OVERVIEW
The following lessons are presented as in-class activities. During the COVID-19 pandemic and other public health crises, we recognize that teachers are likely to engage in virtual or online learning exercises. You can adapt any of the following class activities to be assigned to individuals or groups online with the opportunity for virtual discussion.

During a public health crisis, many rights are at risk. One of these is UDHR Article 19: the right to seek, receive, and impart information and ideas through any media and regardless of frontiers. Because of this, encourage and facilitate the use of trustworthy news sources and other data among students based upon current best practices.

UNIVERSAL DECLARATION OF HUMAN RIGHTS
- Article 19: Everyone has the right to freedom of opinion and expression.
- Article 22: Everyone has the right to social security.
- Article 25: Everyone has the right to a standard of living adequate for their health and well-being.
- Article 26: Everyone has the right to education.
- Article 29: Everyone has duties to the community.

HUMAN RIGHTS ISSUES
Health, adequate standard of living, social security, education, and personal duty and responsibility

ACTIVITY DURATION
1–5 30-minute lessons, with additional time for work beyond the classroom
TARGET AUDIENCE
Grades 9-12, ELA and Social Studies Courses

ESSENTIAL QUESTIONS
• What factors need to be present for a health crisis to become a pandemic?
• What role should the government (local, state, national, and international) play in preventing, addressing and stopping a health crisis?
• How is the interdependent and interrelated characteristic of human rights evidenced during a public health crisis?
• What role does the individual play during a health crisis or pandemic?

STUDENT SKILLS
• Critical thinking and problem solving
• Comparing and contrasting
• Researching and analyzing information
• Drawing inferences and making conclusions

VOCABULARY
• Pandemic
• Public health
• Mitigation
• Social distancing
• Virus
• World Health Organization
• Centers for Disease Control
• Infectious disease
• COVID-19
• Coronavirus disease

CONCEPTS
• Individuals, groups, and institutional social responsibility
• Public health care
• Social connectedness
TECHNOLOGY REQUIRED

- Internet access
- Computer access

MATERIALS

- Video of Dr. Fauci testifying to the House Oversight and Reform Committee Hearing on Coronavirus Response, Day 1
- News article of Dr. Fauci testifying to before Congress
- Video of the World Health Organization’s (WHO’s) media briefing on COVID-19 with Dr. Tedros
- World Health Organization WHO Situation Dashboard

BACKGROUND INFORMATION

The Universal Declaration of Human Rights (UDHR) was created in the aftermath of World War II in an effort to ensure that the atrocities committed by Nazi Germany would not be repeated. Representatives from all regions of the world, who symbolized a variety of legal traditions and cultural backgrounds, came together to codify a list of human rights to which all people around the globe should be entitled. The drafting committee, known as the UN Commission on Human Rights, was chaired by Eleanor Roosevelt, widow of American President Franklin D. Roosevelt and a long-time advocate on behalf of minorities, refugees, women, and the working class. The final document, containing 30 articles, was recognized as a common standard by the United Nations General Assembly on December 10, 1948. Since that date, the document has been translated into over 500 languages.

The Commission’s work did not end with the approval of the declaration. The treaty still needed to be ratified by nations, with the expectation that every nation that signed on "would then be obligated to change its laws wherever they did not conform to the points contained in the covenant." The Commission was optimistic that this work could be completed within a few years. However, the challenge was far greater than they realized. Today, advocates continue to fight to secure the human rights of citizens around the globe.
ANTICIPATORY SET

• Divide students into 3 groups.

• In their groups, ask each group to research a public health crisis.

• Some examples of public health crises and pandemics to research include: Ebola virus disease (EVD), H1N1 (swine flu), H5N1 (bird flu), HIV/AIDS, and SARS coronavirus (SARS-CoV). For each group, students should answer the following questions:
  ○ What was the health concern?
  ○ How did it spread?
  ○ Did it affect certain populations more than others? (Compare males vs. females, age groups, ethnic groups, etc.)
  ○ How did the government(s) respond to this health concern?

