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Swine Flu Scare Reveals Flaws in Global Public Health

The governor of the Mexican state of Veracruz has called for an [independent investigation](#) into the operations of Carroll Farms, the livestock company co-owned by Smithfield Foods and AHMSA of Mexico. The massive industrial farm animal production facilities are located near the village where the first case of the swine flu outbreak was confirmed in an eight-year old boy, Edgar Hernandez.

“We should have an independent authority to have extra assurance that there is no link whatsoever between what happened and what was at the beginning a link to the swine flu,” Governor Fidel Herrera told Al Jazeera reporters.

The governor’s announcement follows a long line of denials and cover-ups regarding the role of the hog farm in the outbreak of the A/H1N1 virus in Mexico. An outbreak of unusual respiratory disease began in communities surrounding the farm in early March, with some indications [dating back to January](#). Local health authorities attributed the outbreak of what is being called “acute respiratory infection” to the open-pit lagoons of manure and biological wastes surrounding the farms.

On April 5, local health authorities declared a health cordon in the area but tests were not carried out to determine an exact diagnosis of the strange disease. Meanwhile, the U.S. Center for Disease Control determined on Apr. 17 that two patient samples from California were a new H1N1 virus, and on Apr. 21 the CDC issued an early dispatch to its [Morbidity and Mortality Weekly Report](#) to warn of the discovery of a new virus. The San Diego cases were then linked to the suspicious cases popping up in Mexico and the alert went out of a possible pandemic.

Emergency measures in Mexico were not declared until Apr. 23. On April 25, the World Health Organization (WHO) Director-General declared the outbreak a [Public Health Emergency](#) of International Concern.

As of this writing the United States reports [2,254 confirmed cases](#) and two deaths. [International cases](#) according to the World Health Organization stand at 3,440. On May 7, the [Mexican Secretary of Health](#) confirmed 1,364 cases and 45 deaths.

System Slow to Respond to Protect Public Health

Three warning signs indicating the existence of a new virus went unheeded in Mexico: 1) an atypical outbreak of flu outside the normal flu season, 2) victims in the middle-age range--35 of the deaths are of people between 20 and 39 years of age—rather than concentrations among the very old and the very, and, 3) the proximity of the outbreaks to the hog farm.

The delayed response on the national and international level of even a few days,

meant the difference between epidemic and “imminent pandemic” according to various experts.

According to a May 1, Science article:

“Both CDC and WHO have made clear that the careful plans developed over the past 5 years to squelch pandemics at their source don't play a role at all now because the virus is already too widely dispersed. In papers published in 2005 in Science and Nature, scientists concluded that it might be possible to stop a budding pandemic locally by aggressive, targeted use of antivirals and measures such as shutting down transport and schools. WHO had stashed away some 5 million treatment courses of oseltamivir that could be used to that end.

The scenario might have worked for swine flu, says Longini (A University of Washington epidemiologist)-if it had been tried much earlier. “There were 800 or 900 [suspected] cases before it hit the global radar screen; that's way beyond a containable outbreak.”

Finding the answer to why diagnosis and response were delayed following these initial warning signs should be a major point on the follow-up agenda for the Mexican health system and international agencies.

Factors include: a lack of response to the initial reports from Perote, possibly to protect the hog farm from bad publicity; the fact that Mexico's North American partners under **NAFTA** had not developed technology transfer and training to enable the Mexican government to test and detect suspicious outbreaks that did not fit known patterns; an inexplicably slow response on the part of the Center for Disease Control; evidence of efforts to explain away cases with misdiagnoses in local and state health facilities in Mexico (Oaxaca and Veracruz); and problems in communication and coordination within Mexico's decentralized health system. Some reports that poor people were discriminated against and their complaints dismissed also weigh into the inquiry.

Another factor was the lack of tracking and regulation of swine diseases, even though scientists have known for decades that pig and human diseases can and do cross the species barrier.

Defending the Factory Farm

Experts have long warned that “industrial farm animal production” (IFAP) leads to potentially serious human health impacts. A tragically prophetic study done by the Pew Commission on Industrial Farm Animal Production of 2008 concludes, “...one of the most serious unintended consequences of industrial food animal production is the growing public health threat of these types of facilities. In addition to the contribution of IFAP to the major threat of antimicrobial resistance, IFAP facilities can be harmful to workers, neighbors, and even those living far from the facilities through air and water pollution, and via the spread of disease.

