

and their capacity for future autonomy respected” (pp. 368–69).

While it is likely that *A Magna Carta for Children?* will become required reading for anyone interested in children’s rights, it really should be read by a much broader audience—at a minimum, by anyone interested in or concerned about human rights. Because, in many respects, children’s rights are foundational to human rights. Conversely, resistance to genuine recognition and implementation of children’s rights is antithetical to the broader human rights idea. After all, if rights are inherent to all human beings, they exist from birth. Not accepting that children have rights equates to saying rights are not inherent but are granted by governments when individuals reach adulthood. Dependent on government largesse is exactly what rights are *not* in theory and should *never* be in practice. Thus, an understanding of, and focus on, children’s rights is critical to any effort to advance human rights more broadly.

Following the January 6, 2021 insurrection in the United States, some commentators opined that the U.S. Constitution does not so much guarantee democracy as it depends on it. Children’s rights law is

similar. In the end, it does not so much guarantee that adults will respect the rights of young people as it depends on adults accepting that children have rights and acting to help children secure those rights. The CRC and other children’s rights law—whether international, national, or local—are important steps toward the realization of children’s rights. But as Freeman explains, “Law can only achieve so much. . . . [R]ights require remedies, and remedies require the injection of resources. Much from which children suffer, such as a degraded environment, for example, can only be put right by a world committed to children and ultimately to humane world governance” (p. 298). In this regard, children’s rights might be the ultimate test not just of the human rights idea but also of who we are as a society.

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New Pandemics, Old Politics: Two Hundred Years of War on Disease and Its Alternatives, Alex de Waal (Cambridge, U.K.: Polity, 2021), 284 pp., cloth \$64.95, paperback \$22.95, eBook \$14.00.

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Written for a general audience, Alex de Waal’s *New Pandemics, Old Politics* explores why in the twenty-first century

responses to infectious disease outbreaks and pandemics continue to be guided by an outdated script. This script,

characterized by martial and biomedical responses, has its roots in the nineteenth century and is ultimately unsuccessful at tackling the social and environmental root causes of infectious disease outbreaks. De Waal argues for a more democratic approach to infectious disease outbreaks, one that takes more seriously the social and environmental root causes of pandemics. Although this argument is not really new, the book stands out for its careful historical analysis of how this age-old pandemic script emerged—and why it continues to dominate pandemic preparedness strategies today. As such, the book is highly relevant and contributes to the urgent calls by global health experts to rethink pandemic preparedness strategies in the wake of COVID-19.

De Waal presents and compares the health responses to some of the defining infectious disease outbreaks and pandemics in the nineteenth and twentieth centuries, such as the cholera outbreaks in nineteenth-century Europe, the global influenza pandemic of 1918–1919, and the global HIV/AIDS pandemic in the late twentieth century. De Waal uses these examples to illustrate how a martial and biomedical script has shaped our thinking of pandemics and pandemic preparedness from the nineteenth century to the present. He shows that diseases are not only biomedical phenomena but also social constructs. Our understanding of diseases is shaped and reshaped by the political, socioeconomic, and technological developments of a given period. The development of our scientific understanding of infectious diseases is embedded in a (geo)political context, and scientific discoveries and health responses are interpreted through this context.

Chapter 2 focuses on the frequent cholera outbreaks in nineteenth-century Europe.

Here, de Waal compellingly illustrates that the emergence of a martial and biomedical response to cholera was facilitated by a toxic political environment, one wedded to militarization, national superiority, empire, colonialism, and war. During this period, medical discoveries were weaponized and became part of national narratives about the superiority of one nation over another. This environment considerably favored the rise of germ theory—the biomedical theory that identifies pathogens (viruses, bacteria, fungi, and so on) as responsible for the spread of infectious diseases—as the principal explanation of infectious diseases. The emergence of the martial and biomedical script was facilitated by the discovery of the cholera bacterium by Robert Koch, one of the early advocates of germ theory. However, this discovery sidelined other well-established, and more common, understandings of infectious diseases that emphasized the role of social determinants and environmental factors, such as inequality, poverty, poor hygiene, and poor sanitation. Instead, germ theory reduced the understanding of infectious diseases to the transmission of a pathogen, which needed to be defeated in a warlike manner. The new approach ignored the decisive role played by social and environmental factors and thus failed to tackle the root causes of infectious disease outbreaks. Ever since, the dominant approaches to infectious disease outbreaks have been principally shaped by germ theory.

