

White House press briefing [via CBSN]

02/09/22

1:28:38 p.m.

2 minutes and 38 seconds

AAMER MADHANI: New York, today, was the latest to work on their mask mandates. Several states are now, it seems, well ahead of the federal government in explaining the path out of the pandemic. Is the President now falling behind states in explaining to Americans how are — we all can, sort of, resume our normal lives and get back to normalcy?

JEN PSAKI: Well, the President has been clear on — has said that we are moving toward a time when COVID won't disrupt our daily lives, a time when COVID won't be a constant crisis. I think you all heard him talk about that in his press conference two weeks ago and that is something that — as Jeff Zients, I believe, just said during the COVID briefing earlier today — there's an active and ongoing work plan to develop a path forward and that is — there's constant discussion about that. I think what you're referring to, as it relates to New York — which is an important component, especially as Americans are consuming what it means and where we're going of masks and what the mask guidance is — Dr. Walensky was also on this COVID briefing that happened just earlier this morning and what she conveyed on that briefing — I know there's a lot going on, so you may not have all seen what she said, but — is that we certainly understand the need to be flexible. We want to ensure that public health guidance we're providing meets the moment we're in. We recognize people are tired of the pandemic. They're tired of wearing masks. I bet all of you are. I certainly know I am. We all understand that, but that — what our focus is on is looking at the data and science. So, there's good — there are positive signs, as she referred to: cases and hospitalizations are falling. We're looking at all of the guidance based on the latest data and science. She also said — which is, I think, important for people to note — that we continue to — while we continue to recommend masking in areas of high and substantial transmission — which is basically the entire country at this point; that's essentially everywhere — for indoor settings, we are evaluating rates of transmission. We're evaluating and looking at data to see if any changes need to be made. And that is something, of course, the CDC continues to do. So, I would say that we are internally discussing, of course, what it looks like to be in the phase of the fight against the COVID pandemic where it is not disrupting everyone's daily lives; where people are moving on and living, you know, lives free of, hopefully, masks at some point and many of the restrictions that we've all been living through over the past two years. But as the federal government, we have the responsibility to rely on data, on science, on the medical experts. That's something the President committed to during the campaign. They committed — they confirmed, during this briefing, they are continuing to evaluate and there's ongoing discussions and work happening internally.

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1:32:25 p.m.

2 minutes and 16 seconds

NANCY CORDES: The White House has made it pretty clear there is no plan for a mass

evacuation of American citizens in Ukraine and, in fact, you and the President and others have suggested that Americans who are in Ukraine should leave now if they can. At the same time, it's been projected that Russia could overtake Kyiv in two days if it invades. So, what happens to Americans if they do get stranded in Ukraine? Should they understand that the U.S. is not coming to get them?

PSAKI: Well, let's just take a step back here. First, we don't know that President Putin has made a decision to invade. We still don't have a new assessment on that, right? I'm obviously not going to discuss intelligence reports, which I think you also referenced. What I can tell you is that it's not just that the President or I have been conveying this warning to U.S. citizens. This is something the State Department has been doing for weeks and weeks and weeks now. I know there have also been a range of reports out there about American citizens. As you all know, because we've discussed this before, U.S. citizens are not required to register their travel to a foreign country with us and we don't maintain a comprehensive list of U.S. citizens. That said, the State Department does estimate — does estimates from time to time and I know there have been much larger numbers out there, so I just wanted to reiterate for all of you that back in October, the State Department estimated there were at the time — so, months ago — about 6,600 U.S. citizens residing in Ukraine. Not much far — not much larger than that. There have been — of course, there are periodic times — during the holiday season — where there are assessments of tourists and visitors and others, but in terms of citizens residing in Ukraine — many of which would be dual citizens. So, what people should understand is that the United States does not typically do mass evacuations. Of course, the situation in Afghanistan was unique for many reasons, including that it was the end of a 20-year war. We were bringing a war to an end; we were not trying to prevent a war, as we are certainly in this case. There are a range of means that individuals and Americans can depart from Ukraine, and we've been encouraging them to do exactly that. But what we have been — how we've been looking at this is much more — much more similar to what was ordered in Ethiopia or Kazakhstan in recent months, where the security circumstances on the ground warranted travel advisories and warnings from the State Department.

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1:35:17 p.m.

5 minutes and 15 seconds

JACQUI HEINRICH: HHS just put out a statement clarifying around some reports that crack pipes are not going to be part of the "safe smoking kits" that are funded by the administration, but can you clarify for us: Were they never a part of the kit or were they removed in response to this reporting and this pushback? Just — the language was unclear.

