

## ASTHO's At-Risk Populations Project

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## Today's Agenda

- ASTHO Overview
- At-Risk Populations Project (ARPP) Overview
  - General project synopsis
  - The guidance document
  - Next steps
- Questions and comments
- Closing remarks

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## What is ASTHO?

- The national, non-profit association representing the 57 state and territorial health agencies in the United States, including the District of Columbia
- Members are the person holding the executive position in any state or territorial health department
- ASTHO provides policy guidance and advocacy based on membership priorities

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## The At-Risk Populations Project

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## What is the At-Risk Populations Project?

- The Centers for Disease Control and Prevention (CDC) funded ASTHO to develop planning guidance on at-risk populations and pandemic influenza
- To develop the guidance, ASTHO worked with:
  - The University of Minnesota's Center for Infectious Disease Research and Policy (CIDRAP)
  - The National Association of County and City Health Officials (NACCHO)
  - The Keystone Center
- Audience: state, territorial, tribal, and local health departments



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## What Makes this Project Unique?

- The project represents the first time national guidance has been developed outside of CDC
- A factors-based definition for at-risk populations was developed rather than using traditional labels
- During the drafting process, input was sought from at-risk populations and the providers who serve them



Photo from <http://www.onekvoice.org>



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## Project Methods

- A literature review assessed federal, state, and local plans and promising practices
- An Advisory Panel oversaw the process and created a factor-based definition for at-risk populations
  - 19 members from federal, state, local, and tribal agencies and national-level agencies
- Subject matter expert-based work groups:
  - 66 experts from all levels of government, private business, academics, associations, and others provided guidance and expertise
- Engagement meetings:
  - Two public engagements – Boston, MA and Kansas City, MO
  - One national stakeholders' meeting – Washington, DC

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## Definition of At-Risk Populations

- At risk of **consequences** from pandemic influenza, **NOT** at risk of infection.
- “Factors” may increase a person’s risk of impacts - including societal, economic, and health-related impacts.
- Individuals may experience significant barriers and need help maintaining medical care, food, and shelter
- More likely to experience these effects when the systems that people usually rely on are overloaded

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## What Factors Put People at Greater Risk?

- Economic disadvantage
  - People may have too little money to stockpile supplies, or to stay home from work
- Absence of a support network
  - E.g., some children; homeless; travelers; and the socially, culturally, or geographically isolated



Photo by Ken Hammond, USDA copied on Nov. 16, 2007 from <http://www.ers.usda.gov/amberwaves/February04/Findings/HowMany.htm>

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## What Factors Put People at Greater Risk?

- Needing support to be independent in daily activities because of:
  - Physical disability
  - Developmental disability
  - Mental illness or substance abuse/dependence
  - Difficulty seeing or hearing
  - Medical conditions
- Difficulty reading, speaking, or understanding English

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## Identifying Critical Issue Areas

- After developing the definition of at-risk populations, Advisory Panel members addressed issue areas for the guidance.
- Panelists reviewed pandemic planning goals and background data on the nature of pandemics.
- The ensuing discussion led to a consensus on the five critical issue areas for the guidance.

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## Critical Issue Areas and Work Groups

- Each Work Group was assigned a critical issue area, which correlates to a chapter of the guidance:
  1. Collaboration with and engagement of at-risk populations
  2. Identifying at-risk populations
  3. Communications with and education of at-risk populations
  4. Provision of services (clinical and non-clinical)
  5. How to test, exercise, measure, and improve preparedness

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## The Use of Public Engagements

- The Policy Analysis Collaborative (PACE) Model:
  - A group process designed for both citizens-at-large and representatives from stakeholder organizations to actively exchange ideas and learn from each other
- The benefits of this type of joint work process are:
  - Sounder decisions which better fit with our societal values
  - Increased sense of ownership and support for final decisions taken
  - Increased empowerment and sense of autonomy and well-being among participants
  - Increased trust in citizens by government and trust in government by citizens.

