COMMITTEE ON OVERSIGHT AND REFORM

CAROLYN B. MALONEY, New York, Chairwoman

ELEANOR HOLMES NORTON, District of Columbia
JAMES COMER, Kentucky, Ranking Minority Member

STEPHEN F. LYNCH, Massachusetts
JIM JORDAN, Ohio

Jim Cooper, Tennessee
Virginia Foxx, North Carolina

GERALD E. CONNOLLY, Virginia
JODY B. HICE, Georgia

RAJA KRISHNAMOORTHI, Illinois
GLENN GROTHMAN, Wisconsin

Jamie Raskin, Maryland
Michael Cloud, Texas

Ro Khanna, California
Bob Gibbs, Ohio

Kweisi Mfume, Maryland
Clay Higgins, Louisiana

Alexandria Ocasio-Cortez, New York
Ralph Norman, South Carolina

Rashida Tlaib, Michigan
Pete Sessions, Texas

Katik Porter, California
Fred Keller, Pennsylvania

Cori Bush, Missouri
Andy Biggs, Arizona

Shontel M. Brown, Ohio
Andrew Clyde, Georgia

Danny K. Davis, Illinois
Nancy Mace, South Carolina

Debbie Wasserman Schultz, Florida
Scott Franklin, Florida

Peter Welch, Vermont
Jake LaTurner, Kansas

Henry C. “Hank” Johnson, Jr., Georgia
Pat Fallon, Texas

John P. Sarbanes, Maryland
Yvette Herrell, New Mexico

Jackie Speier, California
Byron Donalds, Florida

Robin L. Kelly, Illinois
Vacancy

Brenda L. Lawrence, Michigan

Mark DeSaulnier, California

Ayanna Pressley, Massachusetts

RUSS ANELLO, Staff Director

JENNIFER GASPAR, Chief Counsel and Deputy Staff Director

Yusra Abdelmeguid, Clerk

CONTACT NUMBER: 202-225-5051

MARK MARIN, Minority Staff Director

SELECT SUBCOMMITTEE ON THE CORONAVIRUS CRISIS

JAMES E. CLYBURN, South Carolina, Chairman

MAXINE WATERS, California

STEVE SCALISE, Louisiana, Ranking Minority Member

CAROLYN B. MALONEY, New York

JIM JORDAN, Ohio

Nydia M. Velázquez, New York

Mark E. Green, Tennessee

Bill Foster, Illinois

Nicole Malliotakis, New York

Jamie Raskin, Maryland

Mariannette Miller-Meeks, Iowa

Raja Krishnamoorthi, Illinois
CONTENTS

Hearing held on April 29, 2022 ................................................................. Page 1

WITNESSES

The Honorable Gene Dodaro, Comptroller General of the United States, Government Accountability Office
Oral Statement .............................................................................................. 6

Candice Wright, M.P.P., Director, Science, Technology Assessment, and Analytics, Government Accountability Office
(Speaking with Mr. Dodaro.) .................................................................

Sonja Rasmussen, M.D., M.S., Former Editor-in-Chief, Morbidity and Mortality Weekly Report (2015 - 2018), Centers for Disease Control and Prevention
Oral Statement .............................................................................................. 8

Anita Desikan, M.S., M.P.H., Senior Analyst, Center for Science and Democracy, Union of Concerned Scientists
Oral Statement .............................................................................................. 7

Written opening statements and the written statements of the witnesses are available on the U.S. House of Representatives Document Repository at: docs.house.gov.

INDEX OF DOCUMENTS

The following document entered into the record during this hearing is available at: docs.house.gov.

The select subcommittee met, pursuant to notice, at 9:04 a.m., remotely; Hon. James Clyburn (chairman of the subcommittee) presiding. Present: Representatives Clyburn, Maloney, Velázquez, Foster, Raskin, Krishnamoorthi, Scalise, Jordan, Green, Malliotakis, and Miller-Meeks.

Mr. CLYBURN. Good morning. The committee will come to order. Without objection, the chair is authorized to declare a recess of the committee at any time. I now recognize myself for an opening statement.

For more than two years, the scientists who serve at our Nation’s public health agencies have been on the frontlines of our battle against the Coronavirus. Thanks to their tireless efforts and the leadership of President Biden, the worst of the pandemic appears to be behind us.

Before President Biden took office, public health officials had to contend with more than just a deadly virus. As Americans were dying by the thousands, then President Trump and his political appointees made the calculation that his reelection would be more likely if the seriousness of the pandemic were downplayed.

Pursuing this political strategy, Trump administration officials criticized and interfered with the work of the scientists at our Nation’s public health agencies because the science of the Coronavirus showed a grave threat to the American people.

These actions made our country sicker and did immense damage to our public health work force and to public trust in our scientific institutions.

Last week, Congress’ independent and nonpartisan watchdog issued a detailed report finding that government scientists observed incidents of political interference in the pandemic response that undermined the scientific integrity and independence of our Nation’s public health agencies.

The Government Accountability Office found in their report that CDC and FDA employees believed this quote that you see on the screen at the moment. Scientists who spoke to the GAO said they felt that the political—potential political interference they observed resulted in the alteration or suppression of scientific findings.
Some believe that political interference may have resulted in the politically motivated alterations of public health guidance or delayed publication of COVID–19-related scientific findings.

Career scientists across government agencies told GAO that they did not report incidents of political interference that they observed because they feared retaliation, thought leadership was already aware or were unsure how to report issues.

GAO’s findings confirm what the Select Subcommittee has always known—the Trump administration engaged in a persistent pattern of political interference in the Nation’s pandemic response.

Through our investigation, the Select Subcommittee has documented nearly 90 instances of this dangerous conduct. When scientific reports did not align with their political message, Trump administration officials tried to alter their findings, delay their release, or suppress them entirely.

Career scientists were blocked from speaking to the American public about the risks posed by the virus and how to mitigate its spread. They feared retaliation from political appointees simply for doing their jobs.

The Select Subcommittee continues to find new evidence detailing Trump administration officials’ obstructions of the CDC’s efforts to provide the American people with health guidance based on sound science.

New documents released today show that after the CDC drafted nonbinding guidance for safely gathering in religious settings, senior Trump White House officials forced the deletion of recommendations that they found. I quote “offensive,” even though they had no scientific basis on which to object.

Fortunately, President Biden has made restoring scientific integrity a priority. The Biden administration has taken steps to restore the independence and integrity of our Nation’s public health institutions, ensuring that every aspect of its response to the Coronavirus is based on sound science.

President Biden created an interagency scientific integrity task force under the Office of Science and Technology, which has issued key recommendations.

As noted by the GAO, agencies such as the CDC plan to align their scientific integrity trainings with these recommendations from the Biden administration.

While the Biden administration has made significant progress in its first 15 months to restore scientific integrity, more work remains.

GAO identified steps to improve longstanding institutional policies and procedures governing scientific integrity.

We must work together to ensure that any attempts at political meddling in science by political appointees in any future administration are unsuccessful. The lifesaving work of scientists at our public health agencies must never be corrupted for the perceived political benefit of the President or for any other reason.

No matter who sits in the Oval Office and no matter what public health emergencies arise in the future, the work of these scientists and their ability to speak to the American public must proceed without interference.
We are joined today by representatives from the Government Accountability Office and experts who can help us look back at the harm to scientific integrity and chart a path to reduce the threat as we move forward.

Thank you, and I will now yield to the ranking member for his opening statement.

Mr. Scalise. Thank you, Mr. Chairman, and also I would like to thank our witnesses who we will be hearing from shortly, and I especially want to thank Mr. Dodaro for his almost 50 years of continued service over at the GAO.

This hearing should be about the political interference with science that is well documented under the Biden administration.

Unfortunately, my colleagues on the other side of the aisle continue to use this subcommittee for political purposes as a poorly failed attempt to continue attacking the Trump administration, which, by the way, has been out of office for more than 15 months.

The American people have serious questions about what is happening in the Biden administration. But the Democrats on this subcommittee continue to ignore these concerns or are simply shielding their political allies from accountability.

During his campaign, President Biden promised repeatedly that his administration would follow the science on COVID. He also said he would, quote, “shut down the virus.”

Sadly, we have seen these hollow promises broken over and over again, including dramatically more deaths from COVID under President Biden’s tenure with also three proven and effective vaccines that he had when he walked in the door.

Democrats on this subcommittee, time after time, called for a national plan but have allowed this President to punt his responsibility to the states. Where are the voices on the left calling out this hypocrisy?

