

million yacht was seized in Europe. Ninety million dollars is actually pretty cheap for a Russian oligarch's yacht. Some of these boats run up to \$600 million. Up to \$300 billion of Russian Central Bank assets have been seized or frozen by the United States and our allies.

All these actions raise a very important question. Think about the destruction in Ukraine, the thousands of people who have been killed, the atrocities, and the bodies of men and women left in the streets as Russian soldiers and occupiers are expelled by the brave Ukrainian defenders.

Can we imagine if there is, for example, a cease-fire that puts the immediate violence to rest—we hope that happens—but can we imagine at that moment giving all of this wealth, all of Russia's wealth, the yachts, the bank accounts, the villas, and the planes back to Putin and his cronies as Ukraine lies in ruin and as the Ukrainians bury their dead?

I think the answer is no. We cannot imagine doing that. We will not do that. I don't believe that the Biden administration intends to do that. But the law here is very complicated. These assets are not actually seized. They are merely frozen and blocked.

So this legislation—which I urge all of my colleagues to support today, a bipartisan bill—asks the administration to come up with a mechanism that would enable us to take this wealth and to sell it, to dispose of it, and to use the proceeds to help the people and Government of Ukraine rebuild their country.

Yes, it is complicated. If we apply our American legal constructs to these men and women who have served Putin loyally all these years, it looks like they are the owners of these assets. One of them owns the Chelsea football team in Great Britain. Some own property in the United States. But, in fact, Mr. Speaker, if you understand how Russia works, then you understand that the true owner of all of these assets is one man. It is Putin. These are pooled assets. He can use them whenever he wants.

So I believe it is fitting that we should pass legislation encouraging the administration to use the wealth that has supported this cruel regime to help to rebuild the country that the Putin regime is destroying.

It is the right thing to do, and it is the practical thing to do because this reconstruction effort will, in fact, cost up to hundreds of billions of dollars. We should not be saddled with the full cost of that. Let's use Russia's money to rebuild Ukraine.

Mr. CONNOLLY. Mr. Speaker, I think this is an important piece of legislation in trying to contain the malign activities of the Iranian Government especially in a critical region, critical to us and critical to the world.

Mr. Speaker, I urge my colleagues to support this bill, and I yield back the balance of my time.

Mr. MEUSER. Mr. Speaker, I have no further speakers.

In closing, Iran is a state sponsor of terrorism that oppresses its own people and poses a grave threat to the U.S. and our allies in the Middle East, and the Iranian regime is using drones to expand that threat. Just last month retiring CENTCOM Commander General McKenzie told Congress that he was very concerned about the remarkable growth in number and efficiency of Iran's UAV program and long-range drones. We have a responsibility to our men and women in uniform to do everything we can to counter Iran's dangerous UAVs.

I am pleased we are taking this step today to clarify our sanctions laws and make it clear that they cover Iran's drones.

Mr. Speaker, I am grateful that we can continue the long history of bipartisan cooperation to respond to Iran's threats, and I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Virginia (Mr. CONNOLLY) that the House suspend the rules and pass the bill, H.R. 6089, as amended.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the ayes have it.

Mr. FULCHER. Mr. Speaker, on that I demand the yeas and nays.

The SPEAKER pro tempore. Pursuant to section 3(s) of House Resolution 8, the yeas and nays are ordered.

Pursuant to clause 8 of rule XX, further proceedings on this motion are postponed.

GLOBAL MALNUTRITION PREVENTION AND TREATMENT ACT OF 2021

Mr. CONNOLLY. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 4693) to advance targeted and evidence-based interventions for the prevention and treatment of global malnutrition and to improve the coordination of such programs, and for other purposes.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 4693

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Global Malnutrition Prevention and Treatment Act of 2021".

SEC. 2. AUTHORIZATION OF EFFORTS TO PREVENT AND TREAT MALNUTRITION GLOBALLY.

