

SPEECH BY MR WONG KAN SENG, DEPUTY PRIME MINISTER AND MINISTER FOR HOME AFFAIRS, AT OPENING OF CONFERENCE ON PANDEMIC PREPAREDNESS IN ASIA, 12 JANUARY 2009, 9:30 AM AT MARINA MANDARIN HOTEL

Distinguished Guests,

Ladies and Gentlemen

I am happy to be here this morning at the opening of this conference on pandemic preparedness in Asia.

H5N1 Situation: Still a Pandemic Threat

2. On 9 Dec 2008, Hong Kong raised its bird flu alert level to 'serious' and culled 80,000 chickens after an outbreak of H5N1 at a poultry farm. No human infection was reported and there was no evidence that the virus had spread to other farms. This latest outbreak in Hong Kong was unlike the one in 1997. Then, the H5N1 outbreak infected and killed about 7,000 poultry. Hong Kong authorities then culled about 1.5 million poultry to stem the outbreak. There were also 18 confirmed cases in humans, resulting in 6 deaths. Learning from past lessons and being better prepared, the Hong Kong authority's response in Dec 2008 helped them to avert a crisis similar to the 1997 outbreak.

3. The H5N1 virus has now spread to 61 countries, infected 393 people and claimed 248 human lives. A piece of good news is that according to a United Nations and World Bank report^[1], more than 50 of the affected countries, or more than 80 per cent, have successfully eliminated outbreaks

among their poultry. The pace of sporadic human infections and mortality has also slowed from 59 reported deaths in 2007 to 31 in 2008. These are encouraging developments. National and international capacities for animal and human health surveillance have improved and they enabled governments to respond swiftly to outbreaks. A number of countries have also introduced compensation schemes to encourage early reporting of outbreaks and to reduce the impact on the livelihood of poultry owners. This is an important development because when poultry farmers, especially those living in poorer conditions, are not compensated, they are likely to hide their sick poultry and prevent them from being culled.

4. While the H5N1 situation appears stable for now, the threat of a pandemic remains unchanged. H5N1 has high pandemic risk. It is still actively circulating among poultry in a number of hotspots where there is close proximity between poultry and humans. This means that there is a risk that the virus can combine with a human influenza virus and mutate into a form that is easily transmissible among humans. No one knows how many times the virus will mutate before it eventually leads to a pandemic. So the H5N1 virus is like the jackpot machine, where different combinations are permuted over and over again. One day, and by some chance, the virus will hit the jackpot with the right combination of mutation to make it easily transmissible among humans.

5. We cannot be 100 per cent sure that the next pandemic will be caused by H5N1, even though it is currently the greatest cause for concern. Even if we know that the pandemic virus will be a mutated strain of H5N1, we will not know when the pandemic strain will emerge or how virulent it will be. We can only estimate how badly affected populations and economies could be impacted. If the impact of a pandemic is worse than the outbreak of Severe Acute Respiratory Syndrome (SARS) in 2003, then we can expect many more

people to be infected and to die from the virus. We can anticipate that businesses, especially those in retail and tourism, will be badly affected.

6. There are simply too many unknowns in relation to the next pandemic virus. But we cannot let this uncertainty stop us from preparing for a pandemic because the potential impact is far too devastating to be ignored. According to estimates by the United Nations, the global death toll could be as many as 1.4 million during a mild pandemic and as high as 70 million people in a very severe pandemic. The World Bank estimates that the economic cost of a global flu pandemic could hit three trillion US dollars. This is equivalent to a loss in global Gross Domestic Product of nearly 5 per cent.

7. The impact of a severe pandemic is also expected to surpass that of a terrorist attack. In August last year (2008), the British Cabinet Office published the country's first ever National Risk Register which gives an assessment of the most significant emergencies that the British public could face over the next five years. The document identifies a flu pandemic, not terrorism, as the biggest threat to the British public in terms of potential impact. It states that the effects of a pandemic include wider social and economic disruptions, significant threats to continuity of essential services, lower production levels, shortages and distribution difficulties.

More Can be Done to Prepare for a Flu Pandemic

8. Although more countries have been planning for a flu pandemic, countries can do much more to prepare for it. For instance, they can work together to develop an effective system of disease surveillance and reporting in every high-risk area. This is especially important when overall capacity and quality of animal health and public health services remain low in several regions. As the world grapples with the global economic slowdown, countries

have an even more uphill task guarding against pandemic planning fatigue and complacency. We should not relent on pandemic preparedness, and certainly should not put off preparing for a pandemic till it is too late.

9. Countries that have been planning for a flu pandemic should extend their plans beyond the health sector. In addition, testing plans through operational exercises is important in validating the plans and identifying gaps that need to be plugged. According to the World Bank/UN Report, only 53 per cent of countries have tested their plans and just one-quarter have done so at all levels of their governments. This is not comforting. Untested strategies on paper are just as good as not having any contingency plans because these strategies may well fail the moment a pandemic starts.