America's parents and House Republicans spent the last year calling on the Biden administration to follow the science by issuing up reopening orders on schools, doing things like lifting mask mandates.

The Biden administration continued to allow schools to be shut down and forced kids to be masked against the science. Surely, if our Democrat colleagues took their oversight responsibilities more seriously, we would uncover more examples of political influence by the Biden administration.

But I do want to highlight what, in my view, at least, is the most harmful and alarming interference that we have seen with the science from this Biden administration. It has been uncovered that the Biden administration officials injected political interference into the CDC’s school reopening guidance in 2021.

Documents and testimony prove that, contrary to the CDC’s long-standing practice of keeping draft guidance documents confidential, senior agency officials, including the CDC director herself, shared secretly draft documents of school guidance with the American Federation of Teachers, a political union with no scientific expertise but with a history of donating tens of millions of dollars to Democrat campaigns.

After reviewing the draft, the union staff asked Director Walensky to install a trigger, as they put it, in the guidance to
make it easier for union bosses to shut down schools. The CDC obliged. They went along with the union bosses’ request by changing the science.

And what happened? Thousands of schools across the country remained closed throughout the 2020 and 2021 school year. The damaging edits by union bosses effectively locked millions of children out of their classrooms, causing serious long-term academic and mental harm to millions of children, and this has been well documented, too.

The science has been very clear about the damage done to our young children by shutting down schools because, in part, the CDC threw out the science and catered to the wishes of union bosses.

On February 18, 2022, committee staff interviewed Dr. Henry Walke, a career CDC scientist and medical doctor. Dr. Walke testified this level of coordination between the CDC and an outside organization was, quote, “uncommon.”

In fact, according to Dr. Walke, the CDC does not typically share advance draft guidance outside the agency for any reason, even with other Federal partners.

This was reaffirmed during a staff-level briefing with the CDC on March 2, 2022. This is political interference with the science, plain and simple.

The Biden administration abandoned medical science and replaced it with political science, all to give one of their largest donors unprecedented influence, which ended up harming millions of young children in the process.

This happened despite the fact that we learned way back in the summer of 2020 that many schools did follow the science and safely reopened. The evidence is clear. Keeping schools closed harmed kids.

Now we can see that student learning loss due to remote or hybrid learning is astronomical. In addition, the impact on their social and emotional well-being is incredibly alarming as well. The child suicide rates are surging, and the Surgeon General has declared a youth mental health crisis.

This is just one example of how President Biden has failed to follow the science relating to COVID. Playing politics with public health policy, as the Biden administration has done, harmed millions of American kids and seriously undermined America’s trust in our public health institutions.

It is interesting to note that Democrat examples that we have seen regarding political interference by the Trump administration involve things like looking to the First Amendment to protect free speech in our churches. Yes, that was something the administration looked at because even during a pandemic, the Bill of Rights is not discarded, though we have seen many in the Biden administration try to discard the Bill of Rights, including just recently, two weeks ago, when the courts overturned the Biden administration on their illegal mask mandate on planes.

You can be at a football game with 100,000 people screaming without a mask, but the Biden administration was still and still is trying to force people on planes to have to wear masks.

The option is there. They can wear two, three, or four masks if they want. It shouldn’t be mandatory, and a Federal judge just
made that clear. The Biden administration, by the way, is trying to reverse that.

But when you look at an example that I gave of what the Biden administration did to go around science, it involved catering to union bosses to undermine the learning ability of our children, and we have got well documented at hearings on this committee over and over again from science that talked about how much damage has been done both academically and emotionally to our young kids because of that kind of political interference by the Biden administration.

So I hope that Democrats on this subcommittee will stop trying to sweep these Biden administration interferences that have been documented under the rug and finally start demanding transparency and accountability and have hearings on that.

With that, Mr. Chairman, I look forward to hearing from our witnesses, and I yield back.

Mr. CLYBURN. Thank you, Mr. Scalise.

I would now like to introduce our distinguished witnesses.

First, I welcome back Gene Dodaro, the Comptroller General of the United States. Mr. Dodaro is no stranger to the members of the Select Subcommittee, and we appreciate his dedicated efforts to study and improve the Federal Government’s response to the Coronavirus pandemic at the General Accountability Office. Thank you for being with us again.

Appearing alongside Mr. Dodaro and available to answer members’ questions about the report is Candice Wright. Ms. Wright is the director of science, technology assessment, and analytics at the Government Accountability Office. She led the team that conducted the GAO’s recent scientific integrity review.

Next, I want to welcome Dr. Sonja Rasmussen. Dr. Rasmussen served at the Center for Disease Control and Prevention for 20 years, where she held various leadership positions, including editor in chief of CDC’s flagship publication, the Morbidity and Mortality Weekly Report series, director of this division of public health information dissemination, and deputy director of Influenza Coordination Unit, where she worked on pandemic preparedness issues. At CDC, she worked on several emergency responses, including 2009 H1N1, Zika, and Ebola.

Finally, I would like to welcome Anita Desikan. Ms. Desikan is a senior analyst for the Center for Science and Democracy at the Union of Concerned Scientists.

She investigates the role of science in public policy, focusing on topics like scientific integrity at Federal agencies and political interference in the scientific rulemaking process.

Will all the witnesses please raise their right hands?

Do you swear or affirm that the testimony you are about to give is the truth, the whole truth, and nothing but the truth, so help you, God?

[Witnesses are sworn.]

Mr. CLYBURN. Let the record show that the witnesses answered in the affirmative. Without objection, your written statements will be made part of the record.

Mr. Dodaro, you are recognized for five minutes for your opening statement.
STATEMENT OF GENE DODARO, COMPTROLLER GENERAL OF THE UNITED STATES, GOVERNMENT ACCOUNTABILITY OFFICE

Mr. DODARO. Thank you very much, Mr. Chairman. Good morning to you, Ranking Member Scalise, members of the committee.

Candice and I are very pleased to be here today to talk about our recent report on scientific integrity, procedures, and training at certain public health agencies.

We looked at the Center for Disease Control, the Food and Drug Administration, the National Institutes of Health, and the Assistant Secretary for Preparedness and Response.

Now, the focus of our review was to look at how prepared these key public health agencies are in order to deal with allegations of potential political influence in scientific decisionmaking.

What we found was that each of the agencies, to some degree, had broad statements about trying to make sure that they guarded scientific integrity from such political pressures. However, none of them had any detailed procedures in place in order to report or address any allegations of political influence.

This is problematic from a number of perspectives, including the fact people did not know how to report if they believed there was something inappropriate. People didn’t understand how they would be protected from retaliation, similar to such protections and whistleblower legislation that Congress has created.

So we recommended that all four agencies develop policies and procedures in order to report and address any allegations of potential political influence in scientific decisionmaking.

The agencies agreed with these recommendations, and actions are underway to the creation of a task force and, as was mentioned by the chairman, the implementation of the new Presidential directive on scientific procedures in order to address GAO’s recommendations.

Now, similarly, we looked at the training that was provided to the scientists and other individuals within these agencies to see if there was a clear definition of what was meant by political interference, how to report, how to discuss these issues, what kind of safeguards they would be protected by if they raised these type of issues, and, again, here we found significant shortcomings in all the training that is provided to the individuals in the CDC and FDA, NIH. However, NIH had a little bit in their training program, but it still needed to be—needs to be bolstered. The Assistant Secretary for Preparedness and Response follows the HHS procedures, which we found need to be improved, both from a policy level and at the training level.

Again, the agencies agreed to implement these recommendations. They are expected to produce new policies that comport with the GAO recommendations by this summer.

Now, last, I would say, in conclusion, we are also continuing our work to look at how these agencies are structured and whether or not there are some other recommendations that we might make to the Congress to make some modifications that might better safeguard from any allegations of political influence.
So I thank you for the opportunity to talk about our report today, and Candice and I will be happy to respond to questions at the appropriate time, Mr. Chairman.

Thank you very much.

Mr. CLYBURN. Thank you, Mr. Dodaro.
We will now hear from Ms. Desikan.

Ms. Desikan, you are recognized for five minutes.

STATEMENT OF ANITA DESIKAN, SENIOR ANALYST, CENTER FOR SCIENCE AND DEMOCRACY, UNION OF CONCERNED SCIENTISTS

Ms. DESIKAN. Thank you, Chairman Clyburn, Ranking Member Scalise, and members of the subcommittee, for holding this important hearing.

My name is Anita Desikan. I am a senior analyst for the Center for Science and Democracy at the Union of Concerned Scientists, or UCS for short.

