

Biography

Dr. Jonathan Mann: Champion for Human Rights in the Fight Against AIDS

B. Lee Ligon-Borden, MA, PhD

On September 2, 1998, a Swissair jetliner headed to Geneva, Switzerland, crashed off the coast of Canada. Among the passengers on board were Jonathan Mann and his wife, both highly respected and renowned researchers who were headed to a United Nations AIDS vaccine conference. Jonathan Mann had held many high-level positions at the Centers for Disease Control and Prevention (CDC) before establishing the World Health Organization's (WHO's) Global Programme on AIDS, which he ran from 1986 to 1990. This article presents a brief biography of Mann, with emphasis placed on his contributions to the progress that has been made in treating children with human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS), as well as on his efforts to protect individuals with AIDS and to establish appropriate attitudes toward them when the disease was still an emerging and frightening one that sparked controversy and fear.

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On September 3, 1998, the international scientific and medical communities were shocked and horrified to learn that among the passengers on the Swissair jetliner that had crashed the previous day off the coast of Canada were Jonathan Mann and his wife, Mary Lou Clements-Mann (Fig 1). Both researchers were highly respected and renowned. They had met while working on an expert committee that was developing new strategies to fight disease and had married only two years previously. Mann had held many high-level positions at the Centers for Disease Control and Prevention (CDC) before establishing the World Health Organization's (WHO's) Global Programme on AIDS, which he ran from 1986 to 1990.¹ At the time of their deaths, they were en route to a United Nations (UN) AIDS vaccine conference in Geneva. This article presents a brief biography of Jonathan Mann, focusing on his contributions to the progress that has been made in treating children with human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS). Especially important were his efforts to protect individuals with AIDS and to establish appropriate attitudes toward them when the disease was still an emerging and frightening one that sparked controversy and fear.

Early Life and Education

Jonathan Mann was born in Boston, Massachusetts on July 30, 1947.² He was the second of four children born to Dr. James Mann and Ida Mann. His father was a well-known psychoanalyst who had received his medical degree from Washington University Medical School. His mother was trained as a social worker and for many years worked in that profession. She later pursued interests in the visual arts and graduated from the Museum of Fine Arts School at the age of 80—most likely the school's oldest graduate! (Carol Mann, personal communication).

Their academic acumen and concern for the welfare of other people were integral parts of the home environment, which is evident today in the humanitarian pursuits of all their children. In addition to the contributions made by Jonathan are those of his siblings: Carol, his older sister, is an educator involved in communications (including a daily radio program) and in helping other people achieve a holistic approach (physical, mental, spiritual) to life; his younger brother Jeremy is a pediatrician in California; and the youngest sibling, Joshua, is a rabbi who lives with his family in Israel (Fig 2) (personal communication).

Jonathan was very close to his older sister Carol during both his early childhood and teen years, during which they developed an intimate intellectual and philosophical relationship that lasted throughout his life. As children, they often went on long walks together, exploring both the natural world and the more abstract concepts of life—its purpose and meaning. They collected all sorts of rocks and fossils and talked about dinosaurs and nature and various other subjects. Carol also recalls that they were very resourceful as children, and from the large garden the family

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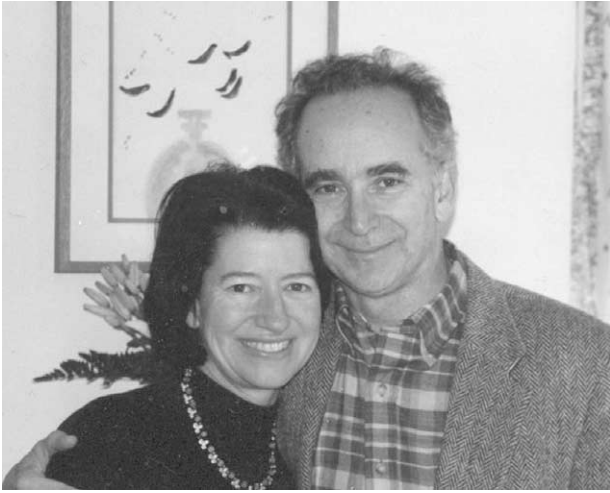


Figure 1. Jonathan and Mary Lou Mann at home in Maryland, 1998.

kept, the two children collected vegetables and set up a stand on the streets where they sold them. Of course, as she notes, they lived in a different world then, with no risks involved for either the patrons or the children themselves (personal communication).

