Warnings Unheeded, Again: What the Intelligence Lessons of 9/11 Tell Us About the Coronavirus Today

By Erik Dahl
Abstract

This article argues that the coronavirus pandemic represents a global intelligence failure on the part of the traditional intelligence community as well as the national and international medical intelligence and surveillance systems designed to detect and prevent outbreaks just such as this one. Comparing these failures with intelligence failures of the past such as the 9/11 attacks can help us understand how we got to where we are today—and even more important, how we might prevent future disasters by avoiding these failures next time. Today’s crisis is very different from previous intelligence failures, but in both the 9/11 attacks and the coronavirus pandemic, the United States was threatened by an enemy that was present in our country well before it was recognized. This article outlines steps that must be taken to ensure that when the next crisis arises, warnings can be sounded, and they will be heeded.

Suggested Citation


Since the early days of the coronavirus outbreak, experts have debated whether the crisis was an intelligence failure. Some argue the pandemic was the result of mistakes by American intelligence agencies who failed to warn, or by policymakers who failed to heed the warnings they were given. President Trump has blamed the U.S. intelligence community for downplaying the threat, while also claiming that he saw it coming early on. And our understanding about intelligence and the pandemic has become even more muddied with the revelations that Trump was aware of how serious the threat was in early February and yet declined to take decisive action.

How to make sense of all this? While we will not be able to make a final assessment until a future national coronavirus commission or other high-level body investigates, enough information is now available to indicate the disaster was indeed an intelligence failure, in which the complex, worldwide system of collection, analysis, and warning that had been developed for just such an eventuality was unsuccessful in preventing the global spread of the disease. And the global intelligence failure of the Covid-19 pandemic bears remarkable similarities with past failures of intelligence and warning such as Pearl Harbor, and in particular the 9/11 attacks.

The crisis today is very different from those previous intelligence failures, of course, most notably in the nature of the enemy we face. But despite these differences, in both the case of the 9/11 attacks and the coronavirus pandemic, the United States was threatened by an enemy that was present in our country for several weeks or even months before it was recognized. In both cases our systems designed to detect just such a threat failed to prevent disaster.
From an intelligence perspective, the most important difference may be that today the task of analyzing data and warning of the threat is not shouldered solely, or even primarily, by the agencies of the traditional American intelligence community, as it was before 9/11. In fact, the job of collecting and analyzing intelligence on pandemic threats belongs mostly to a complex network of national and international medical surveillance systems.

Today as in the past we have seen a deadly combination of three factors at work: strategic level warnings that preceded the crisis but were ineffective in preventing it; a lack of specific intelligence on the actual threat as it developed until it was too late; and an absence of receptivity—which I have described elsewhere as a willingness to listen to and act on the basis of the intelligence they receive—on the part of policymakers who could have done something to head off disaster.

In this article I compare the coronavirus crisis with intelligence failures of the past in an effort to help us place today’s events in context. And more importantly, I hope that by recognizing these parallels, we may be better able to avoid making even more mistakes in the future.

Warnings Before the Crisis

Before both the 9/11 attacks and the coronavirus outbreak, there were strategic-level, big picture warnings from prominent officials and blue-ribbon commissions that went unheeded, and tabletop exercises and wargames that, after the fact, seem remarkably prescient.

White House counterterrorism advisor Richard A. Clarke famously warned of the threat from al Qaeda before 9/11, while as the 9/11 Commission Report detailed, multiple commissions and studies warned about the danger of domestic terrorist attacks well before September 11. Before the current crisis, warnings of the danger from an infectious disease pandemic came from individuals as well-known as Bill Gates, and from studies such as a blue-ribbon report published last November by the CSIS Commission on Strengthening America’s Health Security.

For years before 9/11, government agencies, think tanks, and scholars used war games, exercises, and scenarios to examine the possibility that terrorists might use airplanes as bombs. The coronavirus outbreak was just as extensively war-gamed and anticipated, such as when incoming Trump administration senior personnel participated with outgoing Obama officials in a table-top exercise that tested their response to a global flu pandemic. And just last October, the Johns Hopkins Center for Health Security, the World Economic Forum, and the Bill & Melinda Gates Foundation war-gamed what might happen if a new coronavirus swept the globe. They found that “[t]he next severe pandemic will not only cause great illness and loss of life but could also trigger major cascading economic and societal consequences that could contribute greatly to global impact and suffering.”
Before 9/11, American intelligence agencies as well known as the Central Intelligence Agency and as obscure as the intelligence office of the Federal Aviation Administration warned about the rising terrorist threat. Nearly a year before the current outbreak, the Director of National Intelligence warned in January 2019 that “the United States and the world will remain vulnerable to the next flu pandemic or large-scale outbreak of a contagious disease that could lead to massive rates of death and disability.”

