

MONASH UNIVERSITY

MICHAEL KIRBY CENTRE FOR PUBLIC HEALTH & HUMAN RIGHTS

MELBOURNE, POSITIVE LIVING CENTRE

SUNDAY 29 AUGUST 2010

LAUNCH OF MICHAEL KIRBY CENTRE

The Hon. Michael Kirby AC CMG

TRIBUTES WITH GRATITUDE

I begin with a sincere acknowledgement of the indigenous custodians of the land.

And with special words of praise and thanks to the Executive Director of UNAIDS, Michel Sidibé, who has performed the launch of the Michael Kirby Centre for Public Health and Human Rights (MKC). We are fortunate that he has added this function to the many that he will perform whilst in Melbourne for the United Nations Conference.

Just imagine the burdens that Michel Sidibé carries every day of his life. He can never put HIV out of his mind. During every waking hour; when he enters yet another airport lounge; when he meets another group of PLWHAs; when he retires at night. HIV is always on his mind. It is a personal responsibility that he has accepted to defend the human right to the best attainable health of people living with HIV and those at risk. In a sense, the burden that he carries is intolerable and beyond human imagining. By his efforts and direction, he must help to protect and safeguard the lives of millions of people in every continent. Most of

them will never know him as we are privileged to do. Yet, they are reliant on him and on his ceaseless toil.

I pay my respects to Professors Bebe Loff and Stephen Cordner and to Cheryl Overs and others in the MKC team. I thank them for deciding to associate their Centre with my name. It is natural for an Australian to be sceptical and hesitant about such honours. Since convict days, we have been a land that cuts down its tall poppies. Yet I am proud to be associated with the endeavours of the MKC. I commit myself to a close, ongoing relationship. For nearly 30 years, I have had the privilege of being involved in a practical demonstration of the link between public health and human rights. This will be a new and vivid connection.

I pay my respects to the people living with HIV and AIDS, here in our midst. To those who are memorialised in the precious Australian AIDS quilts that decorate the walls of this beautiful public space. This is the second time I have been here. The first was on World AIDS Day, 2009. I am grateful to the Positive Living Centre for its agreement to offer this place for the launch of the MKC. We could not have a more appropriate venue. Although HIV/AIDS is not the whole of the inter-relationship between public health and human rights, it has been the inspiration that has provided insight into the link with the MKC will explore, describe and advance.

I pay respects to Monash University, to its Deputy Vice-Chancellor, Professor Adam Shoemaker, and to the senior officers of the University who supported the moves to endorse my name for the Centre. I have been associated with Monash University since its earliest days. In 1963-4, I participated in a meeting of the National Union of Australian

University Students that took place on the Clayton campus, then bare paddocks. Yet, even then, the Monash students were stirrers and shakers. I hope that Monash University will never lose its edge of critical engagement with the issues of society.

Finally, I offer respects to all who have come to this launch. To my former colleagues in the judiciary of our country. To experts in epidemiology. To students at the Burnet Institute and other fraternal organisations. To the lawyers and leaders of other branches of the University. And to family and friends. If we look around at the quilts, we are reminded of why we are here. We are reminded of the pain and fear that HIV has brought in its wake. Especially in the early days. For us, HIV is not a matter of statistics. It is a challenge effecting the human dignity and universal rights of precious people

GREAT LEADERS IN THE STRUGGLE

I can remember the first time I ever heard about HIV. It was in about 1984. Leaving a gay venue, I picked up an early edition of the *Sydney Star Observer*. It contained a puzzling story from the United States. The Centers for Disease Control had identified a strange new medical condition. At first, it was thought to be associated with the use of amyl nitrate (poppers). As this was popular amongst young gay men, and as the early manifestations had hit that community in North America, it was a development of great concern. Because I never myself used poppers, I can recall feeling strangely self-satisfied and immune from HIV. Yet, as we were all to find out all too quickly, none of us was entirely immune from its dangers.

At that moment in history, the world experienced blessed good fortune. The Director-General of the World Health Organisation (WHO), Dr. Halfdan Mahler, visited Congo. A young American epidemiologist, Jonathan Mann, told him of a strange new condition called 'AIDS'. This meeting led to Mahler calling Mann back to Geneva to head up the original Global Programme on AIDS (GPA). Fortunate was the international community that these two brilliant civil servants responded to the urgency of HIV. Jonathan Mann, in particular, was possessed of that rarest quality, 'charisma'. He became a global advocate for action. And he was first whom I ever heard to propound the intimate link between public health and human rights.