When Jonathan was 8 years of age and Carol was 10, the family moved to Israel (Fig 3), where their father was called as a visiting professor and helped establish the Department of Psychiatry at Hebrew University Medical School in Jerusalem. During the year they were there, Joshua was born, a matter Carol finds somewhat prophetic now that he has returned to the land of his birth as a rabbi. The two

older children, Jonathan and Carol, had a great time in Israel, where at the time much excavation was taking place. Their walks on the way home from school took them past excavations of Roman ruins, where they would stop and watch with fascination the progress being made. They both were intrigued with archeology, and as the testimony of other lives and civilizations were being discovered virtually before their eyes, Jonathan and Carol increasingly became interested in understanding the world. It was a pivotal year in both their lives. Their inquisitive natures led them to some of the “great” questions of life: Who are we? On whose shoulders do we stand? (personal communication).

During their teen years, Carol and Jonathan pursued interests in natural science, archeology, and native American peoples. As the older of the two, Carol first went on one of the several expeditions they would take during the summer vacations; Jonathan followed her lead. They spent their summers on Prairie Trek expeditions in the “four corners”: New Mexico, Arizona, Colorado, and Utah. These expeditions provided opportunities to participate in digs and excavations and to go biking, camping, and exploring, all activities that they both loved. The camp they attended presented a “Best Camper” award each year, and Jonathan won it, along with the prize of a silver belt buckle that he proudly wore for many years. The time spent in Santa Fe, New Mexico, opened a new world—and a new interest: the Southwest. Jonathan particularly loved the area (the beauty and magnificence of the landscape) and throughout his life it was a place to which he would retire for recreation, rest, peace, and contemplation. His withdrawal to the Southwest served to nourish his sensitivity to nature and his love of the outdoors, counterpoints to his intellectual intensity, and to restore him at various times during his life. A photograph



Figure 2. The Mann Family at a family reunion in 1979. Jim and Ida Mann are surrounded by their children. (From left) Jeremy, Carol, Jonathan, and Joshua.



Figure 3. Passport picture of the children taken May 23, 1955 before the family went to Israel. (From left) Carol, Jeremy, and Jonathan. Joshua would be born in Israel in January 1956.

taken during one of his many hiking trips was developed by his sister after his death; it captures this love for nature and seems, even, as she noted, prophetic (Fig 4) (personal communication).

Two other influences in Jonathan's life were two books he read during his teen years. A voracious reader from early childhood, Jonathan came upon Hans Zinsser's *Rats, Lice, and History*³ when he was in high school. He read the book over and over, fascinated with the biological and historical data it contained. Another book that he encountered while in high school that had a life-long impact on his life was Albert Camus' *The Plague* (published originally as *La Peste*⁴). In it, the protagonist, Dr. Rieux, fights a war against a deadly disease, persevering despite overwhelming obstacles. Dr. Rieux's life and work became models for Jonathan, and the principles he learned from them often sustained him when he, too, encountered difficulties and found himself facing what appeared to be insurmountable barriers. Only when the battle required an approach that inherently violated his principles and integrity did Jonathan withdraw, and that battle was to come later in his life. He also had a terrific memory, and he stored passages from various sources (history, science, philosophy, fiction), using them in his life and quoting them in his own writings (personal communication).

After completing high school, Jonathan once again followed Carol's lead by going to Harvard. His sister recalls one incident that especially defines another of Jonathan's attributes—his determination. She relates that anything he put his mind to do, he accomplished, mustering the self-discipline and/or commitment need to achieve his goal. In this particular incident, he decided to run in the Boston marathon. He found a practical way to prepare for it: at the time, he was dating a young woman who lived 9 miles away, so he simply decided to run to and from her house, thereby accomplishing the two feats of seeing his girlfriend and, simultaneously, preparing for the marathon. This anecdote serves as an early example of the influence that Dr. Rieux's

determination in *The Plague* had upon Jonathan. In his junior year, Jonathan went to Paris to study political science. He spent a year there, where he met a bright young woman named Marie-Paule Bondat. When he returned to the States, Marie-Paule accompanied him. A year later (1969), Jonathan received his Bachelor of Arts degree from Harvard College, and he and Marie-Paule were married. They later had three children: twins, Naomi and Lydia, and Aaron (Fig 5)⁵ (personal communication).

