

Getting Back to Learning How to Take Care of Each Other: Preparing for Pandemic Influenza

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Background

- Influenza Virus
- Avian Influenza
- Concerns
 - Mortality
 - Vector
 - Time
 - Supplies
 - Planning for a pandemic

Background

■ The Next Influenza Pandemic

Projections (medium level)

- 89,000 to 207,000 deaths
- 317,000 to 734,000 hospitalizations
- 18-42 million outpatient visits
- 20-47 million sick people

Plan

- No vaccine
- No anti-virals
- No 'government' intervention

Pandemics and Community

- What Can Be Learned From History?
 - The Black Death of the 1300's
 - The Spanish Flu of 1918
- Can a community be prepared, organized, and mobilized to help each other during a pandemic?
- Growing trend of social isolation

Purpose of the Project

- To bring pandemic influenza preparation to a community level
- An investigation into what a local community could do to survive pandemic influenza- "getting back to learning how to take care of each other"

Binford Redevelopment And Growth (BRAG) Organization

- Indianapolis neighborhood association that requested assistance in developing a community-based program geared towards pandemic influenza preparedness
- Trial organization for the intervention

The Healthwatch Program

Pre-Pandemic Planning

1. Determine the “workable” unit for the community
 - A. Community or sub-division leadership
 - B. Healthwatch Captain identified
 - C. Unit structure example- 10 households per functional unit
 - D. Functional unit specifics- Identify all participating households and those with special needs
 - E. Establish lines of communications- sequences of calls, reports to captain, local and state authorities

The Healthwatch Program

Pre-Pandemic Planning

2. Individual household preparedness
 - A. Identification of members
 - B. Household information- phone company, utilities, pharmacy
 - C. Pandemic influenza emergency provisions- CDC recommendations
 - D. Information for outside assistance- hospital, pharmacy, grocery, urgent care center

The Healthwatch Program

Pandemic Happens

3. Action Plan

- A. Indication of influenza presence- i.e. flag or star on mailbox
- B. Phone tree is utilized for communication
- C. Captain informs area of status of influenza and updates
- D. Monitor stats and needs of infected
- E. Special situations handled- children, elderly, special needs, pets
- F. Death occurs
- G. Recovery and reciprocal care
- H. Protective equipment

The Healthwatch Program Post-Pandemic

4. Pandemic ends

A. Assess financial costs

B. Healthwatch Captain may want to hold de-briefing session to discuss experiences and allow emotional healing

Program Feedback/Future Considerations

- The lack of/need for neighborhood associations/organizations
- Need to consider low-income neighborhoods/communities in need as well as homeless
- Need to consider the lack of socialization in various communities
- Issue of community organization involvement (faith-based, governmental agencies, local businesses)
- Safety issues/Personal information security issues
- Transient populations/apartment communities- communication and networking
- Lack of designated medical care sites/staff

Conclusions and Recommendations

- The Healthwatch Program was developed as a plan that could be adapted to a variety of communities and can be implemented to facilitate community disaster readiness
- The impact will be local and it will be how community groups respond, interact, and mobilize that will make a difference
- Any preparedness is far better than doing nothing, therefore prepare for the worst while continuing to hope for the best!

Program Funding and Implementation

- BRAG is in the process of applying to the Gannett Foundation for grant funding for implementation of the Healthwatch Program
- Dissemination of health information becoming more commonplace in BRAG community

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