“The study continues (references [in original](#)), “Workers in and neighbors of IFAP

facilities experience high levels of respiratory problems, including asthma. In addition, workers can serve as a bridging population, transmitting animal-borne diseases to a wider population. A lack of appropriate treatment of enormous amounts of waste may result in contamination of nearby waters with harmful levels of nutrients and toxins, as well as bacteria, fungi, and viruses, all of which can affect the health of people both near and far from IFAP facilities.”

As local residents protested the stench and pointed to the hog farm as the source of their sickness, Veracruz authorities seem to have gone out of their way to divert suspicions that Smithfield’s Carroll Farms had anything to do with the unusual illnesses being reported. Although health officials sprayed the village of La Gloria to kill off swarms of flies coming from the company’s nearby open-pit manure lagoons, explanations lit on anything but the hog farm.

Federal authorities also denied the link to the hog farm and a Carroll Farms representative called the fact that the first swine flu case was located within a few miles of the farm “an unfortunate coincidence”. On May 2, the company [held a press conference](#) to pronounce that its product posed no health risks but spokespersons refused to take a single question from the press.

Reportedly, Carroll Farms sent samples from its herd for testing at some point soon after the outbreak and both the company itself and the Mexican government absolved Smithfield pigs from any role in the epidemic.

Then came the announcement that an outbreak of the same virus had been discovered in a pig herd in Alberta, Canada.

The Canadian Food Inspection Agency reported this week that about 220 pigs of a 2,200 herd have the 2009 H1N1 virus. This is the first time that the flu has been officially identified in a pig herd and raises suspicions to a higher level. Canadian authorities, industry spokespersons and media have circulated the version that the pigs were contaminated by a worker on the farm who had recently returned from Mexico.

The farm worker returned to Canada from Mexico on April 12 and had contact with the pigs two days later. The pigs began showing signs of the flu on April 24, said the country’s top veterinary officer, Dr. Brian Evans of the Canadian Food Inspection Agency in a [radio report from Ottawa](#). The pigs are reportedly in quarantine, with no risk to the food chain.

However, a review of the reports cited no scientific evidence behind the theory that the worker was the source of the outbreak in the pigs and not vice versa. An article [in The Star](#) quotes this convoluted explanation from Dr. Peter Ben Embarek, a WHO food safety scientist, “We expected that at some point since this virus has swine virus elements that we would find possibly the virus in swine pigs in the region where the virus is circulating”.

Statements from Canadian health officials did little to clear up the confusion. Assuming the premise of the person-to-pig transmission without explaining the basis, Evans noted that the virus showed no signs of mutation when passing from human to pig. "At this point in time, the issue of this being a human virus, having been introduced to the pigs, and the characterization of this virus, shows it is still that virus," he said. What that seems to mean is that the virus is identical in both species, but it still does not explain why authorities assume that the pigs caught it from the humans.

Tom Philpott, one of the first people to sound the alarm on the factory farm connection, [writes in Grist](#) that both flies and asymptomatic pigs can spread the disease. How do scientists know which direction the virus traveled across the species barrier? Why is that information not provided to the public?

If there is solid scientific evidence that the pigs caught the virus from human beings, the public has a right to know what that evidence is. It, on the other hand, this theory is speculation, we have a right not to be fed speculation as if it were scientific fact.

As the human-to-pig theory is accepted as fact in the media in the Canadian case, many experts insist on the swine origin of the virus. Citing the U.S. Centers for Disease Control [Scientific American points out](#) a starting point that politicians seem to have lost sight of: "But what is clear thanks to the hard work of virologists is that this particular strain of flu got its genetic start on U.S. hog farms back in the 1990s."

Ruben Donis, chief of the molecular virology and vaccines branch at the U.S. Centers for Disease Control and Prevention, stated in [an interview with Science magazine](#), "We know it's quite similar to viruses that were circulating in the United States and are still circulating in the United States and that are self-limiting, and they usually only are found in Midwestern states where there is swine farming.

Q: Is it of swine origin?

R.D.: Definitely. It's almost equidistant to swine viruses from the United States and Eurasia. And it's a lonely branch there. It doesn't have any close relatives."

For years scientists have known that pigs incubate and mutate viruses and many have warned that "factory farms" where large numbers are kept in close quarters create a perfect breeding ground for the rapid evolution of disease. The massive use of antibiotics means that viruses seek mutations resistant to the medicines. In the past, few cases of swine flu passing to human transmission were reported but it has long been known that it is possible. This virus posed a particular risk because of its contagion from human to human.

