

# For War or Peace

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Issues of war and peace in the twenty first century

**A Global Public Health Policy Based on Science, Not Demagoguery** Shamoo, A. E. and Bricker, B. 2009.

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# A Global Public Health Policy Based on Science, Not Demagoguery

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**As the swine flu threat level grew at the end of April, World Health Organization (WHO) Director-General Margaret Chan [said](#), "it really is all of humanity that is under threat during a pandemic."**

While the statement is technically correct, the director-general could have expressed the threat differently. WHO, as the organization most responsible in leading efforts on behalf of global health, should have been more careful to avoid adding heat to a potentially combustible discussion of swine flu. Instead of promoting a rational, reasoned response to the crisis, Chan's statement helped inflame sentiment against immigrants in the United States and across the globe. The current strain of swine flu emerged in Mexico on May 5, 2009. The rate of infections in humans was rapid and alarming, with high mortality rates among young and formerly healthy patients. The Mexican government's quick and open action, with some help from the Centers for Disease Control (CDC) toward the flu was exemplary. The Mexican government quickly reacted to the potential epidemic, shutting down all opportunities for mass public contact in schools, sports, and businesses. Mexican health officials also took the unprecedented step of quarantining infected individuals during treatment. These actions quickly reduced the spread of the virus. Dr. Richard Besser, the CDC's acting director, introduced reason into U.S. public discussion on May 5, when he modified his public health guidance on the swine flu virus with "a science-based decision that involves a lot of judgment." The CDC wisely avoided the use of the WHO director-general's characterization of the swine flu as a threat to all humanity. Moreover, the CDC's rapid and continuous flow of accurate information to the public was a model for every government agency facing public crises in the future.

Stating that the virus has been less serious in the United States than initial reports indicated, Besser, along with U.S. Secretary for Health and Human Services Kathleen Sebelius, also expressed concern about the effects of initial guidance for communities with cases of the virus. Noting that closures of schools led to children being dropped off in libraries, and parents being threatened with dismissal from their jobs if they took off two weeks to be with children home from closed schools, the administration's officials have introduced a reasoned approach to health policy. The officials also shared how, when, and what vaccine will be developed. This is a level of transparency that garners public trust.

At the beginning of this flu scare, as alarms sounded from every media outlet, demagogues used initial reports of the virus to inflame sentiment against immigrants, especially those from Mexico, even calling for people to stop using businesses that hired immigrants. Unfortunately, the potential damage that the flu could produce was augmented further by similar comments from presumed experts widely touted by the media.

While it may be true that shutting the borders, stopping foreign flights from entering American space, and stopping all food imports into the country might decrease our exposure to the swine flu, there are added consequences to severe measures — especially if the spread of the disease is less virulent than expected. With such actions, other nations would boycott our exports, citizens would stop going into public areas, and markets that are teetering on survival would finally collapse under the weight of our fear.

For a virus that is no more dangerous than the flu that spreads each year, we should be careful to respond proportionately to all of the data we have been given, making sure the public also understands the factors used to determine an appropriate response. This will enable the public to have an informed discussion — which will be especially important if epidemiological patterns indicate that a virus is changing and becoming more virulent.

Given a reasoned and open discussion that includes all of the factors used for public health advisories, the public is far less likely to fall prey to demagoguery and hate speech against those who may have contracted the virus. A fully informed public can then embark on a discussion in which those risks and benefits are weighed. While there may not be full agreement on how we prioritize those risks and benefits, there will be a base of knowledge to help the country determine its course — and information, not demagoguery, can prevail.

This is most likely the first chapter in what may well be a longer story with this virus. Fortunately, this first pass at handling a potential crisis has provided some valuable lessons. First, transparency, rapid dissemination of information to the public, and less inflammatory language, is needed to communicate and educate the public. Careful discussions regarding treatment, the development of a vaccine and the use of quarantine, should be shared as part of a public discussion. Helping the public accept the harsh measure of quarantine, if necessary, will help us to implement such a policy.