

United States Senate
WASHINGTON, DC 20510

December 19, 2017

The Honorable Eric Hargan
Acting Secretary
U.S. Department of Health and Human
Services
200 Independence Avenue, S.W.
Washington, D.C. 20201

Mr. Brian R. Stimson
Acting General Counsel
U.S. Department of Health and Human
Services
200 Independence Avenue, S.W.
Washington, D.C. 20201

The Honorable Brenda Fitzgerald, M.D.
Director
Centers for Disease Control and
Prevention
1600 Clifton Road
Atlanta, GA 30329

The Honorable Mick Mulvaney
Director
The Office of Management & Budget
725 17th Street, N.W.
Washington, D.C. 20503

Dear Acting Secretary Hargan, Director Fitzgerald, Acting General Counsel Stimson, and Director Mulvaney,

We write regarding concerning reports that the Centers for Disease Control and Prevention (CDC), and potentially the Department of Health and Human Services (HHS), are discouraging the use of specific words or phrases in official FY19 budget documents. Such an agenda, especially if motivated by political factors, threatens to undermine the tremendous scientific progress at the CDC and the public's faith in government, more broadly. If true, this guidance is not just a mere change to vocabulary, it is a fundamental shift of direction and a reflection of flawed ideology. While Director Fitzgerald has recently denied the existence of such a ban¹, we request clarity on your policies via specific answers to the questions below.

The mission of the CDC is to protect the nation's health by addressing threats to our wellness and health security both at home and abroad. In order to carry out this mission, the CDC must be able to accurately describe its initiatives and engage the communities with which the agency works. The potentially banned words and phrases in question—"vulnerable," "entitlement," "diversity," "transgender," "fetus," "evidence-based," and "science-based"—represent important topics that the CDC and HHS should incorporate both internally and publicly. Any ban on specific words and phrases at the CDC would hamstring the top-notch scientists and officials of the CDC, undermine confidence in CDC science, hurt the American public and our global partners, and threaten to deter the next generation of scientists that might otherwise contribute to the great work of our federal agencies.

¹ <https://twitter.com/CDCDirector/status/942423509124427776>

Ensuring research and scientific integrity is critical in our federal agencies. Both HHS and CDC have offices to monitor such integrity: the HHS Office of Research Integrity (ORI) and the CDC Office of Scientific Integrity (OSI). According to HHS' policies and principles for assuring scientific integrity², HHS is committed to:

- A culture of openness with the media and the public;
- Promoting the free exchange of ideas, data, and information;
- Maintaining a culture of scientific integrity that depends on honest investigation, open discussion reflecting a balance of diverse scientific views, refined understanding, and a firm commitment to evidence; and
- Facilitating the free flow of scientific information consistent with applicable laws, regulations, and policies.

The CDC, in its guidance on scientific integrity³ through the Office of the Associate Director for Science, is directed to:

- Facilitate the free flow of scientific and technological information;
- Adhere to policies and systems that preserve the quality of information by rigorously evaluating data, research findings, and results; and
- Communicate with the public in a manner that demonstrates openness, free exchange of information and data, accuracy, timeliness, and responsiveness.

We must ensure that the actions of our federal agencies—particularly those so important for maintaining the health and safety of our citizens—adhere to the highest standards of research and scientific integrity. Given that the Trump administration has already shown a propensity to defund, silence, and eliminate agencies and programs that serve medically vulnerable communities and promote research rooted in science, we are particularly alarmed by even the possibility that the administration would direct a federal scientific agency to avoid the use of medically accurate language.

To that end, we would like to better understand the policies of HHS, CDC, and the Office of Management and Budget (OMB) with regard to any prohibition on the use of certain words or phrases in key agency documents. We request a written response to the following questions by January 8, 2018:

Development and dissemination of the banned word list:

1. Did HHS or the CDC ever propose a policy to avoid certain words (including “vulnerable,” “entitlement,” “diversity,” “transgender,” “fetus,” “evidence-based,” and “science-based”) in official agency documents?
 - a. Have such policies ever been in place in previous administrations?

² <https://aspe.hhs.gov/basic-report/policies-and-principles-assuring-scientific-integrity>

³ https://www.cdc.gov/od/science/docs/cdesiguide_042516.pdf

2. Which administration officials were involved in creating and approving the CDC guidelines discouraging use of certain words? Have these same individuals been involved in previous discussions to censor other federal agency verbiage or processes on ideological grounds?
3. It was reported that this language guidance was provided to make CDC's work appear more valuable or justifiable to Republicans in Congress. Is this true? If not, what was the rationale for providing these instructions to the CDC?
4. Was the guidance also sent to other federal agencies within HHS' jurisdiction? If not, why not? If yes, which other agencies?
 - a. If this guidance applies to agencies beyond CDC, when did trainings on these policies occur for those agencies that have been briefed?
5. Reports indicated the CDC guidance was intended for use in the context of the agency's upcoming budget request. Has the OMB requested the inclusion or exclusion of certain words or phrases in budget documentation from other agencies?
 - a. If so, was this guidance provided to make certain agencies' work appear more valuable or justifiable to Republicans in Congress?
 - b. Did the OMB provide any language guidance for FY18 budget documents?

Legality and enforcement of the ban:

1. What is the legality and constitutionality of HHS and CDC having a policy whereby employees are directed to avoid using certain words or phrases?
2. How will HHS and CDC enforce their policies on discouraged words or phrases, if such a policy is present?
 - a. What would be the consequences of employees not following such policies?

Ensuring scientific integrity in relation to the ban:

1. What is being done to ensure the scientific integrity of HHS and CDC scientists and officials whose work requires them to engage in topics that are must accurately described using words and phrases that are discouraged?
 - a. How will HHS and the CDC prevent political tampering with their findings and conclusions?
2. How does this avoidance of certain words and phrases comply with HHS' and CDC's stated policies on research and scientific integrity, including regarding the free flow of scientific information, openness with the public, and a firm commitment to evidence?
3. What is the role of science and evidence in the development of Department and agency policies, specifically around budgeting and communications, to Congress?

4. What is being done to ensure that studies and research that are ongoing and/or planned within HHS and CDC that pertain to certain discouraged terms will be shared and released to the public?
5. How will the avoidance of specific words affect future grant awards for scientific research in fields where the use of these words is commonplace?

Thank you for your prompt consideration of this matter by January 8, 2018.

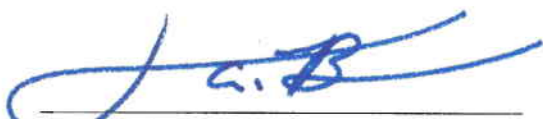
Sincerely,



BRIAN SCHATZ
U.S. Senator



EDWARD J. MARKEY
U.S. Senator



CORY A. BOOKER
U.S. Senator



ELIZABETH WARREN
U.S. Senator



RICHARD BLUMENTHAL
U.S. Senator