These early warnings appear today to be eerily prophetic. But it is not enough for intelligence agencies simply to warn of threats that may come. For example, in the same testimony in which the Director of National Intelligence warned of the pandemic threat, he also warned of increasing threats in the cyber world, from weapons of mass destruction, and from environmental change. More specific intelligence is needed before leaders can be reasonably expected to decide how and where to take action when faced with such a panoply of threats. As I discussed in a book examining the intelligence failures of Pearl Harbor and 9/11, in order to use intelligence to prevent disaster and surprise, leaders need specific, credible threat information—actionable intelligence—before they can respond effectively.

Alarms as The Crisis Developed

In the immediate weeks and months surrounding both crises, intelligence agencies warned of the rising threat, but in both cases the specific, tactical-level intelligence on the actual threat—the 9/11 hijacking plot and the novel coronavirus—was frustratingly and tragically limited.

For example, during the spring and summer of 2001 American intelligence agencies produced a number of threat reports, including the famous President’s Daily Brief that warned “Bin Laden Determined to Strike in US.” But none of these warnings actually referred to the plot that became the 9/11 attacks.

For pandemic threats such as the coronavirus, the specific intelligence that can be most useful to head off a crisis is collected primarily from medical surveillance systems. These systems were hampered by limited COVID-19 testing in many countries, and disease reporting from China was blocked during the first weeks of the outbreak by government bureaucracy and fears of upsetting officials in Beijing.

There were also limitations on disease surveillance in the United States during the early stages of the outbreak. A CDC report released in May 2020 stated that limited community transmission of the virus likely had begun in the United States as early as late January and early February, at levels too low to be detected by the disease surveillance systems being used. As the Washington Post put it, “the virus was already circulating but at a level below the epidemiological radar.” Epidemiologists have called this a missed opportunity; for example, William Hanage from the Harvard T.H. Chan School of Public Health said “[s]urveillance at the time was wholly inadequate to the task of catching a pandemic virus of this sort, whenever it was introduced.”
Other disease surveillance and detection systems might have been helpful in warning of the coronavirus outbreak but were either not available or not successful. For example, a U.S. government program called PREDICT was begun in 2009 to look around the world for viruses that could cross from animals to humans and cause pandemics. But the funding for that program was cut off in September 2019, and although an emergency extension was announced in April 2020, the program was evidently not available to help accomplish its goal of prediction and warning in the case of Covid-19.18

The pandemic was a failure of tactical warning and intelligence in other countries as well. In Canada, the Global Public Health Intelligence Network (GPHIN) system, which was designed to use artificial intelligence and big data to detect early signs of outbreaks, appears to have not been active during the months leading up to the pandemic.19 Canadian intelligence scholar Wesley Wark has written, “Faced with a new and unprecedented coronavirus threat, the surveillance and warning system failed, resulting in costly delayed responses.”20

The traditional agencies of American intelligence appear to have reported on the new threat as soon as information became available, but they too were limited by a lack of specific knowledge in the early weeks.21 In January and February of this year, as reports began to multiply about the coronavirus, intelligence agencies were reporting about the rising threat. One official told the Washington Post, echoing the 9/11 Commission Report, that “[t]he system was blinking red.”22 These warnings went not only to the White House and other executive branch agencies, but they were also conveyed in a classified briefing given to the Senate and House intelligence committees in February.

According to some news accounts, U.S. intelligence detected first indications of a disease outbreak in China as early as November, even before Chinese authorities recognized the problem.23 These reports have been denied by the National Center for Medical Intelligence, a little-known part of the U.S. intelligence system that tracks emerging diseases and bioterrorist threats. But U.S. officials have acknowledged that the first time President Trump was briefed on the virus was January 23, when his briefer downplayed the threat.24 According to the Office of the Director of National Intelligence, Trump was “told that the good news was the virus did not appear that deadly.”25 As many medical experts were realizing at that time, this assessment was incorrect.

Unreceptive Decision Makers

The third factor that led to disaster on 9/11 as well as in the case of the coronavirus was a lack of receptivity on the part of key policy makers toward the warnings they received. Just as President George W. Bush and his top advisors were unreceptive to warnings about Osama bin Laden and al Qaeda, President Trump and his team were slow to respond to the rising threat of the coronavirus.26 And as he has on other issues, Trump has disagreed publicly with the intelligence community on the coronavirus, for example over the question of whether the virus originated in a laboratory in Wuhan, China.27
The most significant evidence for a lack of receptivity on Trump’s part are the revelations from journalist Bob Woodward, which show that Trump knew early on that the virus was more deadly than he had been saying in public, and yet still declined to act. On February 7, 2020, he told Woodward he had spoken the previous day with Chinese President Xi Jinping, and when Woodward asked what they had talked about, he said “we were talking mostly about the virus.” He went on to tell Woodward that “you just breath the air and that’s how it’s passed. And so that’s a very tricky one. That’s a very delicate one. It’s also more deadly than even your strenuous flus.”

