

JAMES R. LANGEVIN
2D DISTRICT, RHODE ISLAND

COMMITTEE ON HOMELAND SECURITY
EMERGING THREATS, CYBERSECURITY, AND
SCIENCE AND TECHNOLOGY
CHAIRMAN

BORDER, MARITIME, AND
GLOBAL COUNTERTERRORISM

INTELLIGENCE, INFORMATION SHARING, AND
TERRORISM RISK ASSESSMENT

HOUSE PERMANENT SELECT
COMMITTEE ON INTELLIGENCE

TERRORISM, HUMAN INTELLIGENCE,
ANALYSIS AND COUNTERINTELLIGENCE

TECHNICAL AND TACTICAL INTELLIGENCE

Congress of the United States
House of Representatives
Washington, DC 20515-3902

WASHINGTON OFFICE:
109 CANNON HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
TELEPHONE: (202) 225-2735
FAX: (202) 225-5976

DISTRICT OFFICE:
THE SUMMIT SOUTH
300 CENTERVILLE ROAD, SUITE 200
WARWICK, RI 02886
TELEPHONE: (401) 732-9400
FAX: (401) 737-2982

james.langevin@mail.house.gov
www.house.gov/langevin

The Honorable James R. Langevin
**Opening Statement “Beyond the Checklist: Addressing Shortfalls in National
Pandemic Influenza Preparedness”**
September 26, 2007

Good morning. I'd like to thank the witnesses on both of our panels for appearing today, and I would especially like to thank Dr. Tony Cirillo from my home state of Rhode Island who will be participating on the second panel. I appreciate your willingness to help Congress understand the devastating nature of pandemic influenza – and to work with us in determining what resources are necessary to help prepare the Nation before a pandemic occurs.

Today we will explore what it takes to prepare for, and respond to, an influenza pandemic that would affect every sector of society, and every person in the world. Planning is problematic to begin with, because it is so difficult to fathom both the potential casualties and the impact of such a pandemic. Even when we focus just on our own country, the projected numbers are still staggering – 200,000 dead, 2 million ill, all sectors and every aspect of the infrastructure negatively impacted. Though this is a problem that we will not be able to control through standard disease management practices, we can and must rise to the challenge. Make no mistake about it, we are due for a severe influenza pandemic.

The influenza viruses that could result in a pandemic are increasing in virulence. Record numbers of humans are now living in proximity to current and potential animal carriers. Rapid transit moves people and cargo at increasingly faster rates, fostering the movement and transfer of diseases. Influenza viruses are already mutating faster than we could have imagined, and the toll that avian influenza is taking on other countries is already devastating.

The impact this disease could have on the security of our homeland is indeed worrisome, which is why awareness and preparedness is critical. Increased emphasis on pandemic planning and preparedness for the United States in recent years has resulted in the generation of the National Strategy for Pandemic Influenza (released in November 2005) and its Implementation Plan (released in May 2006). Some Departments and agencies within the Executive Branch have also created their own strategies, and distributed resources and guidance throughout the country, at all levels of government, and to the private sector – based on their strategies and the National Strategy itself. Although these are positive steps, one thing is clear: the Nation is still not ready for an influenza pandemic to occur here or overseas.

Today we will discuss the insufficiencies in the National Strategy and its Implementation Plan, and hopefully find ways to improve upon our current strategies. The Implementation Plan for the National Strategy is composed of hundreds of separate actions – forming a checklist with 324 items. Although checklists are good tools for getting things accomplished, we can sometimes make checking things off more important than actually achieving the goals and objectives we set for ourselves in the first place.

Our Nation’s leaders are not seeing the big picture – instead, they are driving our Departments and agencies to focus so much effort on checking boxes that there is barely time left to actually combat a potential pandemic. We need to address the shortfalls in our National Pandemic Influenza Preparedness, and get beyond the checklist. Our efforts seem to have gotten stuck at the Federal level – but it’s time to shift our resources to the States, Territories, Tribes, and Localities. State, territorial, tribal, and local entities have found themselves preparing for a pandemic without:

- Adequate funding,
- Necessary resources,
- Strategy-driven guidance, or
- Strong leadership.

When pandemic influenza hits this country, our public health professionals and health care practitioners will be fighting to save lives, and the Federal government will be assisting in those efforts. We need to cater to *them*, not the checklist. Today we’ll also examine the interactions among the members of the Executive branch – especially the Department of Homeland Security and the Department of Health and Human Services as they co-lead activities to manage an influenza pandemic when it does strike our nation.

Unfortunately, there is little evidence that either agency knows what their roles and responsibilities would be during an event. I very much fear another Hurricane Katrina situation, where delays in identifying principal federal officials resulted in the significant problems and unnecessary losses of life. We cannot afford for this to happen again. We must therefore work the uncertainties out today so we can properly deal with these situations tomorrow. I very much appreciate the efforts put forward by our Federal and non-federal colleagues, in the private and public sectors, and thank you for being here this morning.