• Ask students to compare and contrast coronavirus disease 2019 (COVID-19) with the public health crisis they have researched. If they have not already, ask students to consider the questions they answered for the public health crisis and compare those answers to the circumstances of COVID-19.

NOTE TO TEACHERS

Based upon current pandemic conditions, the term “coronavirus” will be used exclusively and interchangeably to describe COVID-19 in the following lessons. Adapt based upon the classroom environment as necessary.

STUDENT ACTIVITIES

Activity 1

• Each group should have one sheet of flip-chart paper. The paper should be held lengthwise and divided into four columns. The columns should be , with these headings: Local, State, Federal, and Intergovernmental.

• Students should answer this question:
  ○ What are the specific roles and responsibilities of the local, state, federal, and intergovernmental (international) levels of government when it comes to protecting and promoting public health?

• Students should consider the following in developing their charts:
  ○ Legislation passed or proposed by the government jurisdiction.
  ○ The influence of agencies or actors, such as the U.S. Department of Health and Human Services (HHS), the Centers for Disease Control and Prevention (CDC), or elected officials.
  ○ Public statements and information released by the governmental administration, including press conferences and releases, media briefings, official statements, and social media.
  ○ The current political and cultural climate.

• Each group should try to reach a consensus. When all the columns have been filled, the flip charts can be taped in place in the classroom.

• Groups should be allowed time to look at each other’s finished charts and to identify differences in roles and responsibilities (of the government jurisdictions) as perceived by other groups.
As a class, have the students share their outcomes and respond to the following questions:

- What (if anything) did all groups agree are the roles and responsibilities that should be upheld by the government (local, state, federal, and intergovernmental) when protecting and promoting public health?
- Did one group identify a role or responsibility of the government jurisdiction that other groups did not? Discuss.
- In addition to taking action, what is the responsibility of the government as it pertains to dissemination of information (regarding public health)?

Activity 2

- Divide students into two groups.
- One group will watch the video of Dr. Fauci testifying to the House Oversight and Reform Committee Hearing on Coronavirus Response, Day 1, or read “8 key exchanges from the testimony.”
  - Video of Dr. Fauci testifying to the House Oversight and Reform Committee Hearing on Coronavirus Response, Day 1
  - News article of Dr. Fauci testifying to before Congress
  - Ask students to discuss their reactions to the testimony. Have students discuss and/or write about how Dr. Fauci perceives the roles and responsibilities of different levels of government as they pertain to the protection and promotion of public health (as evidenced by the testimony and other background research). Ask students how this approach affects the individual.
- The other group will watch the video of the World Health Organization’s (WHO’s) media briefing on COVID-19 with Dr. Tedros, or read the transcript
  - Video of the World Health Organization’s (WHO) Media Briefing on COVID-19
  - Ask students to discuss their reactions to the briefing. Have students discuss and/or write about how Dr. Tedros perceives the roles and responsibilities of different levels of government as they pertain to the protection and promotion of public health (as evidenced by the briefing and other background research). Ask students how this approach affects the individual.
- Ask each group to pick volunteers to summarize the video/information and discussion and report orally to the class.
- As a class, debrief the outcomes of the group discussions. Examine the similarities and differences between the views of Dr. Fauci and Dr. Tedros as they pertain to the government’s role in protection and promotion of public health. Students should consider the information Dr. Fauci and Dr. Tedros provided to the national and international community and how governments responded to them.
NOTE TO TEACHERS
The full video will give the broadest perspective on the United States governmental and intergovernmental response to a public health crisis. Adjust viewing time of the testimony and briefing videos for your class needs.