In 1974, Mann received a medical degree from the Washington University School of Medicine. He had entered medical school with the intention of becoming an ophthalmologist. However, he soon became interested in public health, and after graduating, he and Marie-Paule went to New Mexico, where he worked as an epidemiologist for the Centers for Disease Control and Prevention (CDC). He was pleased to be back in the area that had brought so much excitement to his life during his high school years, and he and Marie-Paule took advantage of the opportunities to go hiking and exploring. He and Marie-Paule shared many interests that they were able to pursue while in New Mexico. He later moved to the state's public health department, where he stayed for 10 years and was credited with helping to control the bubonic plague.⁶

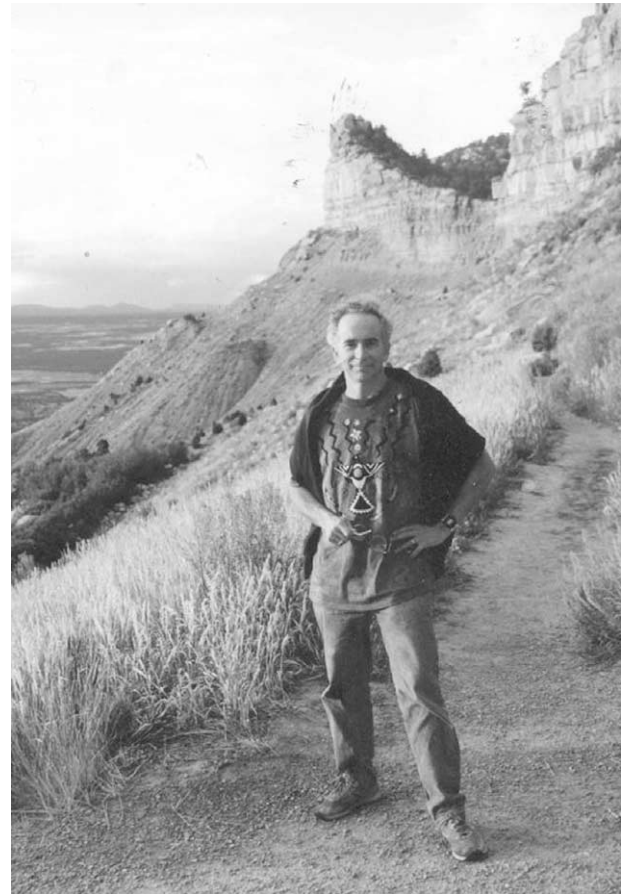


Figure 4. Jonathan hiking in the Southwest, 1998.



Figure 5. Jonathan and his three children. (From left) Naomi, Aaron, and Lydia.

AIDS Epidemic—the Beginnings

In 1981, AIDS first appeared in the United States in a select population, homosexual men in San Francisco, California. The constellation of diseases, which included Kaposi sarcoma, *Pneumocystis carinii* pneumonia, and thrush, soon thereafter was identified in New York, and the case count quickly grew from a few hundred to thousands.⁷

By 1983, the CDC had compiled sufficient information about AIDS to declare that it was caused by a previously unknown agent and that it has only certain routes of transmission. By that time, however, the preponderance of cases among homosexual men had resulted in numerous irrational reactions, from silence from political and spiritual leaders to panicked fear among the populace to “thunderous admonitions” from some clergy that it was “God’s punishment for sin.”⁸ Reports also were coming from Europe that African immigrants were seeking medical attention for a disease that appeared to be similar to AIDS and that it was afflicting men and women alike.^{5,8}

