

Guidance for Engaging At-Risk Communities in Flu Preparedness

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“...efforts to prepare for and respond to the threat of an influenza pandemic should take account of the needs and interests of the disadvantaged.”

Bellagio Meeting on Social Justice and Influenza, 2006

Principles for incorporating considerations of social justice in pandemic planning response

Equity needs to be assured in...

- Access to accurate, up-to-date, and easily understood information
- Engagement in planning and responding
- Involvement in surveillance and reporting of possible cases
- Evaluation and monitoring of interventions and policies, especially with respect to equitable benefits and burdens
- Access to vaccines, antiviral medications, and public health and social interventions

Bellagio Meeting on Social Justice and Influenza

2008 guidance for state, territorial, tribal, and local health departments on at-risk populations in an influenza pandemic

- Collaboration and Engagement
- Identification
- Communication and Education
- Provision of Services
- Test, Exercise, Measure and Improve

At-Risk Communities Planning

- Corollary to public health emergency management
- Refines response activities specifically for populations needing extra assistance
- Built on ethical considerations, with special attention given to minimizing severe consequences for at-risk populations

Definition of "At-Risk" Populations

Before, during and after an incident, members of at-risk populations might have additional needs in one or more of the following functional areas:

- Maintaining independence
- Communication
- Supervision
- Transportation, and
- Medical care

Definition of “At-Risk”

Certain factors will increase a person's risk of negative outcomes for health, safety, and well-being

- Economic disadvantage
- Absence of a support network
- Needing support to be independent in daily activity due to
 - Physical disability
 - Developmental disability
 - Mental illness
 - Substance abuse or chemical dependency
 - Medical condition
- Trouble reading, speaking or understanding English

5 Recommendations for Pandemic Flu Preparedness in At-Risk Communities

- Collaboration with and engagement of At-Risk Populations
- Identifying At-Risk Populations
- Communications with and Education of At-Risk Populations
- Provide Equitable Services (Clinical and Non-Clinical)
- Test, Exercise, Measure, and Improve Preparedness of At-Risk Populations

Guideline 1: Collaborate with and engage At-Risk Populations

- Join an existing network or create a network
 - Recognize community assets
 - Identify partners and link to existing networks
 - Make collaborations flexible
 - Include at-risk populations in policy development

Guideline 2: Identify At-Risk Populations

- use data sources that identify at-risk populations
- Prioritize planning for populations at economic disadvantage.
- Allocate funds based on greatest need

“If a community maps its areas of deep poverty, health and emergency providers will clearly be able to see where extra help will be needed in an emergency.”

Centers for Disease Control and Prevention. (February 2007). *Public Health Workbook to Define, Locate and Reach Special, Vulnerable, and At-risk Populations in an Emergency.*

Guideline 3: Communicate with and Educate At-Risk Populations

- Use effective methods to reach priority at-risk populations
 - appropriate risk communication techniques
 - trusted messengers
 - appropriate technology, media, and formats
- Establish and follow a protocol for evaluating risk-communication messages for at-risk populations

“Local trusted sources gain more trust in a time of shared crisis and outside sources... lose credibility not through inaccuracy, but simply because they are not the recognized face on the ground.”

Kentucky Cabinet for Health and Family Services 2006

Guideline 4: Provide Clinical and Non-Clinical Services to At-Risk Populations

- Convene the appropriate agencies and provide the framework for the necessary planning activities for clinical and non-clinical services for at-risk populations.

Guideline 5: Test, Exercise, Measure, and Improve Preparedness of At-Risk Populations

- Include at-risk populations in evaluation as planners, participants, and part of scenario development in exercise design, implementation, and evaluation
- Implement a quality assurance program for at-risk populations and pandemic influenza planning

State of Oregon Resources for Planning for At-Risk Populations in H1N1

- At-risk populations planning coordinator
- Seed funding for at-risk populations planning
- Risk communication resources
- Vulnerable populations preparedness workshops
- DHS has facilitated connections between Emergency Management & Human Services in Oregon communities
- State vulnerable populations coalition
- Partnership with statewide organizations for planning and training
- Each DHS Division is helping their stakeholders prepare for emergencies
