

DOCUMENTING PANDEMICS

Review of the documentary series:

Pandemic:
How to Prevent an Outbreak (2020),
Season 1 (6 episodes), Netflix

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The American documentary series released on 22 January, 2020 on Netflix in the middle of the COVID-19 pandemic, portrays our collective attempt to contain and eradicate the lethal viruses that caused global medical emergencies. The timely release of the first season in the middle of the current crisis adds a new context to the documentary. The series in its first season (which has six episodes) tracks a wide range of efforts being made internationally at various fronts, from the attempt to develop a universal flu vaccine, to the treatment of deadly influenzas in hospitals in Rajasthan and Oklahoma, to the World Health Organisation's endeavour to contain an Ebola outbreak in the Democratic Republic of Congo. As an attempt to present the diversity of scientific activities involved in managing the risks of recurrent virus outbreaks, the documentary has to be highly appreciated.

Pandemic: How to Prevent an Outbreak (hereafter, Pandemic) develops its narrative through four discrete fields of contemporary bioscience. The first among these is the attempt of a private team of researchers to develop a broad spectrum flu vaccine to immunize human beings against a wide range of deadly virus strains which have been attacking humans in the last hundred years. The documentary follows the animal trials of the vaccine on pigs in Guatemala by Dr. Jacob Glanville and Sarah Ives at the Distributed Bio. The second scenario is about tracking pathogens in birds and animals, the major source of lethal pathogens. Viruses keep mutating in birds and bats, and these new strains have the potential to infect human beings and trigger global outbreaks. Therefore,

identifying them in wild and domestic animals as well as monitoring the migratory birds well in advance is an important activity to detect and prevent such outbreaks. Several such 'bio-surveillance' activities are closely followed in the series, for instance, the tests being conducted in poultry farms in Philippines under the watch of Dr. Dennis Carroll, the Director of the USAID's Emerging Threats Unit and the surveillance efforts of Dr. Ghazi Kayali of Human Link, a Lebanese research NGO that monitors animal-human transition of new virus strains. Thirdly, attempts to create a regulatory science apparatus to prevent the flu outbreaks are presented mainly through the mundane work of Dr. Syria Madad, Senior Director of the Special Pathogen Programme of New York City Health + Hospitals. The other cases being described are the management of the Ebola contagion in the Democratic Republic of Congo under the leadership of Dr. Michel Yao (World Health Organisation), immunisation of illegal immigrant children in the Arizona State, and the public debate on making flu vaccination mandatory in the USA. Using two case studies, the documentary finally explores patient care at hospitals. The first case presented is from Rajasthan, India, which was the hotspot of H1N1 contagion (Swine Flu) in 2015. The medical treatment of patients by Dr. Dinesh Vijay and his team at the Santokba Durlabhji Memorial Hospital (SDMH), Jaipur is meticulously followed. Similarly, Dr. Holly Goracke's work at a single-doctor hospital (Jefferson County Hospital, Oklahoma, USA), one among the 700 hospitals facing the threat of closing down due to fund cuts, is presented as the second case to invite our attention to the collapse of the public health system in the USA.

The series presents the technical details of these cases of medical crisis management interlaced with interesting peeks into the protagonists' personal lives by presenting their struggles, failures and frustrations, making it highly appealing to the viewers. While this strategy is better than a dry narration of the technical aspects of science, it still amounts to a 'revised deficit model' in popular communication of science, wherein science is presented with cultural veneer to make it more humane and hence acceptable to the viewer-public. Quality time is spent in *Pandemic* to depict Dr. Saira Madad's skilful juggling of her professional and domestic life. A practicing Muslim and an expecting mother with two kids, she finds time to participate in community life in the middle of her hectic schedule. On the contrary, Dr. Holly Goracke, the physician who single-handedly manages the county hospital, eventually crumbles under the stress and quits the job to spend

more time with her family, despite being professionally committed. We do not get such a detailed perspective of the personal life of the male characters except Dr. Dinesh Vijay from Jaipur, whose wife works only part time as a physician to give priority to family.

What is interesting in this gendered portrayal of the professionals from the purview of Science Communication Studies is the discursive function of such a 'personal touch' flavouring the popular scientific narrative. This limited social situating of science helps deflect a deeper analysis of its socio-political embeddedness. There are only a few instances where we get a glimpse over the social tensions and political ambivalences regarding the professional management of contagions. There are passing references to scientific frauds performed by start-up companies which proclaim their capability to synthesize vaccines, the issue of hoarding of life-saving medicines by drug companies and provincial governments, and also instances of attacks on health workers by militant groups in Congo. There are only two issues explored in some detail, while being extremely careful in not lingering much on the socio-political aspects – the anti-vaccine movement and the withdrawal of state governments from financially supporting the rural hospitals in the US. The narrative choice to focus on individuals than events seriously curtails the documentary's potential to open up the issues in adequate techno-cultural complexity. The different scenarios of health crisis management presented by the docu-series could have been explored with greater nuances to break the conventional perspective that separates the technical from the social and political. However, *Pandemic* still stands apart as a serious endeavour to engage with the risk governance of virus outbreaks.

