US COVID-19 CASES NOW SPREADING DUE TO TRUMP'S TESTING RESTRICTIONS AND DISMANTLING OF PANDEMIC RESPONSE TEAMS

Back on January 31, Pulitzer Prize winner Laurie Garrett warned us how Donald Trump has dismantled the country's ability to respond to a pandemic. Her Foreign Policy piece, headlined "Trump Has Sabotaged America's Coronavirus Response", Garrett opened with a description of the extreme measures taken in China:

The epidemic control efforts unfolding today in China—including placing some 100 million citizens on lockdown, shutting down a national holiday, building enormous quarantine hospitals in days' time, and ramping up 24-hour manufacturing of medical equipment—are indeed gargantuan. It's impossible to watch them without wondering, "What would we do? How would my government respond if this virus spread across my country?"

The problem, though, is that although Barack Obama built a working pandemic response structure during the Ebola outbreak (which of course Trump criticized incessantly on Twitter), that structure has now been obliterated:

In the spring of 2018, the White House pushed Congress to cut funding for Obama-era disease security programs, proposing to eliminate \$252 million in previously committed resources for rebuilding health systems in Ebola-

ravaged Liberia, Sierra Leone, and Guinea. Under fire from both sides of the aisle, President Donald Trump dropped the proposal to eliminate Ebola funds a month later. But other White House efforts included reducing \$15 billion in national health spending and cutting the global disease-fighting operational budgets of the CDC, NSC, DHS, and HHS. And the government's \$30 million Complex Crises Fund was eliminated.

In May 2018, Trump ordered the NSC's entire global health security unit shut down, calling for reassignment of Rear Adm. Timothy Ziemer and dissolution of his team inside the agency. The month before, then-White House National Security Advisor John Bolton pressured Ziemer's DHS counterpart, Tom Bossert, to resign along with his team. Neither the NSC nor DHS epidemic teams have been replaced. The global health section of the CDC was so drastically cut in 2018 that much of its staff was laid off and the number of countries it was working in was reduced from 49 to merely 10. Meanwhile, throughout 2018, the U.S. Agency for International Development and its director, Mark Green, came repeatedly under fire from both the White House and Secretary of State Mike Pompeo. And though Congress has so far managed to block Trump administration plans to cut the U.S. Public Health Service Commissioned Corps by 40 percent, the disease-fighting cadres have steadily eroded as retiring officers go unreplaced.

But it's even worse than that. Until sometime over this last weekend, the Trump Administartion, through the CDC, blocked all entities other than CDC from running tests for COVID-19. They only allowed testing under such extremely narrow circumstances that pitifully few tests have been carried out to this point.

In an interview yesterday on KPFA (that I'm only halfway through listening to but just had to stop and write this part up) Garrett pointed out that New York City has had its own dedicated lab ready to go for testing for the past six weeks. Coupling that with the various reports coming out today on just how long it's going to take for testing kits to get widespread distribution now that manufacturing is FINALLY kicking into high gear, we are presented with direct evidence of just how much damage Trump's COVID-19 policies have done.

As Garrett points out, we are now seeing "community transmission" of the virus, meaning that cases are appearing in patients who have not traveled to known hot spots and who are not known to have had direct contact with someone confirmed to have the virus. Once community transmission is seen, the correct public health policy with respect to testing is to switch from narrow testing criteria to widespread testing. China was remarkably quick in developing and mass manufacturing DNA-based tests for the virus as soon as the sequence became available. That this was not done in the US is criminal, and the mounting death toll, now at 9, will drive this point home. That's because, if you listen to the early part of Garrett's interview, she compares COVID-19 to the 1918 flu pandemic. She describes characteristics of the spread of the virus that make widespread testing an incredibly important tool in containing its spread. Today's news says we are weeks away from widespread testing. I fear just what we will see when wider testing is available.