*The Policy Analysis Collaborative (PACE) – A Model for Public Engagement:*  
[http://www.pandemicpractices.org/files/26/26\\_1\\_pace\\_overview.doc](http://www.pandemicpractices.org/files/26/26_1_pace_overview.doc)

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## Engagement Meetings

- Boston, MA: 57 participants
  - Strong representation from people who are deaf and those who rely on wheelchairs
- Kansas City, MO: 66 participants
  - Strong representation from people who are homeless and/or people with cognitive or behavioral health issues
- Washington, DC: 21 participants
  - National stakeholders who work with or assist at-risk populations
- Course of the meeting
  - Education on influenza, pandemics, and the unique situation of at-risk populations
  - Small-group discussions

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## Public Engagement Meeting: Sample Participant Comments - Boston

- 98% agreed that everyone should have access to health care
- Additional comments included questions concerning:
  - Side effects of the flu vaccine
  - Length of time people will be asked to stay home
  - How long the virus can live on surfaces such as countertops or door handles

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## Public Engagement Meetings: Sample Participant Comments – Kansas City

- 77% of participants agreed that they would be better prepared for a pandemic if their faith-based communities were more involved in preparedness activities
- Additions included noting that:
  - Specific messages may need to be developed in light of certain religious practices
  - Trusted or primary messengers may include chaplains, imams, pastors, priests, and rabbis (among other religious leaders)



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## ***At-Risk Populations and Pandemic Influenza: Planning Guidance for State, Territorial, Tribal, and Local Health Departments***

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### The Guidance Document

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## **The Guidance: Overview**

- The guidance contains:
  - Factor-based definition of at-risk populations
  - Discussion of ethical and legal considerations in planning for at-risk populations
  - 5 chapters that correspond to each subject-matter work group
  - Sample tools and practices for each chapter
  - Proposed timeline for enacting recommendations based on pandemic phase and severity

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## The Guidance: A User's Guide

### ■ Chapter 1: Collaboration with and engagement of at-risk populations

- Challenges for public health, CBOs, and at-risk people
- Identifying partnerships
- How public health can engage, strengthen, and contribute to community networks
- Including at-risk populations in policy development



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## The Guidance: A User's Guide

### ■ Chapter 2: Identifying at-risk populations

- Purpose, tools, and approaches
- Sources and limits of public data
- Managing and mapping public data
- Prioritizing at-risk groups
- National, state, and local data sources and practices



Photo from <http://www.esri.com>

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## The Guidance: A User's Guide

- **Chapter 3: Communications with and education of at-risk populations**
  - Trusted messages, messengers, and methods
  - Timing
  - Evaluating effectiveness



Photo from <http://www.echominnesota.org>



Photo from <http://www.washingtonpost.com/adsite/wh/atl/atl/page1242.html>



Photo from <http://www.oldnorthstatemedicalsociety.org/MedicineandSpirit.html>

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## The Guidance: A User's Guide

- **Chapter 4: Provision of services (clinical and non-clinical)**
  - Essential clinical services and challenges
    - Lack of access to the healthcare system
    - Chronic physical conditions
    - Equipment/resources for independent living
    - Behavioral health conditions
  - Non-clinical essential services
  - Providers and responsibilities



Photo from Encyclopedia Britannica's Advocacy for Animals Working Animals page. Retrieved Feb. 12, 2008 from <http://advocacy.britannica.com/blog/advocacy/category/features/working-animals/>

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## The Guidance: A User's Guide

- **Chapter 5: How to test, exercise, measure, and improve preparedness of at-risk populations**
  - Barriers to evaluation
  - Methods for evaluation
  - Tailoring Homeland Security Exercise and Evaluation Program (HSEEP) to at-risk populations
  - Sample discussion- and operations-based exercise objectives and scenarios



Photo from [http://www.nursing.columbia.edu/pdf/PublicHealthBooklet\\_060803.pdf](http://www.nursing.columbia.edu/pdf/PublicHealthBooklet_060803.pdf)

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## Sample Tools and Practices

- Each chapter contains a table with sample tools and practices specific to the chapter's topic area.