There is a persistent lack of transparency and complete information on the question of 'which came first—the pig or the person?' FAO spokesperson Erwin Northoff dismissed the idea that the FAO should investigate the Alberta hog farm where the first case of A/H1N1 was detected in pigs, stating flatly, "I don't think there is any need for the FAO to assist the Canadians."

The concern is that, having sold the person-to-pig theory in the Canadian case, any indication of infection at the Veracruz farm will be similarly dismissed. That requires, of course, that citizens fail to notice the lack of scientific evidence to support it and that any scientist with contradicting evidence keep quiet.

In Mexico there has been an unaccountable lack of serious investigation into possible links to the industrial animal farm, and on all levels officials have attempted to discard the theory that Smithfield hogs contributed to the flu epidemic. This behavior only deepens suspicions that the powerful interests of transnational livestock producers are being protected.

With the Canadian case, the heat turned up on Smithfield's Carroll Farms in Veracruz. The industry newsletter "[Meatingplace](#)" reported on May 5:

"In a letter to employees last week, CEO C. Larry Pope indicated Smithfield hired an independent laboratory to conduct additional testing on its Mexican hogs after initial inspections by the company and international health officials found no evidence of the illness. He said results would be returned in a "few" days.

"Mexican government authorities will conduct further testing, including genetic sequence analysis, to determine if any flu strains are present. These tests will take about 12 days, Keira Ullrich, Smithfield's investor relations manager, told Meatingplace.

"The results will enable us to conclude with certainty that the A(H1N1) strain is not present in our hogs," Ullrich said in an e-mail to Meatingplace."

The stated purpose of the testing, then, is not to discover any possible health risks to the human population but to confirm a vindicating foregone conclusion. This phrasing and the effort to avoid an investigation not hired and paid for by the company leaves little doubt that Smithfield is on the defensive.

Also since the genetic sequencing of the virus is relatively simple, the twelve day timeline seems long. Could that period include time for developing a damage-control strategy?

If we learned anything from the financial crisis, it's that business cannot be trusted to self-regulate. Although Mexico City residents were required to interrupt their schooling, work and social activities to stem the epidemic, swine farms--including the one at point zero of the epidemic--are not required by law to report disease and Carroll Farms in Perote has not been ordered to open up files and facilities to a thorough independent inspection.

Public Right to Know Blocked by Delays, Distortion and Omissions

Although the Internet and media are abuzz with reports and opinions on the swine flu epidemic, finding clear and confirmed information is maddeningly difficult. Official

communications and omissions that indicate bending over backwards to protect industry interests have given rise to a plethora of rumors, ranging from wild conspiracy theories to justified suspicions that officials are working overtime to deflect public attention from the hog farms.

The names of all victims and affected persons are being withheld. Although Sec. of Health Cordova finally admitted that poverty and overcrowded living conditions was a factor in the deaths, he provided no socioeconomic data on the victims. Confusion among initial statistics has given rise to the contradictory suspicions among Mexicans that the death toll is being under-reported and that the epidemic doesn't really exist.

Women make up 56% of the deaths from the swine flu. This indicates that a thorough investigation must also include a gender perspective. It also indicates that the compromised immune systems of many Mexicans who live without adequate health and nutrition--a condition that includes a disproportionate number of women--contributes to flu mortality rates.

The Mexican Secretary of Health now says that 77 early deaths showing the symptoms of swine flu will remain forever in the "suspicious" category because samples were not taken of the victims. Since no information has been released on where those cases were from or the characteristics of the victims, we may never know how many of those correspond to residents of communities exposed to the livestock operations.

Solid information pertaining to the possible origins of the virus is even more difficult to find. The swine flu connection and tentative link to Carroll Farms would seem to be a classic case for the mammoth Food and Agriculture Organization (FAO). Reports that the FAO was sending a team to Veracruz came out in the press the first week of May. But later no-one seemed to know whether the team had arrived, where it was, or what it was doing. I called the FAO to find out.

Spokesperson Alison Small replied that she "thought" the team had arrived but was in her car and would confirm in ten minutes. When I called back, I found that the number I had just called was listed as "non-existent." I tried another six times and got the same response. When I reached spokesperson Northoff he said that the team is currently working in Mexico, but he did know its schedule or research agenda. He did confirm that the team will be working at Carroll Farms and will produce a report in a matter of "days".

So far, the FAO has nothing about an investigation of the Smithfield operation in Veracruz on its website. Nearly all its press releases since the outbreak are focused on "protecting the pig sector".

