

**Pandemic Flu (USA-Government)  
Planning and Response Initiative**  
**<http://www.pandemicflu.gov/plan/index.html>**

**Section I: Summary**

Pandemic Flu.gov is a federally-supported website that provides comprehensive government-wide information on pandemic influenza and avian influenza. Content is directed at the general public, health and emergency preparedness professionals, policy makers, government and business leaders, school systems, and local communities. Information includes such issues as US global coordination efforts, health and safety for the general public, economic impact, and planning and response.

This project summary details the government's efforts to promote federal recommendations regarding flu epidemics and the dispensing of flu vaccines, known as Public Engagement Pilot Project on Pandemic Influenza (PEPPPI). PEPPPI was based on three premises that: (1) the formulation of vaccine policies involve a consideration of values as well as science; (2) the process must involve both stakeholders, including experts, and citizens with diverse backgrounds and perspectives; and, (3) the public process provides an opportunity for frank, open dialogue and careful deliberation to produce sounder, more supportable decisions in the short term and result in greater public trust over the longer term.

**Section II: Statement of Purpose**

The Public Engagement Pilot Project on Pandemic Influenza (PEPPPI) was initiated in July 2005 to discuss and rank goals for a pandemic influenza vaccination program and to pilot test a new model for engaging citizens on vaccine related policy decisions (The Vaccine Policy Analysis Collaborative, VPACE). Researchers convened stakeholders from various organizations with an interest in pandemic influenza (the National Stakeholder Group) as well as individual citizens-at-large from the four principal regions of the United States to advise on policy. The public was consulted in the development of an improved plan to increase the likelihood of public support and demonstrate that citizens can be productively engaged in informing vaccine related policy decisions.

PEPPPI was carried out in five phases--two day-and-a-half dialogue and deliberation meetings with approximately 50 national stakeholders and consultants, a day-long consultation with over 100 citizens-at-large in Atlanta which took place in between the two stakeholder meetings, and three half-day sessions conducted with approximately 150 citizens-at-large in Massachusetts, Nebraska, and Oregon where citizens were shown the results of the earlier deliberations and asked for their feedback. Altogether,

approximately 300 participants with diverse backgrounds and points of view came together to learn the basic facts needed to have an informed discussion about pandemic influenza, to engage in give and take discussions about potential goals for the use of limited supplies of vaccine, to weigh the tradeoffs between competing goals, and to select the goals considered most important to achieve with scarce vaccine.

### **Section III: Outcomes**

Both citizens-at-large and the National Stakeholder Group decided—with a very high level of agreement—that assuring the functioning of society should be the first immunization goal followed in importance by reducing the individual deaths and hospitalizations due to influenza (i.e. protecting those who are most vulnerable and at risk). Because of the still high importance of the second goal, the groups added that the first goal should be achieved using the minimum number of vaccine doses required to assure that function. This would allow the remaining doses to be used as soon as possible for those at highest risk of death or hospitalization. There was little support for other suggested goals to vaccinate young people first, or to use a lottery system or a first come first served approach as top priorities.

The groups also defined the federal government's role as providing broad guidance with responsibility for more specific interpretation and implementation remaining with state and local health authorities. Both the public participants in this Pilot Project and the expert advisory bodies which deliberated separately, the Advisory Committee on Immunization Practices and the National Vaccine Advisory Committee, chose protecting society's caretakers and persons at high risk among their top priorities. However, the weight attached by the citizens-at-large and the National Stakeholder Group to "Assuring the Functioning of Society" appeared to be greater than the weight placed on this goal by the expert advisory bodies. Their joint subcommittee placed higher priority on protecting high risk persons and lower priority on most of the categories of persons responsible for assuring the functioning of society.

In addition, the PEPPPI groups developed and deemed important several recommendations related to pandemic planning. They stated the government needs to: (1) build and maintain the public's trust by decision-making that is transparent and characterized by seeking the public's input and coupled with enhanced communication and education; (2) allow the flexibility in the plan to address the unique circumstances dependent on the epidemiology of the event; (3) take action in addition to market forces to increase vaccine production capacity; (4) support the development of other public health measures to protect the public from the influenza illness; and, (5) provide resources to other regions of the world. The groups also felt it was important that the more specific decisions regarding the categories of persons to

receive limited supplies of vaccine be made by health experts and not by elected or appointed representatives without public health qualifications.

This Pilot Project provides “proof of principle” to the vaccine community that a diverse group of stakeholders and citizens-at-large can be recruited to learn about a technical subject, interact respectfully, and reach a productive outcome on an important policy question. Preliminary results from the independent evaluation of all the sessions conducted by the University of Nebraska reaffirmed this conclusion.

The corroboration of the results of the deliberations from the four sessions involving the general public in disparate regions of the country, as well as with the National Stakeholder Group meeting in Washington D.C., gives additional weight to the recommendations. Recognition of the importance and utility of these findings was made evident in the HHS Pandemic Influenza Plan released in early November 2005 which described the agency’s consideration of the priorities that emerged from the PEPPI project. More public discussion of a similar type was called for in the HHS plan.

#### **Section IV: Additional resources**

United States Centers for Disease Control and prevention, Resources for Pandemic Flu: Tools for preparedness, ethical guidelines and additional information, <http://www.cdc.gov/flu/Pandemic/>

World Health Organization, Pandemic Preparedness, <http://www.who.int/csr/disease/influenza/pandemic/en/>

The Trust for Americans Health, Multiple resources including: Working Group on Pandemic Influenza Preparedness, Policy recommendations, and reports <http://healthyamericans.org/pandemic-flu/>