PSAKI: They were never a part of the kit; it was inaccurate reporting and we wanted to put out information to make that clear.

HEINRICH: So, what is in the safe smoking kit?

PSAKI: A safe smoking kit may contain alcohol swabs, lip balm, other materials to promote hygiene and reduce the transmission of disease — diseases like HIV and hepatitis. I would note that what we're really talking about here is steps that we're taking as a federal government to address the opioid epidemic, which is killing tens of thousands — if not more — Americans every single day, week, month of the year. We put out this statement, though, because there was inaccurate information out there — or I should say, HHS put out the statement because there was inaccurate information out there, and we wanted to provide clarification on the allowable uses for the HHS Harm Reduction program. It's not a change in policy. This program, though, is focused on harm reduction strategies, including prioritizing the use of fentanyl test strips and clean syringes and all of these harm reduction services that will be supported by these programs are intended to save lives from an epidemic that we know is — is devastating to communities across the country.

HEINRICH: And then — so just to put a final point on it, does the administration support any effort then to distribute drug paraphernalia like the types that we were hearing about?

PSAKI: We — the statement makes clear that we don't support federal funding, indirect or direct, for pipes.

HEINRICH: Okay. Thank you and then on the safe injection sites that the DOJ is evaluating: Was this an ask from the White House that they review that policy? Because I know that, for years, DOJ has opposed efforts to open safe injection sites.

PSAKI: It's under litigation, so I can't speak to that, but what I can tell you and reiterate is that the White House is committed — as I will — as I would reiterate for you, many Democrats and Republicans, including Senator Cruz — to taking steps to address the opioid crisis. This is not an issue that is inflicting just blue states. It is inflicting millions of Americans across the country, and it is important that we take steps to address it.

HEINRICH: So, just final wrap of those two items: What would you say to critics who are concerned that the Biden administration is somehow encouraging illegal drug use?

PSAKI: I think that it's important to step back and remember — just to put a little more of a fine point on it — that we are losing an American life every five minutes to overdose. We don't have time for political games. The President is focused on saving lives through harm reduction programs. That's exactly what we're talking about here. They work in red states, and they work in blue states. We know they save lives; they help connect people to treatment and recovery and they were endorsed this week by a bipartisan commission co-chaired by Senator Tom Cotton that examines steps we must take to address the devastating toll of overdoses. So, what I would say is: This is not a game. This is not a political game. This is an epidemic that is taking the life of five — of an American every five minutes, and we need to work in a bipartisan way to address it.

HEINRICH: Thank you. Can I ask real quick about the masks? We had another state today dropping the indoor mask mandate as the CDC is confirming that their guidance is not changing. But these decisions that are being made at the local level, like you guys always talk about, are out of step with the science that is at the forefront of the CDC, of this White House, so why are we

not hearing the same messaging criticizing states that are, you know, making these moves like we heard previously with, for instance, Ron DeSantis?

PSAKI: Well, I would say there is a distinct difference between standing in the way, which Ron DeSantis did — or Governor DeSantis; I'll give him his full title — of teachers, school administrators, and others taking steps to protect the students in their school communities. There's a difference between standing in the way of it, threatening to pull back funding; and allowing for local school districts to make choices, which is what a number of these states are doing. Go ahead.

KRISTEN WELKER: Jen, quick follow-up on that. Does the administration risk looking out of touch with where the country is heading, in terms of lifting these mask mandates, if the CDC doesn't revise its guidelines?

PSAKI: Well, again, we understand where the emotions of the country are, right? People are tired of masks. I would say not even — if you look at the polling though, there's also a huge chunk of people who still want masks, right? So, it's not even that specific. It's just that, as you noted, there are some states that are moving towards rolling back or giving more choice to local communities about how they will implement these requirements. But, again, from the federal government, what our responsibility to do is to abide by what the President committed to on the campaign, which is to listen to scientists, listen to data. That doesn't move at the speed of politics; it moves at the speed of data and they — Dr. Walensky committed to — conveyed — or, I should say, confirmed that they were evaluating this at the CDC.

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1:44:45 p.m.

1 minute

CECILIA VEGA: Can you blame Americans for being confused and frustrated and having no idea who they should be listening to right now?

PSAKI: Well, our guidance is consistently — has consistently been this: When you are in a high-transmission area, which is everywhere in the country, you should wear a mask in indoor settings, including schools. There are states that have rolled back their mask guidelines, that have given more flexibility to communities. They're different; they're just not uniform, what every state has done and, certainly, we continue to advise and recommend abiding by public health guidelines.

VEGA: But do you dispute that Americans are confused by what's happening right now?