(a) IN GENERAL.—The Administrator, in coordination with the heads of other relevant Federal departments and agencies, is authorized and encouraged to support efforts to prevent and treat malnutrition globally, including by—

(1) targeting resources and nutrition interventions to support the most vulnerable populations susceptible to severe malnutrition,

including children under the age of 5 and pregnant and lactating women;

(2) increasing coverage, particularly in priority countries, of nutrition interventions that include coordinated deployment of prenatal nutrient supplements, breastfeeding support, vitamin A supplementation, specialized nutritious food products for the treatment of acute malnutrition, and other evidence-based interventions, as appropriate;

(3) increasing the use of context and country-appropriate fortification of staples and condiments with essential nutrients;

(4) advancing evidence-based programs and interventions carried out using data-driven approaches, best practices, and targeted to country-specific contexts and needs;

(5) supporting partner governments to develop policies to prevent and treat malnutrition;

(6) leveraging investments to strengthen health systems, including to support community health workers to advance improved nutrition outcomes;

(7) improve diets through safe, affordable, nutritious foods in the food system; and

(8) ensuring rigorous monitoring and evaluation of such efforts.

(b) EXTERNAL COORDINATION EFFORTS RELATED TO NUTRITION PROGRAMS.—The Administrator, in coordination with the heads of other relevant Federal departments and agencies, should coordinate, as appropriate, with bilateral and multilateral donors, governments of partner countries, United Nations agencies, civil society organizations, nongovernmental organizations, including faith-based organizations, and the private sector to prevent and treat malnutrition globally, including by supporting efforts to—

(1) build the capacity of local and community-based organizations and governments of partner countries to ensure sustainability of nutrition interventions;

(2) expand research and innovation to identify and increase effective and evidence-based nutrition interventions based on country-specific contexts;

(3) improve coordination and structure of supply chains for nutrition interventions;

(4) expand domestic resource mobilization and domestic financing for nutrition interventions; and

(5) seek to leverage additional resources and encourage investment into innovative and multi-stakeholder finance partnerships to advance burden sharing in nutrition-related assistance.

(c) INTERAGENCY EFFORTS.—In carrying out subsections (a) and (b), the Administrator, in coordination with the heads of other relevant Federal departments and agencies, consistent with the Global Nutrition Coordination Plan, shall seek to leverage additional resources to prevent and treat malnutrition globally, including by—

(1) increasing cooperation among relevant Federal departments and agencies represented in the Global Nutrition Coordination Plan to better leverage grants, technical assistance, debt, equity, loan guarantees, and public-private partnerships; and

(2) utilizing the Administrator's role as a member of the Board of Directors of the United States International Development Finance Corporation to consider opportunities within the Corporation's development impact framework that support improved nutrition outcomes.

SEC. 3. SELECTION OF PRIORITY COUNTRIES.

(a) IN GENERAL.—The Administrator, in coordination with the Nutrition Leadership Council, shall select foreign countries as priority countries for purposes of targeting programs to prevent and treat malnutrition globally.

(b) **CRITERIA.**—The selection of priority countries under subsection (a) shall be based on the following:

(1) The prevalence of severe malnutrition among children under the age of 5 and pregnant and lactating women.

(2) The presence of high-need, underserved, marginalized, vulnerable, or impoverished communities.

(3) The enabling environment for improved nutrition, including presence of national nutrition plans and demonstration of strong political commitment.

(4) Any other criteria that the Administrator determines to be appropriate.

(c) **UPDATES.**—The Administrator shall update the selection of priority countries under subsection (a) not later than 5 years after the date of the enactment of this Act.

(d) **SENSE OF CONGRESS.**—It is the sense of Congress that the Administrator should continue to undertake nutrition interventions in countries not selected as priority countries, particularly in contexts in which opportunities are identified to advance multisectoral development programming and integrate efforts to prevent and treat global malnutrition with other priority areas and program objectives.

SEC. 4. NUTRITION LEADERSHIP COUNCIL.

(a) **ESTABLISHMENT.**—The Administrator is authorized to establish in the United States Agency for International Development the Nutrition Leadership Council (in this section referred to as the “Council”), which shall coordinate Agency efforts to prevent and treat malnutrition globally.

