



REMARKS

Remarks by President Trump, Vice President Pence, and Members of the Coronavirus Task Force in Press Briefing

— HEALTHCARE

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James S. Brady Press Briefing Room

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THE PRESIDENT: Thank you very much everybody, and good afternoon. Today is Good Friday. And this Sunday, millions of Christians celebrate Easter and the resurrection of Jesus Christ. At this holy time, we pray that God will heal the sick and comfort the heartbroken and bless our heroes. As American families look forward to Easter, we're reminded that our story ends not in despair, but in triumph and renewal. Very appropriate, isn't it?

I'd like to provide Americans an update on our ongoing efforts in the war against the invisible enemy. Before I do that, I'll have a couple of notes. The United States, in discussions last night with Mexico, Saudi Arabia, Russia, and –dealing with OPEC nations — we are trying to get Mexico, as the expression goes, “over the barrel.” And Mexico is committing to do 100,000 fewer barrels.

The President and I spoke last night. We have a great relationship, great friendship. They're helping us very much at the border. They have 27,000 soldiers — Mexican soldiers — on our border right now, stopping people from coming into our country as our wall goes up. We're up to about 168 miles of wall.

And in speaking with the President, they have a limit. The OPEC nations have agreed to a different limit: a reduction of about 23 percent. So what I thought I would do — and I don't know that it's going to be accepted; we'll find out — the United States will help Mexico along and they'll reimburse us sometime at a later date when they're prepared to do so.

And we had a great conversation, but we'll find out how that all works out. As you know, they're trying to get rid of the glut of oil. There's a tremendous glut of oil. And we don't want anything to hurt our incredible industry. We're actually the largest producer in the world now, so we don't want anything to hurt those jobs — those great jobs in Texas and North Dakota, in Oklahoma, and everywhere. We have a tremendous energy — New Mexico — tremendous energy business. And we want to keep those jobs.

So we're — we're working on it. I think, eventually, it's going to work out. It may work out quicker than what most people thought possible. And maybe it won't, but it'll work out eventually.

Our experts are monitoring the data from every part of our country having to do with the topic that we're here to discuss. In the midst of grief and pain, we're seeing clear signs that our aggressive strategy is saving countless lives. Tremendous progress is being made. Although when you look at some of the numbers — I just spoke with Governor Cuomo; we had a good talk. When you look at those numbers — the numbers of death, people that have died — it's so horrible.

Now, on the other side, you have the numbers of beds being used, we were just saying, are substantially reduced. That's usually the sign that it's heading in the downward curve. So, New York, we know where that is. But in the midst of all this grief and this pain, we're seeing these signs and we're seeing them very strongly. And a lot of that has to do with the aggressive strategy in saving so many lives. We're saving so many lives compared to what it could have been.

So, nobody knows what the number is, but we had a number of 100,000 lives. As many as that is, it's impossible to even think of it. And that was the low end with a tremendous amount of work and a tremendous amount of — you can call it many different things. Our people had to be extremely

strong and brave to be able to put up with what they've put up with. But the minimum, if you did this social distancing at every other aspect — and I think I can say 90 percent, maybe even more than that, were able to do it — the minimum number was 100,000 lives, and I think we'll be substantially under that number.

Hard to believe that if you had 60,000 — you could never be happy, but that's a lot fewer than we were originally told and thinking. So they said between 100- and 220,000 lives on the minimum side, and then up to 2.2 million lives if we didn't do anything. But it showed a just tremendous resolve by the people of this country.

So we'll see what it ends up being, but it looks like we're headed to a number substantially below the 100,000. That would be the low mark. And I hope that bears out.

The situation in Detroit and New Orleans appears to be stabilizing. Detroit has really started to go up, and now it is stabilizing. And New Orleans is a great place; I have so many friends there. They can't believe what's happening, but it's really stabilized. I spoke with the governor of Louisiana. And, as you know, we're building them additional beds right now — the Army Corps of Engineers and FEMA — and that is going to be done. And I hope they're not going to be very well used because I think they've really — I don't think they're going to need them or certainly not very many of them. We built them a big hospital of 1,000 beds and now we're — we're in the midst of doing another 1,000. I don't think they're going to be using very many of them, and that's a good thing.

There was a time, two weeks ago, where we said, "That's not going to be nearly enough. We're going to have to build more." But we wanted to wait to see and I'm glad we waited. It just looks like they're doing really well. Louisiana and the state of Michigan is doing, really, much better than we thought.

In Washington State, we've made enough progress that the governor is now able to return an Army field hospital, so we're going to take that hospital. We don't think we need any more hospitals. We built thousands of beds all over the country, and we think we're probably not going to need that hospital anyway. And if we do, we're ready to move it to a different location.

In New York, we're seeing hospital admissions declining very substantially, as I said. And nationwide, the number of new cases per day is flattening substantially, suggesting that we are near the peak and our comprehensive strategy is working.

Over time, our guidelines to slow the spread are decreasing the rate of new cases very substantially and will result in fewer hospital admissions. And we're seeing that; it's incredible. I think, with no exceptions, it's looking like it's lower. And again, that's because of the people doing what they had to do. Great people. And working with elected representatives and — and the doctors, the nurses, and everybody — I mean, just everybody. Everybody is so, so — has been so amazing.

I was told this morning again, "Please mention all of those people working in the grocery stores." And it's true. The checkouts and the clerks and the people that are really — and a number of those people have become infected. So we want to thank them and a shout-out to them.

With the tireless devotion of American doctors and nurses and all of the medical people, we've kept our fatality rate very, very low compared to other countries. My administration is closely monitoring the data on the virus's impact on our cherished African American communities because they've been hit hard. And the Surgeon General will be sharing more of that information right after we're finished here. He'll be coming up and saying exactly what's happening because it's really — it's very troublesome, I will tell you that.

I'd also like to provide clarity on the important point for many Americans on elective surgeries. While we've asked hospitals to cancel surgeries and procedures that do not take place at this time, just not to do them now — the choice to delay any treatment still remains between the patient and their doctor. We're not advising Americans to postpone medical treatment that the doctor believes should occur now. So it's different kinds of surgery, obviously, but we're really getting to the point where you can start to think about doing that surgery, if necessary, pretty soon, I think. Pretty soon.

Yesterday, I directed Secretary of Agriculture Sonny to — Sonny Perdue to expedite aid to American farmers. And Secretary Perdue will be using all of the tools at his disposal to develop a program — and very quickly — of at least \$16 billion to provide relief for farmers, ranchers, and producers impacted by the coronavirus.

In this time of crisis, we must keep our supply chains moving from the beginning — right from beginning to end. And we're committed to supporting the amazing men and women who produce supply. I did, last night, a statement on social media, and I said I have directed Secretary Sonny Perdue to expedite help to our farmers, especially to the smaller farmers who are very, very badly hurting right now. I expect Secretary Perdue to use all of the funds and authorities at his disposal

to make sure that our food supply is stable and safe, and our great farmers are prosperous and continue to be prosperous.

We're working very hard to make sure our food supply chain is sound and plentiful, but we all know that that begins with our farmers, cattlemen, ranchers, and producers. So we're going to be working with the small farmers, the big farmers, the cattlemen, the ranchers — all of the producers. We're going to take care of them. We're working with them right now. We have a lot of money that was put there through our use of tariffs and other means, and we're going to help out our farmers.

And I don't think — I tell you, I've been helping our farmers for a couple of years because they were targeted, as you know, by China and others. And I think they're very grateful to what — for what we've done.

On the medical front, the FDA — FDA has issued 47 emergency use authorizations for advancements and testing new ventilator designs, innovations, and personal protective equipment, and experimental medicines. And Dr. Hahn is going to be talking about that. We've cut through the red tape to give doctors and patients unprecedented freedom to make their own healthcare decisions, granting access to potential therapies and drugs.

Since Monday, we've deployed two major shipments of hydroxychloroquine from our National Stockpile. And it's going to various cities.

And we are also disposing and getting, as quickly as we can, portions of it to the Department of Veterans Affairs and the Department of Defense. And speaking of the Department of Defense, they're going to be sending us 10 million N95 masks that they had. And we're in great shape in every way. We're in great shape with ventilators. We're in great shape with protective clothing. We have additional planeloads coming in.

But we're not getting any calls from governors at this moment. I can speak, I think for — Vice President Pence will be talking in a little while. We're getting — we're getting very few calls from governors or anybody else needing anything. They're in great shape for this surge that's coming in certain areas in particular, and that's a good job. You've done a great job on that, Mike. Really, a great job. I appreciate it. The whole country appreciates it.

More than 2 million coronavirus tests have now been completed, and we're conducting approximately 100,000 more every day. We're also working to bring blood-based serology tests to the market as quickly as possible so that Americans can determine whether or not they have already had the virus and potentially have immunity.

They have immunity if they've had the virus. A lot of them don't even know if they've had it. Sometimes it's brutal. You see the Prime Minister seems to be doing well now, I hope. He had a rough go of it, and still is, but he's doing better. And then some people don't even know they had it. It could be sniffles. It could be they don't feel perfect, but they've had it. And they're the lucky ones.

The NIH, CDC, and FDA are currently validating these antibody tests to ensure that they are accurate, and they're doing that at breakneck speed. I think we can say that, Doctor. And we're going to get them approved very quickly — Dr. Hahn.

When validated, we're confident that the production will scale up to tens of millions of tests very quickly. We're leading the world now in testing, by far, and we're going to keep it that way. Other countries are coming to us, and they're wanting to know about our tests and can they buy the tests, and can they do whatever they have to do to get the tests. And we're going to make that — very soon, we'll be in a position to make that possible because it's important for them to have it.

And we're going to have an announcement on the World Health Organization sometime next week. As you know, we give them approximately \$500 million a year, and we're going to be talking about that subject next week. We'll have a lot to say about it. We'll hold it.

Every American should be proud of what our country has achieved in just a short period of time. The U.S. military has deployed thousands of personnel to build 23 temporary hospitals with more than 16,000 beds. And we have the potential to build many more if we needed them, but we're all ready to go. But I don't think we're going to need them, which is great — great news.

And we built those hospitals in 12 states and the District of Columbia using the Defense Production Act. And we used it like a hammer. A lot of the media said: Oh, we weren't using it. We used it like a hammer to a point where all we had to do was say the words and everybody gave us max. And they've done a good job. They really have done a good job, with few exceptions.

And we've harnessed the full power of American industry to produce ventilators and other essential supplies. Right now, we're making thousands of ventilators, many of which we won't need, but we'll use them in our stockpile. And we'll build that up. We'll also help build up the stockpiles, which they should have had in the states. And so we're working with governors on that, and we'll also help other countries or countries that are calling us for help, if they need ventilators and they're in no no position to build ventilators. We are. We have Ford and General Motors, and many, many companies are building ventilators.

So we're going to be helping — at a not-too-distant point, we're going to be helping quite a few of the countries.

Now, we've launched Project Airbridge to deliver nearly 300 million pieces of personal protective equipment from and around the globe. We're also shipping out 60 sterilization systems to 10 different cities that can each sterilize up to 80,000 masks each day, and I'm even hearing it can go up to 120,000 masks a day — certain equipment with certain additions. It's a company in Ohio that makes it. It's a great company. Great — I hear it's a great product. It works very well.

I asked that question; I said, "How come we have to buy so many masks? Why can't we sterilize the masks that are being used?" And the answer was, "You can." In this case, they say, up to 20 times. So we can take a mask — certain types of masks — the N95s in particular — and we can sterilize them, make them very clean, up to 20 times. That's a great thing.

In addition, we passed the largest emergency economic relief package in American history to save the U.S. economy and protect the American worker. As you know, this past week, which was four active days on the stock market — Good Friday today is not — is not included; the markets are closed. In four days, we had the biggest market increase — stock market increase that we've had in 50 years. That tells you that there's a pent-up demand. That tells you they want to get back. There's something good going to happen. I really believe that. There's something very good going to happen. We have to get back.

So think of it: In this horrible period, this horrible, dark period where this — this monster came and worked its horrible, horrible spell over the world — 184 countries as of this morning. A hundred and eighty-four countries.

We've done well, and I guess the market thinks we've done well, because we hit the biggest stock market increase without one day — we're talking four days instead of five — that we've had in 50 years. Fifty years. Think of that. More than 50 years, actually.

In short, the American people have launched the greatest mobilization of our society since World War Two, deploying every scientific, governmental, medical, and military resource to defeat the virus.

So I want to just start then with — we're going to answer questions later. We'll have time. I think we have a lot of time today. A lot of people are off, as they should be. Good Friday.

But — so I'll stick around, and we'll answer questions later. I want to start with Deborah Birx, please. Dr. Birx. And you can go over some of the numbers we just looked at, and that'd be great.

Thank you very much, Deborah.

DR. BIRX: Thank you, Mr. President, and thank you for outlining how well we are doing in a series of metro areas. What also has been encouraging, for those of you who are watching epidemic curves every day — and I'm sure you are, and lot — watching them in log phase, because that's how epidemiologists like to look at their curves — you can see for the first time that, in the United States, we're starting to level on the logarithmic phase, like Italy did about a week ago. And so this gives us great heart on that — not only in specific places, but we're starting to see that change.

Obviously, a lot of that is driven by the improvement in New York City. Remember, for a long time, they were over 50 percent of our cases and 50 percent of our new cases. That has dramatically changed because of the impact of what the citizens of New York and New Jersey and across Connecticut, and now Rhode Island, are doing to really change the course of this pandemic and really change the trajectory of new cases.

We're seeing that what many states and metro areas were — experienced as twofold and fourfold — fourfold increases that went to twofold — that now those are going to eight days between the doubling rate. Watching this every day gives us hope across these metro areas, from New York and New Jersey and all through Denver, and of course, through New Orleans.

We still see cases occurring in the Boston area and in Chicago, but their rate of increase seems to be stabilizing. And we really want to call out the work of the mayors of Baltimore and the District and Philadelphia who have really brought all of their health — health experts together and, working with their communities, are starting to really change the curves in those areas.