On October 18, 1983, a small team of foreign scientists landed in Kinshasa, Zaire (now Republic of Congo). At the Mama Yemo Hospital, a 2,000-bed hospital named for the president’s mother, people were dying mysteriously. Bila Kapita, Chief of Internal Medicine, was wondering if what he was observing in Zaire might be the same disease that had been occurring in San Francisco and New York. A team of specialists sent from the CDC and National Institutes of Health (NIH) was led by Peter Piot, a 34-year-old Belgian who had co-discovered the Ebola virus. Piot is quoted as noting that “In 1976, there were hardly any young adults there except for traffic accidents in orthopedic wards. Suddenly—boom—I walked in and saw all these young men and women, emaciated, dying.”⁹

In response, James Curran, director of the CDC AIDS Program, recruited Mann, then chief epidemiologist and assistant director of the Health Department of the State of New Mexico, to assume directorship of an international AIDS research group that would work in Zaire.⁸ Mann was the ideal choice because of his expertise in epidemiology and the French language. Mann accepted the offer, and he

and Marie-Paule and the children left for Zaire. They spent 2 years there, where he established Project SIDA, a Zairian, American, and Belgian AIDS collaborative research effort.^{5,8}

WHO Global Programme on AIDS

Mann had uncovered the existence of a vast epidemic of AIDS in sub-Saharan Africa. With this discovery and his commitment to the war against this new disease, Mann was becoming a leading figure among scientists and human rights advocates, who increasingly were becoming aware of the epidemic proportions of the disease. At the time, AIDS still was regarded as an ailment of the promiscuous few. In fact, Halfdan Mahler, the organization’s Danish-born Director General, did not consider AIDS nearly as important as many other diseases. He soon changed his mind after Fakhry Assaad, his chief of infectious diseases, introduced him to Mann. In a two-hour conversation, Mahler listened as Mann explained that AIDS was not merely another infectious disease. Mann described how the disease seemed to flourish in conditions of poverty, oppression, urban migration and social violence; that it could not be solved as a biomedical problem; that women refused to ask their husbands to use condoms, fearing that they would be beaten; and that street children and widows without rights of inheritance could not reduce the number of their sexual partners if they depended on sex for their subsistence. Mahler later testified to being completely transformed by Mann’s analysis.

On November 20, 1986, just three weeks after their meeting, Mahler accompanied Mann to a news conference in New York, where the newly converted advocate declared at the UN headquarters:

*We stand nakedly in front of a pandemic as mortal as any pandemic there has ever been. In the same spirit that WHO addressed smallpox eradication, WHO will dedicate its energy, commitment and creativity to the even more urgent, difficult and complex task of global AIDS prevention and control.*⁹

When they returned to Geneva, Mahler offered Mann the position of first Director of the WHO’s Global Programme on AIDS (GPA),⁸ bypassing WHO’s chain-of-command.⁹ The choice of a United States citizen for such a high (and likely to be controversial) position at a UN agency was an unusual move, but Mann’s hands-on experience in Zaire, his outstanding intellectual gifts and training, and his perfect command of the French language, along with the heroic energy he displayed, all were needed for the challenge of capturing the attention of the international community and of tackling the new and unpredictable problems that lay ahead.

The task facing Mann was a daunting one. As Laurie Garrett, *Newsday* reporter and author of *The Coming Plague* noted, by 1987, 81 countries had passed laws against people with HIV or risk groups, usually homosexual males and prostitutes. A federal judge in Germany had declared that tattooing and quarantining people with the virus might be

necessary; Cuba already was quarantining patients with AIDS, and some Muslim states were placing “promiscuous” individuals in jails. At the other extreme, Chinese officials denied that men who engaged in promiscuous activities, drug users, or prostitutes even existed in the People’s Republic. In the United States, Secretary of Education William Bennett fought Surgeon General C. Everett Koop’s plans for providing frank education about prevention of HIV, favoring instead compulsory testing of all hospital patients, marriage license applicants, and immigrants. Into this moral and ethical fray entered Jonathan Mann with his insistence on logical and compassionate concern for each individual that led “public health authorities to perhaps their finest hour.”¹⁰

Progress in War Against AIDS

Mann headed the WHO’s AIDS program until 1990. During his tenure, tremendous strides were made in the war against AIDS. Daniel Tarantola, who joined the endeavor at the beginning, recalled later that “the program was himself [Mann], a secretary and one typewriter.” Two years later, Mann had managed to build a budget of almost \$100 million.¹

