



Remarks by Secretary Napolitano at the H1N1 Influenza Summit

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Secretary Napolitano: Well, thank you Kathleen and thanks to everyone for putting this summit together. I have to tell you that I first met President Obama in 2004 at the Democratic Convention in Boston and I was the speaker right before Barack Obama at that convention. And the only thing worse would have been to be the speaker right after Barack Obama; and, now, I get to do that—yea!

But a lot has happened since then, obviously, and we have a lot of work to do moving forward with respect to H1N1. One point I'd like to emphasize for all of us is that the work we do now on H1N1 is not wasted because it has applications and other scenarios as well. So even though we cannot—and science cannot predict what kind of flu or flu epidemic we are going to experience, and how serious its lethality will be—whether we're in a 1918 situation or a 1968 situation—that remains to be seen. But, what we do know, however, is that the preparations we do now would apply to many other scenarios as well—so the time, the efforts and the monies are put to good use.

Now, what does the Department of Homeland Security (DHS) have to do with the flu? The fact of the matter is that we've had a lot. Here's the way it's set up. It is under what's called [Homeland Security Presidential Directive] HSPD-5. The director of Homeland Security is what's called the principal federal official. What does that mean?

Well, what that means is that we know the Department of Health and Human Services has to lead all the public health and science aspects of a flu epidemic; and, that's why it's so important that we work our issues through in terms of vaccine, vaccine distribution, analysis of the kind of flu that we're seeing and the like. But, if there truly is a pandemic of serious proportion, it affects many, many other things. It affects schools. It affects the workplace. It affects our ability to provide national security in a variety of ways.

It affects continuation of government and a continuation of operations within the private sector. And so the plan—to be able to do that under a scenario where you could be experiencing high rates of absenteeism and where assets that you think are available are not available—are the very issues that the DHS is charged with coordinating. So that's why I'm so pleased to be here with my colleagues today. We worked together before. We're working this problem, and that's what I call it.

When you are in this kind of situation, you know some things, you don't know others. Every day you work the problem and you keep working it. And, as information becomes available, you adjust your plans accordingly. Now, what are some of the things that need to be done? First, we know that a flu pandemic crosses all sectors. It crosses, as I mentioned before, the public sector and the private sector. So we need to make sure that plans are in place and hopefully have been actually exercised now, so that if there are different rates of absenteeism, operations continue.

Well, what does that mean? That means you really have to look at—for example, in your utility company, if they have one or two critical people who are necessary to repair utilities—if they are not functioning to work on the system, that they have trained some back-up individuals so that things continue. What does it mean in the government sector? Very much the same thing, and we need to make sure that plans are in place so that the functions of government—particularly public safety and public health—continue. And as a former attorney general and governor, one thing I would say to the state and local officials here: make sure your payroll continues.

You know, whoever processes those checks, make sure you've got a back-up. We have to reach out, and in each area of the country, to state and local governments. They are not all here in this room. That's why, as Secretary Sebelius said, we hope when you leave here you will leave and plan your own similar situations in your own states. Because we've got to have the discipline to force everybody to work the problem at their own local level with their own local knowledge and their own individual issues and problems.

It will be different in different parts of the country and let me just say—we talked in terms of states and cities and counties, but for those of you who have Indian country in your jurisdictions, please be sure that tribes and planning for tribes are included in the planning you're doing at the local and state level.

I talked about business and the private sector, but they're going to be affected in other ways as well. For example, you're going to hear from Secretary Duncan in just a moment. One of the lessons we learned this spring was how critical schools are, particularly for a strain of flu like this one, where school-age children are disproportionately affected. And so working through the guidance for school districts, it's not easy. You'd think it would be easy. It is not easy, nor is it always uniform.

But, when you close a school, there are ripple effects all across a community, because then children have to stay at home. Well, what does that mean for working parents? That means they probably, at least one of them, has to stay at home as well. So even though they may not have the flu, they're going to contribute to the absenteeism that interferes with the continuation of business of government and the like. So we need to think and work that problem through as well.

Kids at home—you've closed the school. Well, we have a lot of children in this country who get breakfast and lunch at school, and it's provided for by the Department of Agriculture, as you know, through the free lunch program. We need to be working the problem: are they going to get fed? How is food going to be made available if a school has to close? So these are very practical issues.

Let me give you another one. We have individuals, particularly in the federal government, who work with the public all the time: Transportation Security Administration individuals who are officers who are at our airports; people on the Border Patrol and Customs who are policing our borders. Well, not in addition to the absenteeism issues—the illness issues they may have—there are issues about personal protective equipment and how that is supplied to them.

What kind of masks should they have? Where are they? Have we stockpiled them? Are they in the right place? Do we know how to get it to employees who are in that type of situation? Transfer that to state and local and you've got to be thinking about, in particular, your public safety community. And at what point do you require that masks be worn? At what point is it optional and the like? Very practical questions, and they are hard, because once you see them and start working them, you'll realize all the things that are implied there.

Here's another one. Every state and locality has incarcerated populations. It can be prison. It can be jail. It can be a juvenile facility. An epidemic—if it goes and gets into one of those facilities—it spreads swiftly through. That's a public health issue, of course, of great dimension in terms of how you get healthcare to your detainees—to your inmates. But, it will also affect your guards and your corrections officers.

So you have to be thinking through “what do you do with the institutions that you have who have incarcerated populations?” Again, these are problems that we need to work through. That's why we're having this summit. Try to evoke in all of us a lot of the issues, so we begin or refine plans that we already have made.

What is the role of DHS? We will be working with you on these plans. We will be encouraging you to— not just to have plans—but to actually do some—at least tabletop exercises, where at least your leadership in a particular area has sat around the table with a scenario and really worked it through over the course of this summer. We are also providing regional coordination teams for states and local communities. And this afternoon at the sessions you will learn more about those regional coordination teams and how we think they will work.

Also, as Secretary Sebelius said, communication is so very, very key. It's communication with the public in just saying what we know, what we don't know—but regular communication with the public—the preparation message—because the more we are prepared the less fear people have. But it's also daily, sometimes, communication with state and local officials. In the audience today is Assistant Secretary of DHS, Juliette Kayyem. She was running our state and local communications during the spring outbreak at times.

We had a thousand communities on conference calls, getting information on what to do. Those systems will be in place and will be operational again. You'll hear more about them over the course of the day. And then, lastly, communication with the members of the Congress—so in the coming weeks, the three of us will be going to the Hill to brief the House and the Senate on what we are doing to prepare and coordinate the nation for a possible flu outbreak of serious proportion. So let me just close by saying preparation is key.

You've got to be thinking—and we all are thinking—about very nuts and bolts type questions—particularly anticipating potentially high absentee rates for several weeks at different points in the fall and the winter flu season. And thinking through that and then third, DHS along with the other departments represented here are prepared and are preparing not only to coordinate amongst federal agencies but to have that direct link with our states, with our counties, with our cities, with our tribes, with our territories, to help and to make sure planning is being done.

So, with that, let me just say again and repeat the thanks that Health and Human Services Secretary Sebelius said to those who organized it—thanks to those of you who are going to be doing the work once we leave here today and have been doing the work over the course of the past months—and introduce our third speaker, Arne Duncan, the Secretary of Education.

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