What we're seeing is we're united in social distancing, and that's been very encouraging to all of us, and it should be encouraging to the healthcare providers that are on the frontline, many of which are serving our Americans with such dignity and respect and ensuring that everybody gets optimal care.

And as the President noted, our mortality in the United States is significantly less than many of the other countries when you correct them for our population. And that is really solely the work of our health — our frontline healthcare providers.

And so working with — you can really — hopefully you get the theme today that we are incredibly proud of our public health leaders at the city level, at the state level, at the federal level who are working together to really change the course of this pandemic, working with their citizens in their communities to make these changes, and the American public who has really taken all of this to heart and stayed home.

I know, last week, we really asked a lot of people in the Washington and Baltimore area to consolidate, not go out frequently to grocery stores or pharmacies. You can really see that that's having a huge impact.

So it's really about the encouraging signs that we see. But as encouraging as they are, we have not reached the peak. And so, every day, we need to continue to do what we did yesterday and the week before and the week before that, because that's what, in the end, is going to take us up across the peak and down the other side.

We continue to really applaud the work of California and Washington State and Oregon. We're learning from all three of those states, from their public health officials, about how they were able to keep the virus from ever becoming logarithmic. And I think that's an important lesson for all of us on how they did that, what the timing was, in case we ever have to face this issue in the future.

Thank you, Mr. President.

THE PRESIDENT: Thank you very much, Deborah.

THE VICE PRESIDENT: Tony?

THE PRESIDENT: Doctor, please.

DR. FAUCI: Thank you very much, Mr. President. So again, just keeping on the theme that Dr. Birx had mentioned, this is the end of the week — that famous week that we spoke about last weekend — in which we — what actually was predicted to happen, happened. We're starting to see the leveling off and the coming down that Dr. Birx had mentioned.

But it's important to remember that this is not the time to feel that since we have made such important advance in the sense of success of the mitigation, that we need to be pulling back at all. I was actually hearkened [sic] by the fact that we've been talking about the New York, New Jersey, New Orleans, and other areas where they have really big spikes, but there's other parts of the country, in the middle parts of the country, where they're concerned to make sure they don't get those spikes.

And I really want to salute the governors of states throughout the entire United States, but particularly in the central part of the country because the governors after they see us in these press conferences. And I've had calls over the last several days from several of the governors — you know, from Nebraska, Iowa, South Dakota, Utah. Just about an hour and a half ago, I spoke with the governors of Arkansas and Wyoming, who are really committed to make sure that they don't get into the situation where they're going to have spikes in their state. And they're doing the kinds of things that they don't get recognized, because people don't talk about them much.

But we have a big country. We have 50 states. And it's not only the big cities. So if we're going to pull out of this, we're going to pull out of it in the big cities and we're going to pull out in those areas that aren't as densely populated.

And I just want to give a shout out to them. They're doing an extraordinary job. I was really pleasant- — I wouldn't say "surprised," because I expect it of this country — but to hear what they're doing and the commitment that they're putting into making sure that we don't have the kinds of situations that we've experienced, unfortunately, in other areas — this is very important.

I just want to close by — one other thing, something I mentioned yesterday and the day before — that there are a lot of candidate interventions that are going into clinical trials. For those of you who are interested in it, I recommend you go to ClinicalTrials.gov, and you'll see the design of a clinical trial, and you'll see that many of them are the randomized control trials that are the really gold standard of how you find out whether something really is safe and effective. And as the weeks and months — and it'll probably be months — sometime in the summer, we'll start to see which are working, which are not. And to focus on those that are — we're developing and we're working.

I'll be happy to answer questions later. Thank you.

THE PRESIDENT: Please, Doctor.

DR. HAHN: Thank you, Mr. President.

THE PRESIDENT: Thank you.

DR. HAHN: The White House Task Force has been very focused on increasing the supply of personal protective equipment for our great providers. I was one of those providers a few months ago and I can tell you nothing is more important than making sure they have what they need.

So, in order to increase the supply of N95 masks, FDA has worked with industry and has now authorized two companies who will supply machines to sterilize N95 masks.

Admiral Polowczyk and FEMA are purchasing, on behalf of U.S. government, 60 sterilization machines, as mentioned by the President. And they will be positioned around the country to increase the amount of supply of N95 masks.

Each machine will be able to sterilize 80,000 95 masks [sic] — N95 masks per day. And we hope to actually increase that further.

The Vice President and the White House Task Force challenged us yesterday, and we responded as a team. FDA issued revised guidance regarding the laundering of gowns because gowns are another issue, in terms of supply, that we're looking forward on.

This is not something that normally happens around the country, but issued this guidance. It's on our website now at FDA. So there's information about how hospitals can do that to increase the supply.

We've heard concerns that maybe hospitals might not want to do that because of regulations. And I can — happy to tell you that Administrator Verma and I have worked on this — certified providers and suppliers who follow FDI [sic] — FDA guidance, as posted on the website, will be compliant with Medicare and Medicaid requirements.

And then finally, last week FDA provided guidance to manufacturers on manufacturing specifications for cloth gowns. This is another attempt to increase the number of gowns. Typically, it's plastic or other types of materials. And this guidance, if followed, can be used by manufacturers to actually make these gowns and no further regulatory red tape will be necessary. They can go into circulation.

Thank you.

THE PRESIDENT: Thank you very much. Please.

SURGEON GENERAL ADAMS: Thank you, Mr. President. Good afternoon, everyone. I started off the week talking about the challenges that lie ahead, and I want to finish the week just by reiterating what you've heard. Mitigation works. It definitively and quantitatively is working. And I want to say thank you to America for your efforts to help flatten the curve and to save lives.

But, at the President's direction, yesterday, I met with 2,000 Hispanic leaders from their communities. And today, the Vice President led a phone call that I was on with hundreds of African American leaders, including the Reverend Jesse Jackson, including Derrick Johnson of the NAACP, including the National Medical Association and the Black Nurses Association, to talk about some of the alarming trends we're observing regarding the impact of COVID-19 on communities of color.

And you've heard the stats in New York City: Hispanics represent the majority of deaths. In Milwaukee County, blacks are 25 percent of the population but almost 50 percent of the cases and 75 percent of the deaths. So what's going on? Well, it's alarming but it's not surprising that people of color have a greater burden of chronic health conditions.

African Americans and Native Americans develop high blood pressure at much younger ages, and it's less likely to be under control, and does greater harm to their organs. Puerto Ricans have higher rates of asthma and black boys are three times as likely to die of asthma as their white counterparts. As a matter of fact, I've been carrying around an inhaler in my pocket for 40 years out of fear of having a fatal asthma attack. And I hope that showing you this inhaler shows little kids with asthma all across the country that they can grow up to be Surgeon General one day.

But I — more immediately share it so that everyone knows it doesn't matter if you look fit, if you look young. You are still at risk for getting and spreading and dying from coronavirus.

The chronic burden of medical ills is likely to make people of color especially less resilient to the ravages of COVID-19. And it's possibly — in fact, likely — that the burden of social ills is also contributing.

Social distancing and teleworking, we know, are critical, and you've heard Dr. Birx and Dr. Fauci talk about how they prevent the spread of coronavirus. Yet only one in five African Americans and one in six Hispanics has a job that lets them work from home.

People of color are more likely to live in densely packed areas and in multi-generational housing, which — situations which create higher risk for spread of a highly contagious disease like COVID-19.

We tell people to wash their hands, but as studies showed, 30 percent of the homes on Navajo Nation don't have running water. So how are they going to do that?

In summary, people of color experience both more likely exposure to COVID-19 and increased complications from it. But let me be crystal clear: We do not think people of color are biologically or genetically predisposed to get COVID-19. There is nothing inherently wrong with you. But they are socially predisposed to coronavirus dispos- — exposure and to have a higher incidence of the very diseases that puts you at risk for severe complications of coronavirus.

But as the Vice President shared on the call this morning, this history — and I want you to hear me say this — it does not have to be our nation's future. We're taking steps now, in the midst of the COVID-19 pandemic, to reach, protect, and strengthen all communities impacted by this disease, and especially our communities of color.

More details will be forthcoming. But we are actively working, as the Vice President and the CDC director laid out today, on data collection; targeted outreach to communities of color; and increasing financial employment, education, housing, social and health supports, so that everybody has an equal chance to be healthy.

And I want to close by saying that while your state and local health departments and those of us in public service are working day and night to help stop the spread of COVID-19 and to protect you regardless of your color, your creed, or your geography, I need you to know: You are not helpless. And it's even more important that, in communities of color, we adhere to the task force guidelines to slow the spread.

Stay at home, if possible. If you must go out, maintain six feet of distance between you and everyone else, and wear a mask if you're going to be within six feet of others. Wash your hands more often than you ever dreamed possible. Avoid alcohol, tobacco, and drugs. And call your friends and family. Check in on your mother; she wants to hear from you right now.

And speaking of mothers, we need you to do this, if not for yourself, then for your *abuela*. Do it for your granddaddy. Do it for your Big Mama. Do it for your Pop-Pop. We need you to understand — especially in communities of color, we need you to step up and help stop the spread so that we can protect those who are most vulnerable.

This epidemic is a tragedy, but it will be all the more tragic if we fail to recognize and address the disproportionate impact of COVID-19 and an array of other diseases and risk factors on communities of color. The task force and this administration are determined not to let that happen. The President, the Vice President have said we will not let that happen.

We can't fix these issues overnight, but I promise you we will work with your communities to quickly and meaningfully move the needle in the right direction. Nothing less than the fate of our families and friends, my family and friends depends on it.

THE PRESIDENT: Thank you very much. Great job. Thank you.

Mike, please.

THE VICE PRESIDENT: Thank you, Mr. President. Today, the White House Coronavirus Task Force met and — and heard from the President the gratitude then he and I and I know all the American people feel for all the dedicated workers at FEMA, HHS, U.S. Public Health Service, FDA, and all those that are literally working on your behalf around the clock to partner with states, to partner with local health officials. And Mr. President, allow me to add my — my thanks and admiration to all of the entire team here at the federal level.

On this Good Friday, we — we remember those who've lost their lives to the coronavirus. We remember their families, our dedicated healthcare workers, and our first responders. And we do well, on this special day for Christians across this country, to remember them in our prayers.

But, as you just heard from Dr. Birx and from the experts, it's also a good day to remember that Good Friday is always followed by Easter Sunday. And there is hope. There is hope in this moment that, thanks to what the American people are doing every day — adhering to the President's Coronavirus Guidelines for America; thanks to the fact that Americans are listening to state and local leaders, and putting the health of their family members and neighbors first, we're getting there, America. We're making progress. But it's imperative that we all continue to implement all of the guidance in the "30 Days to Slow the Spread."

As the Surgeon General just attested, at the President's direction, we engaged more than 400 leaders in the African American community today. And allow me to express my appreciation for their leadership and their efforts in communicating to African Americans and other minority populations some of the unique challenges that those communities face in the midst of this epidemic.

And the CDC, as the Surgeon General said, is working on not only studying the issue, but very rapidly issuing new guidance. And we'll be communicating that new guidance to all of those great leaders.

On the subject of testing and supplies, the President gave a great amount of detail. More than 2.1 million tests have been performed and we continue to work very, very closely with FDA and suppliers around the country to expand the ability of testing. And you just heard Dr. Hahn reflect on the fact that very soon we will have an antibody test that Americans will be able to take to determine whether they ever had the coronavirus.

I spoke today to the governor of Colorado, Jared Polis. And we've been in contact with Senator Cory Gardner about an outbreak at a particular meatpacking facility in the Colorado area. And at this time, our team is working with the governor and working with the senator to ensure that we flow testing resources. At this point, there are some 14 people hospitalized, maybe 2- to 300 of the workforce have been impacted. And we spoke about providing those resources this weekend. I want to encourage people in Colorado that we will — we will work to support that effort, but I also want to emphasize that all the people that are working in food supply — from farmers, to meatpackers, to distributors, to truckers, to grocers — continue to have our gratitude, as President Trump said just a few moments ago.

On supplies: More than 5 billion have been obligated to the states, 29,600 National Guard have been activated, and, at the President's direction, more than 4,700 active duty military personnel have been deployed — medical military personnel — in nine states, focusing on the areas of the most significant epidemic.

Air bridge, its 26 flights have been completed. Four flights are scheduled to arrive today, bringing a quarter million gowns, 25 million pairs of gloves. Fifty-four more flights are scheduled, literally bringing in supplies from around the world.

Finally, let me say, as we go into this very special weekend — into Easter services. I know I speak on behalf of the President when I say how grateful we are to all of the churches that have been there — and their ministries have been working under great difficulty — to continue to provide for the needs of your members. There have been — there have been food drives, there have been phone calls, and ministry has continued. And we are grateful for the role, on this Holy Week, that our churches, our synagogues, and all of our houses of worship have played.

On their behalf, allow me to remind you that even if you're not in the pew this Easter Sunday, if you are able, it's still a good idea to give, because those ministries continue to go forward. And we encourage you — we encourage you to continue to support them.

We also want to say very respectfully to all of the — all the church communities around this country and all the places of worship to continue to heed the guidelines issued in the President's Coronavirus Guidelines for America. We know it's difficult in this time of year, particularly, Mr. President, to avoid gatherings of more than 10. But we're grateful that so many churches, synagogues, and places of worship have done just that, and we urge you to continue to do it.

And to my Christian brothers and sisters across the country, let me encourage you with the words we should all remember that Jesus said, “Wherever two or more are gathered, there He is also.” And so you can worship, you can celebrate Easter, and know that you’ll be blessed in so doing. And you’ll be serving the nation.

Thank you, Mr. President.

THE PRESIDENT: Thank you. Great job. Thank you.

Okay, it’s Good Friday. Let’s be nice. Okay? Let’s be real nice. Yeah, please. Go ahead.