(b) **DUTIES.**—The duties of the Council shall include—

(1) advancing United States Agency for International Development efforts to prevent and treat malnutrition globally;

(2) ensuring nutrition interventions, particularly in priority countries, are carried out in close coordination with other relevant United States Government strategies and policies and provisions of law, including—

(A) the Global Food Security Act of 2016 (22 U.S.C. 9301 et seq.);

(B) the Senator Paul Simon Water for the World Act of 2014 (22 U.S.C. 2151 note);

(C) the Global Child Thrive Act of 2020 (subtitle I of title XII of division A of Public Law 116–283); and

(D) the Global Fragility Act of 2019 (22 U.S.C. 9801 et seq.); and

(3) ensuring nutrition interventions are coordinated with nutrition programs carried out by other relevant Federal departments and agencies.

(c) **MEMBERSHIP.**—The Council shall include representatives of the following bureaus and independent offices of the United States Agency for International Development:

(1) The Bureau for Global Health.

(2) The Bureau for Resilience and Food Security.

(3) The Bureau for Humanitarian Assistance.

(4) Any other relevant bureau or independent office that the Administrator determines to be appropriate.

SEC. 5. IMPLEMENTATION PLAN.

(a) **IN GENERAL.**—Not later than 260 days after the date of the enactment of this Act, the Administrator, in coordination with the heads of other relevant Federal departments and agencies, shall develop and submit to the appropriate congressional committees an implementation plan for programs to prevent and treat malnutrition globally described in section 2.

(b) **MATTERS TO BE INCLUDED.**—The implementation plan required by subsection (a) shall include the following:

(1) A description of specific and measurable goals, objectives, and performance metrics

with respect to such programs, including clear benchmarks and intended timelines for achieving such goals and objectives.

(2) A description of monitoring and evaluation plans with respect to such programs, as appropriate.

(3) In priority countries, a description of efforts to ensure that nutrition is adequately addressed in the Country Development Cooperation Strategy to the extent practicable and identify opportunities to expand efforts to prevent and treat malnutrition, including through leveraging existing health and development programs and other ongoing activities.

(c) **CONSULTATION.**—The implementation plan required by subsection (a) shall be developed in consultation with, as appropriate and to the extent possible, representatives of nongovernmental organizations, including faith-based organizations, civil society organizations, multilateral organizations and donors, relevant private, academic, and philanthropic entities, and the appropriate congressional committees.

SEC. 6. REPORT.

(a) **IN GENERAL.**—Not later than one year after the date of the enactment of this Act, and annually thereafter for 5 years, the Administrator shall submit to the appropriate congressional committees a report that describes progress made towards preventing and treating malnutrition globally.

(b) **MATTERS TO BE INCLUDED.**—The report required by subsection (a) shall include the following:

(1) A summary of progress made towards achieving the specific and measurable goals, objectives, and performance metrics towards ending global malnutrition.

(2) In priority countries—

(A) a detailed summary of nutrition programs and activities in the previous fiscal year, including a breakdown of the countries to which nutrition resources have been allocated and an estimated number of people reached through nutrition interventions; and

(B) an description of the coordination of nutrition programs with other health and development programs and priorities.

(3) A summary of efforts to expand research and innovation to development and scale up new tools to prevent and treat malnutrition globally.

(4) An assessment of the collaboration and coordination of nutrition efforts of the United States Agency for International Development with United Nations agencies, the World Bank, other donor governments, host country governments, civil society, and the private sector, as appropriate.

(5) A description of other donor country and host country financial commitments and efforts to prevent and treat malnutrition.

(6) An identification of constraints on implementation of programs and activities and lessons learned from programs and activities from the previous fiscal years.

(c) **INCLUSION IN OTHER REPORTS.**—The Administrator may include the report required by subsection (a) as a component of other congressionally mandated reports provided to appropriate congressional committees, as appropriate.

SEC. 7. COMPLIANCE WITH THE FOREIGN AID TRANSPARENCY AND ACCOUNTABILITY ACT OF 2016.

Section 2(3) of the Foreign Aid Transparency and Accountability Act of 2016 (22 U.S.C. 2394c note) is amended—

(1) in subparagraph (C), by striking “and” at the end;

(2) in subparagraph (D), by striking the period at the end and inserting “; and”; and

(3) by adding at the end the following: “(E) the Global Malnutrition Prevention and Treatment Act of 2021.”.

SEC. 8. DEFINITIONS.

