

*Secretary*

U.S. Department of Homeland Security  
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**Homeland  
Security**

*Testimony of*

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*before*

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*H1N1 Virus*

Chairman Lieberman, Senator Collins, and members of the committee: Thank you for this opportunity to testify about our national plan in response to the most recent outbreak of the 2009 H1N1 flu virus.

The flu outbreak that we are seeing in the United States is a serious situation that we are addressing aggressively. As President Obama has said, while this outbreak is not a cause for alarm, it is a cause for concern. As part of our precautionary measures, we are responding forcefully and preparing for further cases of the 2009 H1N1 flu virus though at this time we do not know the ultimate scope or severity of the outbreak. We expect this outbreak to develop over time – so our response will be a marathon, and not a sprint.

DHS' role in addressing the threat of this flu outbreak is clear: The Homeland Security Act instructs the Secretary of Homeland Security to lead the Department as a focal point for the federal government regarding crises and emergency planning. Under Homeland Security Presidential Directive 5 (HSPD-5), the Secretary of Homeland Security is the Principal Federal Official (PFO) for domestic incident management, which includes responding to large-scale medical emergencies. Under the National Response Framework, the Department of Health and Human Services (HHS) has the lead for public health and medical services, which include assessing public health and medical needs, conducting disease surveillance, providing public health and medical information, developing vaccines, and managing health, medical, and veterinary equipment and supplies. As part of HHS' response, HHS' Centers for Disease Control and Prevention (CDC) has responsibility for identifying and tracking the spread of the disease, conducting epidemiological investigations and laboratory tests, managing the Strategic National Stockpile (SNS) and providing SNS medicines and medical supplies to states,

and communicating health-related information to the government, the media, the public, and others. Within its role, DHS has taken a number of steps to protect the American public in concert with our interagency partners, with state, local, and tribal governments, and with the private sector.

Other federal departments play critical parts in our ongoing efforts. Through the Homeland Security Council, the President has made clear that this is an effort where everyone has a role to play. The Department of Education hosted a conference call earlier this week with more than 1,400 participants to guide education officials on how to identify, report, and prevent 2009 H1N1 flu in school facilities; the U.S. Department of Agriculture is reaching out to agriculture officials in every state to continue to affirm that no signs of this newly identified strain of H1N1 virus have been detected in our nation's swine, that no illnesses have been attributed to handling or consuming pork, and that there currently is no evidence that one can get the virus from eating pork or pork products; the Department of Defense continues to ready its plans to protect the men and women who serve our nation in the event that the outbreak escalates.

While I am speaking of partners, I cannot go without mentioning the strength and additional forces that our state, local, and tribal governments bring to this effort. DHS has initiated daily conference calls with our government partners. From our public health officials to the homeland security advisers of each state's governors, leaders are working around the clock to protect the safety of those they serve.

The public also plays a critical role in helping to prevent the spread of the this virus, so DHS and other responding agencies have been engaging with the public to communicate to Americans everything that is being done to protect against this flu

outbreak, and to educate people on steps they can take to protect themselves. We know that many Americans are concerned about this problem, and they deserve to be informed. I am pleased to be here with Rear Admiral Anne Schuchat, M.D. from the CDC, who will discuss her agency's role in our cooperative approach to mitigate the 2009 H1N1 flu outbreak.

I would also like to recognize Dr. Schuchat and the rest of the CDC for all the work they have done in the past weeks to combat this virus. Some have expressed concern about vacant political positions in the responding agencies, and while we will certainly welcome new appointees, this issue has not at all hindered the national response. We have benefited – and will continue to benefit – from the great work of career public health officials who have spent their careers in these fields, have prepared extensively, and have critical experience in dealing with what we are facing.

