

While I don't agree with any of their policy statements or any of the things they are for, I really don't wish to put them in prison.

Highlighting the disturbing nature of DOJ's prosecution of this minuscule fringe group, Patrick Eddington, of the Cato Institute, writes that the party "and its related political movement can only be described as fringe, bit players on the American political scene whose previous statements and stances already mirrored the Kremlin's line" for decades.

Eddington continues: "It makes one wonder why the FBI targeted such marginal groups with little to no impact on the broader political process, and whether an unstated goal of" these DOJ raids and imprisoning people "was to put the entire domestic political advocacy community on notice that a domestic group with foreign connections is considered fair game for FBI scrutiny even if legitimate First Amendment activity is involved."

According to an article in *The Nation* magazine, "Since its initial enactment into law, the DOJ has invoked FARA," the statute at hand, "to stigmatize and criminalize political advocacy that is contrary to the interests of the US government. Early illustrative examples include the 1951 indictment of W.E.B. Du Bois, who was prosecuted as an agent of the Soviet Union for having promoted and circulated the Stockholm Appeal, calling for a ban on nuclear weapons."

You can see how this gathers up political speech. You don't have to agree with the speech. But if the speech happens to represent the viewpoint of another country, the speech may be stifled and you may be arrested for it.

I understand the Senate will be asked to pass unanimously two bills today that would allow the DOJ to retroactively require this registration or this paperwork and another that would, effectively, write an enemies list into law.

Both give the DOJ prosecutors greater ability to selectively threaten disfavored groups by prosecuting activities that are otherwise protected by the First Amendment. Yet these bills have not been marked up by the committee of jurisdiction, the Senate Foreign Relations Committee. At the very least, the Senate Foreign Relations Committee, of which I am a member, should consider these bills before being rushed into passage.

Therefore, I object.

The PRESIDING OFFICER. Objection is heard.

The Senator from Iowa.

Mr. GRASSLEY. I would like to speak to this.

This legislation was passed in 1938. You heard me say in my opening remarks that for a long period of time—until about, I think, less than 8 years ago, when we started bringing attention to this legislation not being enforced by the Department of Justice—probably only about a dozen people or

less were convicted under this legislation.

I heard what my colleague from Kentucky said about this legislation. I think you could read his remarks to indicate that a violation of freedom of speech is—we might as well repeal the lobbying act or lobbying registration act—whatever the law is—of 1946 that lobbyists have to register if they are going to lobby the Congress of the United States.

It doesn't have anything to do with freedom of speech. What it has to do with is transparency, so we know who is spending money to influence the laws in this country. That has nothing to do with freedom of speech. You can say anything you want to. It is just about transparency and accountability that comes with transparency. I think it is very important.

I don't find a lot of fault with what Senator RAND has said about regulatory criminalization and too much federalization, but this is a law that has been on the books since 1938 and, really, hasn't been enforced until very recently here. I think when you enforce the law, you get respect for the law. And there ought to be respect for a simple little law that says nothing more than: We just want to know who you are; who you are working for; and, particularly, if it is a foreign country, we ought to have a record of who is being hired to influence public policy in the United States as a result of your work. It could be a national security concern. It could be a business concern. It doesn't matter what that concern is. You can do anything you want to lobby Congress, but we ought to know who you are.

I have great respect for Senator PAUL. Of course, as you just found out, I happen to disagree with him on his decision not to let this bill move forward.

I know a thing or two about government abuse and weaponization. My investigative staff has been surveilled by the Justice Department, as an example. You find out that from whistleblowers. You don't find out that because there is transparency of what they are doing.

I and my investigative staff have been subject to briefings from the Justice Department that were targeted to interfere in my investigative work. I have seen government weaponization firsthand.

That data point shouldn't be a basis to object to this bill. The due diligence has been done—the oversight, the hearing, the negotiations. This bill is bicameral. This bill is bipartisan. There is no legitimate basis for this bill to not be law.

I thank my colleagues, including the objector, for their giving attention to it even if we couldn't agree on it.

I yield the floor.

The PRESIDING OFFICER. The Senator from Washington

UNANIMOUS CONSENT REQUEST—S. RES. 828

Mrs. MURRAY. Mr. President, I come to the floor to offer a simple resolu-

tion, one that reaffirms the basic principle that when you go to the ER, the emergency room, they should be allowed to treat you. When your life is in danger, doctors should be able to do their job. When you need emergency care, including an abortion, no politician should stop you from getting it.