Chapter 3 looks at the spread of the global influenza pandemic of 1918–1919 in the extremely militaristic environment of the First World War. An understanding of this pandemic as a social, rather than biomedical, phenomenon can explain why the influenza strain responsible for that pandemic was so aggressive. While the war being waged was not against the

microorganism, the influenza virus—and particularly its aggressive virus strain—was certainly a product of the First World War. During the war, soldiers were sent all over the world, often crammed into small spaces on ships and trains as they travelled across continents and countries, which both spread the virus and provided a favorable environment for a highly aggressive virus strain to evolve.

De Waal's account of the AIDS pandemic illustrates how the martial and biomedical script was challenged by the global AIDS movement through social activism, national and global campaigns, and rights-based approaches. Drawing on his deep knowledge of African politics, de Waal focuses on the role of European colonialism in Africa in the emergence and spread of HIV in chapter 4. While the chapter emphasizes the role of socioeconomic, political, and environmental factors in the emergence of HIV/AIDS in Africa, it loses sight of another relevant point that would have connected to a crucial aspect of the book's overall argument; namely, that responses to health crises are significantly shaped by the prevailing political and socioeconomic context. Just as the responses to Europe's cholera crises in the nineteenth century were shaped by the prevailing political mood in Europe (as laid out in chapter 2), so, too, was the response to HIV/AIDS shaped by the changing international environment in the 1990s after the end of the Cold War. De Waal rightly credits the global AIDS movement both with avoiding the militarization of the disease and with using AIDS as a means to implement social reform in many countries. At the same time, the author fails to discuss the larger structural transformations of the global system that took place in the 1990s, making the emergence of the

AIDS movement's rights-based approach possible. The 1990s are symbolic of the emergence of strong social movements at the national, regional, and global levels, embedded in the redemocratization processes that occurred in many countries in the Global South after the Cold War and facilitated by the emergence of the Internet.

Chapter 5 recounts the public narrative that has formed since the 1990s—including through novels and films on infectious disease outbreaks and pandemics—regarding the preparations for a new major pandemic called “pandemic X.” The author concludes that the martial and biomedical script has dominated the public imagination about the arrival of a new major pandemic. And this public narrative shaped the real-world health responses to major outbreaks that occurred over the last twenty years, such as SARS in 2002–2003, the 2009 swine flu pandemic, and the 2014–2016 outbreak of Ebola in Western Africa. Thus, it is not surprising that the global response to COVID-19 has been dominated by this old script.

In the final chapter, de Waal raises the question of whether COVID-19 could become an “emancipatory catastrophe,” giving rise to a more democratic, inclusive, and holistic approach to pandemics, as was the case with HIV/AIDS. The jury is still out, but so far, this has not been the case. If not necessarily by a martial script, the pandemic response has been clearly dominated by a biomedical script, almost exclusively focused on vaccines and disease containment. As the biomedical script in the nineteenth century emerged with the help of major medical discoveries, in 2021 the biomedical response to COVID-19 was strengthened by the unexpected discovery of mRNA vaccines, which medical

experts consider as the beginning of a new biomedical revolution. The environmental and social factors that allowed COVID-19 to emerge and spread have been overshadowed by this biomedical discovery and may allow the biomedical script to continue to thrive at the expense of more holistic approaches. The dominant focus on biomedical solutions will do little to tackle the socioeconomic and environmental root causes of COVID-19 and will

merely lay the groundwork for the next pandemic.

—MARKUS FRAUNDORFER

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Neither Settler nor Native: The Making and Unmaking of Permanent Minorities, Mahmood Mamdani (Cambridge, Mass.: Harvard University Press, 2020), 416 pp., cloth \$29.95, eBook \$29.95.

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The constitution of political community in the aftermath of colonialism was the foremost challenge for postcolonial leaders who had been shaped by anti-colonial struggles premised on the modern notion of political self-determination. The ensuing independence promised not just legal sovereignty but also liberation from imperial domination and dispossession. Leaders such as Gamal Nasser, Kwame Nkrumah, and Jawaharlal Nehru, and postcolonial intellectuals like Frantz Fanon, recognized full well that the promise of self-determination called for state structures that moved away from the colonizers' mode of governance. The previous systems had been based on the construction of the colonized in racist and ethnic or tribal terms, denying them access to politics and indeed the capacity to create political

community based on equal citizenship. The postcolonial strategy, confirmed at the Bandung Conference, was based on international solidarity. The goal was to gain a voice in shaping the postcolonial international order and to advocate for a new founding language of the secular modern state. For Fanon, the promise of self-determination would entail an eventual shift away from the "national" idea of the state and toward cosmopolitan solidarity as the ultimate expression of a postcolonial global order. The obstacles to such transformation derive from a colonial international structure, the reach of which perpetuates global inequalities and continues to have profound implications for the shaping of political community in the postcolonial world.

Mahmood Mamdani's new book, *Neither Settler nor Native*, places the lens on the