Currently, the United States has 50 million courses of anti-viral medication on hand that will have some efficacy against the 2009 H1N1 flu virus. Six million courses are dedicated for containment, and 44 million for treatment. Twenty-five percent (11 million courses) of the states' allotments of these stockpiled anti-virals, known commercially as Tamiflu and Relenza, are being released. Personal protection equipment is also being provided. While there is a priority placed on states that have confirmed cases of this flu, as well as on border states, all states have access to these extra resources. Resources are already being deployed to several states and we expect all of the 11 million courses will be deployed by May 3. These federal resources augment the roughly 23 million courses that states themselves have stockpiled. The CDC and the State

Department have also advised against non-essential travel to Mexico in order to mitigate the spread of 2009 H1N1 flu.

DHS has responded on numerous levels. Customs and Border Protection (CBP) is monitoring incoming travelers to identify individuals experiencing symptoms entering the U.S. and is providing information about the 2009 H1N1 flu virus to people who do decide to travel. We have also pre-positioned critical assets for our workforce in case the outbreak becomes more widespread and have conducted aggressive outreach to state and local authorities.

In our response, we are moving according to plans and protocols in the National Pandemic Strategy and Implementation Plan (PI) to effectively address an outbreak of this kind. We have taken action to get in front of this not just based on what's going on today, but on what could happen four months from now. We are prepared, and we are constantly evaluating the facts to ensure that we have a plan ready to be executed no matter how the threat evolves.

Indeed, this is a threat for which DHS and other levels of government have been preparing for a long time. While Governor of Arizona, I served as the co-chair of the National Governors Association panel on pandemic flu preparedness. I was able to see first-hand and help guide collaboration among states, DHS, HHS, and the CDC in preparing for potentially dangerous flu outbreaks. These preparedness exercises are now coming into great use, and the strong partnerships that formed as a result are now serving the American people well as we collaborate extensively across levels of government to mitigate this public health threat.

I would now like to explain a few of the actions DHS in particular has taken to mitigate the spread of this flu.

### **DHS Actions**

#### *Possibly Ill Travelers*

As infected travelers can lead to the spread of this virus, DHS is taking a number of precautions in light of the scope and nature of the threat.

At our land ports of entry and in our airports, CBP is continuing to implement protocols to direct incoming travelers who appear sick to separate rooms where they can be evaluated by local public health professionals. This is similar to the kind of monitoring that CBP conducts consistently, though obviously CBP is now in a heightened state of alert regarding 2009 H1N1 flu.

Furthermore, DHS is keeping travelers informed of the steps they should take to ensure their own health and the health of others in light of this outbreak. The Department is working with CDC to distribute “traveler’s health alert notices” (THANs) issued by CDC to educate travelers. The notices explain 2009 H1N1 flu and its symptoms to the traveler and inform travelers of steps they should take in case they feel symptoms. CBP is issuing notices to those entering the country at land ports of entry, to aircraft passengers coming into the United States, and to passengers on cruise ships with destinations stops in Mexico. The Transportation Security Administration (TSA) is posting these notices at screening checkpoints and other airport locations.

Like the CBP, TSA has instituted protocols for passengers who may be exhibiting 2009 H1N1 flu symptoms to engage local health officials in order to evaluate their condition before further travel. Immigrations and Customs Enforcement (ICE) is also being vigilant and reviewing recent intakes in its detainee population to identify any detainees who might have contracted this flu. The Coast Guard is alerting health officials of any signs of this flu virus discovered on board commercial or private vessels while conducting routine Coast Guard duties, and is ensuring the shipping community is following established protocols for reporting ill crewmembers.

The actions we are taking regarding international travelers match the precautions advised by the CDC and the World Health Organization (WHO) based on the current, evolving epidemiology of the 2009 H1N1 flu virus. According to both the CDC and WHO, closing the border would yield only very marginal benefits; at the same time, closing the border has very high costs. The strain of the this virus that was first detected in Mexico is already present throughout the United States, and there is no realistic opportunity to contain the virus through border closures, so our focus must now be on mitigating the virus. The actions we are currently taking, as well as the travel advisories issued by the CDC and the State Department against non-essential travel to Mexico, should help to mitigate the number of people infected with 2009 H1N1 flu crossing the border.