For nearly a decade, I have worked as a public health researcher and have acted as a leading subject matter expert for a strong science-based and equitable response to the pandemic. I am thrilled to talk to you today about the need for strong scientific integrity protections across the government and especially at our Nation's public health agencies.

Scientific integrity refers to a process by which independent science can fully and transparently inform policy decisions free from inappropriate political, financial, ideological, or other undue influences.

UCS has played a leading role in researching scientific integrity and its role in science-based policymaking since 2004. Scientific integrity is integral to protecting the health and safety of communities across the Nation, especially underserved communities. The pandemic has shown in the starkest terms possible why scientific integrity matters.

The COVID–19 pandemic was and continues to be a public health crisis of unimaginable scale and devastation. The number of people in the U.S. who have died from COVID–19 is expected to soon reach 1 million.

There is likely no person—who is untouched by the fear, the loneliness, the hardships that the spread of this virus has wrought. This is especially true for Black, indigenous, people of color, low income, and rural communities throughout the U.S. for which the pandemic has—for which they have faced disproportionate harm and heartache during this pandemic.

Science has been pivotal to protecting the health and safety of people during the pandemic. But the role of science in decision-making goes far beyond vaccines and lifesaving treatments.

The use of the best available science is required by numerous public health laws and policies to protect the public from serious threats such as air pollution, toxic chemicals, and climate change impacts. Science, in other words, has played a major role in safeguarding the lives of millions over generations.

However, science at Federal agencies has long faced a serious problem. Since at least the 1950’s, some in government, often those with power and influence, have politicized Federal science in serv-
ice of their political agendas. Such tactics have included varying studies, censoring scientists, and halting data collection.

These attempts can have enormous consequences. For instance, the Trump administration’s numerous attempts during the pandemic to silence experts from speaking to the public and line editing, delaying or blocking the release of scientific documents deeply eroded public trust in scientific institutions, and the lack of clear scientific information coming from Federal scientists opened the door to the enormous spread of online misinformation and disinformation, the effects of which we are still dealing with to this day.

And these were not isolated incidents. According to our research, the Trump administration attacked science 204 times, which averages to an attack on science occurring once a week every week for four years.

Since 2005, UCS has conducted periodic surveys on scientific integrity to thousands of Federal scientists across the government and across the past three Presidential administrations.

In every survey we have conducted, we have found a connection between workplace morale and scientific integrity. When Federal scientists felt that they could do their jobs and communicate about their work without undue political interference, they were more likely to report personal job satisfaction and that their agency was effective in carrying out its mission.

The only way to prevent current and future administrations from engaging in politically motivated attempts to crush science is to put strong guardrails in place.

Most science-based agencies have scientific integrity policies, but they can vary wildly in the rights and protections they have for their scientists. For instance, few agencies specify that political appointees are required to follow scientific integrity guidelines and fewer agencies appear willing to investigate a scientific integrity violation when a political appointee is involved.

While the current system is functioning, it is full of holes. It is like water going through a leaky hose. Therefore, we need stronger and more comprehensive measures like the Scientific Integrity Act to plug these holes.

This would help ensure that agency decisions are informed by the best available science to protect people from the effects of the pandemic and other public health threats. The public needs and deserves a government that is willing to strengthen scientific integrity policies for the public good.

Thank you very much.

Mr. Clyburn. Thank you very much, Ms. Desikan.

Finally, we will hear from Dr. Rasmussen.

Dr. Rasmussen, you are recognized for five minutes.

STATEMENT OF SONJA RASMUSSEN, FORMER EDITOR-IN-CHIEF, MORBIDITY, AND MORTALITY WEEKLY REPORT, CENTERS FOR DISEASE CONTROL

Dr. Rasmussen. Thank you. Good morning, Chairman Clyburn, Ranking Member Scalise, and distinguished members of the committee. Thank you for the invitation to testify on the importance
of ensuring the scientific integrity of our Nation’s public health agencies.

I am Dr. Sonja Rasmussen, a pediatrician, clinical geneticist, and epidemiologist. For 20 years, from 1998 to 2018, I worked at the Centers for Disease Control and Prevention.

During this time, I served in a variety of leadership roles in birth defects, infectious diseases, pandemic planning, emergency preparedness, and response, and as editor in chief of CDC’s Morbidity and Mortality Weekly Report, or MMWR.

I am an author of over 270 publications and lead editor of the CDC Field Epidemiology Manual, the guide used by the CDC to train epidemic intelligence service officers on how to investigate and respond to acute public health events.

I am honored to come before this committee.

Since early 2020, when we first heard reports of a novel Coronavirus, I have closely followed the CDC’s response to COVID–19. I had served during several CDC responses to 2009 H1N1, Ebola, and Zika, so I knew what my former colleagues were facing.

Working on a CDC response to a public health emergency is challenging. The situation is rapidly evolving, and decisions need to be based on limited data. The stakes are high, people are sick and dying, and the situation is highly visible. Americans want answers now on how to protect themselves and their loved ones from the emerging public health threat.

Developing interim guidance is a difficult process to weigh the benefits of an intervention against the potential risks, often while the information in which you are basing those decisions is constantly changing.

With a new pathogen like the virus that causes COVID–19, guidance development is particularly difficult. Many questions are coming up. How is this new pathogen transmitted? Is it an aerosol or blood? How important is the transmission from surfaces? Can infected persons transmit the virus before they show symptoms? Just to name a few.

You need to consider logistical issues. For example, if you are recommending that people wear masks, are there enough available, or are they needed for frontline health workers who can mitigate the impact of the pandemic’s effects?

Feasibility is a critical consideration. Thus, you obtain input from key stakeholders, people who will be implementing the guidance that you are developing. Then you need to communicate that guidance and emphasize that it will change as additional information becomes available.

Fortunately, I knew that the CDC scientists have the expertise, knowledge, and experience to guide these public health decisions and are dedicated to maintaining their scientific rigor and integrity throughout the process.

As the former editor-in-chief of the MMWR, I was also closely following their publications. MMWR has long been considered to be the voice of the CDC with a focus on communicating timely, authoritative, accurate, objective scientific reports to guide public health action.

It is a well-respected publication, highly cited, and has a broad readership in the public health and medical communities. MMWR
has served a critical role in providing up-to-date information during previous health crises. For example, in 1981, cases of what later became known as AIDS were first reported in the MMWR, which prompted reporting of additional cases and subsequent identification of the disease.

One of the most difficult situations for me to hear about during the pandemic has been reports of political interference with the development of COVID–19 guidelines and demands to review and make changes to MMWR articles.

These reports threatened the credibility of the CDC and MMWR, essential sources of information to guide us through the pandemic.

Watching CDC, an institution that is highly revered around the world and to which I had dedicated my life’s work, lose the trust of so many Americans was painful, and to watch that lack of trust lead to more deaths from COVID–19 has truly been a tragedy.

We know that we will be challenged by future public health threats, whether another emerging infection, a bioterrorist attack, or a radiation emergency. It is essential that safeguards be put in place to protect the scientific integrity of public health agencies so that the American people know that they can trust the guidance that is coming from them.

To maintain that trust, these agencies need to be free of political influence. Our ability to protect the health of Americans during future public health threats depends on it.

Thank you.

Mr. CLYBURN. Thank you very much, Ms. Rasmussen.

We will now go into five minutes of questions for each member, and before I ask my question, I want to respond to the ranking member. I see he is off the screen. I am going to reserve until he gets back up because I really would—well, I see——

Mr. SCALISE. Hi, Mr. Chairman.

Mr. CLYBURN. OK. Well, thank you because I really wanted to respond to something you said in your ranking statement before we get to the questions. I want to do it with you present and give you an opportunity to respond to this.

You mentioned the Biden administration’s interference as it relates to school safety protocols when we were trying to get schools reopened. I do consider this as an attempt to distract from what we are trying to get to here in terms of interfering with the work of our scientists.

You know, we have had multiple CDC officials to come before this committee, and they have made it very clear to us that it is not—I want to emphasize it is not improper for CDC to engage with stakeholders. Engaging with stakeholders is something totally different from trying to discredit the work of scientists.

In fact, if you recall, Dr. Robert Redfield, director of the CDC under President Trump, told us. I am quoting him here, “It wasn’t unusual for the CDC, when they were developing guidance, to reach out for discussion purposes to groups that may be affected by the guidance. That is what CDC did,” end of quote.

Now, that is totally different from trying to discredit the work of scientists.

Mr. SCALISE. Mr. Chairman, can I respond to that?

Mr. CLYBURN. I yield to you for your response.
Mr. SCALISE. I appreciate it.