- Dr. Fauci testifying to the House Oversight and Reform Committee Hearing on Coronavirus Response, Day 1
  - Dr. Fauci’s opening statement on the coronavirus and timeline for vaccines begins at 13:54.
  - Dr. Fauci’s discussion of lack of containment and testing of coronavirus within the United States is at 35:01.
  - Rep. Stephen Lynch (D-Massachusetts) discusses the response of President Trump to the coronavirus outbreak, and Dr. Fauci replies in regard to the data he has provided at 49:14.
  - Dr. Robert Redfield (CDC) and Dr. Fauci discuss the lack of and possibilities for testing at 58:08.
  - Dr. Fauci says “We need to do a lot more” at the national level and in response to travel restrictions at 1:02:23.
  - Dr. Fauci refutes the comparison between coronavirus and other viruses including the “common flu [and cold]” and warns the committee against inaction and complacency at 1:14:04, at 1:30:11, and at 1:35:58.
  - Dr. Fauci talks about the importance of data and science (when questioned about speaking out in politically charged times) at 1:16:55.
  - Dr. Fauci talks about the necessity for quick response and mitigation strategies by the United States with the coronavirus at 1:47:58 and at 1:51:46.
  - Dr. Fauci responds to questions about what the health sector needs from Congress and the government to address public health concerns at 1:58:36.

- World Health Organization’s (WHO’s) media briefing on COVID-19 with Dr. Tedros
  - Dr. Tedros speaks about breaking the chains of transmission and the necessity of testing at 2:32.
  - Dr. Tedros discusses the joint call to action of the global business community from the WHO and the International Chamber of Commerce at 10:05.
  - Dr. Tedros speaks of the need for political commitment at all levels of government (including the highest levels) at 17:51.
  - Dr. Tedros promotes “a whole of government and the whole of society approach” to combating coronavirus at 37:49.

Activity 3
- Put students in groups of two pairs.
- Ask each pair to select a country (other than the United States) that they want to focus on for this project.
- Show students the World Health Organization Situation Dashboard
- Ask students to compare the graphs, speed of spread, and numbers from the United States and their country of choice.
After they examine the WHO data, ask students to research the public response of their chosen country to local, national, and global coronavirus outbreaks. Have students answer the following questions:

- What tactics, if any, did your country use to mitigate and control the coronavirus? In what time frame did these actions take place?
- If applicable, what steps did the local, state (or provincial), federal (or national), and intergovernmental jurisdictions take to address the coronavirus? What information did they or did they not share with their population and when?
- Were they successful? Why? Why not?
- Did the government response (at any level) align more with the position of Dr. Fauci, Dr. Tedros, or neither? How did they align? How did they differ?

Ask students to compare and contrast the government response of their country to the actions of the United States. Students should explain how the United States statistics relate to those of their chosen country.

- To what extent do the countries reveal commonalities (or differences) in the spread of the coronavirus? Can you identify any patterns consistent between the two?
- In your opinion, has one of the countries been more successful at controlling the coronavirus? If so, why and how? What has the government’s role been?

Have students report the findings of their country to the class.

As a class, debrief the outcomes of their research session with their countries. Ask students if it was easy or difficult to find data or information outside of the WHO statistics.

Have the groups merge all research into a Comprehensive Global Coronavirus Response Document.

Culminating Activity

In their groups, ask students to consider the contexts which they have been researching and generate a list of rights that have been protected or denied by the country’s government due to their management (or mismanagement) of the coronavirus public health crisis.

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TEACHER TIP
Students may automatically recognize that their right to a standard of living adequate for their health and well-being (Article 25) can be impacted, protected, or denied during a pandemic or public health crisis. Ask students if there are any interdependent or interrelated rights that have been impacted. For example, has the public health crisis resulted in a change in their way of life? If so, has this change protected or denied a right guaranteed to them previously?

• Using the information in the previous activity, have each group write a Rights Action Plan to address these rights within the Comprehensive Global Coronavirus Response Document. Students should include at least three government actions that can be taken to protect or promote these rights. Within their plans, students should discuss which level of government will be involved and what actions they will take.

• Students should refer to their charts from Activity 1 and consider how the following could be used in their plans:
  ○ Legislation passed or proposed by the government jurisdiction.
  ○ The influence of agencies or actors, such as the U.S. Department of Health and Human Services (HHS), the Centers for Disease Control and Prevention (CDC), or elected officials.
  ○ Public statements and information released by the governmental administration, including press conferences and releases, media briefings, official statements, and social media.
  ○ The current political and cultural climate.