Mann brought to the project a unique philosophy based on his knowledge of the misguided early responses to AIDS in the United States and Europe. His confrontations with government officials in numerous countries convinced Mann that controlling an epidemic rationally was impossible apart from valuing human lives equally. If certain groups were considered dispensable, if certain ubiquitous human behaviors were condemned, and if the right to respect and dignity were denied, then disease, especially one of epidemic proportions, not only continues but is aided, Mann argued. He called for respect for human dignity and social justice, insisting upon their necessity not only for economic development, but also for the protection of any population’s health.⁸

One of his first initiatives was the establishment of the Global Commission on AIDS. Composed of a mix of epidemiologists, scientists, and ethicists, it included Luc Montagnier of France and Robert Gallo of the United States, rivals in the claims for isolating the virus. Also on the commission were June Osborn, then Professor of Public Health at Michigan University and one of Mann’s closest friends, Richard Rector, a person living with HIV/AIDS (Mann insisted on his presence on the commission), and a “token lawyer,” The Honorable Justice Michael Kirby, AC, CMG, Justice of the High Court of Australia.⁵ Kirby later commented that he would:

never forget the energy with which Jonathan Mann threw himself into the struggle—surely beyond the capacities of any single human being. Or his remarkable mixture of cold logic and passionate call to arms. Or his clinical mobilisation [sic] of hard-won epidemiological experience leavened by demands for respect for human rights which seemed to resonate deeply within him and to take equal strength from his American and his Jewish identification. Or his brilliant skill in answering tricky questions, alternatively in English and French, paying courtesy to the interlocutors in each of the principal languages

*of the United Nations. It was a dazzling display of high intelligence, skilled professionalism and absolute dedication.*⁵

Mann’s determination to respect each individual, his dogged moral conviction that effectively countered many governments’ denials of the existence of AIDS among their people, and his denouncement of inhumane policies inflicted upon people living with HIV led to the GPA’s being the first UN agency to devote extensive time and effort to working directly with nongovernmental community-based organizations. The result was that the GPA ultimately succeeded in uniting many countries against a common enemy, and numerous countries adopted policies based on sound public health and ethical purposes.⁸ Mann also managed to convene national ministers of health together in London, where almost 150 nations agreed to cooperate in a condom-based, compassionate strategy to slow the spread of AIDS.

The achievement of these goals did not come without considerable effort and outspoken dogmatism. At the 1988 AIDS conference in Stockholm, Mann took the Swedish government to task, in blunt terms, for proposing to detain patients with HIV/AIDS in a former mental home. He also insisted that the United States government drop its restrictions on people with HIV seeking to enter the country. His fired-up determination resulted in countless other individuals taking up the call, and his lessons generally were accepted in most Western countries. Unfortunately, that same intensity in approach, as well as his inability or refusal to play bureaucratic games, later proved to be devastating to both Mann and the AIDS program.

Conflict and Departure

When Halfdan Mahler suddenly retired as Director-General, he was succeeded by Dr. Hiroshi Nakajima of Japan, director of Pacific operations for WHO. Nakajima displayed a general displeasure with Mann’s privileged status that began to surface almost immediately after Mahler’s departure. A master at back-room maneuvering, Nakajima soon began to trim the support given to the AIDS program. Relying on reports from his secretariat, institutional rivals of the AIDS program, Nakajima accepted their assessments that Mann’s program was excessive for the tiny number of AIDS cases that could be proved. He decided to “normalize” the status of the special program by cutting resources and subjecting it to layers of unsympathetic management.⁹

Opposition to Nakajima’s program also surfaced. Early in Nakajima’s term at WHO, Albina du Boisrouvray, a French countess who auctioned off a Renoir and millions of dollars’ worth of jewelry at Sotheby’s to fund philanthropy against AIDS, traveled to Geneva to confront Nakajima. According to Boisrouvray, when she asked if he were not worried about AIDS, Nakajima retorted, “Ah, don’t talk to me about AIDS; I have malaria, which is a much bigger killer of people, on my hands.” Despite her appeal and the fact that AIDS was growing exponentially, whereas malaria was not, Nakajima was determined, according to a U.S. official who worked with him, to concentrate on the constituency politics of reelection—which meant providing money

to popular programs, not to ones that few nations wanted to acknowledge.