We had a hearing on this, and, in fact, I brought this up to CDC Director Walensky herself, and as you recall—and I mentioned this in my opening statement—Dr. Walke, who is over at the CDC, is somebody that we interviewed. He said it was unprecedented to give that kind of access weeks in advance of a report coming out to then make line-by-line edits, and this is what I pointed out to Dr. Walensky.

It wasn’t just that she was sharing it with people as the process was going on. It was that she allowed an outside group—a political union—to make complete wholesale changes to a scientific document before it came out and didn’t afford other people that opportunity.

And by the way, Mr. Chairman, at that hearing, I specifically asked Dr. Walensky for names of other organizations. I said, were there any parent organizations that were afforded that same VIP access that the unions had? And she implied there were, and I said, give me specific examples. And to this day, Mr. Chairman, I have not gotten a single example back from Dr. Walensky to the question, and she said in this hearing while she was under oath that she would send me specific examples and said there were some, and she has yet to send me a single one.

The only one we know of is the union, and it was very well documented that the union got VIP access that even Dr. Walke says was not afforded to other people in other settings for CDC guidance.

That is what I brought up to Dr. Walensky herself. Even when she said there were other examples, she has yet to provide me with a single one, and that hearing was weeks ago.

Mr. SCALISE. Well, when it is selective—no, Mr. Chairman, this was one-sided. Only one group was given that opportunity, and others weren’t, and, again, in the examples—I haven’t seen real examples from the majority regarding the Trump administration. There sure are a lot of accusations against the Trump administration. But if accusations can be made against President Trump’s administration without what I have seen as documented examples—I have given documented examples, and we even had a hearing on it where the CDC director herself acknowledged it happened. Someone else at CDC said it was unprecedented for that to happen.

So within the CDC, you don’t have unanimity, and this is why science matters. But scientists, just by putting on a lab coat, don’t go above the law because not all scientists agree. Even within the CDC, we had a disagreement at that hearing.

And so, let us get the facts out there. I documented my example and stand by it. I am still waiting for a response from Director Walensky. She said before all of us on this committee that she would give us more examples. She has yet to give me one.

Mr. CLYBURN. Well, I can appreciate that. But I seem to recall, if you remember, we had some hearings here—this committee did—
regarding the meatpacking industry—the meatpacking industry, and I assure you that we are aware that the previous administration engaged with and allowed the meatpacking industry to review their work.

Now, this is not unprecedented, and I will gladly get this to you after the meeting if you don't remember it. I do.

OK. With that, I will go to—I am sorry? OK.

Mr. SCALISE. No, I said this will continue and——

Mr. CLYBURN. OK.

Mr. SCALISE [continuing]. We will wait for more information from CDC as well.

Mr. CLYBURN. Very good. Well, I now yield myself five minutes for the questions.

I am kind of troubled about the GAO findings. The CDC and FDA scientists—and I am quoting them here—felt that potential political interference they observed resulted in the alteration or suppression of scientific findings, including findings related to the Coronavirus.

Dr. Dodaro, what led GAO to make these findings?

You are muted. Please unmute yourself.

Mr. DODARO. I am sorry, Mr. Chairman.

I will ask Candice to elaborate on this. But our first report here that we are talking about today wasn't really intended. One of the objectives was not to document individual examples of political interference in scientific decisionmaking.

What we focused on is what some of the institutional processes were that needed to be addressed in order to deal with accusations that might come during any administration.

But while we were doing that, some of the people that we talked to identified these concerns that they had, and when we asked them why they didn't report, they didn't know how to, or they feared retaliation, rather, and that is how we got to this documentation. So, you know, the result of our recommendations was to, you know, have better procedures in place for reporting and addressing this issue.

Candice, can you elaborate, please?

Ms. WRIGHT. Certainly.

So, Chairman Clyburn, with regard to that issue, employees told us as we were conducting our interviews with them that they had these concerns. They had these observations. And so the information was provided and included in the report, really, to be able to set up where there are gaps in the system and where there are areas to strengthen with regard to having procedures in place to be able to report and also address any concerns about potential political interference.

So that information, really, was just included in the report to set up those recommendations to show that there are these gaps, and these are some things that the agencies can do to continue to strengthen their scientific integrity policies and processes with the goal of achieving their desired effort to maintain a culture of scientific integrity.

Mr. CLYBURN. Well, thank you. I know—I wanted you to expand on that a little bit. But if that is all you care to say about it, that is fine.
But let me to go to Ms. Desikan.
Ms. Desikan, how would you characterize the Trump administration’s record on scientific integrity and independence?
Ms. DESIKAN. Thank you for the question, Chairman Clyburn.
The Trump administration—so we at the Union of Concerned Scientists have been watchdogging administrations since 2005 on scientific integrity violations, and during the Trump administration, what we noticed was a spike in comparison to prior administrations.
So one aspect of our research was scientific integrity violations occur at all administrations, at least since the 1950’s and probably before then. But we documented 204 attacks on science by the Trump administration, 29 of which were related to COVID–19 directly.
These impacts had enormous consequences. This would include a culture of fear within the agencies. This would include a lack of scientific information being shared with the public, an inability to communicate during a crisis situation like COVID, and an inability to use science to protect people’s health and safety.
So thank you for that question.
Mr. CLYBURN. Well, thank you. I don’t have but a few seconds left. So I am going to open with another question. Let me yield to the ranking member five minutes for questions.
Mr. SCALISE. All right. Thank you, Mr. Chairman.
And, you know, as we talked about earlier, we did have a hearing in this committee regarding, among other things, interference that was well documented by the Biden administration where the CDC was getting ready to come out with guidance for reopening schools.
They, weeks in advance, shared it with the head of the largest teachers union in the country. There were back and forth emails that we uncovered where the CDC director was asking what they thought of it.
The union expressed concern because they said it doesn’t give them enough power to close down schools. They actually gave specific suggestions of changes and, lo and behold, within the final guidance, almost word for word, the union’s changes were included in the scientific guidance so that it would be easier to shut down schools.
And as I mentioned to the chairman when I asked the CDC director about it, she acknowledged it happened, and I said, were there any other groups afforded this opportunity. She said there were. I asked her to send me those specific names, and I have yet to receive a single one.
So I would ask Mr. Dodaro, as you are talking about concerns about political interference, when we have that well-documented example of guidance from scientists getting ready to come out on opening up schools and then a union that wants to have an ability to make it easier to shut schools down says, wait, we would like you to make these changes and those changes are made verbatim, have you seen examples like that in other cases and would you consider that specific example political interference in the science?
Mr. DO DAR O. Yes. We have not looked at this particular example that you are mentioning, Congressman Scalise, and I will ask
Candice if there are other examples that we ran across that are on a comparable basis.

But I would say before I turn to her, though, the concern that I have had on this whole issue is that there is not a process in place to thoroughly address these issues within CDC to investigate it, to be reported, screened, investigated, responded to. These are allegations that could be made by Congress as well as by people within the agencies, and I think that is a significant shortcoming regardless of what type of allegation it is.

Candice, can you help in responding here?

Ms. WRIGHT. Certainly.

So, Ranking Member Scalise, on this particular issue, we have not identified other instances of involvement by external parties in the work that we have done. In other discussions that we have had with former agency heads, we have heard that sometimes there is a practice to engage with stakeholders.

However, it is really not clear to us from the procedures that are in place what requirements are in place in terms of who is consulted for input when that happens.

Mr. SCALISE. And if I could—I am sorry, because I am going to come back to this because I do think this is an important point in—this broad issue of what is political interference with the science.

The first assumption is that the science is all unanimous, and we have seen in many examples scientists themselves disagree on a lot of these big questions. Even within the CDC example, Dr. Walensky said she does this all the time. Dr. Walke said they never do it. And so scientists within CDC had very big disagreement even on how outside influence is even allowed.

So that question, I think, is important. But then as we get to—we have had a lot of debates over scientists coming and saying we should be opening up schools. Many scientists have said that.

So the idea that there is a consensus amongst science, I think, is something we have got to be very careful about because, in many cases, we find out there is wide disagreement amongst scientists. If one scientist doesn’t get their way, they say there is political interference when it is not political interference. Maybe they are just wrong.

There was a recent example just a week and a half ago. A Federal court ruled that President Biden’s mandate that planes have to require people to wear masks was thrown out by a Federal judge, and quickly, that same day, almost every major airline dropped the mask mandate. Biden is now appealing that.

But in response, Dr. Fauci said quote, “We are concerned about the courts getting involved in things that are unequivocally a public health decision. This is a CDC issue. It should not have been a court issue.”

