

Dissecting the social and civil liberties issues of the Ebola outbreak

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As medical volunteers return to the United States after treating Ebola patients in Africa, confusion about the disease and how it is transmitted has raised public anxiety levels and public health questions. Michael Willrich, the Leff Families Professor of History and author of the award-winning book "Pox: An American History," which chronicles the smallpox outbreak at the turn of the 20th century, says the public's reaction to Ebola isn't unexpected.

BrandeisNOW sat down with Willrich to discuss the parallels between the U.S.'s response to the <u>smallpox</u> and Ebola epidemics.

How did the smallpox outbreak advance the field of public health in America?

Smallpox is central to the development of the public health field. The very first vaccine was developed for smallpox. My book "Pox" focuses on a wave of smallpox epidemics that swept across the U.S. between 1898 and 1903, killing thousands of people and disrupting trade. The epidemics became politically explosive, generating a strong government response at the local, state and federal levels, as public health authorities enacted compulsory vaccination measures. People who were opposed to compulsory vaccinations took to courts and the public square to challenge the government. Though the courts sided with public health, the cases did also lead to new safeguards for individual liberties that ensured that future measures would be applied more fairly and safely.



As we await the vaccine for Ebola, on what grounds today can the government mandate compulsory vaccinations?

The power and the duty to prevent the spread of contagious diseases is part of the police power, a very old tradition rooted in common law, which holds that the state and local governments can interfere with liberty and property rights when the general welfare requires it. The strongest case for the police power in American history was always public health. The courts often compared the police power to the duty of a government to prevent an invasion. This power was originally designed to stay mostly at the state and local level, not the federal level.

Quarantining today seems to be almost as controversial as compulsory vaccinations were during the smallpox epidemic. What are your thoughts on how quarantine is being used today to treat Ebola?

Its use can certainly be dramatic. Recently, the Liberian government quarantined the city of Monrovia's poor West Point community, isolating an entire district of the city. In examples such as this, we see why quarantining can be so controversial with the public. It has been applied in such discriminatory ways, often used against marginalized groups.

In American history, quarantine is both common and controversial because it restrains personal liberty. It's a temporary detention, an inconvenience and can sometimes be dangerous, as suspected disease carriers who are in fact healthy can be quarantined among the sick. Today, with the spread of vaccines and antibiotics, it has become an uncommon public health technology. It hasn't been seen as necessary or effective, particularly when applied on a large scale. It's an incredibly



blunt instrument. And it's too easily politicized.

If quarantine is so ineffective, what do you think that says about our preparations, political or otherwise, for Ebola?

It's striking how slow international institutions were to respond to an outbreak that was reported as early as last March. The very limited use of quarantine in the U.S. so far (at this point they've only been issued by various state governors) has not been clearly thought out, in my opinion. They're understandable, but problematic because they have heightened public fear about Ebola during the Midterm elections. For a while, the Ebola panic entered the political process and seemed in danger of spinning out of control.

What civil rights lessons from the past can we apply to today as volunteers return to the U.S. after treating Ebola patients in Africa?

Cases like that of Kaci Hickox, the nurse who returned from Africa and was forced into quarantine, are interesting. She felt her human rights were violated. Though she understandably has strong feelings and the order for quarantine may have been ill-thought out, it's not at all clear that the order was unconstitutional. The history of smallpox and other diseases offers us lessons, especially the importance of public education. It's a vitally important part of the responsibility of <u>public health</u> to educate the public about diseases and manage fear and public expectations. In terms of rights, anyone subject to quarantine has the right to basic due process and to have their detention reviewed by a court of law.



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