• Ask students to reflect back on the discussion from Activity 1 and consider the responsibility of the government as it pertains to dissemination of information during a public health crisis or pandemic. Students should consider these responsibilities when developing action items for their plans.

• Students should also consider local individuals and human rights defenders in their community who are taking action to protect or promote human rights. If applicable, students should include in their plans actions that could be taken by these or other individuals.

• Ask each group to present their plan either through presentation slides, flip chart, or oral presentation.

BECOME A DEFENDER
We are in unprecedented times as the world navigates how to deal with the spread of the Coronavirus (COVID-19). What do know is that human rights should and must be considered in all the efforts to help prevent this from becoming worse. Your students might be asking, what can we do to help uphold and protect human rights during this challenging time? As most of our students are being asked to stay home indefinitely, how can they effect change from home? Below are some immediate actions all young people can take RIGHT NOW!

We encourage all students to leverage technology and help organize virtual meetings to collaborate and brainstorm ways in which they can all help during this global challenge. Please encourage your students to organize themselves into groups to brainstorm ways they can advance the following recommendations for taking action and more!
Right to Access to Information and Duty to Community

- Social media: Right now, many of us are at home and have a ton of time to be on social media, but how are we using it for good in the midst of all these challenges? Students can:
  - Make PSAs and share information. There are a lot of helpful educational materials out there about very tangible ways people can stop the spread of this virus that students can share via social media. For example, the notion of social distancing has been thoughtfully articulated on multiple platforms, and students can begin to share that information. The following link from the Washington Post is a great tool to educate the public on the need for social distancing and what your personal duty is to the global community: [https://www.washingtonpost.com/graphics/2020/world/corona-simulator/](https://www.washingtonpost.com/graphics/2020/world/corona-simulator/)

Right to Health and Well-being

Ask students to research and find local food banks in their immediate community or around the world that could help vulnerable populations. Students can compile their findings, and create a PSA to encourage others to donate, or even create a crowdfunding campaign themselves to benefit a local food bank. For example, [Feeding America](https://www.feedingamerica.org) has a large reach, and they can encourage people to donate to it.

ADDITIONAL RESOURCES

WORLD HEALTH ORGANIZATION (WHO)
Live updates, reports, and research about the global outbreak.

CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC)
Information regarding symptoms, prevention, and preparation.

RECENT NEWS

NEW YORK TIMES
Coronavirus Map: Tracking the Spread of the Outbreak

[https://www.nytimes.com/2012/07/15/sunday-review/the-ecology-of-disease.html?fbclid=IwAR1SfPAdr6jVBe6TqqXlVs7V1dw275PXaHX7nozcA9VJFG_8qroBuutPlL](https://www.nytimes.com/2012/07/15/sunday-review/the-ecology-of-disease.html?fbclid=IwAR1SfPAdr6jVBe6TqqXlVs7V1dw275PXaHX7nozcA9VJFG_8qroBuutPlL)
The Ecology of Disease, by Jim Robbins

POLITICO
[https://www.politico.eu/article/coronavirus-italy-doctors-tough-calls-survival/?fbclid=IwAR276hjicWWd15vVkkGB0WBQWdUUTG_aAhYpMLrBYQoE9l48La9](https://www.politico.eu/article/coronavirus-italy-doctors-tough-calls-survival/?fbclid=IwAR276hjicWWd15vVkkGB0WBQWdUUTG_aAhYpMLrBYQoE9l48La9)
Italian doctors on coronavirus frontline face tough calls on whom to save, by Greta Privitera
NATIONAL STANDARDS

COLLEGE, CAREER & CIVIC LIFE (C3) FRAMEWORK FOR SOCIAL STUDIES STANDARDS

• D1.5.9-12 Determine the kinds of sources that will be helpful in answering compelling and supporting questions, taking into consideration multiple points of view represented in the sources, the types of sources available, and the potential uses of the sources.