Trump has since defended his actions as merely presenting a positive, optimistic face to the country, but his comments to Woodward clearly indicate that he understood the gravity of the situation.

It is not clear that Trump gained his understanding of the threat from intelligence; his February 7 conversation with Woodward suggests he was repeating what he had learned from the Chinese leader. But by early February, Trump had received warnings about the coronavirus from a number of sources, including top advisors as well as the intelligence community. Although the story of the current crisis is still being written, what we know at this point strongly suggests that Trump’s inaction will be remembered along with other infamous cases in which politically motivated behavior and neglect of intelligence led to calamity.

And it does appear that this part of the failure played a greater role in the coronavirus disaster than it did in 9/11, because President Trump was much less receptive to warnings about the virus than President Bush was to warnings about bin Laden and al Qaeda.

But it is too simplistic—and perhaps too easy—to only blame the Trump administration. The failure to grasp the seriousness of the crisis in the early stages was a broader failure of intelligence and warning throughout the United States and around the world. Trump’s failure to act does not explain similar failures in many other countries, and it does not fully explain the lack of early, decisive action in many U.S. states and communities—where many of the most important public health decisions are made—in the early period of the crisis.

Lessons from Past Failures

When we see this history of warnings unheeded, it is tempting to draw only the depressing lesson that failures of intelligence and warning are inevitable because no matter how often or how loudly intelligence officials and other experts warn, leaders will continue to make decisions based on their own often flawed judgment. This was the conclusion reached after the 9/11 attacks by experts who pointed out that the nation had made many of the same intelligence failures before Pearl Harbor 60 years earlier—suggestions that as scholar Richard Betts has argued, intelligence failure is not only inevitable, but natural.

But in two important ways, the intelligence situation we face today offers room for optimism. First, in the 19 years since 9/11 the 17 agencies that make up the American intelligence community appear to have learned to coordinate and share information better than they had before. What we know so far suggests intelligence agencies did well in reporting and sharing what information they had once news of the virus became available by early January. A key question for a future investigation will be whether the intelligence community had been able
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to—or should have been able to—collect and analyze intelligence on the outbreak earlier than January, when Chinese authorities were limiting the flow of information and when efforts to prevent the spread of the virus might have been most effective.

The second and most important difference is that after initial delays in reporting from China, the worldwide medical intelligence and surveillance system appears to have performed generally well. In particular, newer systems such as ProMED and HealthMap were among the first in the West to report on the virus outbreak. Many of these surveillance programs had been developed and strengthened in recent decades following infectious disease outbreaks including SARS and Ebola, and it is clear the crisis would have been much worse without the data and early warning provided by medical surveillance. But it still was not enough to curb the outbreak.

Where Do We Go from Here?

As the United States and the world continue to respond to the crisis, we should remember that one of the key intelligence lessons from 9/11 came after that disaster had occurred. As part of the nation’s response to being attacked, American leaders gave intelligence agencies new, largely unchecked powers to monitor and surveil their own citizens. When these programs eventually came to light, they not only caused a national scandal, but they were found to have contributed little to increasing the country’s security. The Bush administration’s warrantless telephone monitoring program, for example, was a case study in how a democracy should not surveil its own citizens. The lesson of the intelligence failure after 9/11 is that secret domestic surveillance programs are much more likely to fail than those begun with appropriate oversight and transparency.

Many countries around the world—although not, to any great extent, the United States—are using cell phone tracking and other surveillance technologies to monitor those who have been infected or who are in quarantine after possible exposure. Such tools appear to be very useful for contact tracing, but they raise a multitude of questions about privacy and civil liberties. There has been relatively little public discussion about how or whether they might be used in this country, and many experts argue that a better approach would be to use large-scale manual contact tracing instead. If such digital surveillance programs are put into wide-scale use in the United States, they should be implemented publicly, with as much transparency as possible, and with strong policies in place to protect civil liberties.

In the case of the coronavirus, as with 9/11, the problem was not a lack of long-term, strategic warning; the critical failures were in being able to develop timely, actionable intelligence of the threat as it developed, and in having a strong enough intelligence-policy relationship to ensure that the warnings would be heeded. When a nation faces attack—whether from a hostile military, a terrorist plot, or a growing pandemic—timely warning is critical. To reduce future mistakes in the current crisis and to help develop the warning needed to prevent future disasters, three steps should be taken now.
First, the American intelligence community must continue to be able to walk and chew gum at the same time—to track and warn of not only the immediate threats facing the country, but of the dangers beyond the horizon. Experience shows that at the very top levels, the national security establishment can only focus on one problem at a time. A year ago, that was great power competition. Several years before that, it was international terrorism. And last January, the focus was on impeachment. But the coronavirus crisis shows that global threats can arise from literally anywhere, and that the United States needs an intelligence community that can monitor and warn of such a wide range of threats. Only by having the most expansive (and expensive) intelligence community in history will that be possible, and this means continuing to spend a significant portion of our national treasure on intelligence.