Its first [press release dated April 27](#), echoes the industry objective to "protect the pig sector from the novel H1N1 virus by confirming there is no direct link to pigs" rather than adopting the scientific method of gathering evidence first and arriving at conclusions later.

The [next press release](#) steps up efforts to protect the global pork sector, announcing an official language change—obediently adopted by most of the world’s media--, designed to disassociate the epidemic from what the FAO considered wrongly maligned swine operations:

“...there is currently no evidence to suggest that the novel human-to-human transmitted H1N1 influenza virus is circulating in pigs in Mexico or anywhere else in the world, reasserted FAO Chief Veterinary Officer of FAO, Mr. Joseph Domenech. He added that ‘given current facts and scientific understanding, consumption of pig meat does not bring any increased risk to the consumer.’ It is for these reasons that FAO, the World Health Organization and the World Organization for Animal Health (OIE) agreed to no longer refer to “swine flu” but instead to “Influenza A/H1N1”.

A May 2 joint statement from the World Organization for Animal Health (OIE), the World Health Organization (WHO) and the World Trade Organization warns against imposition of anti-pork trade measures:

“To date there is no evidence that the virus is transmitted by food. There is currently therefore no justification in the OIE Terrestrial Animal Health Standards Code for the imposition of trade measures on the importation of pigs or their products.”

When the Canadian pig outbreak quickly belied the assurance that the disease was not circulating among swine, the organization [issued a release on May 4](#) echoing the Canadian version of “human-to-animal transmission” and stating:

“Surveillance for porcine respiratory disease should be intensified and all cases of porcine respiratory syndrome are recommended to be immediately reported to veterinary authorities. It is also recommended to inform OIE and FAO about any occurrence of outbreaks of the new A/H1N1 Influenza virus in pigs.”

Virulent Virus Leaps Species Barrier, Bureaucracy Does Not

Note the language in the FAO press release: “all cases of porcine respiratory disease are recommended to be immediately reported” and “It is also recommended to inform OIE and FAO”.

As Mexicans reel under draconian measures that included suspension of schools, cultural events, “non-priority” government activities and the temporary closure of bars and restaurants, industrial farm animal producers in most countries are not even subject to obligatory reporting of virus outbreaks that are known to have the capability of spreading to the human population. Neither Mexico nor the United States have laws that require reporting swine flu. The United States currently uses a totally voluntary animal tracking system (NAIS).

Canada does require reporting of disease outbreaks in farm animals. This may account for why Canada is the first place that the A/H1N1 virus was detected in pigs.

In an article titled “Swine Flu Shows need for Better Animal Testing”, Bryan Walsh [writes in Time magazine](#) notes, “The H1N1 virus contains human, avian and swine flu

genes, and genetic analysis indicates that it reassorted years ago, meaning it could have been in pig populations for some time before the virus gained the ability to transmit easily from person to person. If we had had tight surveillance of flu infections among swine, we might have noticed that something bad was brewing.”

One of the reasons oversight is so lax on factory farms is that a stark distinction exists among agencies and regulations pertaining to human health, and animal health. When asked about the evidence regarding the source of contamination on the Canadian farm as a worker returning from Mexico, FAO spokesperson Northoff replied that the organization could not confirm the human-to-animal link and that the FAO “only works on animal health issues.”

Animal health is generally considered under agricultural regulations rather than health. Despite the known health risks to human populations, regulations remain voluntary and woefully behind the times. The Pew study concludes with the recommendation: “A mandatory premise and individual animal or lot registration should be in effect by 2009, with an animal tracing capability in place by 2010.”

A Pound of Cure

The adage teaches that an ounce of prevention is worth a pound of cure. But in this case, it's the pound of cure that's worth billions. As government and international health officials ignore causes of the epidemic rooted in globalized factory farms and poor health systems, it could very well be that global pharmaceutical companies convert the latest flu pandemic into one of the most lucrative disasters the world has ever known.

The money to be made in privately produced antivirals and vaccines is mind-boggling. Roche is ramping up to produce 400 million doses of its antiviral Tamiflu a year and the French ambassador to Mexico reports that it has a market value of 230 pesos, or around \$18 dollars, per dose. Do the math.

The Science article quotes retired pharmaceutical executive and flu vaccine expert David Fedson's fears that the antiviral is “too pricey for many poor nations.” In a worst-case analysis this could lead to a survival gap between developed and developing nations.

Although many cite the complexity of the formula, the global patent system and dismantling of public health research centers lies at the root of the access problem. Big Pharma has exclusive production and distribution rights to its products except for very limited cases where generic production has been licensed. A monopoly on life-giving medicines means the companies can charge what they want and if private customers can't pay it, governments will.