In this Act:

(1) **ADMINISTRATOR.**—The term “Administrator” means the Administrator of the United States Agency for International Development.

(2) **APPROPRIATE CONGRESSIONAL COMMITTEES.**—The term “appropriate congressional committees” means—

(A) the Committee on Foreign Affairs and the Committee on Appropriations of the House of Representatives; and

(B) the Committee on Foreign Relations and the Committee on Appropriations of the Senate.

(3) **NUTRITION LEADERSHIP COUNCIL.**—The term “Nutrition Leadership Council” means Nutrition Leadership Council established by section 4.

(4) **PRIORITY COUNTRY.**—The term “priority country” means a foreign country selected under section 3 for purposes of targeting programs to prevent and treat malnutrition globally.

SEC. 9. SUNSET.

The requirements of this Act and the amendments made by this Act shall terminate on the date that is 7 years after the date of the enactment of this Act.

The **SPEAKER** pro tempore. Pursuant to the rule, the gentleman from Virginia (Mr. **CONNOLLY**) and the gentleman from Pennsylvania (Mr. **MEUSER**) each will control 20 minutes.

The Chair recognizes the gentleman from Virginia.

GENERAL LEAVE

Mr. **CONNOLLY**. Mr. Speaker, I ask unanimous consent that all Members have 5 legislative days in which to revise and extend their remarks and include extraneous material on H.R. 4693.

The **SPEAKER** pro tempore. Is there objection to the request of the gentleman from Virginia?

There was no objection.

Mr. **CONNOLLY**. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise today in support of H.R. 4693, the Global Malnutrition Prevention and Treatment Act of 2021.

In the wake of COVID-19, we have seen malnutrition rates climb and food insecurity become an ever-greater challenge. Jarringly, it is predicted that disruptions to global food and health systems will double global malnutrition rates—double—with women and children bearing the brunt of those effects. It is estimated that in 2022 the devastating global effects of COVID-19 could add an additional 17 million severely malnourished children worldwide. We cannot stand by while millions of children's lives are on the line with COVID, climate change, and conflict worsening the global situation. That is why the Foreign Affairs Committee took action with H.R. 4693 which will direct USAID to implement solutions to prevent and treat this global malnutrition.

This bill establishes a nutrition leadership council to identify populations most at risk to severe malnutrition and to prioritize prevention and treatment programs. Preventing and treating malnutrition is relatively inexpensive to implement and has high returns. With every \$1 we spend, we improve health and increase cognitive

and physical development yielding the equivalent of a \$35 return.

By coordinating activities throughout the U.S. Government with our partner countries with the United Nations' specialized agencies, civil society, private-sector actors and more, we can sustain nutrition interventions that save lives.

This bill also requires USAID to provide Congress an implementation plan and annual reports concerning its programs for treating and preventing malnutrition.

Mr. Speaker, we must do more to support those in dire need, and we must answer their call for help. H.R. 4693 is this Chamber's opportunity to do just that: to prevent the lives of those suffering from malnutrition all around the world. This measure builds on the work and jurisdiction of USAID and will bolster efforts to respond to and prevent malnutrition everywhere.

While the United States has led the world in responding to COVID-19 and its effects around the world, we must also ensure we don't lose ground in longstanding investments such as food security. By supporting this legislation we can take a meaningful step in doing both.

Mr. Speaker, I urge my colleagues to support this measure so we can move it one step closer to the President's desk, and I reserve the balance of my time.

Mr. MEUSER. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, as we speak, millions of women and children are on the brink of starvation around the world. An estimated 3.1 million children perish every year due to malnutrition. In fact, almost half of the deaths among children under the age of 5 are linked to malnutrition, mainly in low- and middle-income countries. In the 21st century this tragedy should be prevented.

This bipartisan bill will support efforts to scale up targeted and effective nutrition programs in countries most at risk for severe malnutrition. That will help us have a real impact on people's lives around the world.

Fallout from the Russian invasion of Ukraine and the administration's chaotic and deadly withdrawal from Afghanistan have compounded global humanitarian crises. Coupled with the COVID-19 pandemic, now more than ever we must do everything we can to advance lifesaving nutrition programs, and that starts with a strong and effective USAID who has the tools it needs to ensure no child dies from malnutrition.