This also means American intelligence agencies should focus on the areas where they have a comparative advantage over open source medical intelligence, especially on collecting and analyzing (often at a classified level) information about how other countries are responding to the threat. Such clandestine reporting is often critical for developing the actionable intelligence leaders need to guide their decisions. As an example of how this applies against a threat such as the coronavirus, reports indicate that the intelligence community has for some time been warning that Chinese authorities were understating the number of infections in their country. Such assessments are also critical concerning suspect disease reporting from Russia, North Korea, and other nations where autocrats are likely to have both means and motive to mislead the world about the spread of the virus.

In addition, major institutional changes are needed in the American intelligence community, such as elevating the National Center for Medical Intelligence to the status of an independent national center, reporting to the Director of National Intelligence, and reinstating the position of National Intelligence Officer for Warning that was abolished several years ago.

The second step we must take is to improve our medical surveillance capabilities, both in the United States and around the world. This means increased support for international programs such as the Global Health Security Agenda, which helps countries improve their epidemic detection and response capabilities, and for domestic efforts such as the National Syndromic Surveillance Program, which is an early warning system in the U.S. that tracks symptoms of patients at medical facilities such as emergency rooms.

Changes must also be made to national and international medical surveillance systems, including, if possible, a new international treaty to provide the World Health Organization with the authority to enforce requirements for nations to monitor and report potentially serious outbreaks. Efforts using artificial intelligence and big data to detect early signs of outbreaks show promise and should be expanded.

Some experts have suggested developing a global early warning system for infectious diseases and other health threats that would integrate the global hodge-podge of disease surveillance systems that currently exists, and provide a worldwide system similar to those already in place to warn about earthquakes and tsunamis. Such a system is needed, but so far the pandemic has failed to inspire the sort of coordinated international effort that will be necessary. Because we cannot count on international coordination to always be effective, but also because local
authorities are critically important in health emergencies, there will also need to be new state and local systems developed to counter the threat of future pandemics. At the U.S. federal level, the National Weather Service offers a useful model for what could become a National Disease Forecasting Service, while at the local level the current crisis has demonstrated the importance of local surveillance and data collection efforts.\textsuperscript{37}

Third, and perhaps most important, our leaders must learn to trust their intelligence advisors and become receptive to the warnings they receive. This does not, of course, mean decision makers should automatically agree with intelligence assessments, but it means we must get beyond the dysfunctional relationship that President Trump has had with the intelligence agencies and leaders who work for him. This may be the most difficult goal of all, especially in this time of ideological polarization and partisanship. Trump may never be able to develop the close, trusting relationship with the intelligence community that military commanders typically form over years of collaboration with their intelligence advisors. But for at least as long as this president’s time in office lasts, the need to improve America’s intelligence-policy relationship may mean that the intelligence establishment will be forced to accept what is normally considered anathema: Trump’s habit of promoting loyalists into key intelligence positions. Such moves are often criticized by experts who argue that top intelligence posts should be apolitical,\textsuperscript{38} but if this is what it takes to get the president to listen to intelligence, then it may ultimately be beneficial.

There is of course no guarantee that American intelligence will be able to help prevent a future pandemic. But if these steps are taken, we may find that when the next warnings of crisis come, they will be heeded.

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Notes


6. Erik J. Dahl, Intelligence and Surprise Attack: Failure and Success from Pearl Harbor to 9/11 and Beyond (Georgetown University Press, 2013), 23.


12. Dahl, Intelligence and Surprise Attack.

13. For a brief summary of these medical intelligence systems, see Erik J. Dahl, “Was the Coronavirus Outbreak an Intelligence Failure?” The Conversation, June 15, 2020, at https://theconversation.com/was-the-coronavirus-outbreak-an-intelligence-failure-139450.


17. Ibid.


21. Some experts argue that there was more tactical warning about the coronavirus than there had been before 9/11; see for example Gregory F. Treverton and Molly Jahn, “COVID-19: We Had the Warning but We Lacked the Leadership,” The Hill, April 5, 2020, at https://thehill.com/opinion/white-house/490404-covid-19-we-had-the-warning-but-we-lacked-the-leadership.


24. Barnes and Goldman, “For Spy Agencies, Briefing Trump Is a Test of Holding His Attention.”


26. Harris, Miller, Dawsey, and Nakashima, “U.S. Intelligence Reports from January and February Warned about A Likely Pandemic.”


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