Q Thank you, Mr. President. Can you clarify a little bit what the U.S. offer to Mexico, in order to agree to that oil deal?

THE PRESIDENT: Yeah.

Q And then also go into detail about what you spoke about on oil with President Putin this morning?

THE PRESIDENT: So all of the OPEC nations met, and others, and they’re all agreeing to cut back because there’s a tremendous glut. We don’t even — we’re filling up our strategic reserves. We don’t even have room to store it. In fact, they’re using ships to store oil. There’s never been anything like this.

It was being overproduced to start off with, and then you had the virus and that took off 40 percent right there. So we have — there’s a glut of oil like nobody has ever seen before. It’s good in many ways and, depending on where you are, who you are, it’s bad. We have a tremendous energy business with hundreds of thousands of jobs. We’re doing great. Number one in the world.

So, they all got together and they said, “We’re going to cut it, because we have to get rid of this tremendous supply.”

Now, the good news is, gasoline prices — I’m seeing 90 cents, 85 cents, in different parts of the country, a gallon. Nobody has ever seen that. I guess you have to go back to the 1950s where they

had the big large dollar bills, remember? You don't remember; you're too young. But the fact that you have to go back a long ways to see it.

So there's some good. The airlines are trying to come back, having low fuel costs is good for them — and other reasons. Steel manufacturing — but a lot of the steel goes to building what we do for the oil and engineering firms. So, you know, that's a — that's a double-edged sword.

But it's — it's — we want to keep our energy. We want to remain independent. We will remain independent, I think, regardless. But we want to get rid of this tremendous overflow. There's no place to even store it.

So the OPEC nations met. They've been meeting. And, you know, I've hated OPEC over the years, absolutely hated them. But obviously it broke down and we potentially have years' worth of supply. A long time before it ever can catch up, even if they do reduce it.

And they agreed, but Mexico didn't agree. It was one of the few countries that didn't agree. This is OPEC-Plus. These are OPEC-Plus countries outside — you understand? And Mexico didn't agree. And I understand the President very well. He has a level when he came in, and he wanted to keep it at that level. Oil is important for Mexico. The problem is — and I explained it very strongly — you know, you're going to be selling it for \$5 or \$10 a barrel. So, in the end, it's bad.

But he did have some political difficulty with it, frankly, and I understand that too. And it's a small amount for us. It's a large amount for Mexico, but it's a very small amount for the United States, being the biggest producer. So I agreed to pick up some of the slack. So he was going to reduce it by 100,000 barrels — reduce his output by 100,000 barrels. And I was going to pick up the slack and they would make it up to us at a later date. They would make up what we're doing at a later date. It could be in a different form.

And I don't know whether or not that's going to be — for Mexico, it was acceptable. I don't know whether or not that's going to be acceptable to the other oil-producing nations. We'll find out. But it's something that would certainly be acceptable to me to get it over the back. So Mexico is going to reduce by 100,000 barrels, and that would mean that they're 250 to 300 barrels short. We'd make up the difference. They would reimburse us at a later date. Okay?

Q You mean make up the difference by cutting U.S. production?

THE PRESIDENT: By cutting some U.S. production. Now, the U.S. production has already been cut, because we're a market-driven economy and — and oil is very market driven. They've been cutting oil all over the place. We're cutting it back.

And what does it mean really? It means we have it in the ground. We can use it. Now we have a lot of — we have a lot of ground with a lot of oil in it. I think we're number one in that too. We're probably number one, especially with ANWR. As you know, I got ANWR approved in Alaska. That's one of the biggest finds anywhere in the world.

So when you add it all up, I think we're probably number one, even in what we have under- — we're very lucky. We were — we grew up in a land that was rich in a lot of ways, but it's also rich because it has a lot of oil underneath — oil and gas.

And as, you know, natural gas — LNG — is all over the country now at a very low price. And our carbon, our atmosphere, our — the level of environmental cleanliness is at its all-time best right now. All-time best. Because we are using a lot of natural gas.

But we have many forms of energy, including some of the newer forms that people want to see us go to. We have a lot of different forms of energy. We're number one in the world. We want to keep it that way.

So we're helping Mexico out. We will be reimbursed, in a form, sometime in the future.

Please.

Q Mr. President, I want to ask about the new federal projections in a moment. But first, today, you tweeted "The Invisible Enemy will soon be in full retreat!" Given it's invisible, without widespread testing how would you know?

THE PRESIDENT: Well, I think we're going to have it in retreat. Will it be today? No. Tomorrow? No. But it will be — at a certain point in the not-too-distant future, it will be gone.

Q But how do you know that without the widespread testing is specifically my question.

THE PRESIDENT: Well, we'll know. We'll know because people aren't going to go to the hospital, people aren't going to get sick. You're going to know that without — but we're going to do very substantial testing. We're doing more testing right now than any other country in the world by far.

Q But it's still fewer than 1 percent of our population —

THE PRESIDENT: And if you'd like to have that question answered, I'll have the professional answer it. Deborah, perhaps you could come up. We are doing tremendous testing, but you'll know. You're going to know before anybody, because you're going to see nobody's getting sick anymore. It will be gone, and it won't be that much longer.

Go ahead.

Q I'll ask about the projections after. Thanks, Mr. President.

THE PRESIDENT: Go ahead.

DR. BIRX: Thank you, Mr. President. So, the testing, I want to reemphasize about what kind of testing we're talking about. This is RNA diagnostic testing. That is the platform that was built to respond to this epidemic. It is the same platform that we utilize for HIV viral loads, and so many HIV clients have also given up their space on the machines to have these tests run for all of Americans.

This assay is complicated. It's not like an assay that you have for your other diseases — your strep test or other diseases like that. This is a very complicated assay that requires a lot of technical oversight and it's part of the reason why not all 100 percent our machines are running at full capacity. But we had great discussion with the lab directors about that.

Every day, more are brought online. And so — but I think we have to create expectations of what the daily test rates will be. Last year, we probably did 3 million HIV viral loads or 4 million HIV viral loads as a country. We've done over 2- — almost 2.2 million in four weeks. So this is unprecedented in what we have to do.

I think that's why we're working very hard for two pieces. And I want to make sure that people understand: Testing is just part of our strategy. The other part of the strategy has to be this

syndromic and influenza-like illness, where there's an alert to an illness. And so that we're surveying where we know the most vulnerable cases have appeared.

And the great call that I had with the mayors and with the health officials yesterday and mayors today — a lot in the rural areas, their primary — and as it was in Washington and California — it was at the nursing homes.

So the issue is to build a testing strategy that speaks to our strengths of laser focusing a strategic approach to testing when we know what our volumes are — and they increase every day, but we have to be realistic about what the volumes will be a week, two weeks, three weeks from now — and combine that with strategic surveillance so that we're testing symptomatic people and their contacts very quickly — to go back to contact tracing, utilizing our complete strategy.

And I think we're very much interested — and it's why the President, three weeks ago, really put us on getting an antibody test. And I think — I called from the podium for our university colleagues and unive- — and hospitals to begin an ELISA-based test, because that's a blood draw. But we really wanted a finger prick to make it easy and deployable.

That's what's being worked on now. Of course, we don't want to promise until we have it because I think we deserve that, the American people deserve that: to have a test that is efficient to let people know who has been positive for immunity. That's critical to epidemiologists and public health officials to know what the penetrance of a virus was into a community, when all you're seeing are the serious cases and testing the most symptomatic.

And so that's a question that we still have: Is this the tip of the iceberg or is this half the iceberg or three quarters of the iceberg — what we have seen to date?

And we have — I just want to complete the thought by saying: In the areas where we had an outbreak, these large metros — Louisiana, Denver, Detroit, Chicago, New York, New Jersey — but, per capita, we've done more tests than any other place in the world. That was intentional. We focused the tests where the need was the greatest and the burden of disease the greatest. And now we're trying to really see how strategically that very valuable resource can be utilized around the country to create a mosaic of testing combined with surveillance.

Q Can I ask about the new federal projections? There's new reporting today — the new federal projections suggest —

THE PRESIDENT: Let you ask who?

Q I'd like to ask you, if I can, about the new federal projections that suggest lifting the 30-day shelter-in-place orders would lead to a spike in infections. Have you seen those new projections from your Department of Homeland Security and HHS, first of all?

THE PRESIDENT: I have not. When did they say this would take place? When?

Q They said that it would take place if the 30-day shelter-in-place were to be removed. They're three different example —

THE PRESIDENT: Oh, well, we'll talk about that. Doctor, would you like to talk about that?

Q So does that impact your thinking though that those —

DR. BIRX: We haven't seen the documents.

THE PRESIDENT: I haven't — they haven't seen it. I guess, you're seeing — I guess they leaked it to NBC.

Q They didn't leak it to us. It's being reported by others.

THE PRESIDENT: Nobody has it. And they're the ones that do it, so.

Q It's your administration, so I asked. It's from the HHS and DOJ.

Q I'll circle back in a sec- —

THE PRESIDENT: We'll find out about it. They don't know about it.

Q So in terms —

THE PRESIDENT: Do you want to say something, Tony? Go ahead.

DR. FAUCI: First of all, Peter, I haven't seen that, so I can't quote on that.

Q But New York Times just reported it with the last four hours.

DR. FAUCI: That's okay. I still haven't seen it. I've been here all day. (Laughter.)

Q I understand. I'm just saying it wasn't leaked to me; I'm just telling you what I've seen.

DR. FAUCI: So, what I think — what — that they're talking about is that whenever you pull back, you would expect that you might start seeing cases. And what we've been talking about — what Dr. Birx has just mentioned — is that when you see that, that's where you want your resources to be able to very efficiently, in real-time, identify, isolate, and contact trace.

So, don't let anyone get any false ideas that when we decide at a proper time when we're going to be relaxing some of the restrictions, there's no doubt you're going to see cases. I would be so surprised if we did not see cases. The question is how you respond to them.

I think that's what they were referring to.

Q I guess, the question, Mr. President: Should Americans have to decide between staying healthy and going back to work?

THE PRESIDENT: Look, I think we're going to do both. We're going to go back to work and we're going to stay healthy. And staying healthy is also a proportion. If you look at what we're doing, we're looking at a date — we hope we're going to be able to fulfill a certain date — but we're not doing anything until we know that this country is going to be healthy. We don't want to go back and start doing it over again, even though it would be in a smaller scale.

Yeah, Jeff. Go ahead.

Q Thank you, sir. Just a follow-up on the oil question. The President of Mexico said that you had agreed that the U.S. would cut production by 250,000 barrels per day. Is that what you agreed to?

THE PRESIDENT: Yes, we would — which we've already done, by the way. But we would agree to a reduction cut; they would agree to do something to compensate us in the future. Okay?

Q Did you make any assurances to Saudi Arabia that you, the United States would not bail out oil drillers here?

THE PRESIDENT: We didn't discuss that with Saudi Arabia. We just discussed the numbers and we discussed who is opposed and who is not. And pretty much everybody is in favor of it, because they're getting clobbered. They're all getting clobbered. All of those countries are having problems.

If you look at Saudi Arabia, that's their source of income — primary source of income, by far. So they want to do it. Russia wants to do it. The OPEC nations want to do it. They all want to do it. So we'll see what happens. There's a difference between wanting to do it and doing it.

Yeah, go ahead. OAN, in the back.

Q Thank you, Mr. President. This is a national security question, back to Venezuela and China. This morning —

THE PRESIDENT: Venezuela. Go ahead.

Q Your administration has placed a \$15 million bounty on Venezuela's Nicolas Maduro. And we have news this morning that President Xi is talking with Nicolas Maduro, expressing his financial support for Maduro. So, two questions: One, have you discussed with Dr. Xi — President Xi the U.S. policy on Maduro? And two, are — how does this affect U.S. policy with regards to its war on anti-narcotics?

THE PRESIDENT: Yeah. We will not be happy if that takes place. I have not spoken to President Xi of China about Venezuela — about that aspect of Venezuela. But if that took place, we will not be happy. Okay? I will not be happy.

Q Are you concerned that he is opening up another financial avenue with him?

THE PRESIDENT: I'm concerned about everything. I'm concerned about everything. That's why I don't sleep a lot. I get myself concerned about everything. But I would not be happy about that. Go ahead.

Q Mr. President, getting back to Peter's question — a variation of that question. Your doctors who are gathered here seem to be in doubt as to whether or not the country could reopen on May the 1st. If they come to you before May the 1st and say the country is not ready or huge parts of the country are not ready to reopen on May the 1st, will you listen to them?

THE PRESIDENT: I listen to them about everything. I think they're actually surprised. I have great respect for these people. All of them. You, look —

Q But those — that recommendation in particular —

THE PRESIDENT: And others that are working with us. I have great respect for this group. In fact, I told Tony Fauci — I said, "Why don't you move to New York, run against AOC? You will win easily." But he decided that he's not going to do that, okay? I kid. By the way —

Q Some of your allies have been bashing these doctors. Some of your allies have been bashing —

THE PRESIDENT: — you know that —

Q Some — some of your allies have been bashing these doctors. Would you tell them to cut it out?

THE PRESIDENT: I can only say this: I have tremendous respect for these people and we've done very well. And when you look at us compared to others — we're a big nation. When you look at us compared to others, when you see how we've taken testing from a broken system that I inherited to having the best tests that anyone has made anywhere in the world — and other countries are calling us, wanting to use our technology. I have great respect for these people.

Q But if they come back to you, sir —

THE PRESIDENT: I'm never saying bad about these people.

Q If they come back to you, sir, and say, before May the 1st, “We can’t open on May the 1st,” do you listen?

THE PRESIDENT: I will certainly listen. I will certainly listen.

Q Will you take that advice?

THE PRESIDENT: There are two sides. Remember, there is — I know — I understand the other side of the argument very well because I look at both sides of an argument. I will listen to them very carefully though.

Please. Go ahead.

Q Thank you, Mr. President. You may have seen this, but JPMorgan came out with a forecast about GDP growth in the second quarter, and they’re saying a 40 percent decline in the second quarter of this year. Do your economic advisors share that view?