Every parent wants to be able to put food on the table, nourish their families, and provide for themselves. Support for low-cost, effective nutrition interventions mean an investment in the health, development, and productivity of the next generation of children, and I urge my colleagues to support this important measure.

In closing, Mr. Speaker, in addition to the crises in Ukraine, Afghanistan, and Ethiopia, the COVID-19 pandemic

has erased years of progress towards ending extreme poverty. It has pushed more people into severe food insecurity and malnutrition and has destabilized fragile states. This legislation will help us reclaim lost ground in the battle against hunger and malnutrition.

USAID plays a pivotal role in helping nations across the globe combat hunger and poverty. The agency, alongside our NGO and private-sector partners, has helped secure nutrition stability for expectant mothers and young children along with countless others in need, but more must be done to truly end starvation.

I want to thank members of the advocacy community, especially Bread for the World and RESULTS, for their continued support of this legislative effort.

Mr. Speaker, I am grateful we can continue the long history of bipartisan cooperation to help those in need around the world, and I yield back the balance of my time.

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Mr. CONNOLLY. Mr. Speaker, I yield myself the balance of my time.

The United States has a long tradition, on a bipartisan basis, of dealing with the issue of food insecurity and malnutrition. Herbert Hoover led some of the early efforts by the United States Government after World War I to feed a starving Europe. He even provided food assistance to the Bolshevik regime in Russia because we understood that malnutrition didn't respect political ideology or labels.

Through the Food for Peace program in the early Kennedy and Johnson years, there was cooperation between the late Senator Bob Dole and the late Senator George McGovern to make sure that both domestic and international food security were staples of U.S. policy and bipartisan support.

This is an important piece of legislation. No child in 2022 should ever be malnourished, and certainly, no child should ever die from malnourishment.

This is an important statement by this Congress about our values as human beings and as a society and reaffirms a longstanding commitment by the American people to not let this kind of tragedy happen anywhere.

Mr. Speaker, I urge passage of the bill, and I yield back the balance of my time.

Ms. JACKSON LEE. Mr. Speaker, I rise in strong support of H.R. 4693, Global Malnutrition Prevention and Treatment Act of 2021, which will establish programs and direct the U.S. Agency for International Development (USAID) to carry out activities to prevent and treat malnutrition globally.

This bill would advance targeted and evidence-based interventions for the prevention and treatment of global malnutrition and to improve the coordination of such programs.

Under this bill, USAID must leverage resources to address malnutrition through the Global Nutrition Coordination Plan and its role on the board of directors of the International Development of Finance Corporation.

The Global Nutrition Coordination plan is an interagency effort to strengthen the impact of U.S. investments in nutrition.

USAID must also select countries based on specific malnutrition-related indicators for the purpose of targeting malnutrition prevention and treatment programs.

The plan will prioritize high-need, underserved, marginalized or impoverished communities.

However, countries must display strong political commitment and have existing nutrition strategies already in place, which ensures that the plan to combat malnutrition in a select country will be effective and impactful.

Additionally, USAID may:

- establish the Nutrition Leadership Council to coordinate activities to prevent and treat malnutrition;

- target resources and nutrition interventions to the populations most susceptible to severe malnutrition, and otherwise support efforts to prevent and treat malnutrition globally;

- coordinate activities among partner countries, United Nations agencies, civil society, private sector actors, and others to, for example, build capacity in partner countries to sustain nutrition interventions.

USAID would also be required to provide Congress with an implementation plan and annual reports concerning the programs for treating and preventing malnutrition.

As a senior Member of the House of Representatives and the founding chair of the Congressional Children's Caucus, I believe this bill is vital for preventing and treating malnutrition around the world.

We must ensure continued focus on multi-sectoral nutrition programs, while monitoring these interventions to ensure effective use of American taxpayer dollars.

I commend the USAID maternal and child nutrition programs that seek to improve health outcomes by implementing nutrition-specific interventions, and those that address the immediate, health-related determinants of undernutrition.

It is no secret that poverty amplifies the risk of malnutrition.

People who are poor are more likely to be affected by different forms of malnutrition.