The first open conflict between Mann and Nakajima occurred before the first World AIDS Day summit of December 1, 1988. A week or so before the meeting, Mann obtained an advance transcript of an interview Nakajima had given to the French newspaper *Le Monde*, in which Nakajima implied that a balance was needed between the rights of patients with AIDS and the interests of society at large. Mann was appalled. He saw this attitude as being a precursor to the institution of all kinds of bans on immigration and employment of people with AIDS, which WHO experts said were driving the pandemic underground. Kathleen Kay, Mann's longtime deputy, later recalled that when Mann made urgent efforts to reach Nakajima, the new aides pointedly rebuffed him. Mann finally issued an ultimatum—if Nakajima's remarks were published, Mann would resign, and he would do so during his keynote address at the upcoming summit.

Although Nakajima, who could not afford to have such a spectacle, retracted his comments to *Le Monde* and Mann never mentioned the incident again, the stage was set for Nakajima's retaliation. Mann began to be excluded from meetings. The legal authority to spend his budget sat unsigned on Nakajima's desk, and his travel requests were either denied or granted too late to matter. The WHO AIDS program was being destroyed. Mann, who seldom if ever in his life had succumbed to pressure, disappointment, or obstacles, began to realize that he was fighting a battle that was beyond him: to persevere would require an approach that went against the grain of his moral and ethical standards.

Finally, on March 16, 1990, Mann took leave of the program. At the very hour that Nakajima was unveiling six ceremonial stamps for the fight against AIDS, Mann called together his staff just across the hall and informed them that he was quitting. In his letter of resignation to Nakajima, Mann cited "great variance between our positions on a series of issues which I consider critical for the global AIDS strategy."

The next day, the *New York Times* quoted officials as saying that Dr. Nakajima wanted to de-emphasize AIDS to focus more on other diseases and that he had vetoed Dr. Mann's staff appointments, had transferred staff out of the AIDS program, had delayed making critical decisions for months, and had prevented Dr. Mann from attending an AIDS conference he had organized in Eastern Europe.¹² The article quoted Dr. June Osborn, chair of the National Commission of AIDS, as saying that "From July 1986, when he didn't even have an office, to more than 150 useable, constructive agreements on such a sensitive issue is the most brilliant job of international creative work that I know of." (quoted in *New York Times*, March 17, 1990)¹²

On March 20, the *Los Angeles Times* editorial called it a "regrettable resignation", noting that

The resignation of Dr. Jonathan Mann as head of the World Health Organization's AIDS program is a serious blow to the global campaign to contain the AIDS epidemic. It inevitably raises questions

about the leadership of Dr. Hiroshi Nakajima, WHO director general since 1988 . . . Much of the success [of the program] was attributed to the energy and flexibility of Mann's highly personal leadership. He won international respect from public-health professionals and the confidence of leaders of nations beset by the spreading disease. . . . In all likelihood, it was Mann's imaginative personal leadership of the huge and independently funded program that was the source of conflict with the new director general. Nakajima has a reputation for strong personal management not distinguished by delegation of authority.¹¹

Mann's intention was to stay until June, but when *Le Monde* published on March 23 an interview in which Mann accused Nakajima of obstructing the program to the point that he "paralyzed our efforts completely," Mann was ordered to clear his desk by the end of the day. Kay quit the program with Mann and later recalled that those last years were "soul-destroying . . . just dreadful. All those years lost! It was like a slow torture."

AIDS Treatment News not only related the information contained in the *New York Times* report, but also noted that the GPA raised most of its \$109 million annual budget itself, instead of taking money from WHO, and that the fundraising had given it more autonomy than other programs within the health agency. It quoted Dr. June Osborn, who called Mann's resignation "a world tragedy."¹²

The years at the UN also took their toll on Mann's personal life. His marriage of more than 20 years dissolved after his return to the United States.