I am not sure if he realizes there are three branches of government and that the courts are one. Do you believe that any agency, including the CDC, is above the law if the law says something differently than an agency does?

If anybody wants to answer that I would be happy to open it.

Mr. DODARO. I think that the courts have a role here in our system of government and that, you know, it is an issue that people
can pursue whether or not—Congress always has the prerogative to change the law if the courts disagree.

So, you know, our system of government should be allowed to work as intended with the proper checks and balances.

Mr. Scalise. Thanks, Mr. Chairman. I see I am out of time. I yield back.

Mr. Clyburn. I thank the ranking member for yielding back.

The chair now recognizes Mrs. Maloney for five minutes.

Chairwoman Maloney. Thank you, Mr. Chairman, for holding this important hearing.

More than two years ago, the Oversight Committee held one of the first hearings with Dr. Fauci and other top health officials regarding the Trump administration’s response to the Coronavirus pandemic. Since that first hearing, the Select Subcommittee’s investigations have found that the Trump appointees retaliated against public health officials for sharing accurate information about the Coronavirus with the public.

For instance, multiple CDC officials confirmed that the Trump White House blocked CDC from conducting any public briefings for more than three months during the early months of the pandemic because President Trump was angry about truthful information that had been shared.

This morning, the Select Subcommittee released new evidence that former CDC Director Robert Redfield called this decision quote “one of the greatest disappointments,” end quote.

Ms. Desikan, what kind of damage does it cause when scientists are blocked from speaking out during a crisis?

Ms. Desikan. Thank you for the question, Congresswoman.

So the example that you gave here about the CDC being unable to speak to the public during the Coronavirus pandemic in 2020 is one that we have been deeply concerned about ourselves.

So I was—I have emphasized in my written testimony I was the lead author of a report that we released in May 2020 to look specifically at whether the CDC was holding press briefings in comparison to previous epidemics like the H1 epidemic—influenza epidemic—and the SARS epidemic. We found was that they were silenced for months on end, and that is also confirming findings from this very House subcommittee too.

Chairwoman Maloney. Reclaiming my time because I have limited time.

I am very troubled by the revelation in GAO’s report that career scientists did not report incidents of political interference to any agency or any external officials because they, quote, “feared retaliation,” end quote, or thought, quote, “thought leadership was already aware,” end quote.

So, Mr. Dodaro, what did GAO find about why career officials were reluctant to speak up about political interference that they observed?

Mr. Dodaro. I will ask Candice to elaborate. But one of the reasons was that they were unsure who to report to in these cases. One of the things—we looked back over 10 years, Congresswoman Maloney. There was not one formal complaint filed during that period of time, and that spanned multiple administrations.
But I think the—it was not part of the institutional norms to help people identify how to report, and so if you don't know how to report your concern about retaliation, then these things will not get surfaced in a systematic way that they could be dealt with thoroughly.

Candice, any other thoughts on this?

Ms. WRIGHT. Certainly. Thank you.

I would also just add on this point that part of the reason that scientists didn't report it is because they feared retaliation. However, we have called for agencies to implement procedures, and as part of the procedures that, they would also include protections for CDC, FDA, and NIH employees—other HHS employees—to highlight for them the protections that might be in place or could be afforded to them if they were to report.

And the other piece I would also like to touch on is with regard to leadership being aware is that in some cases, employees thought leadership was aware and, therefore, didn't think that they needed to report it.

But we did also hear of instances where they weren't sure if they did report it, even though leadership was aware whether they were actually going to take any action.

Chairwoman MALONEY. OK. Mr. Dodaro, did your report find that our public health agencies have adequate anti-retaliation policies in place to protect scientists?

Mr. DODARO. We didn't—and I will ask Candice to clarify—but I don't think we focused on that particular issue. But we felt that there weren't procedures in place that needed to be put in place, including protections of people against retaliation. Clearly, the employees we talked to weren't aware of anything if it was there, and we didn't find anything in the training.

Chairwoman MALONEY. Can you expand on what respondents from CDC, FDA, and NIH told you or told GAO about why they feared retaliation? Why did they fear retaliation? Was anyone threatening them? Or why did they fear retaliation?

Mr. DODARO. Yes. Candice, would you respond, please?

Ms. WRIGHT. The employees did not elaborate specifically on why they feared retaliation. I think some of it had to do with media reports that they were seeing of other incidents, and that could have affected their thinking on that issue.

Chairwoman MALONEY. My time has expired. Mr. Chairman, we have to learn from this dark chapter and take steps that this never happens again and that our scientists are protected and speaking truthfully about what they know.

I yield back. Thank you.

Mr. CLYBURN. Thank you very much, Mrs. Maloney, for yielding back.

The chair now recognizes Mr. Jordan for five minutes.

Mr. JORDAN. Thank you, Mr. Chairman. Dr. Desikan, how many scientific integrity violations did you say you found during the Trump administration?

Ms. DESIKAN. Two hundred and four.

Mr. JORDAN. And how many were relative to COVID?

Ms. DESIKAN. Twenty-nine.
Mr. JORDAN. Have you found any scientific integrity violations with the Biden administration?

Ms. DESIKAN. The Biden administration, obviously, is still ongoing, but yes, we have found at least one.

Mr. JORDAN. One. And how many are in COVID?

Ms. DESIKAN. None related to COVID.

Mr. JORDAN. None? So when Dr. Walensky said that the vaccinated can’t get the virus, that wasn’t a scientific integrity violation?

Ms. DESIKAN. So my——

Mr. JORDAN [continuing]. False.

Ms. DESIKAN. Yes, thank you, Congressman. So my organization has a specific definition for how we define an attack on science. You can see more in my written testimony on that and——

Mr. JORDAN. She is the head of the CDC, and she said a statement that is absolutely 100 percent positively false. She said the vaccinated could not get the virus. She actually said the vaccinated couldn’t transmit the virus. We know those—both of those statements are false, and you haven’t found those as a scientific integrity violation?

Ms. DESIKAN. Again, we can get back to you in writing to discuss this more.

Mr. JORDAN. You also said in your opening statement that misinformation erodes trust in public institutions. Did it erode trust in a public institution—did it erode trust in the CDC when the head of the CDC said that the vaccinated cannot get the virus?

Ms. DESIKAN. Again, I can’t speak on this specific issue.

Mr. JORDAN. It is a simple question. When the head of the CDC, a pretty important public institution, when we are talking about COVID—and you have pointed out the Trump administration supposedly did scientific integrity violations—when the head of the CDC says something that is absolutely false and, yet, that is not any—the simple question, does that erode trust in public institutions?

Ms. DESIKAN. Again, we can get back to you in writing to describe this answer in more detail.

Mr. JORDAN. I will forward to it.

Did it erode trust in a public institution and would it be a scientific integrity violation when the head of the CDC allowed the teachers union to edit the guidance on school reopenings, which is exactly what Dr. Walensky did? Would that be a scientific integrity violation?

Ms. DESIKAN. That is an investigation that—I can’t comment on the specific details. But we do agree that the process of investigating scientific integrity violation is important. There needs to be investigations to examine the evidence.

Mr. JORDAN. How about when Dr. Fauci said that this virus didn’t start in a lab? Is that a concern? Does that erode trust? Because it sure looks like it did. All the evidence points there. Is that something you are going to investigate?

Ms. DESIKAN. We can describe this more in writing. I am not——

Mr. JORDAN. What about when he said it wasn’t gain of function research done at the lab in Wuhan, China? Are you going to inves-
tigate that? Because that—it sure looks like it was gain of function research.

Ms. DESIKAN. Again, I can’t specifically talk on this particular incident.

Mr. JORDAN. What about when Dr. Fauci said American tax dollars were not used at the Wuhan Institute of Virology when, in fact, we know they were? Was that a scientific integrity violation?

Dr. Fauci, the smartest guy on the planet, the highest-paid guy in our government, the head of the—of NIAID, when he said that was that a scientific integrity violation that you guys should be looking into?

Ms. DESIKAN. Again, I can’t speak on specifics that you are raising here, but I can bring it up in our written testimony to you responding. I am here to talk about how scientific integrity—

Mr. JORDAN. Joe Biden said he would not impose a vaccine mandate. When Jen Psaki said, they weren’t going to impose a vaccine mandate, when Jeff Zients, the White House COVID–19 response coordinator, said, quote, “That is not an authority we are exploring at all,” and then just a few months later they actually did that, did that erode trust in public institutions?

