WHOLE – OF – SOCIETY PANDEMIC READINESS

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About PIC

UN Office for the Coordination of Humanitarian Affairs (OCHA)

Pandemic Influenza Coordination (PIC) Team
WHAT  What is the current Influenza A(H1N1) Global Situation?
What are we getting ready for?
What is an Influenza Pandemic?

WHY  Why a Whole-of-Society Approach?
Why not limit preparedness to health sector?
Why we need to go beyond health?

WHERE  are we now?
State of pandemic readiness in AFRICA

HOW  to implement the WoS approach and HOW NDMOs should contribute
WHO raised the alert level to Phase 5 on April 29

As of 16:00 GMT yesterday, 6 May 2009, 23 countries have officially reported 1893 cases of influenza A (H1N1) infection with 31 deaths (29 in Mexico and 2 in USA)

Global epidemiological data as of May 3
- In USA over 80% of the cases in <18 years
- In Mexico, healthy young adults (20-50 years) affected
- In EU, healthy young adults, (20-29 years) affected
- Disparity of mortality between Mexico and other countries

No vaccine is available

Antivirals available: Oseltamivir (Tamiflu)& Zanamivir (Relenza)

U.S.A. issued a travel advisory recommending against non-essential travel to Mexico

EU issued a travel advisory recommending suspending "non-essential" travel to affected parts of U.S.A. and Mexico
WHAT are we getting ready for? – Influenza Pandemic ABC

**Seasonal Influenza**
- Viral respiratory infection in humans
- Self-limiting, fatal in elderly & very young
- ~ 500,000 deaths globally/year
- Occurs seasonally

**Avian Influenza**
- Bird virus - spreads from birds to birds
- H5N1 strain highly lethal to poultry
- Can sometimes infect humans

**Influenza A (H1N1) [SWINE FLU]**
- A NEW strain of Influenza A(H1N1) combining avian (BIRD), swine (PORK) and human strains
- Responsible for the current outbreak in humans initially detected in Mexico in April 2009 and currently cases reported by 23 countries (as of May 6)

**Pandemic Influenza**
- Global outbreak of a new human influenza
- Causes increased morbidity & mortality.
- Last pandemics originated from animal viruses
The current WHO phase of pandemic alert is 5 as of April 29

- Pandemic ALERT phases indicate geographic spread and are a PLANNING TOOL

- Pandemic ALERT phases do NOT INDICATE OR PREDICT SEVERITY
What ARE Influenza Pandemics?

- Pandemics ARE worldwide epidemics
- Pandemics ARE unpredictable [Origin - Timing - Severity - Duration]
- Pandemics HAVE happened before

- Pandemics are NOT fiction
- Pandemics are NOT about birds or pigs
- Pandemics are NOT like any other hazard
- Pandemics are NOT of same SEVERITY
3 Pandemics in 20th Century

1918

Spanish Influenza
World Population: 1.2 billion
Case Fatality Ratio: 2-3%

1957

1968

Hong Kong Flu

Asian Flu
Socio-Economic Impact

Spanish Flu (1918)
- Circa 40 million deaths worldwide
- Merchants suffered because customers were too ill to shop
- Auckland: ambulance service unable to meet extraordinary demand
- Winnipeg: all public facilities closed for 46 days
- London: Insurance company paid 2 times as much in flu claims as in war claims
- Chicago: crime rate dropped by 43%

SARS (2003)
- 75% Decrease in Air Travel to Hong Kong at the Peak
- 15% Decline in Retail Sales in Hong Kong at the Peak
- 2% GDP Reduction ($200 billion) in the 2nd Quarter of 2003 in East Asian Region
Pandemic Influenza needs to be included in the DRR agenda as one of the hazards that NDMOs should be prepared to manage.
The potential pandemic impacts - details

- Geographical spread could be rapid and global lasting 12 to 18 months globally and likely to come in several “waves”

- Supplies of vaccines, antiviral drugs and other medicines will be inadequate.

- Organizations will experience high absenteeism rates because workers may not report to work due to illness, death, fear, school closures, or the need to take care of affected family members

- Extraordinary public measures may be put into effect - Authorities may impose travel restrictions, close the schools, stagger market hours, close working spaces, or prohibit mass gatherings such as sporting events, religious services and funerals

- Market disruptions will have major economic impacts. A severe pandemic is expected to have a massive effect on the global economy (between 2 and 3 trillion USD according to IMF studies)

- Some essential public services will break down - Food, Public Transport, Air Travel, Energy, Telecommunications