PSAKI: Well, I think we should do everything we can to prevent them from being confused, so I'm restating what our policy is here, from the federal government, which is based on public health guidelines.

VEGA: And does the CDC run the risk of becoming irrelevant in the minds of many Americans, given that their states are moving along — ahead without them?

PSAKI: Well, I don't think the — the federal experts on health and medical advice should be irrelevant to Americans at a time where we're still facing a pandemic.

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1:48:36 p.m.

1 minute and 13 seconds

M.J. LEE: Jen, given that the CDC guideline still remains that masking is recommended in schools, if you are a parent, a teacher, a student living in a state where that is no longer recommended, should you still follow the CDC guideline?

PSAKI: Yes.

LEE: Yes? So, even if the state is not requiring that you wear masks in the schools?

PSAKI: Well, this is where we would advise any American to follow the CDC guidelines and as Dr. Walensky said, and you referenced, they're — they're constantly evaluating — right? — because the data is changing, the science is changing. It certainly is positive that case numbers have come down, hospitalizations come down and they look at all of that information. That's why it's also important to — to note the difference between leaders who are saying, "We're going to leave it up to localities, local school districts to make decisions." No parent who wants to send their kid with a mask should be penalized. No teacher or — who wants to wear a mask should be penalized or school district who makes that choice should be penalized. But it — a lot of these decisions have been up to local school districts. In the past, we have made a — we have funded and we have made announcements about a number of mitigation measures, which we will continue to work with school districts to implement.

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1:59:53 p.m.

1 minute and 28 seconds

SABRINA SIDDIQUI: You're saying, you know, the CDC — its guidance remains that there be universal masking in schools and the White House supports that recommendation. As you point out, some of these Democratic governors who are lifting mask mandates in schools, they are allowing local authorities to make some decisions, but the reality is: There are going to be a lot of parents who no longer have their children wear masks in schools and given community transmission is still high across the country — I mean, the whole map on the CDC website is red — are you not concerned that these decisions are going to potentially lead to outbreaks in schools?

PSAKI: Well, our focus continues to be to recommend everyone follow CDC guidance, right? And we know that wearing masks effectively reduces transmission, as much as people are understandably tired of wearing masks — we understand that. There were a number of other mitigation measures that schools have taken. Obviously, now kids age five to 11 are eligible to get — to be vaccinated, testing so kids can remain in the classroom even if there is a case is something we have also talked about and supported, and funding from the American Rescue Plan ensured that there was capacity and ability to improve ventilation, social distancing, and take other steps that are also effective mitigation measures in schools. But, again, you know, our view is that if a student or a parent chooses to wear a mask, they should be able to freely, so that — and they should not be prevented from doing that.

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2:03:32 p.m.  
50 seconds

REPORTER: Is it the sense inside the White House that the decisions by Democratic governors to relax some of these mask guidelines is driven mostly by, as you said, the speed of politics and not the public health guidelines that are driving the federal government's policy?

PSAKI: I didn't actually make that assessment, but I would point you to all of them to ask them questions about what they based their decision-making on. But, again, we understand local leaders — we continue to advise local leaders, whether they're governors or others, to make decisions based on the science and data about what's happening in their communities — and what is going to keep in schools safe, what is going to keep kids in their — people in their communities safe and we will continue to abide by what federal guidance is advising, which is based on the — the science and health experts in the federal government.

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2:06:58 p.m.  
1 minute and 34 seconds

APRIL RYAN: Back on the HHS issue —

PSAKI: Yeah.

RYAN: — and pipes. You know misinformation has a terrible ripple effect. What is this administration doing? Because this has permeated a lot of corridors that people are taking this in. Are you or the administration or HHS planning on doing something beyond the statement to let people know that this is misinformation and correct it?

PSAKI: Yeah, that's a really important point, because I think there's been a lot of misinformation and about particularly this issue and — and it has really clouded over what is a hugely important issue in this country, which is a fight against the opioid epidemic and the need to have bipartisan

approaches that are going to help communities that are impacted address it. But, yes, we will certainly be building out our efforts to effectively communicate that we are not — that what — what is in a safe smoking kit, what is not in smoking kit — safe smoking kit, and what we are effectively trying to do with our harm reduction program.

RYAN: Has damage — has a lot of damage already been done just by misinformation in certain communities, are you finding?

PSAKI: We certainly have seen — and I think, April, one of the reasons we felt, even though we have never — this has never been a part of what has been funded, we felt it was important to put out a public statement from — from the federal government to make that clear, because we saw the spreading of misinformation and the fact that it was having an impact on a range of communities and we felt, even though it was never true, that we needed to put out a proactive statement.