Pandemic Flu:
Why Faith Groups Must Care

J. George Reed

It's not time to panic, but it is time to plan. In 1918-1919, Spanish flu spread around the world. In the United States, more than 500,000 people died. Most health professionals agree that the world will face another flu pandemic at some point in the future. It could be H5N1, the strain of avian flu currently spreading around the world in birds, or it might be some later flu. But it will come.

Put aside for now the question of whether it's this bird flu and it hits relatively soon or another strain of flu many years hence. I want you to think about the potential impact of a pandemic.

One of the things that distinguishes flu pandemic from regular flu is that people will have little or no immunity to it. Health care systems could be overloaded and medical supplies will be in short supply. A flu disaster would be unlike a natural disaster. First, the area impacted would be much wider. North Carolina wouldn't be sending volunteers to Louisiana, nor would we be receiving help from other states. Second, the duration of the disaster itself, not just the response, would be much longer. A pandemic could come in waves over 12 to 18 months. There could be bans on travel, closings of schools, cancellation of events, and disruption of businesses.

Estimates are that as much as 20% of the population could get the flu and as many as 40% of workers might stay home at its peak because they are sick, a family member is sick, or they don't want to risk exposure. Think of the impact these absences would have on a community's infrastructure: utilities, water purification systems, food supplies and preparation (including transportation of food to groceries and restaurants), trash pickup, public transportation, medical care, and availability of prescription drugs.

An influenza pandemic, whenever it comes, will also disrupt church life and raise serious questions for churches and their leaders. Consider the potential impact on regular worship services; communion/Eucharist; hospital visits by clergy and laity; funerals, grief counseling, and other pastoral care; committee meetings and other church gatherings; child-care centers, soup kitchens, food pantries, and free clinics; national and international meetings; and missions trips.

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And, some of the hard questions for churches:

- What is the duty of clergy regarding parishioners sick or hospitalized with the flu: to visit them as a sign of God's presence or to not visit so as not to spread the flu?
- In deciding whether to cancel activities, should the church act more quickly in order to set the example in preventing the spread of disease or less quickly because of the importance of gathering to worship during a crisis? Should parishioners help others, but risk spreading flu?
- Who makes decisions about canceling services or altering communion? Would a congregation follow a public health recommendation to limit services or wait until it was mandatory?
- Are there essential services within the church that must be continued during a pandemic?

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Also, think about some of the justice issues involved:

- Would lower-paid workers (support staff at hospitals, for example) be required to show up for work while higher-paid workers could stay home and telecommute? What happens to hourly-wage workers if businesses must close?
- In a time of greater rationing of health care, would poor people get to see a doctor, be admitted to a hospital, have use of a ventilator? How would limited supplies of vaccines and antivirals be allocated?
- What would happen to poor people who didn't have the resources to stockpile food and water, if those delivery systems were affected?

So, what should the faith community be doing? Our first step is still to get flu pandemic on our radar screens. Early last year, one state's council of churches asked bishops and other leaders about meeting with health officials to discuss a flu pandemic. Only two out of more than twenty expressed any interest. We all have a lot on our plates, but as one public health person pointed out, "If we try to make plans during the crisis, we're not planning, we're improvising."

Second, we must be at the table in the development of contingency plans. The state's public health and emergency planning agencies are hard at work and looking for community allies across the state.

Third, we must have firm plans for our congregations and judicatories. What supplies should be stocked now, or with the first news of the spread of flu among humans?

What can be done to help families make plans? The federal government has established checklists for a variety of groups, including faith communities. See them at www.pandemicflu.gov.

Fourth, we must be well enough involved and informed to be a voice for moral and ethical decision making, helping to balance the community's needs with our calling to treat all of God's children equally. In the event of a pandemic, we should also use our credibility in the community to be a source of good and true information.

Let me be clear: As of this writing the H5N1 avian flu has not been found in North or South America, even in birds. It has shown up in only about 274 humans worldwide (though more than half of them have died).[1] Almost all of the human cases were caught from birds, not other humans. The risk is if H5N1 mutates in a way that enables it to be transferred easily among humans. Then, because we have virtually no immunity, the world would have a pandemic, one that could spread rapidly around our interconnected globe.

The difficulty in raising these questions is that no one wants to spread panic. I feel a bit like Chicken Little ("The sky is falling") in writing this. But we are better prepared to deal with a crisis if we are informed and have made careful plans. Otherwise we could find ourselves improvising in the midst of a worldwide health disaster. **NCMJ**

REFERENCES

1 Confirmed Human Cases of Avian Influenza A(H5N1). World Health Organization, Epidemic and Pandemic Alert and Response. February 19, 2007. Available at: http://www.who.int/csr/disease/avian_influenza/country/en/. Accessed February 20, 2007.