Preparing for a Human Influenza Pandemic in Singapore

10. In Singapore's case, we have been planning for a pandemic since 2004. We have a national crisis management system where key Ministers, Permanent Secretaries and Heads of Departments of the various Ministries and Government agencies meet on a regular basis to identify capacities that we need to build to ensure that we are ready for even a very severe pandemic. Our experience with the SARS outbreak taught us a valuable lesson. We cannot treat widespread outbreak as a solely medical crisis. Instead, we need a combination of medical and non-medical interventions to deal with a pandemic. We need to free up the medical professionals to treat infected persons, while others take on non-medical interventions like enforcing quarantine orders and ensuring that essential services continue to function.

11. Our business continuity planning extends to critical essential services like water, power, banking, food supply and public transportation. We believe

that a multi-sectoral approach is the most sensible and pragmatic way to reduce the wide-ranging impact of a pandemic to the furthest extent possible. However, persuading and convincing non-health sectors to devote time, money and resources to pandemic planning is challenging and we can expect it to be a long-drawn process.

12. In an effort to reach out to emergency planners in the private sector, the Ministry of Home Affairs has published a book entitled 'Preparing for a Human Influenza Pandemic in Singapore'. It outlines Singapore's approach towards a pandemic, our planning parameters and assumptions, as well as our response measures. It also describes the roles of the Government, the private sector and the community in the national response plans. While the Government will do all we can to mitigate the impact of a pandemic, we will need the cooperation of the private sector to sustain the economy and the population, and for the community to take personal responsibility for their own health and well-being.

13. I urge emergency planners in the private sector to look through the book to understand the planning parameters that the Government is working on. Like other countries that have published similar documents like ours, there are no operational details of the measures that could be implemented in a pandemic. This is because operational details will change as we discover and learn more about the pandemic virus. What is important now is that emergency planners understand the common lingo and planning parameters so that they align their respective plans to the national strategy and identify the critical gaps in planning. For example, an important planning assumption is the duration of the first wave of a pandemic. Other important planning assumptions are staff absenteeism rate, impact of travel restrictions and degradation of third-party services.

14. Individuals who are interested to know more about pandemic preparations can read about the broad framework of how the Government is structuring itself to respond to the pandemic. They may also find useful practical tips on precautions they should take during an outbreak. While the Government will try to cushion the impact of a pandemic on the population, the public should also mentally prepare for it and get used to the idea of stockpiling food and medicine or making alternative childcare plans for extended school closure. Early planning will help to reduce disruptions to daily lives.

No One-Size-Fits-All Approach

15. There is no one-size-fits-all approach to deal with a pandemic. Mitigation measures that work well in one country may not be as effective in another country. This is because the conditions are different among countries. Therefore, plans must be contextualised to the circumstances and conditions of each country.

16. Take for example border measures. Experts disagree on the effectiveness of border measures in slowing the spread of the pandemic from one country to another. Some US observers feel that closing off borders is a 'ridiculous' act that will do more damage by stopping the delivery of essential goods to people during a pandemic. Indeed for a large country like the United States which shares a huge land border with Canada and Mexico, imposing border measures may prove operationally unfeasible. This is because the borders are too porous.

17. However, for compact countries, including Singapore, that have fewer border checkpoints, border measures may buy precious time for these countries to ramp up their resources to respond to a pandemic. For instance,

a few days' grace could enable us to ramp up our healthcare capacity and get ready other mitigation measures such as instituting health checks at the checkpoints and putting in place quarantine procedures. A delay of one or two weeks could thus make even more significant difference to us.

18. I am glad that one of the topics that will be discussed at this conference is border controls. I hope that there will be a candid exchange of ideas and opinions not only on border controls, but also on other equally important issues such as disease surveillance, continuity in a crisis and the roles of non-Government players.

Concluding Remarks

19. This conference on multi-sectoral pandemic preparedness is a timely one. It reminds us that there is still much work to be done in preparing for a pandemic and that apart from governments, the private sector and citizens have critical roles to play as well.

20. Today's event is organised by a new research institution - the Centre for Non-Traditional Security Studies – at the S. Rajaratnam School of International Studies. This is indeed a commendable effort by a small team of very dedicated researchers and staff. I hope that as the Centre grows in strength and expands its research areas, it will organise more of such symposiums so that there will be more platforms for information sharing and brainstorming of ideas.

21. Ladies and gentlemen, we do not know how much time we are left to prepare for an influenza pandemic. But nature has given us an unprecedented warning and we must seize this opportunity to prepare ourselves. Thank you.

[1]“Fourth Global Progress Report on Responses to Avian Influenza and State of Pandemic Readiness” is produced by the UN System Influenza Coordinator (UNSIC) and the World Bank. The report focuses on progress in responses to avian influenza and in pandemic preparedness between June 2007 and June 2008. The report, based primarily on analyses of data provided by 148 countries, was published in Oct 2008.