When they said, three different occasions—the top people in the administration said they would not impose the mandate and then turn around and did. Does that erode trust in public institutions?

Ms. DESIKAN. Again, some of these—some of these issues that you bring up are actually in the policy realm and not in the science realm. The policy can use nonscientific information to guide its processes. Scientific integrity is more specific on the process of researching, on data collection—

Mr. JORDAN. This scientific integrity issue, when the head of CDC says that the vaccinated cannot get the virus, is that something that science—that you should look into?

Ms. DESIKAN. Again, I can’t comment on the CDC procedures in depth.

Mr. JORDAN. I just—I would just—I just think it is important we understand the inconsistencies here. This is—you know, you have 20 some violations—scientific integrity violations of the Trump administration, and yet you haven’t looked at anything relative to the Biden administration where they said things that were absolutely positively 100 percent false, and when they let an outside political organization edit the school reopening guidance—they let them edit that—that has to be eroding trust in public institutions. I am just using the words from your testimony.

And I see I am over time, Mr. Chairman, so I will yield back.

Mr. CLYBURN. Thank you for yielding back, Mr. Jordan.

The chair now recognizes Ms. Velázquez for five minutes.

Ms. VELÁZQUEZ. Thank you, Mr. Chairman, for holding this important hearing.

Mr. Dodaro—and I am going to give you ample opportunity to respond to my questions without interrupting—the GAO’s new report says that to maintain public trust and credibility, agencies must ensure their decisions are, and I quote, “evidence-based and free from political interference.” How will GAO’s recommendations help agencies like CDC and FDA achieve that goal?
Mr. Dodaro. Well, first of all, it will—if they follow our recommendations, they will have instituted institutional protections to be able to respond thoroughly to any allegation that comes up because they should have a process of how it gets reported. It gets screened. It gets investigated. They respond to the allegation in writing and then discuss anything if necessary that needs to be done.

So right now, you don't have a good process, so there is a lot of anecdotal information. But there is not a systematic evaluation of the allegations. So it should enhance public trust if implemented properly.

Ms. Velázquez. Thank you.

And, Mr. Dodaro, will the recommendations made by the GAO, if properly implemented, help protect against any future administration attempts to discourage the sharing of information in an open and transparent manner?

Mr. Dodaro. Yes. Well, I don't think anything would be necessarily a panacea to ensure that any future administrations don't try things or other parties. But what it will ensure is that nothing that is alleged goes uninvestigated and dealt with properly, either defended or making a change.

I think it could also have a salutary benefit by empowering employees to feel more protected in raising this issue so, thereby, it may have a deterrent effect as well to help people not, you know, move in this direction to try to interfere with the process, knowing that there is a well established process for investigating such matters and the employees are trained to recognize this. So I think it will help a great bit.

Ms. Velázquez. Thank you.

Dr. Rasmussen, during your time at the CDC you helped the agency respond to other outbreaks like Zika, swine flu, Ebola, under both Republican and Democratic administrations. So can you please explain why public trust in the CDC and the information it publishes during a public health emergency is so important?

Dr. Rasmussen. Yes. I do think that CDC has been and should be seen as the experts on public health emergencies. People there have spent their lives working to learn the best ways to protect the American people from emerging infections and other threats, and so I think it is really important that people at CDC have the ability to speak to the American people and present their results and talk about the best way, what is known, what is unknown.

You know, we learn—as I tried to give in my testimony, we learn as responses go along and we learn more information. But to give people this is what we know, this is what we don't know, this is what we are trying to find out, I think that is also important.

Thank you.

Ms. Velázquez. Thank you.

And, Ms. Desikan—sorry if I am mispronouncing your name—the Trump administration's undermining of science and experts led many of the scientists working in this institution to leave public office. What steps have been taken to rebuild this work force to ensure that there are qualified experts in these positions?

Ms. Desikan. Yes. Thank you for the question, Congresswoman. There really is a tie to whether Federal scientists feel comfortable
working in the agency and political interference steps to undermine that process.

So when scientists feel like they can’t, they don’t know who to go to when they are seeing a potential scientific integrity violation. They don’t know who to talk to. They don’t know what procedures—and they don’t even know whether that enforcement of that—if they are finding a correct violation whether that will actually go through.

This will lead to why be here, my work isn’t meaningful, and just the—a decrease of the ability to—for scientists to actually be able to do work to help all of us across the Nation.

Ms. VELÁZQUEZ. Thank you. Thank you for that answer.

Mr. Chairman, I yield back.

Mr. CLYBURN. I thank the gentlelady for yielding back.

The chair now recognizes Dr. Green for five minutes.

Mr. GREEN. Thank you, Chairman Clyburn and Ranking Member Scalise, and I want to thank our witnesses for being here today.

You know, today is another missed opportunity for us to investigate issues that deserve the attention of this subcommittee, and one of the critical failures of the Federal Government’s pandemic response, in my view, was the outsized focus on vaccines as the primary answer to COVID while therapeutics took a backseat.

Tests and vaccines are crucial tools but effective therapeutics are indispensable for saving the lives of COVID patients. The FDA and the CDC sidelined their expert advisory committees for booster shots, prompting two senior FDA vaccine officials to leave the agency in protest, all during the Biden administration, I might add.

At the same time, the FDA showed little urgency in authorizing drugs that had well-documented efficacy in mitigating the severity of COVID. Along those lines, where was the priority for investigating treatments such as combination therapies?

Congressman Foster and I wrote a letter demanding that this be addressed—a bipartisan letter, I might add. Was there a bias that led the FDA and its senior leaders to emphasize vaccines and downplay therapeutics? These are serious questions that we should be investigating so we can improve our preparedness for future pandemics.

The Biden administration’s mixed messages demonstrate that behind their, quote, “follow the science” slogan their true guiding light is political. The administration believes that public health requires forcing everyone to wear a mask on well-ventilated planes though not in stadiums packed with thousands of fans screaming at the top of their lungs.

But the same officials have determined that lifting the Title 42 at the border is not a public health risk. That makes no sense. It is hypocrisy. It is not science.

The science applies differently depending on what radical progressive priorities really are. Public health requires public trust and, unfortunately, the CDC and other public health agencies have seriously damaged their credibility with the public during this pandemic by avoiding transparency and acting in accordance with political aims while pretending to justify these actions were science.

In early 2021, the CDC outsourced the Biden administration’s school guidance to the American Federation of Teachers, also
known as AFT, a teachers union that endorsed Joe Biden in the
Democratic primary, donated millions of dollars to liberal can-
didates and PACs in the 2020 election cycle. Teachers unions gave
more than $40 million to Democrat and liberal PACs in the 2020
election.

In fact, according to Open Secrets, Democrats made up 99 per-
cent of AFT’s donations. No single action has done more to under-
mine the trust and the integrity in the CDC than this decision to
place the political interests of the Biden administration over the in-
terests of millions of children.

This is a political interference at the highest order. The CDC
got far beyond the usual practice, as been said already, of solic-
iting input from various groups. The White House and the CDC al-
lowed the AFT to edit and rewrite the guidance line by line.

The guidance was then presented with the full weight of the
CDC’s medical credibility behind it, not once disclosing that the
language was written by AFT, a partisan political entity with no
scientific experience and, clearly, a financial donor. The CDC never
disclosed the extent of AFT’s involvement.

In medicine, we have well established professional guidelines
around the proper attribution of sources and the disclosure of con-
licts of interest. Yet, such standards of integrity were completely
tossed aside by the CDC when they allowed an outside political
player favored by the Biden administration to rewrite the guidance
to suit its own needs. The problem is that significant parts aren’t
CDC guidance at all. They are teacher union guidance to keep
schools closed, and they chose not to disclose any of this.

Why does it matter? Well, this wasn’t reopening guidance.
Thanks to the efforts of union bosses, the CDC guidance made it
more likely schools would close. At the same time the CDC was col-
laborating with a left-wing political group to keep schools closed we
had abundant evidence of severe harm school closures inflict upon
our children and the clear need to reopen.

The CDC knew that students were falling behind academically.
They knew there was a mental health crisis spiraling out of control
amongst our youth. The CDC knew all this, but thousands of
schools remained closed for months because they chose to place po-
tical allies of President Biden above the well being of our stu-
dents.

If we want to investigate partisan political corruption in Federal
agencies, why don’t we start there?

Thank you, Mr. Chairman.

Mr. CLYBURN. I thank the gentleman for yielding back.

The chair now recognizes Mr. Foster for five minutes and, hope-
fully, you have got a question.

Mr. FOSTER. Thank you, Mr. Chairman.

