

# “They Don’t Want the Backlash”: Top Doctors Balk as Team Biden Tries to Turn the Page on COVID

As health experts wrangle over whether to aggressively curb the spread of SARS-CoV-2 or let each American decide how much risk to take, the administration is sending mixed messages—and taking heat from all sides.

By [Katherine Eban](#) May 20, 2022

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In early 2021, the incoming Biden administration had every expectation of rescuing America from the previous regime's *Lord of the Flies*-style pandemic response, in which states battled one another for scarce supplies and advisers pushed controversial recommendations to let the virus spread unchecked to achieve herd immunity. **Joe Biden**'s team unfurled a massive and well-organized vaccine rollout, bringing the lifesaving shots to within five miles of almost every U.S. home and vaccinating roughly 215 million Americans.

A little over a year later, with a mind-boggling 1 million American deaths from COVID-19—nearly half coming after the vaccinations were freely available, amid a battle with wildly infectious variants and rampant anti-vax disinformation—Biden's team appears to be pivoting to a new approach.

Facing an exhausted and divided public, diminished legal options to maintain

vaccine and masking mandates, and ominous polling ahead of the midterm elections, the administration has edged away from top-down efforts to control the spread of the virus. It is aiming to turn the disease into a treatable, survivable condition that doesn't require hospitalization. To make that possible, the administration wants to ensure Americans have access to abundant vaccines, powerful therapeutics such as Pfizer's Paxlovid, and an array of other treatments such as monoclonal antibodies. "If you can target [these tools] to the right people, virtually no one should be dying," a senior administration official told *Vanity Fair*.

With that goal has come a distinct change in how federal officials talk about the pandemic. "You are going to see them shift the messaging around personal responsibility," said Dr. **Scott Gottlieb**, who served as FDA commissioner under **Donald Trump**. "'Don't be the jerk that walks COVID into a restaurant. Don't be the careless person that holds a super-spreader event.' They are trying to instigate good behavior on the margins."

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But this attempt to transition to a new normal of safely living with COVID-19 faces an immediate obstacle: SARS-CoV-2 itself, which is churning out new and more transmissible variants at an alarming rate. "This virus is in hypermutation mode," said Dr. **Rick Bright**, CEO of the Pandemic Prevention Institute at the Rockefeller Foundation. "This is an ugly virus causing ugly disease."

The administration is also hearing complaints—both in private and in Twitter screeds—from a formidable contingent of doctors and public health officials who have called foul on both the new approach and the administration's new

shift in tone.

**Gregg Gonsalves**, an associate professor of epidemiology at the Yale School of Public Health, thinks the messaging shift has more to do with a “new political era” than with any new scientific or medical reality. He calls it a “rhetorical move in the middle of mass death.... We are still in the midst of a pandemic, with all the uncertainty.”

Preventing new infections is still critical, say some doctors and scientists, especially with a virus as dangerous and unpredictable as this one. “You never know: Is this the infection that’s going to kill you?” said **Michael Osterholm**, an epidemiologist and the director of the Center for Infectious Disease Research and Policy at the University of Minnesota. A new analysis [by the nonprofit organization FAIR Health](#) found that over 75% of patients suffering from long COVID, a constellation of disabling symptoms from fatigue to shortness of breath, initially had a mild or asymptomatic case and were not hospitalized when first diagnosed.

A White House spokesman, **Kevin Munoz**, told *Vanity Fair*, “The president laid out [a comprehensive, 100-page plan in March](#) that emphasizes COVID-19 isn’t over and lays out a detailed road map for how we can continue to protect people from COVID, prevent COVID from being the disruptive feature it has been for so long, and move America forward safely—recognizing that we now have more tools than ever before...and a strong foundation to build on.” He added that “countless outside experts” helped the White House develop its plan, but that Congress had so far failed to provide the funding for its continued implementation.

Shortly after Biden took office, his new surgeon general, Dr. **Vivek Murthy**, began a series of off-the-record calls with influential doctors and public health experts. The confabs functioned as quasi auditions for some

attendees who wanted a role in the new administration. But they also allowed Team Biden to keep medical influencers on message and have them air criticisms behind closed doors before going public. "I find the calls to be kind of pointless and useless, except I felt special being invited," said one doctor who attends them.

More recently, the medical huddles have become something else: a venue for frustrated exchanges between administration officials and doctors over the fundamental goal of federal COVID policy, according to half a dozen participating doctors who spoke to *Vanity Fair*. Is the objective to prevent COVID-19 infections nationwide, or simply to allow Americans to choose the level of risk that is right for them, so long as hospitals don't become overrun?

On a May 5 call, dozens of doctors listened as the White House's recently appointed COVID-19 czar, Dr. **Ashish Jha**, enumerated the limits of a federal pandemic response that had run out of money. Without new congressional funding, Jha explained to the group, the supply of monoclonal antibodies and vaccines would dwindle and not all treatments would continue to be covered by COVID-19 relief funds.

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The administration wasn't to blame for Congress's failure to fund these measures. But for the doctors on the call fighting for health equity, it was painfully evident that a COVID response on the cheap would disproportionately impact disadvantaged communities.

One week before the call, the White House Correspondents' Dinner had

become a battleground over what constitutes acceptable risk. Even as cases were once again skyrocketing, driven by the omicron subvariants BA.2 and BA.2.12.1, the federal response was shifting away from mandated precautions and toward personal risk assessment.