Before HIV came along, public health was not naturally viewed as associated with human rights. In fact, human rights tended to be thrown out the window when a serious epidemic broke out. From biblical times, the infected were sent outside the city walls. The strict laws of quarantine were put in place. Effectively, those who were ill lost most of their human rights. But when HIV struck, the infected were already on every continent. There was not enough barbed wire to round them up. A new strategy was needed. This required the link that Jonathan Mann propounded.

It also required recognition of a paradox. Acceptance that, to alter human behaviour, society would have to protect the human rights of the infected and vulnerable. I can recall, at the first meeting of the WHO Global Commission on AIDS, to which Jonathan Mann invited me, how the great scientists Luc Montagnier and Robert Gallo predicted that the world would have a vaccine within a decade and a cure within 20 years. Today, we do not have an effective vaccine nor a total cure. But one

day, the genius of human intelligence will find these remedies. Meantime, the Jonathan Mann paradox remains as true as it was when first propounded. Paradoxically, the best way to prevent the spread of HIV is by protecting the most vulnerable. This means men who have sex with men; injecting drug users; sex workers; refugees and prisoners; and women. Jonathan Mann always taught that HIV was a women's health issue.

As I have said, HIV/AIDS is not the entirety of public health and human rights. But its necessities rapidly escalated our understanding of a linkage which had earlier been denied. It is that linkage which the MKC will seek to explore, chronicle and further.

Jonathan Mann was succeeded with the establishment of UNAIDS and the appointment of its first director, Peter Piot. A scientist of world renown, Peter Piot piloted UNAIDS through a period of great challenge as therapies became available but at enormous cost. Now Michel Sidibé is the third in this honourable succession. He faces a time of new challenges. Especially HIV weariness; the global financial crisis; and the necessity to re-direct energy to prevention of further spread of the virus. These are enormous challenges. Yet never have the stars of fortune been in more propitious alignment. The Secretary-General of the United Nations (Ban Ki-moon), the Administrator of the UNDP (Helen Clark), the High Commissioner for Human Rights (Navi Pillay), the head of UNFPA (Thoraya Ahmed Obaid) and Michel Sidibé all propound the same message. It is a message that rests on the proposition that human rights and public health are allies now, not enemies.

A BRIGHT STAR

And so, on this cold night in Melbourne, a new enterprise is launched. It will house scholars and students, medical experts, lawyers and philosophers, public health specialists and representatives of community organisations.

I am glad that Michel Sidibé has projected a possible *Memorandum of Understanding* between UNAIDS and the MKC. I hope that this can be signed without undue delay. The support of UNAIDS will be a great encouragement. We, in Australia, have learned important lessons about the link between public health and human rights. In a week of great political uncertainty in our country, it is as well that we remember the genius of our democracy. And the leadership that was performed by fine politicians: Neal Blewett (the Labor Minister for Health in the Hawke Government) and Peter Baume (the Coalition Spokesman on Health at that time). It was their perception of the link that led to brave initiatives in Australia. These led, in turn, to the reduction of infections and to community education that has helped to keep our sero-conversions down. Despite all the other differences and disagreements we have had in politics in Australia in the intervening years, we have basically been united over AIDS. I hope it will always be so because HIV is above politics. It is a test for humanity.

I pay respects to the many who are present who have come on the journey with the road map that Jonathan Mann, Peter Piot and Michel Sidibé have given us. Now we must extrapolate. We must broaden the focus and establish the plentiful links of public health and human rights. This is a new paradigm for public health. It will shake and disturb the orthodox in law, medicine and other disciplines. Challenging outmoded

orthodoxy is the role of university and specifically of Monash University and the MKC.

We should hasten to secure a memorandum of understanding with UNAIDS and with other global and local sponsors. We should resolve that this Centre will truly become a centre of excellence. That it will become a bright star in the southern hemisphere. That it will draw on Australia's experience, for the benefit of countries in our region. That it will act co-operatively with the leading United Nations agencies: UNAIDS, United Nations Development Programme, WHO, UNFPA. That it will foster an attitude of thinking outside the square. And that it will achieve world renown for the excellence of its investigations, research, its scholarship and publications. Nothing less will be good enough for this Centre. A shining star it will become. We must ensure that it is so. Not ignorance, but knowledge. Not prejudice, but empiricism. Not dogma, but science.