Mann's Perseverance Despite Difficulties

Despite the personal and professional pressures and disappointments, Mann continued his battle against AIDS and against prejudice against those individuals who had contracted the disease. In 1991, he founded Doctors of the World, feeling that a void existed among the health and human rights organizations in the United States. His desire was that a unique organization be formed to create sustainable programs that could promote and protect health and human rights in the United States and abroad.¹³

Two years later, in 1993, Mann was appointed the first Francois-Xavier Bagnoud Professor of Health and Human Rights and founding Director of the Francois-Xavier Bagnoud Center for Health and Human Rights at Harvard University.¹³ This group publishes an international journal, *Health and Human Rights Journal*, which he founded.^{5,8} He increasingly waged battle against new injustices, among them the fact that new drugs that were available in developed countries were not available to 90 percent of the people living with HIV in poorer countries. A team of contributors were assembled who addressed the successive assessments of the state of the epidemic, called AIDS in the World. It was a thinly-disguised statement against Nakajima's at WHO, but it failed to maintain Mann's international influence, which waned after he was removed from the WHO global network.⁵ Nonetheless, Mann also organized the world's first conferences on the subject at Harvard University in 1994 and 1996.⁸

In 1995, Mann presented an "International Declaration of Human Rights," in which he argued that a "deeper

understanding of the nature and fundamental cause of vulnerability to HIV/AIDS," one that took into consideration that HIV can enter a community or country in many ways, was required. He pointed out that regardless of the source, the disease has one common feature: eventually it poses its greatest risk among people who before it arrived "were marginalized, stigmatized and discriminated against." He also championed a second insight regarding human rights and HIV prevention: that recommendations for prevention such as reducing the number of sexual partners fails in the real world because often "vulnerability cannot be addressed through efforts to influence individual behavior, without dealing with the societal context." The capstone of his argument was that "adding a human rights dimension to HIV prevention work will have major advantages as well as creating some difficulties" but "real progress towards uprooting the pandemic will depend upon further development and application of an optimal combination of risk reduction, vulnerability reduction and human rights realization, in strategies best suited to each specific setting."¹⁴

Remarriage and New-found Personal Happiness

In 1995, Mann met Mary Lou Clements, a highly respected researcher in her own right, while working on an expert committee that was developing new strategies to fight disease. They were married in 1996. At the time of her marriage to Jonathan Mann, Mary Lou Clements held joint appointments in the Department of Molecular Microbiology and Immunology in the School of Public Health and in the Department of Medicine, Division of Infectious Diseases, in the School of Medicine at Johns Hopkins. She served on active medical staffs at Johns Hopkins Hospital and Bayview Medical Center. Formerly, she had served as head of the Division of Vaccine Sciences at Johns Hopkins.²

Reared in Longview, Texas, she had received her undergraduate degree from Texas Tech University and her medical degree from the University of Texas Southwestern Medical School (1972). In 1975, she was awarded a D.T.M.H. from the University of London, London School of Hygiene and Public Health.² In 1997, she joined Mann at Harvard as visiting professor in the Department of Cancer Biology at Harvard School of Public Health. He, in turn, accepted an appointment as visiting professor in the Department of Health Policy and Management in the Johns Hopkins School of Public Health.²

By the following year, their intellectual and emotional closeness had translated into their adopting each other's professional passions: Clements had begun to share her husband's commitment to human rights, and he had begun to champion her contention that the best strategy for rapidly developing an anti-HIV vaccine was to conduct clinical trials with currently available vaccine candidates. The issue was highly controversial, and when Mann, speaking before the President's Advisory Council on AIDS suggested that the NIH violated human rights by not proceeding to large-scale clinical trials with available AIDS vaccines, he was sharply rebuked by many scientists and physicians. In Jan-

uary of that year, he moved to be near his wife, accepting the Directorship of the newly formed School of Public Health at Allegheny University.⁸

Untimely Deaths

On September 2, 1998 the Manns were headed to a UN AIDS vaccine conference in Geneva when the Swissair jetliner on which they were traveling crashed, killing everyone aboard. These two imminent researchers, whose lives together had been short but full, according to friends, left a tremendous void in the scientific community. At the time of her death, Clements-Mann was principle investigator for several NIAID research studies; she had long been the head of the Division of Vaccine Sciences in the Department of International Health at the School of Public Health. Jonathan Mann was Dean of the School of Public Health at Allegheny University of the Health Sciences, Director of the Francois-Xavier Bagnoud Center for Health and Human Rights at Harvard, Director of the International AIDS Center, Harvard AIDS Institute, and Chair of the Global AIDS Policy Coalition.