Jha seemed to signal support for this view when he told Fox News in the run-up to the dinner, "I think if people put in good safeguards, they can make it substantially safer—make sure people are vaccinated, make sure you have testing, improve ventilation. Those are strategies we have learned over the last two years." While Dr. **Anthony Fauci** pointedly skipped the dinner, Jha attended mask-less, as did most guests. The inevitable tally of sick correspondents afterward suggested that the banquet had been a super-spreader event.

But to health-equity advocates on the call, including Dr. **Ebony Hilton**, a Virginia anesthesiologist, the event underscored a fundamental injustice at the heart of the pandemic response. Media executives and high-profile journalists who fall ill can usually get tested for free, consult their personal physicians, and, if warranted, take the antiviral drug Paxlovid. But the servers, drivers, and other support staff they came into contact with over the course of the weekend's festivities might have to pay for tests, seek out costly medical care, and hunt for someone willing to prescribe them the drug.

During the May 5 call, [according to Politico](#), Fauci himself voiced frustration with the public perception that the pandemic was effectively over. Hilton also spoke up, according to several people who were on the call, saying, in so many words, "Where's the siren for this pandemic? With hurricanes, we give warnings. Where's the voice that tells people, 'If you get infected, it could be financially devastating for you'?"

Her remark was followed by silence.

Asked about her remarks by *Vanity Fair*, Hilton said that the conversations were off the record but that she had repeatedly expressed similar sentiments in public forums. A senior administration official said, "Health equity has been a huge part of everything we've done." Pointing to high vaccination rates among Black adults, free rapid COVID tests sent to homes in vulnerable zip codes, and millions of high-quality masks delivered to community health centers, the official added, "We know what's at stake."

From the earliest days of the pandemic, Trump offered rosy and false assurances that the virus was "totally under control" while attempting to stage-manage reality. In March 2020, for example, he said he didn't want a cruise ship filled with COVID-positive patients to dock in San Francisco because "I like the numbers being where they are. I don't need to have the numbers double because of one ship that wasn't our fault."

Biden won the election in part by pledging to restore unvarnished truth and scrupulous science to America's pandemic response. "Arriving in the White House to thousands of people dying every day, realizing we had no vaccines in inventory, more than half of vaccines sent to states were not getting into people's arms, millions of people looking for vaccines every day and not finding it, that was some scary stuff," Biden's former senior adviser **Andy Slavitt** told *Vanity Fair*. "Things got better from there, thanks to a lot of hard work and science."

And yet, on Wednesday, the White House COVID-19 press briefing offered a discordant picture of the new federal messaging. The director of the Centers for Disease Control and Prevention, Dr. **Rochelle Walensky**, warned of what appears to be a new surge: One third of Americans live in areas where viral transmission is now medium to high. Nonetheless, she emphasized that it

would be up to individual Americans to choose to protect themselves: “We encourage everyone to use the menu of tools we have today to prevent further infection and severe disease, including wearing a mask, getting tested, accessing treatments early if infected, and getting vaccinated or boosted.”

Critics say that that mixed message—COVID-19 is running rampant, but each American should decide how best to respond—risks sowing even more distrust. “I feel they are talking in circles and don’t want to commit to a clear fact,” said Bright at the Rockefeller Foundation. “I don’t feel there is a level of transparency about all the data they have. I feel like they are [shielding] America in some way” from the reality of the virus.

“They are not willing to say, ‘You are going to get this, therefore our goal is to make this safe,’” said Dr. **Jeremy Faust**, an emergency medicine doctor at Brigham and Women’s Hospital in Boston. “They’re not willing to say, ‘Let it rip.’”

*“Public health is ultimately about acknowledging what people are willing to do.”*

Dr. **Leana Wen**, a public health professor at George Washington University, believes the administration is pulling its punches because, in part, “they don’t want the backlash that’s going to ensue from certain quarters who are still intent on a zero-COVID strategy, including many people in Biden’s base who have already expressed their disappointment.”

In late April, after an outcry from the medical community, even Fauci had to walk back comments to *PBS NewsHour* that America was “out of the pandemic phase” of the virus, which he later clarified to mean that the nation

was “out of the full-blown explosive pandemic phase.”

In part, the muddled messaging is the result of the administration’s attempt to tread a fine line between clashing camps of doctors and public health experts. On one side are doctors like Wen, who believe that it’s time to transition from government mandates to empowering individuals to make their own risk calculations. “Public health is ultimately about acknowledging what people are willing to do,” Wen said.

On the other side are those trying to protect vulnerable communities in America’s wildly uneven health care system. These advocates feel kneecapped by messaging that Americans can go about their business. “We need strong messaging that the pandemic is not over, and enforcement of mitigation strategies to keep our communities safe,” said Dr. **Matifadza Hlatshwayo Davis**, director of health for the city of St. Louis. Without that, she said, “I don’t feel as empowered to enforce” safety measures.

Ultimately, the highly transmissible, shape-shifting SARS-CoV-2 virus has proven impervious to spin, even in Washington, D.C. “There are politics, and there’s the reality of what we’re all living,” said one former federal official who worked on the development of COVID therapeutics. “Who’s harmed more people with their misinformation? Fauci going out there and saying everything’s okay, or Trump saying it’s okay to drink bleach? They’re both wrong.”