

Excerpts from Transcribed Interview of Dr. Robert Redfield

Q: This is from CDC's website, a list of press conferences held by CDC telebriefing, specifically in 2020. This covers the whole year starting from the second page, reflects January, where it looks like there were about nine or ten, a similarly high number in February. And then two in March. And then we don't see any until June. So I'm sure you can anticipate my question, but –

A: My attorney told me not to anticipate.

Q: -- what happened?

A: I've said this publicly before, **this is one of my great disappointments. That HHS basically took over total clearance of briefings by CDC.**

Q: Was it just HHS?

A: Well, HHS is where I had to do it. You can ask them where they got their guidance. But my issue was HHS. **They would not clear our briefings.** And that all happened, as you all know, you've already done your homework, after the briefing that [former CDC National Center for Immunization and Respiratory Diseases Director] Nancy Messonnier did, which I thought was an honest briefing, and I've supported her. You can look at my congressional testimony. I've always supported her. She's an excellent leader. It was disappointing to me to see her leave the agency. And I'm really upset about it, because that briefing was cleared by HHS. And the public affairs people. They were involved in clearing the briefing.

And after that briefing, basically the HHS, every time we put up a request for a briefing, we weren't told per se that you're no longer going to get approval, but every approval, and I'm sure there are people who can probably provide all the requests we put through, **they were all not approved.** And you can see, it wasn't until -- even though it came with its own collateral challenges, until [former HHS Assistant Secretary for Public Affairs Michael] Caputo came in as the new public relation person, I told Caputo, I wanted CDC to be free to go back and do the regular briefings. And I wanted to decide which briefings were appropriate for the American public whether they were COVID or non-COVID. And for a brief period, and you've probably got it here, he was able to get us cleared for, if I remember, two or three briefings and then eventually we weren't cleared again.

So from where I sat, **the ability to make those decisions internally at CDC were no longer CDC's decisions,** whereas I would argue the clearance process prior to Nancy Messonnier's was more perfunctory, whatever we put up got cleared. And I assume we still had to get cleared, but I don't remember ever not being cleared until afterwards that I -- **for a while, none of our briefings were approved.**

Q: Who communicated to you that briefings were not being approved?

A: Well, my comms people. No one came to me and said your briefings aren't going to be approved. We continued to put requests up and they continued to be denied.

Q: Okay. So during this period where there's –

A: And I don't even remember who Caputo's person was back then. **It's such PTSD for**

probably six months, but whoever took Caputo's place. Whoever was in charge there, whether Bill Hall or somebody else, **CDC no longer had the ability to do briefings**. Now, I will say in their defense, which I don't agree with again for the record, was that there was no -- not necessary for CDC to do it, because the [White House] Coronavirus Task Force was doing them every night.

Q: You don't agree with that?

A: No, I think they should have heard from the public health leaders.

Q: Does this policy apply not only to briefings, but also to requests for media interviews and things like that?

A: **Yeah, denied. Or I shouldn't say denied. I would say not approved.** So I don't know if there's an active piece on this versus just a passive no approval. I know that my communication people would say that we weren't approved to do that or not approved to do that, or not approved to do that.

Q: What do you think the consequences were of CDC's inability to provide truthful scientific information to the public during this period?

A: **Well, I think it impacts trust of the American public on the agency.** I was -- different agency leaders handle this differently, and I'm not critical of the current leader. I called her when she got nominated. The one thing she wasn't going to hear from me was public criticism. I got it every night from my predecessors on the nightly news. I said I'm not going to do that to you. That is tough job. I'm here to help. Call me if you can.

.... I think there are ways to improve CDC's ability to do its mission, and one of those would be to look at the FBI model, and think about it for this public health agency.

Because I will tell you, CDC was -- didn't really quite know how to function when every decision they wanted to make had to be reviewed by multiple different parties, and multiple different this and multiple different that. **I think it would be much more easy if the public health agency was independent.**