

CORONAVIRUS

How Trump Gutted Obama's Pandemic-Preparedness Systems

Former officials: Trump's reshuffling of positions and departments, focus on business solutions, downgrading of science, left the country dangerously unprepared for an unprecedented pandemic.



BY ABIGAIL TRACY

MAY 1, 2020



BY DREW ANGERER/GETTY IMAGES.

 SAVE

When the first reported cases of Ebola in Guinea came to light in March 2014, it set off a mad scramble inside the Obama White House to track and contain the spread of the virus, which killed **around 50%** of the people it infected. Though not nearly as contagious as the current coronavirus, an epidemic, or even a pandemic, seemed possible if the disease weren't confined to its West African redoubts. The Obama White House had clear protocols and chains of command for these kinds of threats. “The way to stop the forest fire is to isolate the embers,” **Beth Cameron**, a former civil servant who ran the White House's National Security Council Directorate for Global Health Security and Biodefense, told me. Cameron and her colleagues quickly drew up a memo to **Susan Rice**, the national-

security adviser, and **Lisa Monaco**, the homeland-security adviser, outlining what was known about the outbreak, setting off a chain of action that went up through the Oval Office, then spread through the government.

In the summer of 2018, on **John Bolton**'s watch, the team Cameron once ran was one of three directorates **merged** into one amid an overhaul and streamlining of **Donald Trump**'s National Security Council. And the position Monaco previously held, homeland-security adviser, was downgraded, stripped of its authority to convene the cabinet.

Hive

Where Wall Street, Washington, and Silicon Valley meet.

SIGN UP

By signing up, you agree to our [user agreement](#) (including [class action waiver and arbitration provisions](#)), and acknowledge our [privacy policy](#).

Obama's team never faced a crisis as serious as the novel coronavirus, a truly unprecedented challenge. But officials who worked on past crises and experts on pandemic response believe that Trump's dismissal—and in some aspects, wholesale discarding—of the Obama administration's preparedness structures and principles, and the current administration's ideas about government—that states could and should take take responsibility, that business could be more effective than government at solving problems at this scale—have left them dangerously unprepared.

“What the administration lacked in February, and still lacks today is articulating an overall strategy for managing this crisis,” a former administration official told me.

“There’s a framework in place, we understand what authorities and roles and responsibilities everybody across government has at their disposal to be able to address an emergency. But when you walk through crisis management at a presidential level, the job of the president, first and foremost, is to develop and articulate the end state that we are trying to get to.”

Trump has yet to do this. “President Trump has, throughout this, seemed a little schizophrenic about his role,” **Jeremy Konyndyk**, a senior policy fellow at the Center for Global Development who ran USAID’s Office of U.S. Foreign Disaster Assistance in the Obama administration, told me. “On the one hand, he clearly wants all the credit for it when things go right. On the other hand, he has furiously attempted to avoid having to take ownership for the success of the effort...he wants the credit without the accountability.”

The biggest difference between Obama’s approach and Trump has to do with science. “Traditionally, we have had a situation where the response is always scientifically, technically proven,” says a former government official. “Of course there are political considerations. But the options that are presented are fundamentally sound from a scientific perspective.”

In the current situation, the president decides which scientists and governmental organizations are listened to. “We’re seeing that institutions like the FDA and the CDC have been curtailed; their ability to do the right thing has been curtailed,” this person added, noting Food and Drug Administration commissioner **Stephen Hahn**’s subtle hedge when **asked on CNN** about Trump’s suggestion that people inject themselves with disinfectants to fight COVID-19. “I certainly wouldn’t recommend the internal ingestion of a disinfectant,” Hahn, a member of the White House coronavirus task force, said.

Trump critics are quick to draw contrast between the COVID-19 and Ebola crises. Obama, they assert, was guided by objective facts. “One of the principles [that] President Obama was very clear on when it came to public health crises is you have

to be guided by science and facts and speak clearly and consistently and credibly on those issues,” Monaco told me. “That meant, frankly, having public health and medical experts do the communicating.” Monaco recalled Obama’s decision not to issue a travel ban in the midst of the Ebola outbreak as an example of this posture. “President Obama’s view was, we’re not going to be buffeted by the political winds here. We’re going to go with what the scientists and the public health experts tell us is in our best interest,” she said.

