

National Leadership in Confronting Bioterrorism:1

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I remember when I first had to think about bioterrorism. It was back in the fall of 1998, and Secretary Cohen was on a trip in the Middle East. We were in one of our periodic dust-ups with Iraq, and I had to go over to the White House to attend an interagency meeting with the president. At the very end, the president did something he never did any other time that I was there. He pointed his finger at me and said, "I need to talk to you for a minute." Whew, that was a big deal! He hauled me into the Oval Office and said, "Is this book *Cobra Event* true?" I said, "Sir, I haven't read it, to be honest. I don't know," but "before the sun rises in the morning, I'll have 100 colonels who will have read it and we'll figure it out." I didn't get 3 feet out of the White House compound when the phones were ringing all over the Pentagon. The Department of Internal Affairs was reviewing the book. We went to battle stations. You know, when the president says something, you do it. I was really surprised, and gratified, to find out that we had people at the Department of Defense (DOD) who did know about this book and had been thinking about the subject for some time. I, for sure, had not.

That led to a remarkable event several weeks later, when the president brought together six or seven distinguished Americans who are experts in this area, some of whom have become close friends since, like Josh Lederberg. The president arranged a little tutorial for the cabinet, and it was remarkable to be sitting there and having the president of the United States and the cabinet officials sitting opposite these scientists. By the way, this is the way I think it worked in the past. I have a feeling that's the way it was when they came and told the president about nuclear weapons 50 years ago. It *ought* to be like that: a dialogue with scientists who have a sense of public spirit. It was quite an eye-opening experience.

Two months later, I remember the sinking feeling when I got a phone call from the National Military Command Center that reported, "We have what we think is an actual anthrax incident here in this country." It was like one of those events that you hope never happens in you life, and it's astounding when it does. I can remember virtually all of it, and thinking to myself, "This new world has finally hit us."

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It's unfortunately the product of the terrible security epoch that we all survived by the skin of our teeth: the Cold War. We were confronted by an opponent who systemically went about the business of pulling together whatever it was going to take to win his next war. He, unfortunately, built an enormous, enormous inventory of bad things: nuclear weapons, chemical weapons, and biological weapons. Now we're dealing with the residue of that Cold War. We're dealing with the wreckage and what's left over. Unfortunately, it didn't go away. The devices did not go away; nor did the knowledge.

As well, it created something else that is a great worry to me. It seemed to create in the minds of some others around this world that it's possible to get a poor man's version of a weapon that could at least politically neutralize those who own nuclear weapons. All of a sudden, a lot of small countries seem interested in biological weapons because it could deter the big guys who can bring a nuke to the table.

Consequently, over the last 10 years, we now have 14, 15, or 16 countries that have created active programs to build biological weapons. I'm personally not so worried about a biological weapon in the hands of a nation state, because at its core we know how to deter a nation state. You can put things at risk that, arguably, are larger than what they can accomplish with the use of the device. What worries me more than anything is that when nations set about the task of building these terrible things, gradually over time, the knowledge and, frankly, the technology and material spread out to a larger world. They spread out to a world of nonstate actors who aren't necessarily deterrable. It's harder to figure out how to deter organizations that seem to be motivated more by eschatological goals than the kind of traditional items that nations worry about, like territory or mineral rights. It's this larger worry that the knowledge and the tools that have been created over the years to build these terrible weapons will now spread to those who are not necessarily deterrable.

Ultimately, this poses a real dilemma for the DOD. How we prepare for this actually gets to the core of one of America's greatest anxieties. Americans do not want their military involved in law enforcement in the United States. They're frankly worried about that. The military doesn't want that, by the way. The last thing we want to do is to have the burden of confronting our own citizens on our own soil. Yet if we don't prepare for this terrible day, I fear that we're going to create a far greater crisis, a far greater threat to civil liberties in this country.

When the Imperial Navy bombed Pearl Harbor,

within four months we locked up 120,000 Americans who happened to be Japanese. If the public senses that they are under great risk and great danger and that it's out of control, I fear that the reaction is going to be to reach for extralegal solutions that we just can't have in this country.

We also don't want the president to have declaration of martial law as the only option. One of the great problems about bioweapons and bioterrorism is that they are unlike other great catastrophes. When Hurricane Hugo comes crashing ashore or when an earthquake knocks down bridges all over California, by the time the president gets out there with the director of Federal Emergency Management Agency the sun is shining, it's a nice day, and the camera crews are filming. At least there's a sense of hope in the air that it's going to get better.

When do you get that sense that it's going to get better with a biohazard or a bioterrorism attack? I don't think any of us knows what the public sentiment is going to be like at that time, the sense that tomorrow could be worse than today. I fear in that environment we're going to have many people who will be looking for deep solutions to their insecurity. We've got to make sure that they don't feel that the only answer is to call out the military to take control of society. That would be the worst outcome.

What must we do to get ready? Ultimately, this is not a problem that the DOD can solve. I will say, however, that we're probably the only people in the world who know how to perform thoracic surgery in a chemical environment. That's a fairly specialized skill and an unbelievable capability. When you see a doctor in MOP gear opening up someone's chest, that's incredible. However, that's not a capability that we have in abundance, and I don't know how you could provide that for a country confronting a large-scale attack. We're the only organization in the world that could set up barrier nursing for 10,000 people over a weekend, another fairly refined skill. We're probably the only people who can insert intravenous catheters in 100,000 people's arms within a day if we had to. We know how to do that.