THE PRESIDENT: I think my economic advisors are interested in the third quarter and really the fourth quarter. And I think we have a chance to do record fourth quarter numbers, because there’s a tremendous pent-up demand. And you see it this week — I mean, what reason would there be, other than faith in us and in this country? Faith in this group — and me, and our Vice President, and everybody. Governors, perhaps. You can add them into it also. What reason would that be for — in a shortened week, four days instead of five — to have the biggest stock market gain in over 50 years? So, I think that — you know, to me, there’s a sign.

Hey, look, with all we’ve been down — I mean, we’ve — we’ve never been hit — I don’t know, has this country ever been hit like this? Probably not. 1917, but that was different, and it was a different time, and, frankly, Europe took the brunt of it. We didn’t, but it was a terrible time also. But, probably, never been hit like this, right?

Somebody was saying — in fact, I was speaking with Governor Cuomo about it. Because we were in New York City — a place we love, New York State — with the World Trade Center. And that was approximately 3,000 people. Well, we’ve doubled that. In this same area, we’ve doubled that — more than doubled it, substantially more. And it’s obviously going. You know, we had our highest number yesterday and the day before.

Okay. With all of this news, what would lead you to believe that we're going to have the best stock market week — shortened week — in 50 years? Almost broke the all-time record. You know what that is? That's a pent-up demand. Now, that's my opinion.

The other thing is we're doing tremendous stimulus plans. And despite what you're reading — you know, there's back and forth, but we are getting along with the Democrats. They want to see something happen. We have to help our workers. We have to help our small businesses. We have to help — we have to help our restaurants. I think deductibility will be great for entertainment, restaurants, all of it.

Look, I think, with the stimulus, with the people, with what we've got going, with all of the things — we're going to be meeting with the airlines over the weekend. We have a great plan for the airlines. We've got to keep the airlines going. You know, it's never been a great business, but it's a very vital business for the country.

We're going to be meeting with Boeing. We're going to be meeting with a lot of companies that are great companies and were great companies a short while ago. I mean, we can't let anything happen to Boeing. It's, you know, got so much potential. You talk about potential — can anything have more potential than that?

So, we have a lot of very exciting things taking place. We have tremendous plans. We have tremendous stimulus. And I think we have a chance to do really well.

So this quarter isn't the quarter I'm looking at. Third quarter, we start to think about it. And I think fourth quarter is going to be at a level that, maybe, we haven't seen before.

I think our country — with the stimulus, with all that we've been through — we've learned a lot. Don't forget, we've learned about pandemics and epidemics. We've learned a tremendous amount. And with all that we've learned — as an example, we're making ventilators. We have thousands of them being delivered in the very near future. We have countries calling us: "Can we have ventilators?" That would have been an unthinkable call. I'd be — I wouldn't know what to say. They have people dying, but we needed them for ourselves. We have plenty before the surge. In New York, they need far fewer hospital rooms or far fewer hospital beds, in particular, than we thought.

And I have to say, Dr. Birx told me that four weeks ago, six weeks ago. I remember you said, “That number is too high. We don’t need that many.” And based on what she said, and others, we did what we had to do. We actually gave the maximum. We built Javits. We sent the ship in. We then made the ship COVID, because, you know, there weren’t a lot of people on the roads; you didn’t have the accidents that we thought — other unrelated accidents. There’s nobody driving. You know, normally you have a lot of car accidents. You have a lot of motorcycle accidents. You have people going to the hos- — we didn’t have that. We had almost none of it. So, a lot of things have happened.

I think we have a chance to be stronger than before. I really do. I think the stimulus is very important. What we’re doing — I think it’s very, very important.

Q Can I ask —

THE PRESIDENT: Please, go ahead.

Q Mr. President, may I ask you about credit and debt as well? Many American individuals, families have had to tap their credit cards during this period of time.

THE PRESIDENT: Yeah.

Q And businesses have had to draw down their credit lines. Are you concerned, Mr. President, that that may hobble the U.S. economy — all of that debt, number one? And number two, would you suggest to credit card companies to reduce their fees during this time?

THE PRESIDENT: Well, it’s something that we’ve already suggested. We’re talking to them. Business interruption insurance. I’d like to see these insurance companies — you know, you have people that have paid — when I was in private, I had business interruption.

When my business was interrupted through a hurricane or whatever it may be, I’d have business where I had it. I didn’t always have it. Sometimes I had it; sometimes I have a lot of different companies. But if I had it, I’d expect to be paid. You have people — I speak mostly to the restaurateurs, where they have a restaurant, they’ve been paying for 25, 30, 35 years — business interruption. They’ve never needed it. All of a sudden, they need it. And I’m very good at reading

language. I did very well in these subjects. Okay? And I don't see the word "pandemic" mentioned.

Now, in some cases, it is. It's an exclusion. But in a lot of cases, I don't see it. I don't see a reference, and they don't want to pay up. I would like to see the insurance companies pay if they need to pay, if it's fair. And they know what's fair and I know what's fair. I can tell you very quickly.

But business interruption insurance, that's getting a lot of money to a lot of people. And they've been paying for years. You know, sometimes they just started paying. But you have people that have never asked for business interruption insurance, and they've been paying a lot of money for a lot of years for the privilege of having it. And then when they finally need it, the insurance company says, "We're not going to give it." We can't let that happen.

Please, go ahead.

Q Thank you, Mr. President. On March 6th, you said anyone who wants a test can get a test. Now you're saying that there — that you would be open to reopening the government without having a national testing system. How do you square those two statements, given that there's still issues with testing going forward? And how can you tell people —

THE PRESIDENT: Well, there's not a lot of issues with this.

Q — that they're not going to have their lives put at risk?

THE PRESIDENT: Yeah. I got it. There's not a lot. And it's a good question. There's not a lot of issues with testing.

Certain sections of the — if we go to Iowa, we go to Nebraska, we go — and interestingly, Idaho is very interesting because they had a few breakouts, small breakouts. But they're very, very capable states and they're big distances. A lot of land. A lot of opening. You don't need testing there, you know, where you have a state with a small number of cases. Some states with almost none. West Virginia hung in for a long time, as you know, with none — for a long time.

So when you have that, you don't need testing. You don't have to test every person in the state of Iowa, as an example. You don't have to test every single person to say, "Let's open up and let's get

the tractors moving, and let's get the corn," and let's open up all of the different things they do in that great state. You don't need that.

With that being said, if there's a little hot corner someplace, we'll be testing. But I think Deborah speaks to this very well. Same thing in New York. That's what we talked to Governor Cuomo about this morning. We have the Abbott test, which is very quick and very easy. It goes very fast. Then we have a lesser test that we talked about where we can talk about a larger area.

But you're going to know — so we're going to do testing, but you don't need to test 325 to 350 million people, because, number one, it's unnecessary. Vast numbers — vast areas of our country don't need this. I think you agree with me on that. You just don't need it.

Now, we have certain hotspots. So, Louisiana is a hotspot. New York is a hotspot. Detroit is a hotspot. And then you have certain areas in certain hotspots that you have to even go more so. And we're doing all of that.

Remember this: We've done more testing than any country in the world. And we have the best tests. And we've developed this over a very short period of time.

Please. Go ahead.

Q Can I ask you also about the African American disparity? Because I have a —

THE PRESIDENT: Yes.

Q — question for you and a question for the Surgeon General.

THE PRESIDENT: Sure.

Q For you, Mr. President: We know that these health disparities have existed for a long time among African Americans, Latinos, and other people of color. Why didn't the administration possibly have a plan directed at those communities to prevent high death rates, knowing that the health disparities were there?

THE PRESIDENT: Well, we do have a plan. And one of the things I'm most proud about is what I've been able to do for the African American community: the lowest job numbers in the history of our country. This was —

Q I'm talking about for the virus, of course.

THE PRESIDENT: Excuse me. Yeah. Just before the virus came — well, I'm just saying, because you know, this has been here for three weeks, right? So, just before, African American community had the lowest unemployment, the best employment numbers. More African American people and communities have been thriving.

If you look at our Opportunity Zones and what we did — Tim Scott, who's fantastic, a fantastic senator, came to me: Opportunity Zones. More jobs for African Americans than ever before. Better healthcare than they've ever had before. All of these things.

The Surgeon General spoke to it, and he spoke to it, I thought, really brilliantly. I found it very interesting what he said. And I'd love you to come up and answer the second part of her question because I think you're — you would do a much better job than I would.

Please.

Q Thank you, Mr. Surgeon General.

THE PRESIDENT: Thank you. Thank you very much.

Q Thank you. I have a quick question for you. You — you've said that African Americans and Latinos should avoid alcohol, drugs, and tobacco. You also said, "Do it for your *abuela* and do it for Big Mama and Pop-Pop." There are some people already —

SURGEON GENERAL ADAMS: I said "granddaddy" too.

Q There's some people online that are already offended by that language and the idea that you're saying behaviors might be leading to these high death rates. Could you talk about whether or not people — could you, I guess, have a response for people who might be offended by the language that you used?

SURGEON GENERAL ADAMS: Well, I used that language because that's the language — I've been meeting with the NAACP, with the National Medical Association, with others. I actually talked with — with Derrick Johnson multiple times this week, the head of the NAACP, and we need targeted outreach to the African American community.

And I used the language that is used in my family. I have a Puerto Rican brother-in-law. I call my granddaddy "granddaddy." I have relatives who call their — their grandparents "Big Mama." So that was not meant to be offensive. That's the language that we use and that I use.

And we need to continue to target our outreach to those communities. It is critically important that they understand it's not just about them, and I was very clear about that. It's not just about what you do, but you also are not helpless.

We need to do our part at the federal level. We need people to do their parts at the state level. And we need everyone — black, brown, white, whatever color you are — to follow the President's guidelines, the coronavirus guidelines, and do their part. Because when I talked to the NAACP three weeks ago, it's important to note that one of the things they asked me was, "Can you help dispel the myths in this community that people actually can't get coronavirus if they're black?" That was a myth that was out there that's actually very important for us to squash here.

Q So do you recommend that all Americans avoid tobacco, alcohol, and drug use at this time?

SURGEON GENERAL ADAMS: Absolutely. It's especially important for people who are at risk and with comorbidities. But, yes, all Americans.

So, thank you, and I will clarify that. All Americans need to avoid these substances at all times. I've put out a smoking cessation report in January. I put out a advisory against youths and pregnant women using marijuana last year. And that was not directed towards any one race. That's everybody needs to do everything they can to be as healthy as possible at this critical time.

Dr. Fauci, would you add anything?

THE PRESIDENT: Yeah.

DR. FAUCI: No, I think you said it perfectly, Jerome. Thank you.

THE PRESIDENT: Would you like to add anything to it? Because you are really — you expressed it very beautifully before.

DR. FAUCI: No, I mean — Jerome, you did it beautifully. (Laughs.) I can't do it any better than that. And I know Jerome personally, and I can just testify that he made no — not even a hint of being offensive at all with that comment. I thought that was appropriate. Thanks.

THE PRESIDENT: And I can tell you Jerome has done a fantastic job — our Surgeon General. I just hope nobody steals him and he goes to one of these big companies for a fortune. Don't leave us. Right? Don't leave us, Jerome. Please.

SURGEON GENERAL ADAMS: I'm happy serving the people, sir.

THE PRESIDENT: He's doing a great — you are happy and you're doing a great job. And everybody — everybody tells me that too. So we appreciate it.

Please.

Q Thank you. So Google and Apple have announced that they are jointly enabling contact tracing on their mobile phone operating systems. And I was wondering if this is something that you would consider or maybe the doctors would consider for —

THE PRESIDENT: Well, that's individual freedoms, problems and —

Q — the federal government.

THE PRESIDENT: — a lot of other things. Is it something we're going to look at it? Certainly. And we know they've done that. And it's highly — it's very new. New technology. It's very interesting. But a lot of people worry about it in terms of a person's freedom. We're going to take a look at that. A very strong look at it. We'll let you know pretty soon.

Q And I have another question.

THE PRESIDENT: Brand new. Yes, please.

Q So can you explain why it is appropriate, in the middle of a pandemic, to be talking about cutting or eliminating funding for the World Health Organization?

THE PRESIDENT: Well, we're going to talk about the WHO next week in great detail. I didn't want to do it today — Good Friday. I didn't want to do it before Easter. I also didn't want to do it before we have all the facts.

But over the years, many years, we've been paying them from 300 to 500, and even more, million dollars a year. China has been paying them less than 40 over the years. So we're paying them more than 10 times more than China. And they are very, very China-centric, as I said during the week. China-centric.

China always seems to get the better of the — the argument, and I don't like that. I really don't like that. I don't think that's appropriate. I don't think it's fair to the American people. And, you know, I tell that to President Xi. I tell that to Dr. Tedros. I spoke to him one time. I think he's a very nice man. I liked him.

But we're going to be talking about that next week in great detail. We're looking at it very, very closely. We want to make sure money is properly spent.

But again, why is the United States paying \$500 million a year? It's a lot. And why is — okay? That's a lot. And why is China paying — last year, this year — \$42 million? But generally under \$40 [million]. So it's in the 30s.

So we're at 500, 452, 400, 401 — different amounts, different years. And they're at 40, 38, 36, 35, 32, 31.

Q But why now —

THE PRESIDENT: No, no. But — but you have to ask yourself that question. And then the answer always turns out to be in China's favor. Well, I have the same thing with the World Trade. Isn't it interesting? World Trade. So we have World Health and we have World Trade. So we have the World Trade Organization. And until I came along, we were losing cases — so many cases. It was ridiculous. We were always losing these cases. I mean, almost every case. And now we're winning cases. We just won \$7 billion because they know I'm not going to put up with it.

China has been — unbelievably taken advantage of us and other countries. You know, for instance, they're considered a developing nation. I said, "Well, then make us a developing nation too." They get big advantages because they're a developing nation. India, a developing nation. The United States is the big developed nation. Well, we have plenty of development to do. Okay?

