

The Role of Community-Based Mitigation Strategies During an Influenza Pandemic

*National Association of County and City Health Officials
Infectious Diseases Society of America*



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- The United States cannot depend on the availability of vaccine, antiviral drugs, or other medical interventions to significantly mitigate a severe influenza pandemic currently or in the near future. Consequently, national guidance should be developed using the best available information regarding community mitigation strategies to decrease transmission of influenza and associated morbidity and mortality.
- Community mitigation strategies should be evidence based and the public health rationale for the measures should be strong and explicitly described.

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- Mathematical models used to develop community mitigation strategies must be systematically and critically reviewed for the appropriateness and limitations of their methods and assumptions.
- The results of the models and corresponding strategies must be tested and evaluated to see if they are feasible to apply in practice. Critical gaps in knowledge should be identified and addressed. Models should be tested to validate and strengthen key assumptions, and revised and retested when necessary.

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- Ideally, community mitigation strategies should be applied widely and consistently, using a standardized approach, to assure equitable protection of the public across and within political jurisdictions and to maximize public confidence in, and compliance with, recommended measures. Even so, sufficient flexibility is needed to allow strategies to be adapted in response to local circumstances.

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- However, if the scientific evidence base is inadequate and the public health rationale is not strong (i.e., significant uncertainty and controversy exist among authoritative experts regarding the benefits of such strategies), the argument for widespread adoption and adherence to a standardized approach is not compelling.

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- Guidance on community mitigation strategies must include clear and practical recommendations such as specific thresholds and criteria for implementation, discontinuation, and modification of individual measures and combinations of measures, and on how the impact of the strategies will be assessed, evaluated and communicated.

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- Key stakeholders should be engaged in developing the recommendations, including representatives of state, local, and tribal public health and governmental agencies; elected officials; business leaders; medical professionals; educators and school system officials; law enforcement; and the public, including representatives of socially and economically disadvantaged populations.
- It is critical that stakeholders include both those whose cooperation is necessary for successful implementation and also those who would be impacted by the strategies.

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- Stakeholders should be provided with a thorough understanding of the potential benefits, risks and consequences (i.e., adverse social and economic consequences and "second and third order" effects) of the recommended mitigation strategies, and the associated implications for successful and equitable policy implementation.

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- To the extent possible, community mitigation strategies should be acceptable to, and endorsed by, key stakeholders.
- This is facilitated by stakeholder participation in the development of recommendations and through education and public discussion of the recommended strategies, including their scientific and public health rationale, remaining uncertainties and limitations, and practical consequences and costs of implementation.

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- The varied sources of legal authority necessary for implementation of community mitigation strategies must be identified and overlapping authorities should be harmonized in advance of implementation.

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- Community mitigation strategies should incorporate principles of ethics and social justice so that a disproportionate burden does not fall upon socially and economically disadvantaged groups.

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- Adequate time and resources should be allocated in order to develop sound recommendations at the national level.
- Recommendations should be revised as necessary as more data becomes available.
- Adequate resources are also necessary at the state and local levels for planning, preparation and implementation of community mitigation measures and, possibly, to help alleviate economic and social consequences.

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- Examples of implementation challenges
 - Lack of adequate data and expert consensus on best approach
 - Effect of inconsistent application across jurisdictions
 - Unrealistic interventions/expectations in some models
 - Unclear cost benefit ratio
 - Concerns about adverse effects of school closures on the workforce, including the healthcare system
 - Concerns about adverse economic impacts (business and personal)
 - Concerns about compliance with voluntary measures
 - Concerns about differential impact on vulnerable populations
 - Lack of stakeholder involvement
 - Getting cooperation of local stakeholders and the public

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Summary

National guidance on community mitigation strategies should be developed in collaboration with key stakeholders and should clearly articulate standardized, scientifically rigorous and scalable strategies.

The scientific basis and public health rationale for the prescribed measures should be clearly communicated to stakeholders responsible for implementing the strategies and the public, encompassing discussion of limitations, assumptions, and potential social and economic consequences of such measures on local communities.