Past experience has demonstrated that oftentimes children are overlooked in disaster planning and response, partially because “it’s too hard” or “it costs too much.” The American Academy of Pediatrics (AAP), in collaboration with the Children’s Health Fund, developed questions for an opinion poll to stimulate discussion on the use of resources related to disaster planning and response specific to children’s issues. The poll was also a response to guidelines from the Institute of Medicine that dismissed, on ethical grounds, prioritizing children above adults with the same conditions when a disaster overwhelmed resources and required that prioritization occur. The majority of respondents supported giving higher priority to children over adults. Opinions remained consistent across various demographic characteristics, including region, household income, education, age, race, gender and political party. Highlights from the poll include:

- 76% of respondents strongly agree/agree that children should be given a higher priority than adults for life-saving treatments
- 92% of respondents strongly agree/agree that the US should have readily available the same medical treatments for children as adults for chemical, biological and nuclear agents that may be used in the event of a terrorist attack
- 43% of respondents disagreed with the statement that the federal government is better prepared to meet the physical and psychological needs of children in the aftermath of a disaster compared to adults

On April 27–28, 2011, ICAAP, along with nine additional state AAP chapters, public health and CDC leaders was invited to participate in an “Enhancing Pediatric Partnerships to Promote Pandemic Preparedness” meeting convened by the AAP and the Centers for Disease Control and Prevention (CDC). The purpose of the meeting was to discuss lessons learned from the 2009 H1N1 pandemic, determine strategies for advancing pediatric preparedness, and identify resources that can be used to improve state-level pediatric preparedness. ICAAP representatives to this meeting included Jihad Shoshara, MD, FAAP pediatrician, ICAAP member, member of the Illinois Immunization Patient Advocacy Leadership Initiative (IIPAL); Julie Morita, MD, FAAP, Deputy Commissioner, Bureau of Public Health and Safety, Chicago Department of Public Health; Karen McMahon, Immunization Section Head, Illinois Department of Public Health; and Evelyn Lyons, RN, MPH, Emergency Medical Services for Children Manager, Illinois Department of Public Health.

Prior to the April meeting, state AAP Chapters were asked to draft state action plans and present their plans at the meeting. Teams had an opportunity to review and revise their plans during the course of the meeting and identify plans to take back to chapter leadership for discussion and implementation. The Illinois state plan proposes the development of a pediatric public health advisory group consisting of AAP members, other pediatric stakeholders and state and local public health officials. Optimally, this working group would meet on a regular basis to discuss public health issues that are relevant to children. These issues would include but not be limited to emergency preparedness, communicable diseases, chronic diseases and environmental health topics. The working group would participate in preparedness plan development, provide input on public health policy and program development and could be mobilized to assist in emergency situations. ICAAP representatives to the meeting indicated that “we are hopeful that our proposed plans will help public health and pediatric stakeholders prepare for and address pediatric issues in future emergency responses.”

Role of Pediatrics in Promoting Pandemic Preparedness

BY JULIE MORITA, MD, FAAP, DEPUTY COMMISSIONER, BUREAU OF PUBLIC HEALTH AND SAFETY, CHICAGO DEPARTMENT OF PUBLIC HEALTH AND SALAEHA SHARIFF, MPS, DIRECTOR, IMMUNIZATION INITIATIVES, ICAAP
A pre-meeting survey and discussion revealed consensus around the following issues:

- The need to incorporate pediatricians into decision-making
- Promoting strategic communication, systematic messaging before and during disasters/pandemics.
- Addressing challenges regarding prioritizing within high-risk groups (e.g., pregnant women, children with chronic medical conditions or who are otherwise at risk, health care workers, and minority populations).
- Leveraging school-based clinics and school-located services
- Improve and consider pediatric countermeasures
- Many states have multiple counties. Important to address statewide differences with regard to plans for response during a pandemic or disaster

During the course of the two day conference, attendees were able to present and hear from other states on issues related to Addressing Preparedness and Planning for the Pediatric Population, Model Strategies: Strategic Communications and Systematic Messaging, Model Strategies: Incorporating Pediatricians into State-level Decision Making, and Pediatric Preparedness and the Future. Following the meeting, AAP plans to develop a pediatric preparedness toolkit for use by AAP Chapter and public health leaders to include: key discussion points and findings from the meeting, common elements in state plans relevant to all states, strategies for states to improve pediatric preparedness, and speaking points for the three discussion topics (including pediatricians in decision-making, communication, prioritizing within high-risk groups). Most teams agreed that establishing systems for delivery of medical countermeasures (e.g., vaccines), communicating with the media, and communicating with healthcare providers before emergencies will improve emergency responses at the national, state and local levels.

State teams identified the following activities that will improve pediatric preparedness:

- Provide AAP members with education on issues related to public health/pandemic preparedness
- Chapters should develop relationships with county/state public health officials
- Creation of Pediatric Advisory Committees to guide public health preparedness and responses
- Establish linkages with EMSC networks/groups
- Establish partnership with Children’s Hospitals
- Support robust state immunization registries
- Create information dissemination systems
- Develop pro-active relationships with the media
- Encourage pediatrician involvement, in medical reserve corps

Resources where you can learn more about pediatric pandemic/disaster preparedness:

- AAP Children and Disasters Web Site: aap.org/disasters/index.cfm
- Illinois Emergency Medical Services for Children: www.luhs.org/depts/emsc

To learn more about ICAAP’s effort related to pediatric pandemic preparedness and/or plans related to the pediatric public health advisory group, contact Salaeha Shariff, 312/733-1026, ext 207 or s shariff@illinoisaap.com.

REFERENCE