And now we're winning cases because they know that if we're not treated fairly, I'm going to pull out. Now, you never heard this before because nobody ever talked about the World Trade Organization. But the World Trade Organization has treated us very unfairly. But they know I'm not going to put up with it because all of these countries are taking advantage of the United States.

Now, in the courts and the court system, we're not approving new judges over the last year. We're not going to approve them. And Bob Lighthizer is working very hard on that.

But we had always a minority position, meaning numbers of judges. So we'd have a minority number of judges. I said, "How do you win with a minority number of judges?" But all of a sudden, we're winning. And the reason we're winning is they know if they don't treat us properly — and we won \$7 billion just this very recently. And the money is pouring in. And we won other cases too. We won a lot of cases.

But you know from covering it — I know you know — that the United States was taken advantage of by the World Trade Organization.

And, by the way, speaking of China: If you look at the history of China, it was only since they went into the World Trade Organization that they became a rocket ship with their economy. They were flat-lined for years and years. Frankly, for many, many decades. And it was only when they came into the World Trade Organization that they became a rocket ship because they took advantage of all there is. I'm not even blaming them. I'm saying, how stupid were the people that stood here and allowed it to happen? But we don't allow that to happen. And if they don't treat us fairly, we'll leave. But now we're starting to win cases.

How about somebody new for a change? Come on.

Q Hi, Mr. President.

THE PRESIDENT: Go ahead.

Q As many schools and school districts are closing across the country, Florida Governor Ron DeSantis has not ruled out closing — or opening up schools in May, saying that many kids are not vulnerable to this disease. Do you agree with that assessment? And do you believe that schools — would you recommend that schools open up? And to those states that have a lot of cases —

THE PRESIDENT: Well, I have a lot of confidence in Ron DeSantis, a lot of faith in Ron DeSantis to make the right decision. He's doing a great job as governor. Ron DeSantis, I had read where he's thinking about opening up the schools earlier than the date — the end of the month. I'd have to look at the numbers.

But again, you know, I like to allow governors to make decisions without overruling them, because from a constitutional standpoint, that's the way it should be done. If I disagreed, I would overrule a governor, and I have that right to do it. But I'd rather have them — you can call it “federalist,” you can call it “the Constitution,” but I call it “the Constitution.” I would rather have them make their decisions.

But he's made a lot of good decisions. And he hasn't said he's going to, but he's thinking about it. So I'll take a look at it.

Q I'm wondering if I can ask a follow-up to one of the doctors. If you allow children back into schools, you know, wouldn't that pose a threat to spreading the virus even further to some of those vulnerable people?

THE PRESIDENT: Well, I think the answer is obvious, but if you want, either — would you want to just talk about that maybe? Tony?

DR. FAUCI: She kicks me up here right now. (Laughter.)

THE PRESIDENT: I know. I can see. (Laughs.) I think — I think they know the answer to that.

DR. FAUCI: Yeah, I mean, from — from pure public health issues is that, if you have a situation in which you don't have a real good control over an outbreak and you allow children to gather together, they likely will get infected. And if they get infected, the likelihood that they will bring the infection home. So that really is a risk.

I don't know the situation at all in any detail, and I'm not specifically speaking about Florida. I'm just speaking generically about what happens when you have infections in the community, and you have a congregation of people, such as in classrooms, that that's a risk.

Q Has anyone under 25 died, Dr. Fauci, in the country?

THE VICE PRESIDENT: Deb.

DR. BIRX: Yes.

Q The governor — the governor said —

DR. FAUCI: Yes.

Q — that no one under 25 has died. And I guess you could clarify that people under 25 can die as a result of this.

DR. BIRX: A community in Florida (inaudible).

DR. FAUCI: Yeah, I'm not sure. Again, I —

Q In the country?

DR. FAUCI: Okay, let's do that, because I don't want to have to be answering for —

Q Fair enough.

DR. FAUCI: — a particular state. Yes, people under 25 have died of coronavirus disease in the United States of America.

THE PRESIDENT: Go ahead, please.

Q If you reopen the country in May and there is a new outbreak or a spike in infections, are you open to the idea of shutting the country down again?

THE PRESIDENT: Depending on the outbreak, yeah. Depending.

Q You would be open to it?

THE PRESIDENT: And that's happened, as you know, with a couple of countries.

You know what I'm doing? I'm watching other countries. In many cases, they're ahead of us from the standpoint that it attacked them before us. It hit them first. And I'm watching what's happening with respect to certain other countries — some of them obvious, some of them less obvious — and what they're doing and the success that they're having. And that's going to play a large part of the role.

I'm also — we're also setting up a council of very, very great doctors and business people. We're going to be announcing it on Tuesday — of some great people. The —

Q Is this the economic task force?

Q As a second task force?

THE PRESIDENT: Beyond — this is beyond economic. This is really — I call it, “The Opening Our Country Task Force” or “Opening Our Country Council,” so we don't get it confused with Mike's task force, which has done so great. And we're going to have the great business leaders, great doctors. We're going to have a great group of people.

We'll probably do it by teleconference, because we don't really want them traveling in, for their own purposes. I don't think it would look good, also. But we don't want them traveling in. So we'll do teleconference.

We did one the other day with the banks, and it was very successful — the teleconference itself.

And we'll be announcing names on Tuesday, who's on that. And that'll play a role. But ultimately, I have to make that decision. And then I'll have to make a decision: Do we close a little area that's a hotspot?

I do say this, Jim: I want to get it open as soon as possible. This country was meant to be open and vibrant and great, not where people are, you know, staying in.

Q Are you determined to do it by May 1st?

THE PRESIDENT: No, I'm not — I am — I would love to open it. I'm not determined anything. The facts are going to determine what I do. But we do want to get the country open. So important.

So I'll have a task force. I'll have a council. It's going to be announced on Tuesday with names that you have a lot of respect for, a lot of great names. Different businesses, different people. Top —

Q Bipartisan?

THE PRESIDENT: Bipartisan? I didn't even ask. I mean, honestly, I think it's bipartisan. The one thing I didn't ask, "Are you Republican or a Democrat?" Hard to believe, but I didn't ask. So it would be. And I want their views on what they think.

Also, very important, different parts of the country. Because if you go to the Midwest, it's different than perhaps the East Coast or the West Coast. Now, the West Coast, those numbers are, really, pretty amazing on the West Coast. It's very interesting.

So we're going to be announcing that in a very short while. Probably Tuesday.

Go ahead. Please.

Q Thank you, Mr. President. Government officials in Latin American and in Caribbean nations — Bahamas, Cayman Islands — have been saying that U.S. authorities are blocking the shipment of PPE in certain cases. And I'm wondering if you could speak to that, as (inaudible).

THE PRESIDENT: Well, what we're doing — we have a tremendous force out there — a naval force — and we're blocking the shipment of drugs. So maybe what they're doing is stopping ships that they want to look. We're not blocking. What we're doing is we're making sure — we don't want drugs in our country. And especially with the over 160 miles of wall — it's getting very hard to get through the border. They used to drive right through the border like they owned it, and in a certain way, they did. They could drive right — they had human trafficking. They had — all of a sudden, they

have a powerful wall up, and they're not driving through that wall. That wall is tough and it's also loaded up with equipment — cameras and sensors and everything you can think of. On top of that, we have drones flying back and forth over it. So — so it's in very — a very powerful — it's a very powerful barrier between Mexico and the United States.

A lot of people though — what they're doing now is they're trying to come in through the waterways, whether it's the Gulf or the ocean itself. And what we're doing is we're being very tough. And we're being tough because of drugs and also human trafficking.

And remember, the human trafficking is mostly females. It's mostly females. It's horrible. And what we're seeing is horrible. But you have a big — we have a human trafficking — human trafficking problem worldwide, the likes of which — you know, you think of it as an ancient thing. It's not ancient. It's bigger now than it's ever been before, over the last 10 years, because of the Internet. The Internet made human trafficking to the extent that it is now, which is massive. The Internate [sic] — the Internet made it so big.

So, we are — we have a big naval force that's stopping. So maybe when you mention that, maybe their ships are getting caught. But we are — we're stopping a lot of ships, and we're finding a lot of drugs.

Yeah, please.

Q Thank you, sir. On the additional money for small —

THE PRESIDENT: Well, I meant you, but that's okay. Go head. We'll do this.

Q I'm sorry.

THE PRESIDENT: Go ahead.

Q On the additional money for small business, apparently Treasury Secretary Mnuchin is speaking with the Democrats in Congress.

THE PRESIDENT: Yeah.

Q Are you allowing him to —

THE PRESIDENT: You're talking about the new —

Q Yeah, on the new \$250 billion.

THE PRESIDENT: Yeah, 250.

Q Are you willing to give into Democratic demands for, you know, additional money for hospitals, states, and cities in that interim round of money?

THE PRESIDENT: I'd rather have that be in phase four. I don't deny it; I think it's fine. But I think it should be in phase four. And I think we should have infrastructure, and I think we should have a payroll tax moratorium, because that's something that, over a period of time, the workers get, you know, sort of semi-immediately. It's over that period of time. It starts immediately, but it's over a period of time.

I mean, there are a lot of people — I'm one of them — that would have liked to have seen the payroll tax cut as a permanent cut. But we should do the double-edged — meaning, business-employee payroll tax cut. So we're talking about that.

And I'm certainly okay with helping the states and helping the hospitals. I just think — because, look, the hospitals need help; you see what they've gone through. And the states need help. Some states in particular need help. They need big help. I'm willing to look at that very strongly. But I like looking at it in phase four.

The 251 is actually — the plan is working out well. The banks are getting started with the distribution. They've taken hund- — thousands and thousands of applications. The numbers aren't even believable, the number of applications. They're swamped. But Bank of America and Wells Fargo, and, I guess, Citi — Citibank is just now kicking in.

And also what nobody is talking about, the commercial banks — the community banks. Everyone is talking commercial banks. The community banks are doing tremendous volumes. And they're

probably doing them faster, from what I understand. I hear the community banks, frankly, are the easiest ones in terms of getting the money out.

So the money is getting out. The applications are far beyond what we ever anticipated. And that's what we're — that's why we're going. Because this is money that goes, essentially, to the workers. We want the businesses to hold on to their workers, because once they lose the workers, they're never opening again. It's not going to happen.

Okay, in the back.

Q Yes, sir. Gordon Lubold from the Wall Street Journal. I wondered if you could expand a little bit on your — like the form that Mexico would take the reimbursements. Like, what form would that take? Do you essentially to the tab for the wall that you mentioned? And I have a second question, if I may.

THE PRESIDENT: Well, there's no real cost because we're agreeing to produce a little bit less. So, number one, it's staying in the ground. You have it. You have it for another day. It's actually cheaper than storing it, where you take it out and you deliver it to a massive well, like the Strategic Reserves — our National Strategic Reserves where it has to be brought there. And that's, you know, an expensive process in itself.

But oil is getting to a point where, I mean, there are some areas — some people would say the water is more valuable than the oil. You never thought you're going to see that. You never thought having covered — I know you cover it — you never thought you'd be seeing oil at \$20 a barrel, but how about \$10 a barrel? That, you never thought you'd see.

So we are looking at it very strongly. There is no real cost. I was helping Mex- — I want to help Mexico out. We have a great relationship with Mexico, a great relationship with the President. I really like him a lot. He's been terrific to us on the border because he stopped — he stopped — you don't see the caravans coming up anymore. You don't see all the problems. When I took office, it was unbelievable what was going on.

And they are really — they have been helping us a lot, and we've been helping them a lot. You know, they make product for us, they sell it to us, and it's fine. It's a good relationship. It's — and sometimes it's a great relationship.

So, he could not have done any more than that. And I think there was political reasons for that — for him — that other — other nations don't have. They don't have that. You know, the nations that we're talking about — the 22 other nations that we're talking about — they just don't have that problem.

So, it doesn't cost us anything, and yet it's very valuable. We will be reimbursed in the future — maybe in the near future, maybe in the more distant future. But we'll be reimbursed by Mexico in a certain way, and it'll be fine. But we get Mexico over the hump.

Now with all of that being said, that doesn't mean the deal is going to happen anyway, because they still have a lot of different states. But this was one of the stumbling blocks. Okay?

Go ahead.

Q If I may, China and some other countries that have been particularly active — seen as maybe taking advantage of the U.S. during this process, during this period. China particularly acted in the South China Sea. Got a carrier down, obviously. What's your message to some of these adversaries and competitors?

THE PRESIDENT: Well, look, the way I view it is this: China has taken advantage of the United States for 30 years. Okay? I mentioned the World Trade Organization. China has taken advantage of us through that and using rules that are unfair to the United States. And they should have never been allowed — this should have never been allowed to happen.

When China joined and was allowed to join under those circumstances — the World Trade Organization — that was a very bad day for the United States because they had rules and regulations that were far different and far easier than our rules and regulations. Plus, they took advantage of them down to the last — and you know China and you studied China and you know what I mean. They took advantage of them like very few people would even think to take advantage of them.

And again, they are considered — right? — a developing nation. We are not considered a developing nation. They've given advantages. Okay.

For many years, China has ripped off the United States. And then I came along. And right now, as you know, China is paying 25 percent, and we've taken in billions and billions and billions of dollars in tariffs from China. And I know a lot of the people kept saying, "Oh, no. We're paying." Well, we're not paying. You know, countries are different. Not every country is China. But China would devalue their currency, and they'd also pour out money. And they, essentially, were paying most of those tariffs, not us.

And, as you know, we've taken in tens of billions of dollars. They targeted our farmers. But we took in so much money that I was able to give back. One year it was \$12 billion. One year was \$16 billion. I was able to give back our farmers the money that they were targeted — hurt.

China bought \$12 billion and bought \$16 billion — one year, 12; one year, 16. I was able to give them back the 12, and then give them back the 16 — the farmers. And they weren't targeted, and they're all in business. Now we're doing it because they got targeted in a different way.