Mann was survived by his mother Ida Mann of Newton, Massachusetts; his three children from his marriage to Marie-Paule, Naomi, of Washington, DC, her twin sister Lydia of Boston, Massachusetts, and Aaron, a Peace Corps volunteer in Africa; his sister and two brothers.^{15,16}

Only a month before their deaths, Mann and his wife had gathered with other members of his family to celebrate his mother's 80th birthday. He and Carol took the opportunity to have another of their long walks together. He shared with Carol some of the pain he had experienced at WHO, along with the happiness he was enjoying with Mary Lou. Perhaps prophetically, he spoke of his desire to be remembered not so much for his intellectual and scientific accomplishments as for being a really good human being—his work, regardless of its importance, was secondary to his hope that, despite the foibles we all have, he would be remembered for his integrity and for his concern for others (Fig 6). The immediate responses to his death that came from around the world certainly testify to his desire being fulfilled:

World leaders in the war against AIDS are in shock over the loss of two of their most trusted and admired colleague.

*CNN medical correspondent Dan Rutz,
shortly after receiving news of the crash*

His death is a tragic loss for this University and the world at large. In addition to being a recognized figure in the world of public health, Dr. Mann was an incredibly decent and caring human being.

*Dorothy Brown, President
Allegheny University*

Mary Lou Clements-Mann and Jonathan Mann were distinguished and celebrated members of the faculty... Their loss will be felt deeply by all of us here and by the thousands, if not millions, of people who live better lives today because of their work.

*Alfred Sommer, Dean of the School of Public Health
Johns Hopkins University*



Figure 6. Jonathan Mann in New Mexico on vacation with Mary Lou just prior to September 1998. “The photo was from a role of film developed after the plane crash . . . a prophetic photograph,”—Carol Mann.

Other individuals also have fond memories of Mann:

There is no doubt that Jonathan Mann made a difference to the world. Without his leadership the world's response to the HIV/AIDS pandemic may have been very different. At a time of confusion and denial about the nature and extent of HIV/AIDS, Jonathan forged a way forward and mobilized the highest political support backed by commitment of people and resources.

*Kathleen Kay, Honoring Visiting Fellow
School of Community Medicine, UNSW*

The last time I saw [Mann] was in San Francisco, a year ago, at a conference which I was attending in connection with my new interest in the ethics of the Human Genome Project. All the old energies were there. But I felt angry that such a talented person was teaching classes and not, as he should be, teaching the world. Perhaps, with a new Director-General in WHO in Geneva, if fate had been kinder. Jonathan Mann's star would have risen again . . . let there be no doubt that Jonathan Mann left an enormous impact on our efforts to confront HIV with honesty, integrity and effectiveness. As Bill Bowtell, adviser to the Australian Health Minister, Dr. Neal Blewett when AIDS came along and when Jonathan was in his zenith, said, “Mann's legacy will include the many millions of people who, thanks in large part to his influence on public health policies, will not be infected by the virus.” Amen.

*The Honorable Justice Michael Kirby AC CMG
Justice of the High Court of Australia*

In the world with millions of HIV infections and several more in the pipeline, there are a handful of visionaries furthering the cause to prevent discrimination and human rights violations of people with HIV/AIDS by creating an atmosphere of honour and dignity for them. [Mann's] death has created a lacuna; which may not be fulfilled in [the] near future. He was an ambassador of good will, a guiding force for many and was acclaimed for his penchant for human rights. He was a ray of hope by people with HIV/AIDS.

Dr. I. S. Gilada, Hon. Secretary, IHO

On his way to Geneva, Mann had sent postcards to family members, a common practice. Carol received one after the plane crashed. It bore a water color painting reminiscent of his love of the Southwest—he spoke of a family outing and of having eaten chili (one of his favorite foods). His message, coupled with the art work, captured for her the essence of her younger brother: family, outdoors, watercolors—a lost, but not forgotten, thread in the tapestry of art, spirituality, humanitarian concerns, family, and generosity woven by the entire family (personal communication).

Acknowledgments

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