First, I would like to thank Dr. Rasmussen for the really excel-
ent description of the challenges of providing real-time guidance in
times of scientific uncertainty, and to the GAO for their emphasis
on the need for a consistent process in resolving the tradeoffs
that—and to adhere to this consistent process in an emergency.

I think one of the big difficulties we are having in this discussion
today is the difficulty of separating the scientific process from the
resolution of policy tradeoffs. You know, for example, in the trade-
offs involved in schools opening, the scientific part of this is to quantify, as best you can, if you decide to open schools under certain conditions how many more people will die or get long COVID and, on the other hand, how the educational performance of our children will suffer.

And then the political part—the appropriately political part—is to make the policy decisions that balance those tradeoffs, recognizing that some groups will be hurt or helped by those policy decisions and that all stakeholders, you know, should justifiably be consulted in that.

Now, once the political decisions on those policy tradeoffs have been made, there is a huge incentive on the part of any policy-maker to distort the scientific inputs ex post facto or to interfere with the ongoing scientific process, including actual or threatened retaliations on scientists, to justify their political policy decisions, and that is unacceptable.

One of the most glaring examples of this was the emergency approval of hydroxychloroquine absent any real scientific evidence for its effectiveness. Not only did the previous administration put undue pressure on scientific professionals, it also championed hydroxychloroquine and other drugs long after there was strong evidence that they were ineffective, going against the recommendations and the data and the results presented by scientists.

GAO’s report details that a senior HHS official claimed that the Trump administration retaliated against him for disclosing concerns about inappropriate political interference to make hydroxychloroquine available to the public in May 2020, absent any scientific evidence for it, and this is a reference to former BARDA director Dr. Rick Bright, who filed a whistleblower complaint after he was pushed out of his position by the Trump administration.

Now, Mr. Dodaro, what did the GAO recommend that public health agencies do to protect government scientists from potential retaliation such as was faced by Dr. Bright?

Mr. DODARO. We recommended a number of things. One was that there be a proper institutional-approved process for how to report these concerns, how they will be investigated, how they will be disposed of, and how there will be an official response.

So it would give the employees—in this case, Dr. Bright—a place to go to, basically, raise the allegations, have it thoroughly investigated, and the need to be some independent investigation and then dealt with, and they should—part of our recommendation would be to explain what procedures there would be for protecting the confidentiality or any anti-retaliatory efforts made against the employee who made the allegation. That has to be there.

Secondarily, there would be training so people understand what the process is, what the protections are that they have, who to report to, how it will be treated.

These are very similar to how allegations are treated—whistle-blower situations—throughout the government. But they are absent here and I think it is a key deficiency. Our recommendations, if properly implemented, should remedy it, Congressman Foster.

Mr. FOSTER. Thank you.

Ms. Desikan, you presciently wrote in 2020 that the Trump administration’s promotion of unproven treatments like
hydroxychloroquine, quote, “will likely compromise the health of thousands of people in the middle of the most deadly pandemic experience in our lifetimes.”

So sitting here today, can you say a little bit about how harmful the previous administration’s attempts to promote unproven treatments as Coronavirus cure-alls against the advice of its own scientists—what the harm from those was?

Ms. Desikan. Yes. Thank you, Congressman, for the question.

The public depends on Federal agencies to promote good science. People are wondering, where do I go? What treatments do I take? How do I get vaccinated?

They need answers to these questions, and it is very difficult when you have political officials stating don’t listen to our Federal scientists—don’t listen to the expert opinions and, instead, listen to something else that is unproven.

It provides—it forces the public to be confused about what to do. It promotes misinformation in so many different ways and it undermines the ability of scientists to feel that their work is actually—will help in the pandemic and in other situations.

Mr. Foster. Thank you. My time is expired and I yield back.

Mr. Clyburn. I thank the gentleman for yielding back the time.

The chair now recognizes Dr. Miller-Meeks for five minutes.

Ms. Miller-Meeks. Thank you, Mr. Chair, and I would like to thank all of our witnesses for taking time to come to testify before the committee today.

Ms. Desikan, in the report that is filed with us today, I found it interesting that you used an example or you cite an example of what you think or what the Union of Scientists think is political interference through agencies and you cite that an HHS scientific expert filed a whistleblower complaint stating that in January and February 2020 HHS officials sent HHS workers to Wuhan, China, without any proper infectious disease training or personal safety equipment.

So do you recall at the time when the WHO declared COVID–19 a pandemic?

Ms. Desikan. I don’t know the exact date. I think it was February or March.

Ms. Miller-Meeks. Let me give you the exact answer. The exact answer is March 11. So I find it interesting that there would be a whistleblower complaint, and it is probably why it didn’t go anywhere, that at the time, the WHO was still denying that there was human-to-human transmission of COVID–19 and, in fact, when many of us, I, as a physician and former director of the Department of Public Health, thought the pandemic should have already been called didn’t even consider it a pandemic or an epidemic—pandemic or epidemic—until March 11.

Mr. Dodaro. I would like to take a moment to make sure we have clarified specifically what your report does and does not lay out. To conduct your work for this report, how many individuals from HHS did GAO interview?

Mr. Dodaro. I will ask Ms. Wright to respond to that, please.

Ms. Wright. Congresswoman, we had a multi-part methodology. So we spoke with 16 employees, either managers or staff, and conducted semi-structured interviews with them, and that is how we
got information about what, if any, observations they had with regard to scientific integrity violations.

In addition to that, we had several other interviews where we spoke with former agency heads of FDA, CDC, for example, and we also spoke with current agency officials in various program offices across those four agencies.

Ms. MILLER-MEEKS. Great.

Mr. DODARO. We also—excuse me. Candice, you might want to explain the confidential hotline that we had as well.

Ms. WRIGHT. Thank you for that. So I should mention with regard to the managers and—the 16 managers and employees whom we spoke with we did provide them confidentiality assurances that information that they shared with us would be appropriately protected. And so with regard to the examples that we have in the report, it is at a high level because of any specificity about those observations could risk disclosing their identity.

Ms. MILLER-MEEKS. Thank you. And so does your report make any specific findings regarding whether these complaints did or did not constitute political interference?

Mr. Dodaro?

Mr. DODARO. No, that was not part of our objective. No, so no. No.

Ms. MILLER-MEEKS. So what I am hearing is that you didn't find for certain that there was political interference. What you found was that the absence of specific procedures may explain why the agencies did not have formally reported internal allegations.

Is that correct?

Mr. DODARO. That is correct. That is correct.

Ms. MILLER-MEEKS. Well, thank you for clarifying that. I think we can all agree—and I am a physician and a former director of public health—that political interference of any kind should not be tolerated.

Mr. Chairman, that is why I wish we could hold a hearing on clear political interference we saw during this administration wherein the CDC went directly to the teachers union with guidance.

We should also be discussing this administration's choice to create confusion and bypass the CDC and the FDA's long-established vaccine advisory committee process for boosters.

The GAO found that from 2010 to 2021 none of the four agencies within HHS—CDC, FDA, NIH, or ASPR—had a report of political interference. Do you recall if anyone—Mr. Dodaro, if anyone at the CDC was—had felt and was so concerned about political interference that they resigned?

Mr. DODARO. I don't recall that. Candice, do you?

Ms. WRIGHT. I am not aware of anything like that.

Ms. MILLER-MEEKS. Yes. Well, this administration announced the availability for vaccine boosters for all adults before the CDC and the FDA finished reviewing the data to determine if this was necessary and, in fact, in contrast to fueling political interference that has been brought up, two FDA officials left the agency amid reports of political interference saying that they were concerned about politics interfering with the process, and I have a report that
I would ask for unanimous consent to be submitted to the committee.

Mr. CLYBURN. Without objection.

Ms. MILLER-MEEKS. So I will submit that to you. Thank you so much, Mr. Chair. I yield back my time.

Mr. CLYBURN. I thank the gentlelady for yielding back her time.

The chair now recognizes Mr. Raskin for five minutes.

Mr. RASKIN. Mr. Chairman, thank you for calling this crucial hearing. You know, the great astrophysicist Neil deGrasse Tyson said that the good thing about science is that it is true whether or not you believe in it, and we have recently seen attacks on scientific truth by corporations that find it financially inconvenient or government actors who find the truth politically inconvenient.

In the opioid crisis, we saw a rich, powerful corporation use its wealth and power to influence government to ignore real scientific realities and that exposed our people to terrible addiction and suffering and death, and in the COVID–19 crisis we saw administration officials in the Trump administration systematically deny the reality of COVID–19.

