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## IDSS COMMENTARIES (83/2006)

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### **Influenza Pandemic: How Operationally Ready Are We?**

Beverley Loke \*

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In a world where international terrorism, weapons of mass destruction and other forms of hard security challenges tend to dominate the contemporary global security agenda, seemingly less urgent or soft security threats are often neglected. However, it could be argued that continuing in such a fashion may expose countries to soft security threats whose impact could be as devastating as those posed by more traditional security concerns.

An example of such a threat is an influenza pandemic. The impact of such a pandemic should not be underestimated. As a reference point, an estimated 40 million were killed in the 1918-19 "Spanish influenza" pandemic, five times more than the deaths caused by World War I. Given the current rising death toll of human avian influenza victims, an influenza pandemic should be viewed as a genuine threat. Moreover, for it to be overcome, it is a threat requiring not just a competent response from government agencies but it also demands the general public at large to play a key role.

#### **Not "If" but "When"**

Whilst the international community is not currently confronted with an influenza pandemic, we are only one step away from a catastrophic occurrence where the virus develops the ability to engage in efficient and sustained human-to-human transmission.

In this regard, with the prospect of the virus mutating into one of pandemic potential, the highly pathogenic H5N1 avian influenza is an ominous threat to security. Two escalating trends are indicative of such a possibility.

First, since emerging in 1997 and resurfacing in 2003, avian influenza has infected hundreds of millions of poultry and wild birds. This year alone has seen it spread from 11 to over 40 countries, with the virus making inroads into Africa and Europe. The virus is also finding host in a larger number of species not previously susceptible to any type of the influenza A virus.

Second, at the point of writing, there have been 238 cases of avian influenza human infection since 2003. The death of the latest victim in Indonesia on 8 August 2006 has brought the global death toll to 139. This represents a 58.4 percent case fatality rate, more than five times of that caused by the Severe Acute Respiratory Syndrome (SARS) virus. More significantly, we have seen a steady increase of deaths over the 2004-6 period, with 32 deaths in 2004, 41 in 2005 and already 62 in only the first half of 2006.

Given these trends, the onslaught of an influenza pandemic may be a case of “when” rather than “if”. Globalisation means that a H5N1 influenza pandemic outbreak in any one country will spread worldwide in a matter of months. Unlike SARS, the influenza virus is infectious even before symptoms present themselves. Modest estimates by the WHO project global deaths in the range of 2 to 7.4 million. The question then remains: how equipped are we?

### **The Singapore Initiative- Exercise Sparrowhawk II**

From a national security perspective, an influenza pandemic will have a significant economic, psychological and social impact on Singapore. Singapore’s small state status, its significant dependence on trade and its geographical proximity to countries identified as hotspots for avian influenza human deaths mean that Singapore must have an effective defence strategy against an influenza pandemic.

Due to Singapore’s vulnerability, the country conducted its first ever exercise to assess its operational preparedness for such an event. Codenamed Sparrowhawk II, the two day drill on 21-22 July 2006 comprised a series of simulated orange and red alert scenario-based exercises. It involved over 10,000 government personnel, public health officers and volunteers from the population. The objective was to test the current reactive capacities and capabilities in the event of an influenza pandemic so as to fine tune the Ministry of Health’s *Influenza Pandemic Readiness and Response Plan*.

The significance of Sparrowhawk II is two-fold. First, it recognises the potential threat of a world-wide influenza pandemic. Second, by adopting an integrated defence against influenza pandemic, the exercise represents a step towards positioning health security at the forefront of Singapore’s national security agenda.

However, whilst the Sparrowhawk II exercise was certainly valuable in demonstrating detection and rapid response measures, relevant government agencies and the wider community must engage in a continuous process of evaluation, refinement and improvement. It may be argued that one important aspect to emphasise during this process of refinement and improvement would be the role civil society.

### **The Public as Stakeholders**

It should not be assumed that public action will support government initiated response efforts to an influenza pandemic. The US National Governors Association’s *Preparing for a Pandemic Influenza: A Primer for Governors and Senior State Officials* report states that past experiences have shown that such support “is neither likely nor realistic”. The public may believe that they are unaffected, they may be too fearful to take required actions, or they may simply be unaware of what they should do. The report further states that as the personal threat level heightens, the public will be more likely to turn away from central authority towards leadership which they are familiar with.

In such scenarios, defending against an influenza pandemic from a civil society perspective takes utmost importance. Civil society can educate the wider community, inculcate a greater sense of civic mindedness to ensure effective social mobilisation as well as assist in alleviating the panic and psychological impact.

Ultimately, for an effective influenza pandemic defence plan to be successful, it must consist

not only of a networked government but also a networked community approach. Only through such a multilevel approach can we be vigilant and build social resilience in what is an unsettling security environment.

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