As the [CDC drags its heels](#) on a decision about whether to produce the vaccine or not, the drug companies jockey for position. One lab that already requested a sample of the new flu to [begin work on a vaccine](#) is [Baxter International, Inc.](#), headquartered in

Deerfield, Illinois.

Baxter achieved notoriety last December when it mistakenly sent out a batch of highly virulent H5N1 bird flu to a lab, in a batch of human flu. Not only did the mistake risk release of the dangerous bird flu, but according to [a Times of India report](#) , if a lab worker became infected with the two viruses, that person would become an incubator for a hybrid not unlike the one we see now but potentially more lethal. Baxter is [still under investigation](#) by four European countries and the World Health Organization.

The winner of the swine flu derby-- the private company that obtains the discovery and patent on a new vaccine--can count on a major market. Some health officials talk about giving the vaccine, now barely in the development stage, to practically the entire population of the world. According to [the Washington Post](#), the Obama administration is considering adding two rounds of the new swine flu to a multi-billion dollar fall vaccination campaign--up to 600 million doses in the U.S. alone.

The idea of distributing a hitherto unknown swine flu vaccination along with the usual flu shot opens up the possibility of a host of highly unpredictable side effects. Experts also worry that in the heat of an epidemic, the new vaccine will be permitted to leap over the customary requirements for releasing a new medicine on the market. The U.S. government proposal to distribute a new swine flu vaccination along with the usual flu shot opens up the possibility of a host of highly unpredictable side effects. Assuming that a vaccine was even ready in the fall, to reach the market as part of a massive vaccination campaign would almost certainly violate adequate testing requirements. With sufficient public pressure, one hopes that more prudent voices will stand off against the pharmaceutical companies that will argue for giving out millions of doses to citizens without safety assurances.

Here's a case where history should not be allowed to repeat itself. A swine flu vaccine distributed to the U.S. public in 1976 resulted in hundreds of [cases of Guillain-Barre](#), a previously rare neurological disorder. The U.S. government stopped the shots ten weeks--and 40 million Americans--into the campaign. Twenty-five people died and others were left crippled.

As the pounds multiply, there is barely an ounce of prevention planned. In some cases, government reactions will assure that the next outbreak is even more devastating.

In Mexico, nowhere among the proposed lessons and responses is a concrete commitment to improve the overall health of the Mexican population in order to reduce their risks of flu-related death. During the recent epidemic, the Mexican Institute of Social Security (IMSS, by its Spanish initials) provided the shock troops to confront the disease. Its doctors and nurses spread out through cities and country side and its clinics and mobile units routinely cover 44 million Mexicans including private-sector workers and their families.

Although the response to the crisis would have been even more delayed and largely

impossible without these professionals, the Mexican Secretary of the Treasury announced on May 6 seven measures to confront the effects of the swine flu epidemic on the national economy. These included a reduction of 20% in businesses' contributions to IMSS for a period of at least two months.

Mexican health policy expert Gustavo Leal told the Americas Program, "This measure means major financing cutbacks to IMSS health services. It represents an astounding incoherence in policies and objectives, especially with the swine flu crisis."

Leal notes that the measure comes on the heels of previous cuts in social security contributions devised as part of Calderon's anti-crisis plan announced in January of this year. IMSS personnel and citizen organizations have long accused the conservative government of purposely under-financing and undermining the IMSS in an effort to justify privatization.

A Critical Crossroads

To prevent another deadly flu outbreak would require measures quite different from what we are seeing today, in Mexico and among international agencies.

* We know that the epidemic kills in patients with compromised immune systems, yet rather than strengthening the Mexican health care system, it is being further eroded. Doctors here emphasize the importance of improving health and health care among the population to avoid further deaths. Evidence gathered at hospitals where patients are treated for the flu also indicates that existing flu vaccines are effective in protecting against the new flu yet the Sec. of Health denies the claim and awaits a new silver-bullet solution from pharmaceutical companies. The particular risk to women has not been addressed.

* We know that finding the origin of the virus could lead to reducing the appearance of new and even more lethal viruses, yet the signs that point to factory farms are being dismissed by officials.

* We know that widespread production of antivirals, affordability and rapid production of a vaccine is vital to surviving a pandemic and yet the patent system goes untouched while qualified public research institutes take a backseat to profit-seeking private firms.

Governments and international agencies emphasize the need to be vigilant as the peak period of the epidemic winds seems to be winding down. Recurrences are part of flu cycles and the virus could return with a vengeance in the regular winter flu season.