*Outreach to State and Local Authorities, International Partners, and the Private Sector*

DHS is conducting extensive outreach to state, local and tribal partners so that they are fully apprised of all federal government actions regarding this flu outbreak, and to ensure that they are integrated in the response.

DHS' Office of Intergovernmental Programs (IGP) has instituted a daily conference call among all states – all top-level state and territorial homeland security advisors are invited to participate in these calls, which will continue as long as necessary. DHS is also actively working with cities that have been particularly affected, such as New York City. I have been in personal contact with the governors of virtually every state with a confirmed case of 2009 H1N1 flu, and I will continue to reach out to governors and states as the situation evolves.

FEMA is also prepared to respond as necessary to provide support, and is coordinating with affected states, HHS, the CDC and other partners to determine potential requirements.

In order to continue building a tri-national approach to addressing this virus, in the past few days, I have personally spoken with Arturo Sarukhan, the Mexican ambassador to the United States; my counterpart in Mexico, Interior Minister Fernando Gomez Mont; and my Canadian counterpart, Public Safety Minister Peter Van Loan. We recognize that viruses do not respect borders, and thus it is in our mutual interest to coordinate our efforts.

The Private Sector Office of DHS has reached out to its private-sector partners, in order to keep them informed of how DHS is addressing 2009 H1N1 FLU, and to communicate what they can do to mitigate the risk of this flu to their employees and the country. Efforts have focused in particular on reaching partners in the travel, aviation,



and hospitality industries. The DHS Office of Infrastructure Protection hosted a conference call with over 500 owners and operators of the Nation's Critical Infrastructure to keep them apprised of the situation as it develops.

### *Preparing the Department*

The Department is taking many steps to ensure it continues to operate at full strength throughout the outbreak. As the leader of this Department, I know that if DHS is to protect the safety of our nation, we must ensure that we are doing all that we can to protect the safety of the DHS workforce. This effort has been a top priority for our leadership within the Department, especially working to keep safe our employees who are in the field with face-to-face public interaction everyday. To that end:

CBP has strategically positioned critical assets – including personal protection equipment (masks, sanitizers, etc.) and anti-viral drugs – in each of the nine Border Patrol sectors, in order to ensure that our agents at the border are protected against the virus to the maximum; similar actions have been taken by the U.S. Coast Guard in order to ensure our maritime borders continue to be guarded at full strength.

FEMA and U.S. Citizenship and Immigration Services are taking similar action to preposition critical supplies and protect their workforces and operations.

ICE is similarly prepared to meet the health and safety needs of its employees as well as those individuals in ICE custody. In preparing front-line employees that may be at risk, ICE has pre-positioned personal protective equipment for its law enforcement and mission-critical personnel not only at our borders and throughout the U.S.

Finally, the TSA is rapidly deploying personal protection equipment to 54 airports along the border and with flights from Mexico. The equipment includes masks, gloves, and hand sanitizer, in case those supplies are needed in a heightened state of precaution. DHS has been in contact with its employees about common-sense precautions they can take against 2009 H1N1 flu, in addition to information about the use of anti-viral drugs, should such a step become necessary.

### **Conclusion**

It is important that we continue to educate Americans about the 2009 H1N1 flu virus and the common-sense steps everyone can take to protect themselves, their families, and their neighbors. We urge Americans to take common flu-season precautions, such as washing hands, staying home from school or work if they feel ill, and covering mouths when coughing or sneezing. These are actions we can all take to guard against this flu.

Indeed, this is an effort that has a role for everyone: Our faith-based leaders to can educate their congregations, community-based organizations can mobilize education campaigns in places from senior centers to daycare centers, and employers can communicate with their employees – not with a sense of fear, but with a sense of caution.

Obviously, our thoughts and prayers are with everyone in the United States and around the world affected by this virus. It is our job as a nation to work together to protect each other, and the federal government, states, and cities are acting in unison to do this every day.

Chairman Lieberman, Senator Collins, and members of the Committee: Thank you again for this opportunity to testify about the steps DHS is taking confronting this

threat head-on and to secure America from this virus. I am now happy to take your questions.