Sample Tools and Practices		
American Red Cross Disaster Guide	This comprehensive tool is aimed at helping people with disabilities prepare for a disaster. Information includes how to assess preparedness; creating a support network; personal preparedness and disaster supplies checklists.	<a href="http://www.redcross.org/services/disaster/beprepared/disability.pdf">http://www.redcross.org/services/disaster/beprepared/disability.pdf</a>
Cambridge Public Health Department Advanced Practice Center's personal preparedness displays	This PDF provides examples of pictograms, sample sheltering supplies, emergency kits, and communication plan templates for personal preparedness displays at community health fairs and meetings.	<a href="http://www.emergencyinfoonline.org/3030/files/PreparednessDisplay.pdf">http://www.emergencyinfoonline.org/3030/files/PreparednessDisplay.pdf</a>

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## Guidance Supplement: “Proposed Timeline for Enacting Recommendations”

- As a supplement to the document, 5 different “grids” describe specific pandemic planning and response actions identified in the guidance by pandemic phase and severity.
- The grids should be used as a complement to the guidance to help planners enact recommendations at appropriate times.
- Details of the actions suggested in the grids can be found in the guidance chapter with the same title.

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## Key Recommendations

- Join an existing network or create a network with representation from at-risk individuals, FBOs, CBOs, and key partners, such as media outlets
- Find and use data sources that identify at-risk populations in the jurisdiction
- Prioritize planning for populations at economic disadvantage
- Identify where the greatest needs are in order to effectively allocate funds

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## Key Recommendations

- Use appropriate risk communication techniques; trusted messengers; and appropriate technologies, media, and formats to reach at-risk populations
- Establish and follow a protocol for evaluating risk communication messages for at-risk populations, which may include:
  - Conducting pre- and post-tests at public meetings
  - Evaluating channels used for messages
  - Evaluating the ability of collaborative partners to disseminate emergency messages
  - Measuring the impact of messages on preparedness

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## Key Recommendations

- Convene the appropriate service provision agencies and provide the framework for necessary planning activities
- 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 that tests, evaluates, exercises, and improves the process of providing care for at-risk populations

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## Public Comment Period

- 30-day public comment period April 15-May 15, 2008
- Comments were reviewed and incorporated into draft
  - 24 individuals/entities submitted comments
    - 16 federal; 12 individuals; 5 state HDs; 2 local HDs; 2 non-profits; 1 other
  - 330 different comments
    - ~ 1/3 were minor changes/adjustments/additions
    - Many were general commentary and did not require changes to the document
- Preliminary review of comments:
  - Guidance is a comprehensive, welcomed tool
  - Definition seems to be accepted
  - Concern that the guidance may be a requirement, which would be overwhelming

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## Next Steps

- Interim guidance document to be released publicly early to mid-July, 2008
- Continued work in creating awareness of the document via conferences
  - Infectious Disease Society of America Seasonal and Pandemic Influenza 2008 – May, 2008
  - National Indian Health Board Public Health Summit – May, 2008
  - Area Health Education Center of Southern Nevada – July, 2008
  - ASTHO/NACCHO Annual Meeting – September, 2008
- Implementation activities – August, 2008
  - Regional meeting with senior public health officials
  - Training webinar
- Ongoing implementation activities and revisions 2008-2009

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## Read the Guidance and View Tools Online

ASTHO: [www.astho.org](http://www.astho.org)

CIDRAP: [www.cidrap.umn.edu](http://www.cidrap.umn.edu)

*Click on link under  
"At-Risk Populations Project"  
at either site*

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## Questions or Comments?

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## Closing Remarks

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**Thank you!**

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