Letter to the Editor

Isolationism, populism, and infectious disease: Uncertainty over international emergency response under the Trump regime

I am a rock,
I am an island.
I've built walls,
A fortress, steep and mighty,
That none may penetrate. [1]

Recent electoral and referendum decisions in both the United States of America (USA) and the United Kingdom (UK) have brought into sharp focus a growing resistance to an international orientation among an increasing number of states. A dramatic example of this can be seen in the result of the so-called ‘Brexit’ referendum decision in the United Kingdom (UK) that will ensure its departure from the European Union. Nationalism and racism were undoubtedly crucial elements fueling the outcome of this populist vote [2]. A similar example of successful marketing of isolationism and nationalism can be seen in the electoral triumph of Donald Trump to the presidency of the United States of America. Trump’s campaign was based on a particularly potent mixture of grassroots xenophobia and nostalgia [3]. Trump’s campaign identified Mexican immigrants as criminals and rapists and focused on promising to build a wall (“Build The Wall”) to protect an America that he suggested would once again be a great country (“Make America Great Again”) [4–6].

These incidents are far from being isolated events. In France the far right is gaining significant ground under the leadership of Marine Le Pen who espouses blatant Islamophobia [7]. Similar racist ideologies are being promulgated in the Netherlands and Denmark with growing populist electoral success [8,9].

The impact of this growing racist insularity on international efforts to control potential infectious disease epidemics may be considerable. It should be acknowledged that the US was crucially involved in international efforts to control the recent Ebola outbreak in West Africa [10–13]. However, Trump’s nationalist and isolationist agenda will undoubtedly undermine, if not eradicate, US commitment to future participation in combatting such outbreaks (“America First”). It must be acknowledged that future international cooperation involving the US seems to be in jeopardy in a range of arenas. For example, the Trump administration has consistently attacked international organizations such as the United Nations (UN) [14,15].

Trump’s hastily implemented Muslim Ban, which denied access to the US to citizens from seven Muslim countries (Syria, Iran, Sudan, Libya, Somalia, Yemen and Iraq) demonstrates the new regimes defensive and blinkered thinking [16–18]. Interestingly, although this executive order was quickly overturned, it has since been followed by a similar ban, this time targeted at six of the original seven countries identified in the first ban (Iraq is no longer included in the list) [19].

Of particular concern for the future of international public health efforts to combat global infectious disease threats are the tweets made by Trump when two US aid workers, physician Kent Brantly and nurse Nancy Writebol, contracted Ebola in Liberia [20]. Outlined below are three of his most infamous tweets on this issue:

“Ebola patient will be brought to the U.S. in a few days – now I know for sure that our leaders are incompetent. KEEP THEM OUT OF HERE!”

“Stop the EBOLA patients from entering the U.S. Treat them, at the highest level, over there. THE UNITED STATES HAS ENOUGH PROBLEMS!”

“The U.S. cannot allow EBOLA infected people back. People that go to far away places to help out are great–but must suffer the consequences!” [21]

It was presumably in response to such comments that Samantha Power, former US ambassador to the UN, stated in a recent interview “I would worry, in the face of an epidemic like Ebola, that there would be a knee-jerk ‘let’s close our borders, let the people of West Africa tend to themselves’” [22]. The Trump administration does not appear to understand that disease anywhere is a threat to health everywhere.

The insular xenophobic nationalism demonstrated by the new US government provides an almost perfect antithesis to fundamental philosophies in Public Health. This approach, combined with the Trump regime’s apparent lack of a moral compass [23], its disregard for objective reality [24–26], and propensity toward erratic knee-jerk responses [16–18,21], seriously endangers future international cooperative public health efforts.

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References