- Disruptions in Law & Order: Police, fire departments, prisons and the justice system may come under considerable stress due to absenteeism.
• Social and economic impact will be greater
• Strengthen resilience to other threats
• No single agency or organization can prepare for a pandemic on its own
• Inadequate or uncoordinated preparedness of interdependent public and private organizations will reduce the ability of the health sector to respond
The Readiness Framework

1. **WHOLE-OF-SOCIETY APPROACH**

2. **PREPAREDNESS AT ALL LEVELS**

3. **CRITICAL INTERDEPENDENCIES**

4. **SEVERITY-BASED RESPONSE**

5. **RESPECT FOR ETHICAL NORMS**
Despite these uneven investments the world is BETTER prepared now than ever before

Intensely preparing for the last 5 years under strong WHO leadership
<table>
<thead>
<tr>
<th>Level</th>
<th>Description</th>
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<tbody>
<tr>
<td><strong>A. NONE</strong></td>
<td>Comprehensive Whole-of-Society Planning</td>
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<tr>
<td><strong>B. FEW</strong></td>
<td>Essential Infrastructure interdependencies and the role of other sectors of society is identified but critical sectors not fully involved in planning, lack concrete operational plans</td>
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<tr>
<td><strong>C. MAJORITY</strong></td>
<td>Pandemic Preparedness limited mainly to the Ministry of Health and Agriculture with some involvement of the disaster management structures</td>
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NDMOs PANDEMIC READINESS ROLE

- Ensure that the legal framework is in place and existing regulation are reviewed to enable government to take the emergency measures as well as post-pandemic recovery measures that may be needed

- Support MOPH in the implementation of the International Health Regulations (IHR)

- Ensure that local authorities with the respective NDMO structures are prepared and test their plans

- Advocate with the Government to adopt a multisectoral whole-of-society approach to planning

- Ensure that adequate funds are budgeted annually for preparedness planning in all key ministries and at all levels of government
Role of NDMAs – cont...

- Foster sharing and implementation of best practice across sectors and levels of government especially in the field of business continuity

- Promote stronger regional and international coordination

- Perform quality control function over the planning of the different sectors and levels of government

- Promote cross-border interaction in planning to ensure that policies are coherent with the policies of neighbors and that there is clarity about cross border issues
1. Identify the personnel, supplies and equipment vital to maintain essential functions
2. Identify the critical functions
3. Consider how to deal with the anticipated level of staff absenteeism
4. Provide clear command structures, delegations of authority and orders of succession for workers
5. Assess the need to stockpile strategic reserves of supplies and equipment
6. Determine the ability of the organisation to continue operations if critical infrastructure services and/or supplies become unavailable
7. Agree on a system of communication with suppliers and customers
8. Identify business units that could be downsized or closed to reallocate human and material resources
9. Assign and train alternates for critical posts
10. Plan for security risks to operations and supply chain
11. Consider alternative methods of working, e.g. changes to shift patterns, working from home
12. Consider the implications of travel restrictions and develop procedures to follow if such restrictions are imposed
13. Train staff on infection control and communicate essential safety messages

14. Consider whether there are ways of reducing social mixing (e.g. home working and reducing meetings and travel) and test these

15. Consider the need for family and childcare support for essential workers

16. Consider the need for psychosocial support services to help workers to remain effective

17. Consider and plan for the recovery phase
Stages of Preparedness

0% Prepared

100% Prepared (= 'Ready')

Planning to Plan
(no plan)

Nothing beyond a photocopy of the template

"Department X will be responsible for drafting the plan"

"The Pandemic task force will meet twice per year"

Theoretical

Paper Plan

Exists only on paper; nothing implemented yet

"An emergency communication system will be put in place"

"X% of critical staff will telecommute from home"

Plan + Policies + SOPs

Continuously updated, Tested & maintained

Institutionalized
(Buy-in and sign-off at highest level)

Operationalized
(All preparedness measures implemented)

Ready
Stages of Preparedness

Planning to Plan → Theoretical → Ready

“We should order a fire extinguisher” → fire extinguisher on order → Ready

100% Prepared (‘Ready’)
Contingency Plan Elements

Readiness

Readiness Roadmap

Actions that need to be taken now in order to be ready

Response

Response Plan

Actions that will be taken during the crisis

Pandemic Plan
Contingency Plan Elements

Readiness

Readiness Roadmap

Actions that need to be taken now in order to be ready

Response

Pandemic Plan

Response Plan

Actions that will be taken during the crisis
→ It is important to review pandemic preparedness plans NOW and operationalize them or where they do not exist rapidly developing practical operational plans across multiple vital infrastructure sectors.

→ It is paramount that disaster management institutions at all levels are embracing influenza pandemic as one of the potential disasters that they are preparing for and become ready to manage.
Focus on Governments & UN Country Teams

Continuous measurement of pandemic readiness status
• THANK YOU

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