

United States Senate

COMMITTEE ON FOREIGN RELATIONS

WASHINGTON, DC 20510-6225

May 5, 2020

Ambassador Andrew Bremberg
Permanent U.S. Representative to the United Nations
and Other International Organizations in Geneva
United States Mission
11, Route de Pregny
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1211 Geneva 2
Switzerland

Ambassador Bremberg:

As Congress bolsters the U.S. government response to the COVID-19 pandemic and prepares against any future waves of infection, it also must assess the actions the Trump administration, China, and the international community took that helped or hampered our initial response. We must have all the facts about U.S. government engagement, communication, and information-sharing with its international partners during the early phases of the COVID-19 outbreak. In addition, as the administration has announced a suspension in U.S. contributions to the World Health Organization (WHO), it is critical that Congress understand the criteria the administration is using to assess restarting contributions. To that end, I seek details about your office's engagement with the WHO during the earliest stages of the global COVID-19 pandemic and the administration's review of contributions to the WHO.

As early as January 4, 2020, the WHO, the premier international public health institution that alerts the world to health threats and leads the global response to infectious disease outbreaks, warned of an outbreak of unknown cause in China. The WHO issued a series of increasingly alarming warnings about COVID-19 throughout January. Recent reporting also indicates that at least 17 U.S. government officials were working on the WHO staff, relaying information about COVID-19 to U.S. officials in Washington D.C. since the beginning of the outbreak.¹

Yet, the Trump administration failed to take serious action to address the spread of COVID-19 until 43 days after the WHO had declared an emergency. Only in March did President Trump finally declare a national emergency for the United States. Despite these early warnings from both the WHO and U.S. government officials about the COVID-19 threat, the Trump administration has scapegoated the WHO for the spread of COVID-19 in the U.S., in a clear effort to deflect the spotlight on the administration's slow, uncoordinated, and wholly inadequate response.

Working with our international partners is imperative to quelling the COVID-19 pandemic and any future waves of infection. A comprehensive U.S. response to the pandemic requires that the

¹ Karen DeYoung et al., "Americans at World Health Organization transmitted real-time information about coronavirus to Trump administration," *The Washington Post*, Apr. 19, 2020.

United States leverage international partnerships for critical information-gathering and sharing. When and how these communications occur can mean the difference between an isolated and contained outbreak or a deadly global pandemic.

As the U.S. Representative to the United Nations and Other International Organizations, you stand at the fulcrum of our communication and engagement with the WHO and other agencies in Geneva. Your insight on the WHO's efforts and the U.S. government's engagement is instrumental as we work to ensure a robust response to COVID-19 and proper communication between the U.S. government and the international community during any future waves of infection. And ongoing support from the U.S. is pivotal to the WHO's ability to respond to the global spread of COVID-19.

I therefore request a full description of your engagement and communications with the WHO since November 1, 2019, including the following:

1. When did you or your staff first communicate with any officials or staff from the WHO about a suspected or confirmed outbreak in Wuhan, China (later determined to be COVID-19)? What was the nature of those communications? Through what channels did they occur, and with whom?
2. When did you or your staff first communicate with the State Department, National Security Council, White House, or other Trump administration officials about a suspected or confirmed outbreak in Wuhan? With whom did you communicate?
3. Did you or your staff communicate directly with any officials from the Department of Health and Human Services, including the Centers for Disease Control and Prevention (CDC), the State Department, or U.S. Agency for International Development in January or February 2020 about the virus later determined to be COVID-19? If so, when, and what was the nature of those communications?
4. What information did you or your staff at U.S. Mission Geneva relay back to the State Department and USAID about COVID-19 and when?
5. Prior to the outbreak of COVID-19, how many U.S. staff members at the U.S. Mission Geneva regularly engaged with the WHO? What was the nature and tempo of these engagements, and at what levels?
6. How and when was the decision made to halt U.S. contributions to the WHO? How was that decision communicated to the WHO?
7. What is your role in the administration's announced review of U.S. funding to the WHO? Have you or your office made any recommendations to the administration on conditions for future U.S. engagement or funding for the WHO?
8. How will the suspension in funding for the WHO impact the CDC and National Institutes of Health staff seconded to WHO and working on the global and domestic response to COVID-19?
9. Please provide the total assessed and voluntary contributions the U.S. has made to the WHO for Fiscal Year 2019 and Fiscal Year 2020, and the total contributions that will be affected by the suspension.
10. Have you requested any additional information from the WHO in furtherance of the administration's review of WHO funding? What have you communicated to the WHO about the criteria for this review and the resumption of funding?

11. What specific benchmarks is the administration using to determine whether and when to resume U.S. contributions to the WHO?
12. What analysis have you or your office done on the impact that a suspension in U.S. funding to the WHO could have on COVID-19 response and ongoing global health activities? For example, after the initial announced suspension, the administration is reportedly considering carve-outs for polio and coronavirus in Afghanistan and Pakistan, as well as five other countries. Is the administration considering other exceptions. Why were these not identified before the announced suspension?

Given the critical importance of ensuring that WHO's global health efforts, particularly in response to the COVID-19 pandemic, are not interrupted during this crisis, I request a response no later than May 12, 2020. Please contact my Committee staff to arrange a briefing on these matters. In addition, I request ongoing updates as the administration carries out its review of funding to the WHO.

Sincerely,

A handwritten signature in blue ink that reads "Robert Menendez". The signature is fluid and cursive, with a large initial "R" and a long, sweeping underline.

Robert Menendez
Ranking Member