity. It was barely visible under the most powerful microscope and was known for fiery bumps covering the face and body, profuse internal bleeding, black vomit, and pieces of destroyed skin that would shed off one's body.

Smallpox is estimated to have killed up to 300 million people in the 20th century—300 million—and around 500 million in the last hundred years of its existence.

In 1967, the World Health Organization launched a historic, intense effort to eradicate smallpox. The global eradication effort initially used a strategy of mass vaccination to achieve 80 percent vaccine coverage in each country and, thereafter, used contact tracing—familiar with the word?—to reduce and rein in additional outbreaks.

Ultimately, the global eradication of smallpox was certified and endorsed in 1980, making it one of the most successful collaborative public health initiatives in the history of the world. In fact, this month marks the 40th anniversary of the World Health Organization's historic achievement: the end of smallpox.

Similar global efforts have been taken to deal with diseases such as polio and Ebola. So imagine my concern and that of the rest of the world that, amid the devastating global coronavirus pandemic, the United States decided just recently to sit out a conference to collaborate and raise

funds to research, manufacture, and distribute a possible coronavirus treatment and vaccine.

Just as with the smallpox effort, such a global collaborative approach makes sense, being both morally and strategically the thing to do to save lives around the world. You see, joining forces with other countries would help speed up the development and eventual distribution of a coronavirus vaccine that we all desperately seek. It would save lives in America, but it would also save lives around the world.

No one knows—no one knows—where the vaccine will eventually be perfected or produced, so we should be on this. The United States should be at the table. We should be part of the collective global effort to find this vaccine.

Clearly, other world leaders get it. They understand the obvious imperative of raising \$8 billion to be spent over the next 2 years. Eight billion dollars is a massive sum of money until you place it up against the price we are currently paying for this virus.

Our allies in the European Union and Norway came to this table that the United States vacated, or refused to attend, and each pledged \$1 billion toward this \$8 billion goal.

Who was absent from this critical effort to save lives around the world, including lives in the United States? Sadly, it was the United States itself. We were not part of this virtual global conference. You see, again, another short-sighted and critically missed opportunity to address the coronavirus, a question about what this administration was thinking. Why were we missing in action when all of these countries came together?

I don't know where this vaccine will be found. It will be a great source of pride if it is in the United States. I have the greatest confidence in the men and women who are researchers and the businesses prepared to produce and develop it. I have the greatest confidence in them. But what if the very safest vaccine, the most effective vaccine, the one that is proven to be the best comes instead from England or Germany? Does that mean we will not use it because it is not the American vaccine? We know better than that. We want the safest, most effective vaccine, wherever it may come from, to be available to the world and, certainly, to the United States of America.

Supporters in Congress said little or nothing when it came to the decision to vacate and to not be present at this international conference. The President has blamed others for problems that we face today, but it was his decision not to participate in this global conference on the vaccine. It could have devastating consequences.

So what does it mean for America? Well, we continue to have some of the world's best researchers: experts at the National Institutes of Health, the Centers for Disease Control and Prevention, and many universities and private

researchers that work across the country and around the world. Many NIH-funded researchers have spent years studying coronaviruses. Their knowledge could help to pave the way for future breakthroughs.

I applaud them, and I have to tell you, for the last 4 or 5 years there has been a quartet of Senators of both political parties who have given dramatic investments to the National Institutes of Health for additional research. We have been led by ROY BLUNT, the Republican chair of the Appropriations Subcommittee, as well as LAMAR ALEXANDER, the Republican chair of the Health, Education, Labor, and Pensions Committee. PATTY MURRAY has always been at the forefront of this effort, and I have done my best to back them up every way possible.

We have had a 30-percent or more increase over the last 4 years in research at the NIH, so I believe in the NIH, and I have made it a major part of the job that I have undertaken here in the U.S. Senate with my bipartisan colleagues.

Clinical trials, we know, are underway at NIH for vaccines. I want to commend that agency; Dr. Fauci, a friend of more than 20 years; and Dr. Collins, the same, for their tireless, unwavering, and inspired effort. But it is plausible, as I mentioned earlier, that the best vaccine candidate may turn up in some other country, not in the United States; that it will be some overseas company that decides to initiate and lead the production of the vaccine.

In a rush to research and validate a vaccine, ramp up production, and address global allocation and supply needs that would ensure affordability and access worldwide, where will the United States stand: in the fray, in the battle, or on the sidelines?

Last week we decided to stay on the sidelines and not to work with global partners to find this vaccine. When the United States pursues a go-it-alone approach while the rest of the world is working together, where does that leave us? That is why last week Senators Schumer, Murray, Leahy, Menendez, Murphy, Duckworth, and nearly three dozen others joined me in introducing a straightforward resolution that calls on the United States to join these global efforts.

I am grateful to organizations like PATH, Shot@Life, Better World Campaign, and the UN Association of the United States for their support of this resolution as well. Quite simply, we should be part of these efforts to not only offer American expertise but to share in lifesaving benefits.

We used to have a profound, well documented, proud bipartisan history of such effort. For example, I was pleased to rally around President Bush's call to stem the scourge of AIDS around the world through the historic PEPFAR Program. Many of my Republican colleagues in the Senate supported these efforts.

Now we face this coronavirus outbreak. I was equally proud of President