But even more dangerous than the virus itself, is the political and economic aftermath. Different political responses and readings of the crisis could take us in very different directions.

We could end up in a world where the pandemic is under control but mega-profits for

pharmaceutical companies enable them to tighten their stranglehold on public health; impunity for factory farms leads to official stonewalling of demands for supervision and regulation; public fear numbs dissent; and the spectre of disease obscures the reality of inequality, poverty and discrimination that placed the population at risk. But we also have the chance to expose a system that didn't work.

Without elaborating on each, here is a list for further collective analysis:

- 1) NAFTA failed to promote strategically important technology transfer to Mexico in the health field and others, and has proved a disincentive to national research and development.
- 2) NAFTA provisions that enable polluting industries to locate where laws and enforcement are lax encourage practices that threaten health and the environment, like open-pit manure lagoons, non-reporting of animal illness, cover-ups and other factors that may have contributed to the swine flu epidemic.
- 3) The centrality of foreign investment in the Mexican economy creates a climate where transnational corporations with large investments can exercise coercive power over government agencies on all levels.
- 4) Mexico's decentralized health system, modelled on World Bank prescriptions, and the lack of resources dedicated to preventive and general health programs revealed the cracks in the system that so many Mexicans fall through every year.
- 5) The global patent system allows pharmaceutical companies to determine the price, quantity, quality and distribution of life-saving medicines and they apply criteria of earnings rather than public health when making those decisions.

This epidemic in the end turned out to be less lethal than many feared at the outset. The WHO and national systems tried out new pandemic response mechanisms that, while they worked to detain the spread of the virus, also demonstrated that avoiding global spread in a globalized world is impossible.

Mexico has suffered by far the worst consequences of the outbreak. Not only did more Mexicans die than anywhere else—and health officials are not entirely clear about the reason for that—but the measures applied to avoid a pandemic struck hard at the Mexican economy at a time when it is weakest. According to the Secretary of the Treasury, the nation lost 0.3% of GNP solely due to the virus, while other economic analysts say a more realistic figure is 1%. The cost is estimated by authorities at 30 billion pesos (\$2.3 billion USD) while private analysts cite 60 billion pesos (\$4.59 billion dollars).

This translates into a four to six percent contraction in growth for the year. The loss of remittances from migrants in the United States, lower oil prices and the global economic crisis mean that a country where nearly half the population already lives in

poverty will now hit a major recession with massive job loss.

The Mexican government plans to confront the deficit by taking out more loans from international agencies such as the World Bank, International Monetary Fund and Inter-American Development Bank. This response takes Mexico out of the pot and into the fire, as it increases foreign debt and merely mitigates the crisis temporarily despite a bleak outlook beyond 2009. It also forces the nation to further submit to the same neoliberal policies that stripped its health services and installed widespread poverty through conditionality attached to the loans.

Although several countries have sent donations of antivirals and medical aid, aid to the general economy has not been forthcoming. The U.S. government has responded to the humanitarian crisis growing south of its border by proposing to [ramp up security aid](#) to fight drug trafficking while ignoring Mexico's pressing needs in health and employment.

Not only is this the wrong focus, this military and police aid is proving counter-productive. In a [letter dated May 6, 2009](#) Mexican human rights organizations noted the surge in human rights violations committed by the Mexican military since President Felipe Calderon launched the militarized “war on drugs”. The letter urges the United States “to support a holistic approach to security problems based not on the logic of combat but on tackling the root causes of violence and assuring full respect for human rights.” The organizations also call for a thorough reconsideration of the Merida Initiative security aid now before the U.S. Congress for its third year of funding.

A good neighbor policy toward Mexico would use scarce U.S. resources to support job generation, health care and poverty alleviation at a moment of severe crisis. Dedicating nearly 100% of aid to Mexico to security forces and objectives could have exactly the opposite effect than intended—it could ignite serious conflict and instability. Expected citizen protests for basic needs are all too likely to be met with repression rather than solutions.

In this area, peaceful prevention measures are far preferable to armed cures. Drug-related violence has fallen to the back pages of the newspapers in recent days and although it will continue to be a major challenge, Mexico now clearly shows a more complex clinical case than before.

As in medicine, policies that ignore a broad diagnosis to aggressively attack a single symptom lead not to wellness, but to deeper crisis. Mexico's swine flu epidemic provides lessons that go beyond the pandemic and strike at the heart of a system that favors corporate interests above public health. It's time to turn that system around.