This seems incredibly simple to me. It should not be controversial, especially if everyone who talks about protecting the life of the mother seriously means it. After all, that is what emergency care is for: saving the life of the mother. And yet, when the Biden-Harris administration tried to make clear that these women should get care, many Republicans actually opposed them.

I really want to emphasize, we are talking about women whose water breaks dangerously early or who are experiencing uncontrollable hemorrhaging or sepsis or pre-eclampsia. And still, Republicans actually filed a brief in court saying, essentially, no, we don't think doctors should be required to provide abortion care when a patient's life is at stake.

Their brief rejected that idea—that basic medical reality—of abortion as a stabilizing care. That is really shocking to me, and it should be shocking to everyone.

After a brief like that, I am not going to let any of my Republican colleagues off the hook just for saying they care about the life of the mother—not if they don't lift a finger to actually protect women and to actually make clear that emergency care can include abortion.

We need to send a very clear message on this. The Senate needs to speak with one voice and tell the American people: Yes, we want to make sure your doctor can save your life. Your doctor can save your life.

Before my Republican colleagues get up to object, let me be clear. You will not get by pretending a resolution like this isn't necessary, not when we are hearing now firsthand from doctors racked with guilt for decisions that Republican politicians made for them; not when they are hearing firsthand from women who have bled, suffered, and nearly died because their care was delayed; and, certainly, not when Texas saw maternal deaths now skyrocket because of its strict abortion ban. The data in Texas paints a clear, brutal picture of the reality. These abortion bans are killing women.

Republicans are also not going to get by trying to shift the blame and argue emergency care is already protected because the whole point of this resolution is to say emergency care is protected. If you oppose the Senate actually saying that, don't you see how this could be part of the problem? Don't you see how that could be very dangerous for women?

I can't emphasize this enough. If you don't see and you don't understand—listen. Women are speaking out. Doctors are speaking out. They are terrified; they are heartbroken; and they

are angry. And they are watching right now to see if we can just pass this simple resolution and do the very bare minimum of saying, with one voice, women have a right to get an abortion when their life is at stake—when their life is at stake.

As if in legislative session, I ask unanimous consent that the Committee on Health, Education, Labor, and Pensions be discharged from further consideration and the Senate now proceed to S. Res. 828 on the right to emergency healthcare, including abortion care; that the resolution be agreed to, the preamble be agreed to, and the motions to reconsider be considered made and laid upon the table.

The PRESIDING OFFICER. Is there objection?

The Senator from Oklahoma.

Mr. LANKFORD. Mr. President, reserving the right to object. This resolution itself and the wording that it has in this resolution says it is the sense of the Senate that every person has the basic right to emergency healthcare, including abortion care.

Let me be very, very specific on this. We had a hearing today in the Finance Committee where this same subject was addressed. We had ob-gyns from both perspectives on this, those who perform abortions and those who have a moral objection to it. We had a very good argument to be able to lay some facts out to be able to walk through this, with two sets of attorneys there to be able to walk through the law.

Here is what became very clear during that conversation this morning in that open hearing. There is no State in America in which a woman faces persecution or prosecution for having an abortion. No State criminalizes miscarriage. No State criminalizes removing an ectopic pregnancy. No States prohibits lifesaving care for the mother. No State requires a woman to be actively dying in order for her doctor to care for her.

We heard story after story about doctors being concerned that they may face this because they are hearing political rhetoric—political rhetoric like Vice President HARRIS in a speech that she said recently—where she said women were being arrested and facing prosecution for experiencing miscarriages. That is not true.

So all of this rhetoric that is being put out there is making doctors afraid, but it was very clear from the conversation in law that none of those things are actually true. Every physician prior to the Dobbs decision—when there were limitations on abortion across the country and post-Dobbs decision, when every single State is making those decisions—allowed physicians in an ER to be able to make lifesaving decisions for the mother and the child. Every doctor has already the ability to be able to make that decision to be able to protect the life of the mother. They have the protections to be able to do that.