Now, I'm going to be very interested to see. So we signed a deal with China. And under that deal, they're supposed to buy substantially in excess of \$200 billion from us. That's not only farm product, it's manufacturing product, it's lots of different things. They're going to buy a lot. I just want to see if they live up to that deal.

I know President Xi. I would say he would live up to the deal. But remember this: I never took off the tariff. It's still 25 percent. That's a big — 25 percent of \$250 billion dollars.

So, for the first time — and you saw also — now again, I'm going before the virus hit. Because that's sort of like — that's like, "Let's start all over again." Okay? I can't tell you that yet, because that chapter hasn't been written yet. But go up a few weeks ago, the deficit with the United States and China was coming way down. Nobody has seen that. Nobody has ever seen that before. But the deficit has come way down.

So, now we start a new chapter. And I can only tell you, if a smart person is standing where I'm standing, we're going to do very well with China. Okay?

And I think it's — I have to also say this: I think our relationship, and having the relationship I have with China is a good thing. But for the first time, we're benefiting instead of being the sucker that could — you know, that got taken advantage of for years. Nobody.

You know, I said to China, “How did this ever happen?” I got to know them very well. I said to them — representatives of China at the top level, you know who I’m talking about — I say, “How did this ever happen?” They looked at me and they said, “But nobody ever called us.” We didn’t have a deal. It’s not like we had a bad deal. We had worse: We didn’t have any deal at all, so they just took advantage.

Think of it: \$500-billion-a-year deficit. Not — \$500 million is a lot of money, right? It’s not — everyone thinks I’ve made a mistake when I say “\$500 trillion.” “No, you mean \$500 million.” “No, I said 500-billion-dollar-a-year deficit with China for a long time.” But it was 200. It was 300. It was 400. It was 500 — 556 billion, 507. Five-hundred-billion-dollars-plus-a-year deficit with China. Now I’m charging them tariffs.

And, you know, it’s very interesting. A lot of people that don’t want to do that — they all agreed because China has taken advantage of this country like nobody has ever taken. We have built China with the money we gave them.

Now, I give them a lot of credit. Okay? I give them a lot of credit. They did it. But you know what? We made it a hell of a lot easier. We gave them a fortune.

Go ahead. How about you in the back? Yes.

Q Thank you, Mr. President. I’m Deborah Saunders with the Las Vegas Review-Journal, and I’m here today as the print reporter — the print pooler.

THE PRESIDENT: Good.

Q So, I’d like to ask you a question, and then ask a question from one of the reporters who couldn’t be here because of social distancing.

THE PRESIDENT: Sure. Go ahead. A little louder, please.

Q Thank you. I was wondering if you have been tested for antibodies? If you’ve taken the antibody test.

THE PRESIDENT: Have I been tested for antibodies?

Q Yes.

THE PRESIDENT: Not that I know of. I've had some tests.

Q Has anybody else here been tested?

THE PRESIDENT: No? They tell me "no." I'll accept it.

Q Has anybody else on the task force been tested for antibodies?

DR. BIRX: We don't have a test yet.

Q You don't have a test?

THE VICE PRESIDENT: We don't have a test yet.

THE PRESIDENT: That'll come out. They've just developed those tests. They're sort of new.

Q Okay. Good to know. So, this question is from Andrew Feinberg with Newsweek. A significant amount of federal aid was made available to Boeing in the recently signed CARES Act relief package. But according to sources, Boeing executives are still planning a round of layoffs. So, should Boeing or any company that accepts federal aid to stay in business during this pandemic be penalized for laying off workers after doing so?

THE PRESIDENT: Yeah. Well, the aid hasn't been given yet. But they will be asking, in my opinion. They haven't even asked yet. Boeing has not asked for aid yet. But I think they probably will.

Now, at the same time, they do have to run a company. You know, this isn't a great time to sell airplanes. Let's not kid ourselves, okay? If you're a businessperson. Boeing makes airplanes. They had a big problem with one, but they make the greatest airplanes. They make the best airplanes in the world. They had the problem with one. They got it too complex. It becomes so complex you have to be number one in your class at MIT to be able to fly it. It's a mistake. Every two years, they want to make it more and more.

I mean, they had great success with the 737 — the Boeing 737. Then, all of a sudden, they do the Max. And they say, “Let’s make it more complicated. Let’s put on different engines. Let’s do this. Let’s do that.” It was not exactly a good decision. A bad decision. Very, bad — a horrible decision. Number one, human lives. And number two, horrible what’s happened to the company.

Here’s a company — from a business standpoint, it was like probably the greatest company in the world, in my opinion. I think it amounts to 1 percent of GDP. Some people say it’s a half. I think it’s 1. But here’s one of the greatest companies anyway in the world. Maybe, the greatest. And boom.

Now, on top of what happened there with the two planes — and they say they have that fixed. That’s good. They say they have it fixed undisputably. In fact, somebody said — they gave me something — I said, “You should say it that way.” They said, “Sir, this is now the safest airplane in the air.” I said — “That’s what you should say. That’s a very good statement: It’s the safest airplane in the air. That’s a very good statement. You should use it.” I said, “By the way, are you changing the name? But whether you do or not, you should use that.” But he said that. A Boeing person said to me, “It’s the safest airplane in the air.” That’s a great thing.

But we know they’re going to need help. Now, does that mean they’re going to need help, and they should keep people that they absolutely don’t need? That business is a very cyclical business, like many businesses, frankly. So that determination hasn’t been made. They have not spoken to us, yet. I think they will be. Maybe they won’t need help. That’ll be great.

Look, Boeing made so much money — who would’ve — who would’ve thought they could have made all of those planes that are parked all over the place? In many cases, I guess payment is not made. But who would have thought they could do that and they’re still a solvent company, okay? I mean, what a tragic thing — happened in numerous ways, but also economically.

So, when they see us, making sure that Boeing is strong again is very, very powerful and very important. And we’ll do whatever is necessary to do.

Please.

Q Thank you. A quick one and then a longer one. First of all, have you had insurance —

THE PRESIDENT: Should we keep this going, everybody?

Q You're the President.

THE PRESIDENT: Jim wants to leave. (Laughter.) Keep it going for a while, yes?

Q Are you sure? Yeah.

THE PRESIDENT: If we have time, if you want. Should I — you're not going to criticize me that the conference was too long?

You know, if I leave short — yesterday, I left short. "It was too short." If stay too long, they say, "It was too long." Someday, we're going to get it just right. Okay. Should we continue?

Q What do you make of the Republicans who say that?

THE PRESIDENT: Should we continue? Yes?

Q Well, at least answer my question —

THE PRESIDENT: Okay. Let's at least do your question. (Laughter.)

Q Have you had a chance to speak to —

THE PRESIDENT: That's not a bad point.

Q Have you had a chance yet to speak to Boris Johnson since he came back from intensive care?

THE PRESIDENT: I have not. No. I have a call, just to wish him well to his — to his group. No, I don't want to be calling him now. I want him to get better.

He's a great guy. He's become a friend of mine — a real friend of mine. You know, he has a great feeling for our country. For — obviously, for his country. He loves it. He's — he's a tremendous guy.

Q And a slightly more complicated one.

THE PRESIDENT: He's become — I think, he's probably, right now — he was very high to start. I think he might be 100 percent popularity right now. I think he's — you know, when they talk about approval polls, right? You ever hear that term? I'm sure you never heard that. I hear it all the time. His approval rating must be about 300 percent.

But he's a — he's a great guy. He was a great guy before and I think people see what he's been through. What he has been through is incredible. And they say a “big turn.” So let's see what happens. Let's hope.

Q And, if I may, where do you see the use of something like immunity certificates or documents or passports, when we get to anti-body testing?

THE PRESIDENT: Something like — excuse me?

Q Immunity certificates — once we get to anti-body testing, whether this would be a useful way —

THE PRESIDENT: Well, I see a lot of — yeah. I see a lot of different things. We're going — we have to be very careful for who comes into the country. Look, my opposition party wants to have open borders. This is a case where I'm very glad that my position is: I don't want open borders. I want very strong borders. That includes not only on the southern border — our southern border with Mexico, and you could also say our northern border with Canada — but we want to have strong borders.

And, I think, this is maybe one of the learning points. We learned something about borders. We need borders. A country needs borders to be a great country. And this is, I think, this is a great point.

Go ahead. Do you have something else?

Q Yeah. I wasn't just thinking about for borders. I just thought for ordinary Americans who are currently stuck at home. If they're tested for antibodies, it turns out they've had the disease and therefore shouldn't be infected again — some sort of documentation that would allow them to go back to work safely.

THE PRESIDENT: You mean, once they get better?

Q Yeah, or people who might not (inaudible).

THE PRESIDENT: Okay. So, they have the disease and they're better and they have the immunity now. They have — supposedly, according to what I am hearing, it could be for a long period. It could be for a lifetime. It could also be for a for a year or two, I'm hearing, Tony.

So nobody has told me yet if it's for a year, if it's for two years, or if it's for a lifetime. Like chickenpox — they say if you have chickenpox, you have immunity, they say, for a lifetime. I hope that's true.

But — but nobody has actually told me with certainty, maybe because they don't know yet —

DR. FAUCI: We don't know yet.

THE PRESIDENT: You don't know yet. Because it's new. You know, this came upon us. Nobody knew. We just — we're just — they do know you have it for a period of time and it's strong for a period of time. They don't know — and that's, hence the antibodies that we're making.

I saw somebody who was really sick, and he got better — a young person, a relatively young person — 35 and physically fit, you know. And he — he got better. He made it. Barely, but he made it. His first thing that he did when he was better is, "I want to give — I want to give whatever I can give to help other people because nobody should go through it." It's a tough — it's a tough thing.

So we don't know yet how long — if you'd like to add anything to that. But we don't know yet. Is it a year? It will be a year. But is it more than a year? And only time is going to tell. Okay? Thank you.

Q Can I just ask one more question?

THE PRESIDENT: Go ahead. Try one more.

Q Will you have governors, mayors, members of Congress on the Open the Country Council that you talked about a minute ago?

THE PRESIDENT: Yeah, I think so. I think we're going to put some governors. I've gained great respect for governors, both Republican and Democrat. I've actually become friends with some of the Democrat governors that I wouldn't have really had the privilege of getting to know.

And Governor Murphy of New Jersey is a very liberal guy. I'm not. But we've had a great relationship. John Bel, as you know — I call him "John Bel" — John Bel Edwards. People call him "John Bel." It's sort of a cool name — from Louisiana. I have a very good relationship with him.

Gavin Newsom. Honestly, I think we've fight on every — hey, we're fighting right now. I want automobiles to be made cheaper and safer and stronger. And — but you save three, four thousand dollars per automobile. And environmentally equal, or better, maybe. And we're fighting on that. We're fighting a lot of different things. We fight on the border. He wants open borders. I want — I want people to come into our country legally. But I've gotten very friendly with Gavin Newsom. He's done a very good job here.

I think I've gotten very friendly. I mean, he's been, I think, sort of a friend of mine for a long time. Don't get to see him much. But Governor Cuomo of New York — we talk all the time. I told you, I spoke to him literally the last call, just before walking in here.

I've gotten to — I've really developed a lot of good friendships with the governors and, including governors of (inaudible.) I think — Mike DeWine, Republican, but I think he's done a great job in Ohio.

So, yeah, I want to put on both parties. I want to have some governors. I'm not going to have all of the governors, but I'd like to put some representative governors on the council. Yes, I would like to do that.

Q And have you asked any to serve yet?

THE PRESIDENT: I have. I've asked a couple of them. They've all said yes. So far, everyone said yes. I think everybody would like to be on that council. That's a very important council.

Go ahead, in the back. You haven't gone yet.

Q Thank you, Mr. President. Two questions, if I may. Do you have a message to those pastors who are still planning to have Easter services, defying the Public Health's guidelines?

THE PRESIDENT: You're going to have to say it louder. To those what?

Q To those pastors who are still planning to have Easter services in person.

Q Pastors who are defying —

THE PRESIDENT: Oh, the pastors. I didn't understand your word. Okay, you have a very nice voice but it's a little bit low, and you're far back.

I've had talks with the pastors, and most of the pastors agree — and this is a very complex subject, let's face it, you know, for the obvious reasons. I don't have to go into it. And most of the pastors agree that they are better off doing what they're doing, which is distancing. They feel that, "Let's get this over with," and they want to get back to church so badly.

I mean, can you imagine? We have Easter Sunday and I'm going to be watching Pastor Robert Jeffress, who's been a great guy, that I tell you. He's been a great guy, and I'm going to be watching on a laptop. Now, a laptop is not the same as being in his church or being in another church. It's not, no matter what you say. You know, we can say, "Oh, isn't it wonderful?"

But I've done this for three weeks, and they've had tremendous — I let people know who it is. They've had the biggest audiences they've ever had. They have millions of people now watching, and people are really liking what they're hearing.

So I'm going to be with, on Easter, Pastor — I don't even know if he knows it yet, but he will soon. I think he will in about two minutes. Pastor Robert Jeffress. And he's a terrific guy, a terrific man. I've gotten to know him very well. He's a man of great compassion. He loves our country. And I'm going to be with him on Easter — meaning I'm going to be with him, watching on a laptop. Doesn't sound good, but it's, you know, it's one of those things — it cannot be church. You know, I'm not going to get into it. It cannot be church.

Most pastors and most people of faith — people that we listen to and respect and admire. Franklin Graham is a person I have great respect for. Most people will — and who's done an incredible job in

New York on Central Park, where they put up Samaritan's Purse. He's done an incredible job.

THE VICE PRESIDENT: Incredible.

THE PRESIDENT: The son of the late, great Billy Graham. His family is incredible. He's incredible. Franklin Graham, the job he's doing on — I mean, he loves to do it. He has such a passion. And that's why he's so good at it. He does it with — with incredible love.