We saw them hawk quack medical cures like hydroxychloroquine and we saw them systematically undermining the ability of scientists to do their work.

We have documented 88 separate incidents of political interference in the pandemic response by Trump officials, including attempts to suppress or change scientific reports based on research, implementing public health policies without any credible scientific basis at all, and penalizing scientists for sharing accurate science with the public.

The emails released today show that Trump White House officials wanted to tell the CDC that its ability to publish its scientific guidance to faith communities was, quote, “contingent” on CDC removing public health recommendations that the White House found, quote, “offensive.”

Now, Dr. Rasmussen, in your 20-year career at CDC have you ever witnessed political officials instructing CDC scientists before to change science-based public health guidance because certain administration officials found the scientific findings and guidance offensive?

Dr. RASMUSSEN. No, I never saw that in my time at CDC.

Mr. RASKIN. OK. So I want you to just talk about the strangeness of that and tell us how that does, in fact, collide with the work that scientists do.

Dr. RASMUSSEN. Yes. As I tried to give some background of how hard it is to make these recommendations and that you are basing your science on changing data, CDC scientists take those recommendations very seriously.

And so coming to some recommendations and then having them altered—having political interference I can only imagine must have been really devastating.

Mr. RASKIN. Well, after this incident, Dr. Jay Butler, who is a senior CDC official, wrote to his colleagues at CDC about the faith community’s guidance saying, and I quote—and thank you for putting this up on the screen—“this is not good public health. I am very troubled on this Sunday morning that there will be people...
who will get sick and, perhaps, die because of what we were forced to do. Our team has done the good work only to have it compromised.”

And I heard in that an echo of what Dr. Birx has been saying. Dr. Birx was Donald Trump’s own appointee to be the COVID–19 coordinator for his administration and she has been saying that because of political decisions that were made interfering with the scientific effort and blockading the ability to maintain the scientific and social cohesion, we need to effectively address a public health crisis, hundreds of thousands of people died or were injured because of that political interference with science.

So, Dr. Dodaro, I would like to ask you that—according to the GAO report, there were multiple science officials at the CDC and FDA who believed that political interference may have resulted in the alteration of public health guidance related to COVID–19.

Is that right?

Mr. DODARO. That is what our report says. That is correct.

Mr. RASKIN. OK. And, Ms. Wright as the lead investigator, can you elaborate on what GAO’s investigations found with respect to interference with scientific-based public health guidance during the pandemic?

Ms. WRIGHT. So we did hear from a few respondents with whom we collected information that they felt that they had observed what could—what they thought was potential political interference and that that may have resulted in alteration of guidance.

I am not able to provide any more specifics on the type of guidance or publications because, again, doing so might compromise the confidentiality assurances that we provided to individuals we spoke with.

What I can say, however, is that for a number of the individuals with whom we did speak is that there was concern about the effects on morale within their agencies. There were also concerns around the sort of hectic environment in which they were working and how that might then contribute to, you know, lack of understanding, lack of clarity, about what the appropriate procedures are.

And so some of those things are the basis for why we made the recommendations that we did to enhance—provide procedures as well as to offer training.

Mr. RASKIN. Thank you. Yielding back.

Mr. CLYBURN. The gentleman’s time has expired.

Mr. RASKIN. Thank you, Mr. Chairman.

Mr. CLYBURN. Thank you very much. The chair now recognizes Mr. Krishnamoorthi for five minutes.

Mr. KRISHNAMOORTHI. Thank you, Mr. Chair, and thank you to all of you for appearing today.

I guess my first question to Mr. Dodaro—and thank you for your five decades of service, a half a century of service to the country.

My question is what are the lingering effects of this political interference that happened with these health agencies?

Mr. DODARO. I think there is, you know, concerns about the public trust that could be placed in these institutions. You know, one of the things that we did earlier this year, because I had been concerned about this for a while, is we identified HHS leadership and
coordination as a high-risk area because we had concerns that we are not really prepared to deal with public health emergencies in the future because there is unclear roles and responsibilities.

There has been problems with clear and consistent communications with the public. There hasn’t been a lot of good data collection. There is deficiencies in transparency and accountability.

So I am very concerned about this and that is why we elevated it to this select group of high-risk areas that we keep across the government. So I think the lingering effects here are that, you know, I am not sure we are better prepared now than we were in the beginning even though——

Mr. Krishnamoorthi. What is a—let me just jump in because I have limited time. Can you point to, like, one specific thing that we need to do in Congress or otherwise to prevent this going forward?

Mr. Dodaro. Well, I think there needs to be a good plan that gets developed that identifies—responds to all the deficiencies that we pointed out in this area.

You know, I have also recommended—I recommended in 2015, for example, that there be a national aviation security plan to deal with communicable diseases. That is still not developed and in place. So I have a lot of open recommendations to the Congress I will be happy to share with the committee.

Mr. Krishnamoorthi. Let me—let me jump in. I am sorry. I just had to reclaim my time here. The GAO conducted the review that is the basis for this report after the Biden administration came into office. Is that right?

Mr. Dodaro. Yes. The report covers what happened during the pandemic and it——

Mr. Krishnamoorthi. Why didn’t you—why didn’t you begin this during the Trump administration?

Mr. Dodaro. Well, we actually did begin it then. It began in October 2020, as I recall, and it concluded in the Biden administration. So it——

Mr. Krishnamoorthi. But let me ask you this. Have you conducted a review of the GAO with regard to any officials at the GAO feeling any pressure from the Trump administration with regard to its own activities during the pandemic?

Mr. Dodaro. I am not aware of any examples of that that has occurred.

Mr. Krishnamoorthi. Because I am concerned that—I am concerned that this political interference that happened with regard to these agencies, perhaps, happened with regard to a number of agencies, including institutions like the GAO.

Mr. Dodaro. Well, we are not—well, a couple of things. We have unique safeguards. First, we are in the legislative branch of government. I don’t report to the President. The President can’t remove me.

I report to the Congress. I have a 15-year term. I can only be impeached by the Congress. So we have at GAO very good safeguards to prevent us from being subject to political interference.

Mr. Krishnamoorthi. Because we could——

Mr. Dodaro. So we are in a totally different situation than executive branch agencies.
Mr. Krishnamoorthi. I think that the issue, though, is I wish that we had heard about this during the Trump years when we could have done something about it or there would have been more public pressure on the Trump administration to stop doing what it was doing.

I am not saying that you were actively interfered with, Mr. Dodaro, but I think that there is pressure to almost be silent about some of these things, and I think that had we had this information earlier, we could have actually, perhaps, altered the way in which this political interference happened during the Trump years.

So I would just urge you to, please, you know, call the balls and strikes at any time regardless of who is in office or whether there is any pressure.

So thank you for that, and I will yield back.

Mr. Clyburn. I thank the gentleman for yielding back, and I thank all of you for your participation here today.

I understand that the ranking member has opted not to make a closing statement. So I am going to refrain from part of what I wanted to close with today and go straight to my prepared closing statement.

But before we close, I would like to enter into the record a letter the committee has received from the Brennan Center for Justice at the New York University School of Law with respect to the importance of ensuring scientific integrity in our Nation's public health agencies.

I ask unanimous consent that this letter be entered into the official hearing record and, without any objections, so ordered.

Mr. Clyburn. In closing, I want to thank the witnesses for testifying before the Select Subcommittee today. We appreciate your insight, your expertise, and your advice on how to safeguard the scientific independence and integrity of our public health institutions.

Today's hearing has revisited a dark chapter in the history of our Nation's public health agencies. Adding to the incredible burdens they had to shoulder during the pandemic, career scientists had to contend with an administration that continually undermined their scientific independence, integrity, and decisionmaking.

The Government Accountability Office, in a nonpartisan and independent review, has now documented how political interference affected the work of our Nation's scientists.

The Select Subcommittee's investigations, which have revealed this same pertinent pattern of interference, are ongoing. I applaud the Biden administration's efforts to restore scientific integrity and independence.

The Biden administration has placed its trust in our country's best doctors, scientists, and public health experts, and they have guided us out of the chaos and confusion we faced early in the pandemic, allowing us to move safely forward beyond the crisis. We must never again allow politics to interfere with processes of public health.

I thank our witnesses for testifying today and I look forward to working closely with you to safeguard scientific integrity at our Nation's public health agencies.

With that and without objection, all members will have five legislative days within which to submit additional written questions for
the witnesses to the chair, which will be forwarded to the witnesses for their response.

This hearing is adjourned.

[Whereupon, at 10:44 a.m., the select subcommittee was adjourned.]