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Jonathan Mann's human rights blueprint for global health must guide COVID-19 response

BY NICOLE HASSOUN, OPINION CONTRIBUTOR - 09/02/20 2:30 PM ET





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Speaking to the United States Senate in 1987, leader of the World Health Organization's AIDS response, Jonathan Mann, informed lawmakers that the spread of AIDS had reached troubling new heights. Nearly 39,000 cases of AIDS had been reported from 85 countries — a "more than 50-fold increase" in the number of reported cases in the previous four



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The disease, he told lawmakers, "has provoked reflex reactions at the international level, reactions to restrict international travel or trade, reactions to blame others, often on the basis of political expediency — to blame others for the problem."

Mann spent his career advocating for a robust, human rights-driven approach to combating AIDS, an approach that not only fought the HIV virus, but the oppression, poverty, inequality, and gender-based violence that eased its spread. Mann's approach wasn't just scientifically driven, it was ethically driven. His critiques of those in power were direct and unflinching. He forced the world to take responsibility for a global problem. And his philosophy was comprehensive and effective.

In the face of COVID-19, with public health inequalities bursting at the seams and world leaders quick to place blame on one another, we would all do well to remember Mann's lessons.

Twenty-two years ago this week, <u>Jonathan Mann</u> died in a plane crash while crossing the Atlantic with his wife <u>Mary Lou Clements-Mann</u>, also a pioneering public health leader who helped end the smallpox epidemic and create new medicines for HIV, Hepatitis C, and Rotavirus, a disease causing hundreds of thousands of deaths every year in poor countries due to diarrhea.

The Manns had what I call the virtue of creative resolve: a fundamental commitment to doing whatever it takes to overcome tragedy.

Starting with a staff of one, Jonathan Mann built the WHO's Global Program on AIDS by getting together a budget of about \$100 million, hiring 200 staff, and creating AIDS programs in 155 countries in just a few years. All the while Mary Lou worked to design and carry out large scale drug trials and advocated for the U.S. government and international agencies to remove the barriers to testing HIV vaccines.

The Manns refused to believe that it was impossible to overcome the HIV pandemic, thought creatively about how to advance access to treatment, and acted on their convictions.

Johnathan Mann argued that for human rights work to promote health it needs to draw on "sophisticated understanding of health, health status and health realities," so he rejected quarantines that he thought would only drive people into hiding and explained how human

When the Manns encountered roadblocks, they challenged the status quo. In 1990, Johnathan Mann resigned as the director of the WHO Global Program on AIDS, charging then WHO director-general Hiroshi Nakajima of failing in the fight against HIV. In 1994, speaking at the President's Advisory Council on AIDS he joined his wife's cause and accused the National Institutes of Health of violating human rights by failing to advance research on a vaccine to fight AIDS.

The Manns believed every single person was important and that, in a global pandemic, no one is safe until everyone is.

As with HIV, fighting the coronavirus pandemic requires protecting human rights. When quarantines prevent people from accessing the resources they need to survive or result in violent oppression, they are clearly unjustified. In places like <u>Malawi</u> where a day without work may well mean a day without food and there is little to offer those who abide by the rules, quarantines may simply not be a viable option.

We also need to protect the most vulnerable — the poor and oppressed — to stem the tide of infection. For instance, when <u>India</u> imposed lockdowns that prevented migrant workers from using the trains, they forced a vast migration that ended up contributing to the pandemic rather than containing it.

Even <u>fines</u> imposed to encourage social distancing should not disproportionately affect the poor, and we should consider global assistance for basic income protections a realistic measure to protect public health.

Vaccine nationalism is, likewise, clearly unjustified and counterproductive from a human rights and public health perspective. Countries like the <u>U.S.</u> should not hoard vaccines — doing so will likely just prolong the pandemic.

And we should not sacrifice children's rights to education in trying to protect public health. We must come up with creative ways of providing effective education for children. We should not try to outsource education to big tech companies when online education has proved ineffective for many and exacerbates inequality that feeds the epidemic (though online learning has its place). When the weather is good, for instance, it should be possible to hold school outside, and providing learning pods even for the poorest might help everyone get the resources they need.

Nor should we neglect the effects of our policies on women and girls. Women bear the lion's-share of housework responsibilities even in developed countries and even when they



his commitment and his creative resolve.

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TAGS CORONAVIRUS COVID-19 GLOBAL HEALTH HEALTH POLICY HIV/AIDS JONATHAN MANN PANDEMICS PUBLIC HEALTH WORLD HEALTH ORGANIZATION

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