And he will tell you — we're all saying, "We've got to get our country cured." I know there are some pastors and ministers and others that want to get together. I would — and I have great respect for them. Two of them I know.

But I would say first heal — I'm a Christian — heal our country. Let's get healed before we do this. And there's time to do that. We'll do it for hopefully the rest of our lives.

Please.

Q Thank you. The Mercy and the Comfort seem to be underutilized —

THE PRESIDENT: Yeah.

Q — in Los Angeles and New York. Is there any consideration either to sending the medical units into the cities to — to help —

THE PRESIDENT: Yes.

Q — the hospitals there or to —

THE VICE PRESIDENT: In the hotspots.

Q — or to moving the hospital ships?

THE PRESIDENT: Yeah. So the Mercy and the Comfort were sent when projections were much higher. And I say it — Tony backed it up, Deborah made the statement — they said you're not going to need these many rooms, but we wanted to be prepared. I mean, you know, we had the ship.

They did an incredible job with — the Comfort was supposed to be in maintenance for a period of four weeks and they hadn't done in three and a half, four days. And it came up. And so we had it there.

If there was a disaster from the standpoint of you needed all of the — now, I'll tell you, the Javits Center — Andrew will tell you, we were ready to go. It's incredible, the job they did. But they're — they're using less beds. This is a good thing, not a bad thing. They're using less beds.

Now, Javits has been pretty busy over the last couple of days. And the death numbers are horrific. But you go back now and you're finding they're going to start to come down very substantially just based on the fact that the bed usage, the number of beds are much, much less. Much, much less.

So the Mercy and the Comfort were there in case they needed them. Los Angeles, where you have the one and New York where you the other, they just don't — fortunately, we haven't hit numbers where they would have need, they would have been used. They're always going to be sort of overflow because they're on the edges. You know, they're not as convenient as certain places. But the people were ready, willing, and able. They were ready to go. They were going to do a great job.

But fortunately we don't need — just like we didn't need as many ventilators. When they were asking in New York for 40,000 ventilators, I had experts — these people, I listened to them — they said you'll never need that many. And they were right. And New York now has it's — and I dealt really well Mayor de Blasio. We got him a lot of ventilators. We got Andrew a lot of ventilators. But we never felt you needed the numbers that you were talking about and we were right on that.

Now, with all of that being said, we have a lot of ventilators ready to go. We have almost 10,000 in the stockpile. That 10,000 can move rapidly. We can be within 24 hours almost anywhere. And hopefully we're not going to have to be but it's just — it's really — this has been a great military operation. It hasn't all been military because we're dealing with great companies. We have companies that are making masks. We're — and we're all set up in the masks too.

I just told you we have an order coming in soon: 500 million masks. 500 million. We have companies — you know the story with GM — or 3M — also GM, but 3M is doing a great job. I spoke to the CEO the other day. We settled it out. We had a dispute with them. And it's now all settled. And I think they're trying to show the country something — maybe me, but the country something.

So, we've done, you know, I think — and not me. I'm not talking about me. This country, our country, the people that are doing it: Army Corps of Engineers, FEMA, these people sitting right here, people that we have in the back that are watching every word that we're saying — they've done a fantastic job. They really have done a fantastic job.

Please.

Q Thank you, Mr. President. I wanted to ask you a question about testing. You've mentioned the impossibility of testing the entire American public. So has —

THE PRESIDENT: Well, what do we have —

Q — the Surgeon General — hold on —

THE PRESIDENT: What do we have? 350 million people? You're going to do \$350- —

Q Three hundred fifty million. That's not what I'm getting at. What I'm getting at is priorities. And Dr. Birx has mentioned how there have been priorities in certain regional parts of the country. And I wanted to ask you specifically about one industry in particular, and that's food-processing plants. Is there a priority to get testing at food-processing plants all across the country?

THE PRESIDENT: Well, you're asking that because of what happened — it's a fair question, too — what happened in Denver. Because in Denver, I've never seen — I said, "What's going on?" We're looking at this graph where everything's looking beautiful and it's coming down and then you got this one spike. It's — I said, "What happened to Denver?"

And many people, very quickly, and they — by the way, they were on it like, so fast, you wouldn't believe it. They knew every aspect. They had people go and — not only testing, "Who did you see? Where were you? How many people did you meet? Were you out to dinner in somebody else's home? Where were you?" Where did — where did this number of people come from? How did — they are totally on it.

Now, this just happened. I just saw it this morning. I'm looking at everything smooth, going down, topping out. And then you have this one spike in Denver. It's like, where did this come from?

So we'll be looking at that. And we don't want cases like that happening. This was — but this — this is the kind of thing can happen. This is very complex.

This is a very brilliant enemy. You know, it's a brilliant enemy. They develop drugs like the antibiotics. You see it. Antibiotics used to solve every problem. Now one of the biggest problems the world has is the germ has gotten so brilliant that the antibiotic can't keep up with it. And they're constantly trying to come up with a new — people go to a hospital and they catch — they go for a heart operation — that's no problem, but they end up dying from — from problems. You know the problems I'm talking about. There's a whole genius to it.

We're fighting — not only is it hidden, but it's very smart. Okay? It's invisible and it's hidden, but it's — it's very smart. And you see that in a case like a Denver.

But, you know, I think we're doing well, and they're on Denver like you wouldn't believe. I came in this morning; it was a flurry. I said what's going on? They said, "Denver." I said, "What happened to Denver?" Because Denver was doing pretty well. And they've got that under control. But, yeah, that would be a case where you do some very big testing.

Peter.

Q Mr. President, we've learned that more than 16 million Americans filed for unemployment over the past three weeks. It's Good Friday. It's payday. We are seeing troubling, paralyzing lines at food banks around the country. What do you say to those Americans in need right this moment?

THE PRESIDENT: Number one, I love them. Number two, we're working really hard. It wasn't their fault, what happened. Sometimes they don't do a good job and they lose their job. That's one thing. This is a case where we take the strongest economy in the history of the world, which is what we had. More people working in the United States, Peter, than ever before. Almost — I mean, look at the numbers: 160 million people, almost. Just short of 160.

Q (Inaudible.)

THE PRESIDENT: Excuse me.

So, we have the greatest economy we've ever had. And, by the way, black unemployment, Hispanic unemployment, Asian unemployment — the best numbers we've ever had in virtually every way. And then you get hit like this, and it's traumatic.

People that had great jobs, that went out to dinner, and they didn't have any problems, they'd take their family, they were making good salaries, all of a sudden — you know, you use the term, "cold turkey." It's cold turkey. They go from that to having no money and waiting for their checks, which are being processed very rapidly. But they still — they have to go out and look for money.

It's a terrible thing. All I say is: We love them, we're working so hard, and they're going to be back. And I hope they're going to be back even stronger than before.

Q Let me ask you about that, if I can, just to follow up then. You chose not to do a national stay-at-home order. Now that you say you want to reopen parts of the economy, what authority do you have to do that? Isn't that ultimately up to the states to do that?

THE PRESIDENT: Yeah. Yeah — no, it's really — the states can do things if they want. I can override it if I want. But the national stay-at-home — just so you understand, 95 percent of the country is stay-at-home.

Like, as an example, I was speaking with the great governor of Texas, Greg Abbott, the other day. He has a stay-at-home. A lot of people didn't even know it, but he had a stay-at-home. Some people reported Texas wasn't. He had a very strong — actually, a very strong stay-at-home.

Ninety-five to ninety-six percent in South Carolina, as you know, has it, which at one point, a week ago, they didn't have. South Carolina — another great governor — McMaster.

No, 95 percent of the country is covered. Now, the states that aren't — and again, constitutionally, from a federalist standpoint, if I thought there was a problem, if I saw a state with a problem, I would absolutely demand it. But they're doing great. And the states that aren't are states that have not had a big problem.

Q What authority do you have to reopen right now? The same way that it's up to the states to shut it down, it's up to them to reopen. What authority do you have?

THE PRESIDENT: Yeah, I have — I have great authority if I want to use it. I would rather have the states use it. I would rather —

Q What does that look like?

THE PRESIDENT: And this is so shocking for me. A lot of people are saying, “Wow, he’s really very reasoned, isn’t he?” A lot of people are shocked. They think I do a — I have absolute authority to use it. But, so far, our relationship with governors and the job they’re doing, I haven’t had to do it. Would I do it if I saw a state that was out of control and they didn’t have the stay-at-home policy? I would do it in a heartbeat.

Jeff.

Q Mr. President, there’s obviously a lot of interest in how you’re going to make that decision.

THE PRESIDENT: Yeah.

Q What —

THE PRESIDENT: It’s a very big decision.

Q What metrics —

THE PRESIDENT: I don’t know that I’ve had a bigger decision than that, when you think. Right?

Q I would think —

THE PRESIDENT: I mean, think of that decision. Somebody said, “It’s totally up to the President.” I saw it this morning. It’s totally up — and it is. I don’t know that I’ve had a bigger decision.

But I’m going to surround myself with the greatest minds. Not only the greatest minds, but the greatest minds in numerous different businesses, including the business of politics and reason. And we’re going to make a decision, and hopefully it’s going to be the right decision.

I will say this: I want to get it open as soon as we can. We have to get our country open, Jeff.

Q Can you say, sir, what metrics you will use to make that decision?

THE PRESIDENT: The metrics right here. (Points to head.) That's my metrics. That's all I can do. I can listen to 35 people. At the end, I got to make a decision. And I didn't think of it until yesterday. I said, "You know, this is a big decision." But I want to be guided. I'm going to be guided by them. I'm going to be guided by our Vice President. I'm going to make a decision based on a lot of different opinions. Some will maybe disagree, and some I'd love to see it where they don't disagree.

Will there be risks? There's always going to be a risk that something can flare up. There's always going to — look, look at what's happening where countries are trying to get open and there's a flare-up and they'll go. But I'd like the flare-up to be very localized so that we can control it from a local standpoint without having to close.

It's — it's — there's always a risk. This is a — this is genius that we're fighting. You know, we're fighting this hidden enemy, which is genius. Okay? It's genius, the way it's attacked so many countries at so many different angles. And — I mean, you take a look at what's going on.

And the greatest doctors in the world — I think they're close, by the way, but they haven't figured it out yet. Look what it's done to some people. I mean, some people it's grabbed, and it's a — it's a horrible — it's a horrible way to go, if you want to know the truth. It's a horrible — and then other people, it hardly has an impact on. We talked about it; it's the sniffles. It's less. They don't even know they had anything.

And some people — I looked at New York this morning, and I look at what's happening and the amount of people that are dying and dying — violently dying. It's — it's a — it's a very tough adversary. But we're going to win, and we're going to win it — we're going to win it very decisively.

I'm going to have to make a decision, and I only hope to God that it's the right decision. But I would say, without question, it's the biggest decision I've ever had to make.

Q A quick follow-up for the doctors, if I may, for Dr. Fauci and Dr. Birx. The models, as I understand them, are based on social distancing continuing through May. Is that correct? And if you were to open the economy on May 1st or sometime during that month, would that impact the models in terms of the deaths that you expect?

THE PRESIDENT: Want to answer that?

DR. BIRX: We're taking turns today?

DR. FAUCI: Yeah.

DR. BIRX: Good. That's good.

So the model — the IHME model — does state that it's through May. Every — we've had these model discussions, haven't we, for weeks now? So the models are informed by the data, and you can see how much that model has shifted on the amazing work of the American people. So I think that's what we're evaluating right now.

Remember when — when I talked yesterday — I've been in public health a long time. I have never — except for Ebola, where we worked very closely with the communities about specific issues — we've never taken a country-wide or a global-wide approach to mitigation. This is unprecedented.

I will tell you there is nothing in the literature about specifically what to expect, and I think that's why the models continue to modify themselves based on what actually has happened with social distancing and handwashing and all of the pieces that the American people are doing — the decreasing, the closing of the bars, the closing of the restaurants, no communal eating. That was thought to be a very big issue in many of the other cultures that went through this virus.

So the models continue to evolve based on the impact. And so, therefore, it makes it very difficult to interpret each component of social distancing and which ones are absolutely critical.

Now, there's a way to do that in multivariate analysis, potentially. Now, I want to — I want everyone to understand, there are states that are testing. There are states that are doing contact tracing. So, I mean, it's — I think sometimes we get — you know, we look at what New York is doing and Detroit, and we forget that there's a Utah and New Mexico and North and South Dakota and a whole series of states that have been doing testing and contact tracing, and have been testing at rates higher than that per capita rate that we all have discussed.

So we're looking at that: What did they do? Where are the most vulnerabilities? Where are the outbreaks most likely to occur? And that's why I've been talking about nursing homes, because we

do believe that there's a relationship between age and seriousness of disease. Not to say that there can't be young people with serious disease, but proportionally, it's a smaller piece with serious disease.

And so when you have that kind of spectrum where the older and the more complicated, the higher the severity, you get the impression that there may be more asymptomatic in younger age groups. And that's where the antibody test comes in.

So when you put all these pieces together, you're trying to understand where is — where would be the first signals. So we have surveillance out there right now with the CDC's influenza-like illness. I hope you're all tracking that. It is showing these small changes. I think we can believe in that as a surveillance tool, married with their syndromic piece, giving us the insight about where to test and then where to proactively test in the nursing homes and other vulnerable groups. Because that has been the signal in a series of the states that have very, very low prevalence and incidence of disease. So that's the kind of factors we're putting altogether to really define the best way forward.

And we have superb roadmaps. I hope you all have seen them. There's been about six different roadmaps to opening that people have put online. And again, there's no literature that you can cite and said, "Well, we did this 20 years ago and what really worked." There's — there isn't that. There's brilliant public health people giving us their insights.

Q I guess the core of the question is, because those are the models you've been using, if you do go with opening up — starting to open up the economy again on May 1st, doesn't that lead to more deaths?

DR. BIRX: Well, look at how much it changed with mitigation. And now we're looking at those state by state. And there's some states in there that are still in contact tracing. So we're looking at the impact of that model and what that model predicted, based on the type of contact tracing — less mitigation; more contact tracing.