• D2.Civ.7.9-12 Apply civic virtues and democratic principles when working with others.

• D2.Civ.10.9-12 Analyze the impact and the appropriate roles of personal interests and perspectives on the application of civic virtues, democratic principles, constitutional rights, and human rights.

• D2.Civ.12.9-12 Analyze how people use and challenge local, state, national, and international laws to address a variety of public issues.

• D2.Civ.14.9-12 Analyze historical, contemporary, and emerging means of changing societies, promoting the common good, and protecting rights.

• D2.Geo.5.9-12 Evaluate how political and economic decisions throughout time have influenced cultural and environmental characteristics of various places and regions.

• D3.1.9-12 Gather relevant information from multiple sources representing a wide range of views while using the origin, authority, structure, context, and corroborative value of the sources to guide the selection.

• D4.6.9-12 Use disciplinary and interdisciplinary lenses to understand the characteristics and causes of local, regional, and global problems; instances of such problems in multiple contexts; and challenges and opportunities faced by those trying to address these problems over time and place.

• D4.7.9-12 Assess options for individual and collective action to address local, regional, and global problems by engaging in self-reflection, strategy identification, and complex causal reasoning.

COMMON CORE STATE STANDARDS FOR ENGLISH LANGUAGE ARTS

• RI.11-12.1 Cite strong and thorough textual evidence to support analysis of what the text says explicitly as well as inferences drawn from the text, including determining where the text leaves matters uncertain.

• W.11-12.7 Conduct short as well as more sustained research projects to answer a question (including a self-generated question) or solve a problem; narrow or broaden the inquiry when appropriate; synthesize multiple sources on the subject, demonstrating understanding of the subject under investigation.

• W.11-12.9 Draw evidence from literary or informational texts to support analysis, reflection, and research.
Dr. Anthony Fauci was appointed director of the National Institute of Allergy and Infectious Diseases (NIAID) in 1984. He oversees an extensive portfolio of basic and applied research to prevent, diagnose, and treat established infectious diseases such as HIV/AIDS, respiratory infections, diarrheal diseases, tuberculosis and malaria as well as emerging diseases such as Ebola and Zika. NIAID also supports research on transplantation and immune-related illnesses, including autoimmune disorders, asthma and allergies. The NIAID budget for fiscal year 2020 is an estimated $5.9 billion.

Dr. Fauci has advised six presidents on HIV/AIDS and many other domestic and global health issues. He was one of the principal architects of the President’s Emergency Plan for AIDS Relief (PEPFAR), a program that has saved millions of lives throughout the developing world.

Dr. Fauci also is the longtime chief of the Laboratory of Immunoregulation. He has made many contributions to basic and clinical research on the pathogenesis and treatment of immune-mediated and infectious diseases. He helped pioneer the field of human immunoregulation by making important basic scientific observations that underpin the current understanding of the regulation of the human immune response. In addition, Dr. Fauci is widely recognized for delineating the precise ways that immunosuppressive agents modulate the human immune response. He developed effective therapies for formerly fatal inflammatory and immune-mediated diseases such as polyarteritis nodosa, granulomatosis with polyangiitis (formerly Wegener’s granulomatosis), and lymphomatoid granulomatosis. A 1985 Stanford University Arthritis Center Survey of the American Rheumatism Association membership ranked Dr. Fauci’s work on the treatment of polyarteritis nodosa and granulomatosis with polyangiitis among the most important advances in patient management in rheumatology over the previous 20 years.

Dr. Fauci has made seminal contributions to the understanding of how HIV destroys the body’s defenses leading to its susceptibility to deadly infections. Further, he has been instrumental in developing treatments that enable people with HIV to live long and active lives. He continues to devote much of his research to the immunopathogenic mechanisms of HIV infection and the scope of the body’s immune responses to HIV.
In a 2019 analysis of Google Scholar citations, Dr. Fauci ranked as the 41st most highly cited researcher of all time. According to the Web of Science, he ranked eighth out of more than 2.2 million authors in the field of immunology by total citation count between 1980 and January 2019.