Furthermore, malnutrition increases health care costs, reduces productivity, and slows economic growth, which can perpetuate a cycle of poverty and ill-health.

Malnutrition can have several negative and deadly effects such as decreased cognitive development in newborns, greater vulnerability to disease and other issues.

Optimizing nutrition early in life, especially from the 1,000 days from conception to a child's second birthday ensures the best possible start in life, with long-term benefits.

According to UNICEF, nearly half of all deaths in children under 5 are attributable to undernutrition.

Every year, the world loses hundreds of thousands of young children and babies to hunger-related causes.

Women, infants, children, and adolescents are at particular risk of malnutrition.

I would be remiss if I stood here today without addressing the global impact of COVID-19 on malnutrition.

The significant and life-altering shocks created by the pandemic and efforts to mitigate the transmission of COVID-19 have resulted in the disruption of food systems.

This has also upended health and nutrition services which has devastated livelihoods, as well as threatened food security.

These necessary containment measures have unfortunately caused more vulnerable children to face malnourishment.

By the end of this year nearly 14 million more children are likely to be severely malnourished because of the pandemic's impacts.

This means that 58.9 million young children—or almost the whole population of South Africa—will likely face life-threatening malnutrition if the global community doesn't act.

The pandemic revealed the already existing brutal food insecurity struggles in many nations while triggering economic recessions and jeopardizing access to food.

The combined impacts of environmental factors, COVID-19 and political conflicts place malnutrition as an overwhelming concern in the global community.

I ask my colleagues to join me in voting for H.R. 4693 because with this bill we are committing ourselves to improving the health of women and children in impoverished areas, helping prevent illness, and improving economic conditions in poorer countries.

Every parent deserves the opportunity to put nutritional food on the table to take care of their families.

By supporting these effective nutrition interventions, we unlock the ability to begin investing in the well-being, growth, and productivity of our generations to come.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Virginia (Mr. CONNOLLY) that the House suspend the rules and pass the bill, H.R. 4693.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the ayes have it.

Mr. FULCHER. Mr. Speaker, on that I demand the yeas and nays.

The SPEAKER pro tempore. Pursuant to section 3(s) of House Resolution 8, the yeas and nays are ordered.

Pursuant to clause 8 of rule XX, further proceedings on this motion are postponed.

PARTICIPATION OF TAIWAN IN THE WORLD HEALTH ORGANIZATION

Mr. CONNOLLY. Mr. Speaker, I move to suspend the rules and pass the bill (S. 812) to direct the Secretary of State to develop a strategy to regain observer status for Taiwan in the World Health Organization, and for other purposes.

The Clerk read the title of the bill.

The text of the bill is as follows:

S. 812

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. PARTICIPATION OF TAIWAN IN THE WORLD HEALTH ORGANIZATION.

(a) FINDINGS.—Congress makes the following findings:

(1) The World Health Organization (WHO) is a specialized agency of the United Nations, charged with coordinating health efforts within the United Nations system. The World Health Assembly (WHA) is the decision-making body of the WHO, which con-

venes annually in May to set the policies and priorities of the organization. Statehood is not a requirement for attendance at the WHA, and numerous observers, including non-members and non-governmental organizations, attended the most recent virtual WHA in May 2020.

(2) Taiwan began seeking to participate in the WHO as an observer in 1997. In 2009, with strong support from successive United States Administrations, Congress, and like-minded WHO Member States, and during a period of improved Cross-Strait relations, Taiwan received an invitation to attend the WHA as an observer under the name “Chinese Taipei”. Taiwan received the same invitation each year until 2016, when following the election of President Tsai-Ing Wen of the Democratic Progressive Party, Taiwan's engagement in the international community began facing increased resistance from the People's Republic of China (PRC). Taiwan's invitation to the 2016 WHA was received late and included new language conditioning Taiwan's participation on the PRC's “one China principle”. The WHO did not invite Taiwan to attend the WHA as an observer in 2017, 2018, 2019, or 2020.

