

United States Senate

WASHINGTON, DC 20510

April 20, 2020

The Honorable Michael R. Pompeo
Secretary of State
U.S. Department of State
2201 C Street, NW
Washington, DC 20050

Secretary Pompeo:

We write seeking details about your plans to forge a durable, constructive, and ongoing partnership with the World Health Organization (WHO) to combat the COVID-19 pandemic as the disease continues to ravage the United States and the world. Just as there was confusion and shortcomings in our domestic response to the outbreak, there may be lessons to be learned from the WHO's response to COVID-19. However, the fact remains that the WHO is the primary institution with the capacity to respond that countries across the world rely on when confronted with pandemics and other health challenges. The middle of a global pandemic is not the time to upend our relationship with this institution. To the contrary, your focus should be on ensuring the WHO has the authority, resources, and independence it needs to coordinate an effective global response.

For decades, the WHO has helped to advance important U.S. interests and fight disease around the globe. We have successfully partnered with the WHO over the years to achieve incredible milestones, including the eradication of smallpox, a 99 percent reduction in polio in recent years, and the successful response to the 2003 SARS epidemic. U.S. leadership was integral to these achievements. More recently, U.S. leadership helped the WHO's response to the 2018 Ebola outbreak in the Democratic Republic of Congo, replacing ineffective and disjointed bilateral U.S. assistance with a multinational intervention. Indeed, as this administration has acknowledged, the WHO has "been a longstanding partner" and has made us "safer from the perpetual threat of infectious diseases."¹ Just one month ago, the U.S. stood with the G7 and said "we fully support the World Health Organization in its global mandate to lead on disease outbreaks and emergencies with health consequences."²

Regarding COVID-19, despite its inherent, structural limitations—as a multilateral member organization the WHO cannot compel countries to disclose public health information—the WHO moved swiftly to begin working with the Centers for Disease Control and Prevention (CDC) on January 1, just one day after China disclosed a cluster of cases in Wuhan. On January 5, the WHO issued advisories worldwide to international public health leaders and to every country. On January 10, the WHO issued a comprehensive package of guidance to countries on

¹ Dr. Robert R. Redfield, Director of the Centers for Disease Control and Prevention (CDC), *CBS*, Apr. 15, 2020, <https://twitter.com/CBSThisMorning/status/1250398444973371392?s=20>; Alex M. Azar, Secretary of the Department of Health and Human Services (HHS), "Plenary Statement, 72nd World Health Assembly," May 20, 2019, <https://www.hhs.gov/about/leadership/secretary/speeches/2019-speeches/plenary-statement-72nd-world-health-assembly.html>.

² White House, "G7 Leaders' Statement," Mar. 16, 2020, <https://www.whitehouse.gov/briefings-statements/g7-leaders-statement/>.

how to detect, test, and manage potential COVID-19 cases, which covered possible human-to-human transmission, and how to best protect health workers. On January 20, the WHO successfully gained entry for its scientists into Wuhan, China. While that should have occurred sooner, without the intervention of the WHO, the world may never have secured that access. The WHO warned on January 22 of human-to-human transmission, the same day President Trump made his first comments about the coronavirus, saying, “We have it totally under control...It’s going to be just fine.”³ The next day, on January 23, the WHO warned of a 4 percent death rate and potential exporting of the virus to “any country.” The WHO declared a Public Health Emergency of International Concern (PHEIC) on January 30, their highest level of alarm. By contrast, although Secretary Azar declared a public health emergency on January 31, retroactive to January 27, the Administration did not declare a national emergency in the United States until 43 days later.⁴

In the critical area of testing, the WHO moved quickly to develop a reliable test, publish its results, and distribute kits widely. In the crucial period of mid-January through February, the WHO distributed at least 1.4 million test kits, which were produced by a German company. The CDC declined to use the WHO kits, insisting on using its own. Over that same period, however, the Administration’s efforts to distribute tests ground to a halt, and fewer than 4,000 tests from the CDC were used in the United States. Today, in mid-April, we still lack an adequate testing infrastructure to respond to the demands of this crisis.

The inherent complexity of responding to and containing a pandemic demands greater U.S. leadership to coordinate an international response. As they are doing in other international institutions where the United States is stepping back, the Chinese government will likely exert greater influence at the WHO absent U.S. leadership. The solution to countering Chinese influence at the WHO is American leadership and engagement, not America absenteeism.

It is critical that we develop a strategy to work with and strengthen the WHO’s response to the pandemic. Americans remain vulnerable to COVID-19 until the pandemic is brought under control around the world. We must be doing more. We must participate in the research and development of an eventual vaccine, urge membership of Taiwan and other nations who have much to offer, and call on all governments to provide the WHO prompt, accurate data on emerging infectious diseases.

This extraordinary crisis will require us to ask hard questions after we turn the tide against the virus. We must understand what actions China took to conceal information from, or misrepresent the severity of the crisis to, the WHO in its early days, and what we can do as a member of the WHO to prevent this in the future. We also must learn more about actions the United Nations

³ President Donald Trump, “President Donald Trump Sits Down with CNBC’s Joe Kernen at the World Economic Forum in Davos, Switzerland,” *CNBC*, <https://www.cnbc.com/2020/01/22/cnbc-transcript-president-donald-trump-sits-down-with-cnbc-joe-kernen-at-the-world-economic-forum-in-davos-switzerland.html>.

⁴ Department of Health and Human Services (HHS), “Secretary Azar Declares Public Health Emergency for United States for 2019 Novel Coronavirus,” Jan. 31, 2020, <https://www.hhs.gov/about/news/2020/01/31/secretary-azar-declares-public-health-emergency-us-2019-novel-coronavirus.html>; White House, “Proclamation on Declaring a National Emergency Concerning the Novel Coronavirus Disease (COVID-19) Outbreak,” Mar. 13, 2020, <https://www.whitehouse.gov/presidential-actions/proclamation-declaring-national-emergency-concerning-novel-coronavirus-disease-covid-19-outbreak/>.


and the WHO took that either helped or hampered our own response. And we must ask hard questions about our own government's response.

Right now, however, the United States should and must work alongside our partners in the international community to respond to the COVID-19 pandemic before more lives and livelihoods are lost, both here and abroad. We look forward to hearing how the U.S. plans to do so, and to working with you to bring a positive vision for the WHO and the central role it can play in flattening the curve, turning the tide, and curing this disease.

Sincerely,



Robert Menendez
United States Senator



Jeffrey A. Merkley
United States Senator



Charles E. Schumer
United States Senator



Edward J. Markey
United States Senator



Christopher A. Coons
United States Senator



Benjamin L. Cardin
United States Senator



Christopher Murphy
United States Senator

/s/ Chris Van Hollen

Chris Van Hollen
United States Senator