Dr. Fauci has delivered major lectures all over the world and is the recipient of numerous prestigious awards, including the Presidential Medal of Freedom (the highest honor given to a civilian by the President of the United States), the National Medal of Science, the George M. Kober Medal of the Association of American Physicians, the Mary Woodard Lasker Award for Public Service, the Albany Medical Center Prize in Medicine and Biomedical Research, the Robert Koch Gold Medal, the Prince Mahidol Award, and the Canada Gairdner Global Health Award. He also has received 45 honorary doctoral degrees from universities in the United States and abroad.

Dr. Fauci is a member of the National Academy of Sciences, the National Academy of Medicine, the American Academy of Arts and Sciences, and the American Philosophical Society, as well as other professional societies including the American College of Physicians, the American Society for Clinical Investigation, the Association of American Physicians, the Infectious Diseases Society of America, the American Association of Immunologists, and the American Academy of Allergy, Asthma & Immunology. He serves on the editorial boards of many scientific journals; is an editor of *Harrison’s Principles of Internal Medicine*; and is the author, coauthor, or editor of more than 1,300 scientific publications, including several textbooks.
Dr. Tedros Adhanom Ghebreyesus was elected as director-general of the World Health Organization (WHO) for a five-year term by WHO member states at the Seventieth World Health Assembly in May 2017.

He is the first WHO director-general to have been elected from multiple candidates by the World Health Assembly, and is the first person from the WHO African Region to serve as WHO’s chief technical and administrative officer.

Immediately after taking office on July 1, 2017, Dr. Tedros outlined five key priorities for the organization: universal health coverage; health emergencies; women’s, children’s, and adolescents’ health; health impacts of climate and environmental change; and a transformed WHO.

Prior to his election as WHO director-general, Dr. Tedros served as Ethiopia’s minister of foreign affairs from 2012–2016. In this role he led efforts to negotiate the Addis Ababa Action Agenda, in which 193 countries committed to the financing necessary to achieve the Sustainable Development Goals.

Dr Tedros served as Ethiopia’s minister of health from 2005–2012, where he led a comprehensive reform of the country’s health system. All roads lead to universal health coverage for Dr Tedros, and he has demonstrated what it takes to expand access to health care with limited resources.

“I envision a world in which everyone can live healthy, productive lives, regardless of who they are or where they live. I believe the global commitment to sustainable development—enshrined in the Sustainable Development Goals—offers a unique opportunity to address the social, economic and political determinants of health and improve the health and wellbeing of people everywhere.”

— Dr. Tedros Adhanom Ghebreyesus, director-general, World Health Organization
The transformation he led as Ethiopia’s Minister of Health improved access to health care for millions of people. Under his leadership, Ethiopia invested in critical health infrastructure, expanded its health workforce, and developed innovative health financing mechanisms.

Beyond Ethiopia, Dr. Tedros’ global leadership on malaria, HIV/AIDS, and maternal and child health has been immensely impactful. He was elected as chair of board of the Global Fund to Fight AIDS, Tuberculosis, and Malaria Board in 2009, and previously served as chair of the board of the Roll Back Malaria Partnership Board, and co-chair of the board of the Partnership for Maternal, Newborn and Child Health Board.

Born in the city of Asmara, Eritrea, Dr. Tedros holds a Doctorate of Philosophy (PhD) in community health from the University of Nottingham and a master of Science degree (MSc) in immunology of infectious diseases from the University of London. Dr. Tedros is globally recognized as a health scholar, researcher, and diplomat with first-hand experience in research, operations, and leadership in emergency responses to epidemics.

Throughout his career, Dr. Tedros has published numerous articles in prominent scientific journals, and received awards and recognition from across the globe. He received the Decoration of the Order of Serbian Flag in 2016, and in 2011 was awarded the Jimmy and Rosalynn Carter Humanitarian Award in recognition of his contributions to the field of public health in 2011.