Are we — are you getting what I'm talking about?

Q No — (inaudible.)

DR. BIRX: Okay, so there are states that didn't stay-at-home orders, but were doing contact tracing from outbreaks. So we're looking at them and how they have done, and we're looking at certainly what's happened in the big metro areas. And we're integrating all of that data together to make a plan going forward.

So I can't tell you — because look at how much the model has changed in just a week. Remember, just a week ago it was 80,000. Now it's 60,000. So — and the curves — I'm sure you're all watching it — the curves are getting much broader confidence intervals.

There is still the dotted line, but the confidence intervals around the dotted line are getting bigger. When you see that, you know the model has a bit of instability, and so that's why Tony and I base a lot of our decision and discussion on cases and what physically is happening in that county, in that state, at the same time not ignoring the models but integrating the models as one piece of our thought process.

Do you want to come up here and say what you think about models?

Q Dr. Birx, can you update us on that Abbott Lab test?

THE PRESIDENT: I just want to say that, you know, you talked about, "Couldn't it lead to death," meaning, if you open up, it could lead to death. And you're right.

Q (Inaudible.)

THE PRESIDENT: But you know what? Staying at home leads to death also. And it's very traumatic for this country. But staying at home — if you look at numbers — that leads to a different kind of death, perhaps, but it leads to death also. So it's a very big decision. As I say, it's the biggest decision I'll ever make.

All right, we'll do a couple of more and we'll go. Thank you.

Q Thank you, Mr. President. Before you came out here, you said one of the last people that you talked to was Governor Cuomo.

THE PRESIDENT: Yes.

Q And at his news conference today, he said that he was asking you to use the Defense Production Act to require companies to make more tests, to streamline testing. Is that something that you would consider? Because you've considered it with ventilators and masks.

THE PRESIDENT: Well, you know, the other side seems to keep using that. And I have used it. You know, I've enacted it, you do know. And I've used it — some people thought viciously. Just ask a couple of companies. If you want, you can just look up the names.

And I'm surprised that he would have said that. We actually have great tests. We have others under development. You don't need full testing, as the doctors have been talking about ad nauseam.

So I would be surprised that he would have said that, meaning it that way. If he — if he did, I'd have a much different type answer.

Go ahead.

Q You all didn't talk about it over the phone?

THE PRESIDENT: We talked about testing, yeah. We did talk about testing. And one of the things I did was I put the two doctors in charge of that call. I said, "You know what, Andrew? I have two very talented people standing here. We're getting ready to go on. Let me put them and let me have them talk to you." And they talked to him, really, at length. And I think by the time they finished, he understood what he was — what we were saying. He understood it very clearly. Okay?

Q One more question, please. You've talked a lot this week about holding the World Health Organization responsible —

THE PRESIDENT: Yeah.

Q — for its response to the coronavirus. I'm curious if you've given any more thought to holding China financially responsible for the part that it played and —

THE PRESIDENT: Yeah, I understand.

Q — the economic toll that it's taking on the American people.

THE PRESIDENT: Yeah, I understand the question very well. Look, nobody has done to China, or treated China as strongly as I have. I use the word “strongly.” As you know — you’ve reported on it — billions and billions of dollars is flowing into our Treasury, because of what I’ve done with China.

I think it’s a very sad thing that happened. And I think if people knew, including the World Health Organization — and I do believe they knew, but they didn’t want to tell the world. And we’re going to get to the bottom of it. And we’ll have reports on all of this. And we are — we are not happy about it, but I wanted to leave the World Health for later.

And I can tell you that we’re constantly in touch with China. We’re talking to China. And we’ve expressed how we felt. We’re not happy about it. We’re not happy about it at all, Kristen.

Okay, one or two more. Yeah, Jim.

Q Mr. President, we hear from a lot of people who see these briefings as sort of happy-talk briefings. And —

THE PRESIDENT: No happy talk today.

Q — you and some of the officials paint a rosy picture of what is happening around the country. If you look at some of these questions: “Do we have enough masks?” “No.” “Do we have enough tests?” “No.” “Do we have enough PPE?” “No.” “Do we have enough” —

THE PRESIDENT: Why would you “no”? Look, the answer is “yes.”

Q — “medical equipment?”

THE PRESIDENT: I think the answer is yes. I think the answer is yes. Who — who said no to that?

Q I — I’m saying this is what —

THE PRESIDENT: No, no, you’re saying no, but who said no?

Q We hear — we hear from —

THE PRESIDENT: But you asked, “Do we have enough masks?” Yes.

Q We hear from the doctors. We hear from health experts.

THE PRESIDENT: No, you didn’t say that. You said, “Do we have enough masks?” Yes.

Q Does the country? Does —

THE PRESIDENT: “Do we have enough tests?” Yes. Plus, we’re developing new tests.

Q But they’re not —

THE PRESIDENT: “Do we have enough — do we have enough ventilators?” Yes. “Do we have enough hospital beds?” Yes. We’ve built 20,000 hospital beds. We have enough hospital beds.

Go ahead, Jim. Let’s go.

Q So what do you say to — I mean, you watch the coverage.

THE PRESIDENT: You know what I say?

Q You’ve been watching a lot of the coverage.

THE PRESIDENT: Well, a lot of it’s fake news.

Q These doctors who — no, no, no. Not —

THE PRESIDENT: A lot of it’s fake news. A lot of it’s fake news. Let me just tell you —

Q When the doctors and the medical experts come on our air and —

THE PRESIDENT: The governors — the governors reported —

Q — say that we don’t have enough tests, we don’t have enough masks.”

THE PRESIDENT: The governor — yeah, depending on your air, they always say that, because otherwise you're not going to put them on.

Let me just tell you something: The governors have said — last night, they had a group of governors, 14 governors. They were together someplace, and they said, "It's been unbelievable what's happened."

We've been totally responsive. Ventilators — everyone has the ventilators they need, to a point where we're getting calls from foreign countries saying, "You have all the ventilators. Can we get some? And we're going to try and help some of these countries.

These people have done an incredible job. This is not happy talk. Maybe it's happy talk for you. It's not happy talk for me. We're talking about death. We're talking about the greatest economy in the world. One day I have to close it off. And we did the right thing, because maybe it would have been 2 million people died instead of whatever that final number will be, which could be 60, could be 70, could be 75, could be 55. Thousands of people have died. There's nothing happy about it, Jim. This is sad talk.

Q But when you say there's —

THE PRESIDENT: This is the saddest — these are the saddest — these are the saddest news conferences that I've ever had. I don't like doing them. You know why? Because I'm talking about death. I'm talking about taking the greatest economy ever created — we had the greatest numbers we've ever had in almost every aspect of economics, from employment, to companies doing — look at the airlines. They were having the best year. Now, all of a sudden, we have to save them. Okay?

There's no happy talk, Jim. This is the real deal. And I've got to make the biggest decision of my life. And I've only started thinking about that. I mean, you know, I've made a lot of big decisions over my life. You understand that. This is, by far, the biggest decision of my life, because I have to say, "Okay, let's go. This is what we're going to do."

Q But when you have doctors, when you have hospitals administrators —

THE PRESIDENT: Sure. But you have many doctors that say "unbelievable job." I watched this morning, and I watched a certain network, and it wasn't Fox, and you had doctors saying that we've

done an incredible job. You just read off these “no, no, no.” Well, we have ventilators. We have equipment. We have beds. How about beds? I mean, Governor Cuomo just told me, a little while ago, he’s got plenty of beds. In fact, they’re having a hard time filling Javits Center. We built them 2,900 beds.

So that’s not a fair question.

Q But when you’re — when you’re sanitizing masks —

THE PRESIDENT: Jim, look — Jim.

Q — and you’re talking —

THE PRESIDENT: Jim.

Q — about reusing —

THE PRESIDENT: Jim.

Q — PPE, obviously, you don’t have enough of —

THE PRESIDENT: No, no. No, excuse me. We have masks. We have everything. And we were trying to get ready for the surge. And a lot of people said it will never happen. Deborah said it: “You’ll never need that many beds.” They said we needed 40,000 ventilators. Forty thousand. It’s like building a car. Forty thousand ventilators. People said — I felt it too. You’ll never need that many.

Guess what? We have tremendous — we have — we’re the envy of the world, in terms of ventilators. Germany would like some. France would like some. We’re going to help countries out. Spain needs them desperately. Italy needs them desperately. Mexico needs them desperately. He asked me last night, “Would it be possible to get 10,000 ventilators?” Within a short period of time, I’ll be able to help out Mexico.

No, Jim — just the opposite of your question. It’s not, “No, no, no.” It’s, “Yes, yes, yes.” We’re in great shape. And you know what? What’s happening now is those numbers are horrible, but take a

look at the number of beds. We have beds available all over New York. New York really being the epicenter. New York — New York has experienced something that has been absolutely horrific.

I saw Hart's Island yesterday. I saw those people being buried yesterday. Fortunately, we have the beds. And you can speak to Mayor de Blasio. You can speak to Governor Cuomo. People are — people can't even believe the job we've done. They can't even believe it.

And I give tremendous credit to the military. This has been a military operation, with private people.

Q Do you —

THE PRESIDENT: But wait a minute — wait, wait. I give tremendous credit to our military, to the Army Corps of Engineers, to FEMA, to these people. The job they've done is incredible.

And you shouldn't be —

Q But do you accept the criticism that —

THE PRESIDENT: — asking that kind of a question. Jim, honestly.

Q — had the country been better prepared —

THE PRESIDENT: Okay. Look, I really don't believe you're that bad of a guy.

Q — onset of this —

THE PRESIDENT: You shouldn't be asking that kind of a question. You should say, "You know what? It's been really incredible what's been happening."

Q That's the reality, Mr. President. That's the reality.

THE PRESIDENT: Jim, nobody is asking. What governor —

Q You got 2 million tests. That's not enough —

THE PRESIDENT: Let me ask you this: What governor —

Q — tests for everybody around the country.

THE PRESIDENT: We have more tests than anybody in the world. We have every —

Q But that's not enough for what's needed right now.

THE PRESIDENT: We have virtually every country in the world calling us, asking us: "How do we get these tests that you have? Your testing is the best in the world. How do we get it? They've done a fantastic job."

And when you ask a question like that, it's very insulting to a lot of great people.

Okay, one more, please.

Q For the doctors —

THE PRESIDENT: Please. Go ahead.

Q Thank you, Mr. President. You may have seen how Sweden has responded to the pandemic. The schools are open. Bars and restaurants are open.

THE PRESIDENT: Sweden is different.

Q Do you — do you do you regret not following that approach? Is that approach working?

THE PRESIDENT: I think we could've followed that approach.

Q Could we have that approach?

THE PRESIDENT: And if we did follow that approach, I think we might have 2 million people dead. And Sweden is having a lot of difficulty. You know, look, I'm very friendly with the leadership in Sweden. They took a different approach. They're a very disciplined country to start off with, but they did take a different — and, you know, other places tried it.

The UK tried it — the herd approach, okay? Herd. And they tried it, and you saw what happened in UK. It set them back a lot — a lot of time. It's been — you know, they're having a tough time. Other countries have tried it. And Sweden is suffering greatly. I mean, Sweden is suffering greatly.

If we did the herd — if we went with the “herd,” as they say, we would have had potentially — I mean, you see the charts. Nobody knows. Nobody will ever know, fortunately. Because we're going to be substantially less than the minimum, I certainly hope, unless something happens. That would be tragic. So they had a minimum number, if we did.

One of the reasons we're so far below that number is because nobody thought the American people could be so disciplined. Nobody thought it was possible. And, I guess, when they watched us up here every day, and they watched other people, and they listened to their representatives and governors — nobody thought that the American people could be so disciplined. They've been unbelievable.

And because of that — so you have a minimum number of 100,000, and then you had the 2.2 number that, if we did nothing — if we did — just kept working, everybody go to work — people would be dropping dead on the subways. No.

If we would have lost a million people — take the 2.2 million and cut it in half. Make it — cut it in more than half. Make it a million people, okay? Now take that number and cut it in half. Make it 500,000 people. That's if we did nothing, right? It's unacceptable. It's too many people.

So we have — we've spent more money on stimulus. Who cares by comparison? You take 2.2, you cut it in half, you cut it in half, you cut it in half — you keep cutting it in half. I don't care what number you choose — 500,000, 400,000. Well, we're going to have — we're talking 50, 60, 65 [thousand]. Maybe. Maybe. But if we would have done what one country tried — and it has been very tough for them. You know that. Very, very nasty. Very tough. But if we would have done that here —

And again, you got to remember: UK tried it. And I was a little surprised. And I watched it. They were going about — what, two weeks? And they said, “We got to stop.” Because it was — they were going to have a whole country infected.

So, with all of that being said, we got to get back to work. We got to get — we got to get our country open. But we could have lost 2 million people. We could have lost 1 million people. We could have lost a half a million people.

If we would've lost 500,000 people — and I'll say this also: From the standpoint of being President and Vice President, and we're up there and we're doing that herd, and we're going to bullet through — do you honestly think people like Jim and yourself and other people would've — Jeff — would have put up with it, as people are dying all over? They would have said, "This man is crazy." Because the numbers, Tony, at a minimum, would have been many, many times greater than the numbers we're talking about.

So I'm very honored by our decisions, all of us. We talk about it all the time. I said, "Do you want to let them just — you just ride it. You just ride it right through." We would have lost potentially millions of people.

No. It would have been unsustainable. It would have been impossible to do.

And the American people have been so disciplined. It's been my honor to be their President. I've said it before, I'll say it again, I'll say it always: It's been — it's been my great honor to have been their President.

And I have a big decision coming up, and I only hope to God that it's the right decision. But it'll be based on the input from a lot of very talented people, very smart people, and people that love our country.

Thank you all very much. Thank you. Thank you very much.

END

4:06 P.M. EDT