That, however, is not the answer. It is our problem, of course, as citizens, but this is not a DOD problem. We have to help, but it isn't something that we can solve. It's something, frankly, that even the public health instruments of the United States, those who are under the direction of the government, can't really solve. As capable as Dr. Hamburg is, she doesn't have the assets it would take to do that.

We conducted a grim tabletop exercise about a loose nuke in the United States and found out that

the number of casualties we would have in that one location from one device exceeded the number of all the empty hospital beds in the United States at any one point in time. This is going to be an unbelievable problem that has to ultimately spring from the depth of our basic public health system in America. It's not going to get fixed any other way. The challenge is for the US government to enter into the deepest partnership, much deeper than exists today, with the health care industry in America to prepare for this, an industry that, frankly, doesn't see bioterrorism as a big problem right now. It helps to have a few dead crows around that became infected with West Nile virus. That wakes them up and encourages them to think about it. However, this is not something that average Americans worry much about.

Ultimately, we in the government must figure out how to buck up and strengthen public health in America. It seems to me that's got to be at its core. We should use the power of the government to convene the nation. There isn't any way in the world for any institution other than the presidency to bring to the table the chief executive officers of the largest pharmaceutical, defense, and IT companies and say, "We've got a problem, folks. You know, we've got to deal with it." In retrospect, I think the president basically cut 2.5 years off the normal bureaucratic process that one afternoon by bringing us together to listen to these six Nobel laureates to talk about this problem. So, first, we must use the convening power of the federal government. That must be a starting point.

Second, it seems that this is one situation in which the federal government, with its purchasing power in research and development, can leverage the development of things we need to have done. I honestly don't believe that we can make this a government-solved problem. We have to find ways to leverage interest in the private sector to help solve it. These are hard choices. Do we set about the task here in the short term of trying to get a vaccine for each and every bad bug that's out there that the bad guys in the world are engineering? Alternatively, do we look for some longer term genome-based solution to this problem? We struggled with that in DOD. We never came up with a good answer, so we threw a little bit of money at both and didn't solve either. That seems to be one of those clear directions that I know Dr. Hamburg worked toward. That's one of those things that the Oval Office is going to have to work on. Where do we, as a government, want to put priority? What's the best, most likely productive avenue for research?

Third, if we have this terrible day, the public will have a pretty clear impression of whether or not we

are in control of the situation. I don't know any way to prepare for that crisis other than to have frequent exercises in confusing environments to try to learn how to deal with the problems we will face. We did this at DOD. The exercises were always a little contrived. However, there's nothing like having to think things through in a simulated environment to make you ask first principle questions. After our loose nuke exercise, the primary question was, "How are we going to bury 43,000 radioactive corpses by tomorrow morning?" That's a pretty interesting question that you don't normally confront, in your average government meeting, unless you put yourself through the process of doing an exercise and confront some of the real questions, real problems that come up in an emergency. We've got to find ways to test ourselves as decision makers and not just Washington-based decision makers. One thing that is fairly clear to me is that we have no idea what they really think out there at the state and local government levels.

Dr. Hamburg is a rare example of someone who comes tested and who is able to make decisions. Most of us have been federalites our whole life: We've lived in the system, we'll die in the system, and we won't know what it's like at the state and local levels.

We think we know how it works. Let me tell you that it just sounds totally different when somebody from Washington comes down to the local level and says, "I'm from the federal government. I'm here to organize this thing." Let me tell you, that goes down wrong, and it doesn't work, because we don't know how to do it, by the way. So finding a way to implement steady, ongoing, consistent exercises has to be imperative. Ultimately, you can't ever design a plan that's going to be appropriate when the real crisis occurs. You can do all the war planning you want, and it never happens the way the war plan says. It will never be like that. However, planning is necessary so that you don't have to invent new ideas when you confront the crisis, but you've got to be flexible. The whole strategic direction for the federal government has to be strategic agility in planning under crisis conditions. That's the only way we're going to deal with it, because we're never going to know in what town this is going to happen and what the local health environment and infrastructure are like. We're never going to know the time of day or the time of year. A thousand variables are going to take our plans and throw them right out the window.

Having the ability to plan dynamically under the worst of times is what we're going to have to set as an objective in the years to come. There is much more on the table here than just the ability to deal with a terrible catastrophic event in America. What's really on

the table, I believe, is the future of American democracy if we don't get ready. If we're not prepared for this crisis, the public will be demanding action of the president. We cannot accept the consequences of not being ready. None of us will want to live in that world. So we have to get ready. The military has to get comfortable with our role as subordinate players in this environment, because it's going to be a terrifying thing, and citizens are going to be worried when they see tanks rumbling down the street. That's not going to help. We've got to find ways where we're seen as being

the cavalry riding in and not the threat to society. That means we need to find ways to work with the public health community. Frankly, there was very little interaction between the DOD and the public health community until now. We've got to make up for lost time.

At the policy level, I have no doubt that doctor to doctor there has been a robust discussion, and I think that's been good. However, there hasn't been adequate interaction. We don't have a lot of time to make up for lost time, but we've got to get it right.