So this is a false claim that somehow what happened in the Dobbs decision

and what is happening in the States is limiting that. It is actually the political rhetoric that is making people afraid.

What also came out during the hearing this morning was the very real risk of chemical abortions. We have recently had tragic situations where women used the chemical abortion pills that they are being told are as safe as Tylenol, and that it has life-threatening and in some cases, recently, life-taking consequences. Chemical abortion pills are not Tylenol, yet they are being sold as that.

And what we are seeing is more and more cases of the diminishing of “this is no big deal to be able to end this pregnancy” when they haven’t seen a doctor because the Biden administration is now saying you don’t have to see a physician. So the woman doesn’t know if she has an ectopic pregnancy or not. If she takes the chemical abortion pill while she has an ectopic pregnancy, she is at risk. But the Biden administration is saying: You don’t have to see a doctor. They can just mail it to you. It is just as safe as Tylenol when it is not.

We are also not being tested for their blood type to be able to make sure it doesn’t affect future pregnancies during this chemical abortion. And they are not also determining by sonogram how far along the mom is in this process because there are limitations to this where it becomes more and more dangerous.

All those things are restrictions that used to be there, that the Biden administration has taken away to say: No, we want more people to have access to chemical abortions. But it is making it more dangerous for women. And we have seen this recently.

So we want to engage in a conversation about how can we actually put some of those basic humane doctor-requested restrictions in there to make sure we are protecting the lives of all those women. That is a better conversation for us to be able to have. To say: What is it the FDA actually said was appropriate in the past, and what can we do to be able to protect the lives of women?

So, yes, I object to this resolution based on the wording and what we are doing. But, yes, we should be able to continue to have this conversation because there is a real concern that more and more doctors are afraid to do basic healthcare in an ER because more and more people are laying rhetoric out there that they are going to be arrested, and that is not true.

There has not been a single physician in the country that has been arrested based on actually performing lifesaving care for mom in any ER room in the country.

With that, I object.

The PRESIDING OFFICER. Objection is heard.

The Senator from Washington.

Mrs. MURRAY. Mr. President, I disagree with the Senator from Okla-

homa, and let me be perfectly clear about what is happening. Here in America, in the 21st century, pregnant women are suffering and dying, not because doctors don’t know how to save them, but because doctors don’t know if Republicans will let them.

There are skyrocketing maternal death rates in States like Texas, and as I spoke out on the floor last week, there are at least two women dead in Georgia today because of Republican abortion bans. Those kids are now growing up without a mother. That is the harsh reality.

Republicans can’t ignore that. Donald Trump can’t shout over it. The American people will not ever forget it. And every day we are going to continue to hold those people who are opposed to this accountable for the cruelty of these abortion bans.

The fact is that the resolution that I offered simply says that doctors can provide emergency care for the life of a mother. I don’t understand where the disagreement is, and I hope that we can pass this and give doctors and women the confidence that, in the United States of America, when you are pregnant and having a severe emergency medical situation, you will be treated. I yield the floor.

The PRESIDING OFFICER. The Senator from Wisconsin.

UNANIMOUS CONSENT REQUEST—S. 2152

Ms. BALDWIN. Mr. President, I rise today in support a woman’s right to control her own body. Across the country, women have been stripped of the freedom to make their own decisions—decisions about their families, their health, and their futures. Judges and politicians have inserted themselves into exam rooms, telling doctors they cannot treat their patients, sometimes even if that treatment would save her life.

In my home State of Wisconsin, women lived for 15 months under a criminal abortion ban that was passed in 1849, a law on the books from 1 year after our statehood and 70 years before a woman won the right to vote. And while there were no women in the room when the statute was crafted, 2 years ago, Wisconsin women woke up to find their healthcare decisions would be dictated by a law that predates the Civil War. They woke up to find out that they now had fewer rights than their mothers and their grandmothers. That day began 15 months of confusion and chaos and heartbreak for families across Wisconsin.

We heard stories of women bleeding out from miscarriages, developing life-threatening infections, or being forced to carry unviable pregnancies until they could find an appointment out of State. For countless women, that meant driving hours, paying for lodging and childcare, and taking time off work just to make their own decisions about their own body.

Patients from every one of Wisconsin’s 72 counties traveled to Illinois just to access healthcare, some traveling over 500 miles. Prior to the Dobbs