Even Trump detractors recognize that the COVID-19 pandemic is of an unprecedented scope; it dwarfs the threat posed by Ebola and other outbreaks. “This is a huge pandemic, it was going to be monumental no matter who was in charge,” the former government official said emphatically. In December and January, national-security officials in the White House were tracking the nascent virus, grasping for a way to characterize it. Would the death toll fall short of or exceed the seasonal flu? There was a hope that the novel coronavirus would stay isolated abroad or perhaps die out, inexplicably on its own, as was the case with SARS.

But COVID-19 was a beast of a different degree. “This ended up hitting a sweet spot of transmissibility and lethality that we just had not experienced. Normally those two things are a trade-off. The more transmissible something is, typically the less severe it is, the more severe something is it knocks people out quickly and thus it’s not very transmissible,” the former administration official explained. “The asymptomatic transmission, with the duration during which people are contagious but still asymptomatic, allows it to spread very widely.”

The U.S. crisis response structure has not been equipped to span all 50 states. “The system...is very heavily designed around a relatively short duration, very geographically specific incidents, things like hurricanes and earthquakes and tornadoes and tsunamis,” the former administration official told me. The refrain is, “locally executed, state managed, and federally supported.” And the thinking goes, when a locality gets overwhelmed—say a hurricane or a tornado hits—it goes to its state; if that state gets overwhelmed it will go to neighboring states for assistance,

mutual aid; and when that system is exhausted, the federal government steps in with additional resources.

It is this federal-support piece that has been missing, sources I spoke with say. Testing for COVID-19 has been abysmal. Lacking guidance and support from the White House, governors have been left scrambling to obtain ventilators and personal protective equipment for frontline workers, creating a sellers' market. "[To] take federal capability and federal responsibility out of the mix means you're leaving the states to fight this with one arm tied behind their back," Konyndyk said. The former government official put it more bluntly. "How are we going to explain to the American people how the government has really failed them?...Government failed drastically and it failed to do its part. And it shows that some functions, the private sector cannot do alone."

The reorganization and streamlining of the National Security Council in the Trump era, specifically whether Bolton dismantled an office focused on pandemics, has emerged as a point of discussion and **competing narratives**. At the start of the Trump administration, **Tom Bossert** held the position and, as an assistant to the president, had the highest rank of commissioned officers in the White House. Cameron recalled that during the presidential transition, Rice pushed for pandemics to be one of the three topics covered in an exercise with the incoming administration. At the time, the White House was tracking an outbreak of H7N9, a new strain of the avian flu emerging in China. In Bossert, Cameron saw a receptive participant in the exercise. "He placed a high priority on pandemics because he understands them," she told me. But when Bolton was tapped to replace **H.R. McMaster**, Bossert was **shown the door** and the position was downgraded to a deputy assistant to the president, no longer able to convene the cabinet. **Doug Fears** and **Peter Brown** succeeded Bossert, but their tenures were brief. According to the former administration official, Brown only met with **Robert O'Brien**, Bolton's successor, once during his time in the White House. Today, the position of homeland-security adviser is vacant.

~~\$2.50~~ \$1 per month for 1 year + a free tote.

~~\$2.50~~ \$1 per month for 1 year + a free tote.

Subscribe Now ▶

The role of the homeland-security adviser was created after the 9/11 attacks, the premise being that one person in the West Wing, steps away from the Oval Office, was focused solely on immediate domestic threats. “The idea is you want somebody in the White House who is directly and immediately responsible to the president on these issues,” explained Monaco, who earned the nickname “Dr. Doom” from Obama in the role. “From an interagency perspective, in a crisis—whether it’s Ebola, whether it’s a terrorist attack, whether it’s a natural disaster—inevitably, that coordination has to happen from the White House, even as the rest of the agencies do the operational work. But at a certain point, you need to have that direction and an ability to quickly break through bureaucratic impediments and move quickly...pursuant to an overall strategy.” A whole-of-government response, but informed by the experts, the thinking goes.