(3) Taiwan remains a model contributor to world health, having provided financial and technical assistance to respond to numerous global health challenges. Taiwan has invested over \$6,000,000,000 in international medical and humanitarian aid efforts impacting over 80 countries since 1996. In 2014, Taiwan responded to the Ebola crisis by donating \$1,000,000 and providing 100,000 sets of personal protective equipment. Through the Global Cooperation and Training Framework, the United States and Taiwan have jointly conducted training programs for experts to combat MERS, Dengue Fever, and Zika. In 2020, after successfully containing the spread of the novel coronavirus within its borders while upholding democratic principles, Taiwan generously donated millions of pieces of personal protective equipment and COVID-19 tests to countries in need. These diseases know no borders, and Taiwan's needless exclusion from global health cooperation increases the dangers presented by global pandemics.

(4) Taiwan's international engagement has faced increased resistance from the PRC. Taiwan was not invited to the 2016 Assembly of the International Civil Aviation Organization (ICAO), despite participating as a guest at the organization's prior summit in 2013. Taiwan's requests to participate in the General Assembly of the International Criminal Police Organization (INTERPOL) have also been rejected. In May 2017, PRC delegates disrupted a meeting of the Kimberley Process on conflict diamonds held in Perth, Australia, until delegates from Taiwan were asked to leave. Since 2016, the Democratic Republic of São Tomé and Príncipe, the Republic of Panama, the Dominican Republic, Burkina Faso, the Republic of El Salvador, the Solomon Islands, and the Republic of Kiribati have terminated longstanding diplomatic relationships with Taiwan and granted diplomatic recognition to the PRC.

(5) Congress has established a policy of support for Taiwan's participation in international bodies that address shared transnational challenges, particularly in the WHO. Congress passed H.R. 1794 in the 106th Congress, H.R. 428 in the 107th Congress, and S. 2092 in the 108th Congress to direct the Secretary of State to establish a strategy for, and to report annually to Congress on, efforts to obtain observer status for Taiwan at the WHA. Congress also passed H.R. 1151 in the 113th Congress, directing the Secretary to report on a strategy to gain observer status for Taiwan at the ICAO Assembly, and H.R. 1853 in the 114th Congress, di-

recting the Secretary to report on a strategy to gain observer status for Taiwan at the INTERPOL Assembly. However, since 2016, Taiwan has not received an invitation to attend any of these events as an observer.

(b) AUGMENTATION OF REPORT CONCERNING THE PARTICIPATION OF TAIWAN IN THE WORLD HEALTH ORGANIZATION.—

(1) IN GENERAL.—Subsection (c) of section 1 of the Act entitled, “To address the participation of Taiwan in the World Health Organization” (Public Law 108-235; 22 U.S.C. 290 note) is amended by adding at the end the following new paragraph:

“(3) An account of the changes and improvements the Secretary of State has made to the United States plan to endorse and obtain observer status for Taiwan at the World Health Assembly, following any annual meetings of the World Health Assembly at which Taiwan did not obtain observer status.”.

(2) EFFECTIVE DATE.—The amendment made by paragraph (1) shall take effect and apply beginning with the first report required under subsection (c) of section 1 of the Act entitled, “To address the participation of Taiwan in the World Health Organization” (Public Law 108-235; 22 U.S.C. 290 note) that is submitted after the date of the enactment of this Act:

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Virginia (Mr. CONNOLLY) and the gentleman from Pennsylvania (Mr. MEUSER) each will control 20 minutes.

The Chair recognizes the gentleman from Virginia.

GENERAL LEAVE

Mr. CONNOLLY. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and include extraneous material on S. 812.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Virginia?

There was no objection.

Mr. CONNOLLY. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise today in support of S. 812, a bill to direct the Secretary of State to develop a strategy to regain observer status for Taiwan in the World Health Organization, and for other purposes.

S. 812 will help support Taiwan's effort to gain observer status at the World Health Assembly, the decision-making body of the World Health Organization.

Since the end of 2019, the unprecedented COVID-19 pandemic has reminded the global community of the importance of international cooperation and collaboration on global health.

Taiwan has been a leader on global health. While the People's Republic of China was actively censoring public discussion of and silencing doctors about the effects and outbreak of the virus in China itself, Taiwan was saving lives globally with its early detection and dissemination of information about the virus.

Despite its proximity to the original outbreak in China, Taiwan employed a strategy of social distancing, border controls, mask mandates, quarantine,