The reorganization of the NSC under Bolton, and what exactly happened to the pandemic response team, has been disputed. **Tim Morrison**, a former senior director for counterproliferation and biodefense on the National Security Council, dismissed an op-ed written by Cameron as playing politics in a **subsequent editorial**. But Cameron stressed the importance of officials in the White House having a narrow focus on pandemics. “A senior director is sitting in the national-security adviser’s regular stand-up meetings. And if the senior director has a number of roles and one of them is pandemics and one of them is weapons of mass destruction generally, and one of them is nuclear security and one of them is North Korea and you only have a couple of minutes to provide an update, you’re going to prepare for an update on the thing that is happening that day or that is the most pressing,” she told me—to the potential exclusion of other threats, like a looming pandemic.

Since COVID-19 exploded in the states, both Vice President **Mike Pence** as head of the coronavirus task force, and **Jared Kushner**, have somewhat stepped into the role. But there has yet to be a whole-of-government mobilization, as Monaco described. Instead, the response has been ad hoc, shifting day to day depending on the mood of the president who has refused to accept that the buck stops with him.

The novel coronavirus is exposing the inadequacies of a cornerstone of Trump's (and Kushner's) governing philosophy. "The entire argument behind electing Donald Trump is that business can handle anything better than the government, right? So the entire philosophy, the entire ideology of every senior leader in the White House and that they've installed across the federal government is, 'Get the private sector to do it. Government shouldn't be picking winners or losers and coordinating these efforts,'" the former administration official told me. But the problem is, there are some things only the federal government can do, after all. "This is the crisis for this administration, just as every administration faces, that challenges its ideology and worldview to its core and cannot be effectively addressed with that worldview."

With no sign that Trump is poised to fill the leadership vacuum, sources I spoke with fear the devastation is only beginning. "I think that we will eventually come out the other side, but it's going to be one where it would take longer and they would lead to more loss of life," the former government official told me. "The private sector is mobilizing but there's nobody to pick it up on the other end...I think the governors are going to take the necessary steps to be able to get through this, but it's not going to be because of a compelling, informed narrative from institutions that have traditionally helped guide us to the right place."

Looking ahead to a potential vaccine, there is a question as to whether the Trump administration will be able to effectively distribute a panacea. A vaccine alone is not a solution—a mass vaccination campaign is. "As we are asking where is the plan and the resources for testing, we should be asking the same questions of what's the strategy and the plan for once we—God willing—have a vaccine," Monaco said.

"What thinking and planning is going on right now to ensure that will we have a

strategy and a way to ensure that that vaccine is distributed and able to be provided? And frankly, not just here—around the world.”

Juliette Kayyem, a former homeland-security official in the Obama administration who played a critical role in the H1N1 crisis and the vaccination rollout, was blunt in her assessment. “President Trump does not have the capacity to govern a mass vaccine-distribution program because that’s going to be some really hard decisions,” she told me. For instance, who gets it first? Does the administration prioritize younger individuals, critical to rebooting the economy but also most likely to be carriers? Or the most vulnerable populations? When doling out the H1N1 vaccine, Kayyem explained that it, “Required prioritization to determine best means to distribute a vaccine that was coming on board in real time. That decision was driven by science, including the need to protect first responders and focus on children who were impacted by the disease.”

The biggest problem she sees today is, “This president doesn’t make decisions based on objective criteria.”

More Great Stories From *Vanity Fair*

- Inside Donald Trump and Jared Kushner’s [Two Months of Magical Thinking](#)
- How [Andrew Cuomo](#) Became the Coronavirus Trump Antidote
- What Do Your Genetics Have to Do With [Your Chances of Dying](#) From Coronavirus?
- Trump’s [Scientific Ignorance](#) Is Crippling His Coronavirus Response
- How to [Work From Home](#), According to Neuroscience
- From the Archive: The Untold Story of Dallas’s [Heroic Ebola Response](#)

Looking for more? [Sign up](#) for our daily Hive newsletter and never miss a story.