

Hosting an  
Installation Town Hall on



**INFLUENZA PREPAREDNESS**

A Communication Toolkit for Leaders and Communications Staffs



# Hosting an Installation Town Hall on H1N1 Influenza Preparedness

## A Communication Toolkit for Leaders and Communications Staffs

In an effort to inform Army Community members\* about their role and the Army's role in protecting mission readiness and minimizing the spread of H1N1 influenza, Installation Commanders are encouraged to hold face-to-face town hall meetings as recommended in the Army H1N1 Strategic Communication Plan. The town hall meetings will provide a forum for Installation Commanders to provide information about the H1N1 flu virus and allow for questions to be answered.

The toolkit provides a framework for the town hall meeting by supplying support materials and resources including: messages and talking points in accordance with Army guidance, frequently asked questions, a town hall meeting template and other health education materials. These resources can be adapted for use at local installations. See below for a complete listing of toolkit contents.

It is recommended that town hall meetings include (at a minimum) the following:

- Multiple sessions, to accommodate participant schedules and thereby maximize attendance,
- A preventive medicine expert (preferably affiliated with an Army medical treatment facility) to respond to medical questions,
- Installation civilian and military personnel experts to answer questions about pertinent personnel policies, and
- A representative from all units on the installation.

You may also want to include other partners such as representatives from local public health departments or local schools.

### TOOLKIT CONTENTS

This toolkit includes the following:

- **Messages and talking points** about H1N1 influenza: Spokespersons should familiarize themselves with main messages and be able to deliver them verbatim. Supporting messages and talking points can be used if additional clarification of the main messages is needed. Not all supporting messages and talking points included in this toolkit will necessarily be covered in your town hall meeting. The supporting messages and talking points are comprehensive in scope and provided as back up if queried. Use the town hall meeting template as a script or guide for the focus of the meeting.
- **Frequently asked questions** and suggested answers: These are recommended for use in preparing spokespersons for the town hall meeting.
- Town hall meeting **template**: The template is a PowerPoint script for planning the town hall meeting; it includes suggestions for tailoring the meeting to your specific community as well as risk communication advice.
- **Fill-in-the-blank announcement** for use in command information channels: This can be adapted for broadcast channels and web sites as desired.
- Sample **e-mail announcement**: This can be used by installation and unit commanders to announce town hall meetings to the installation's Army community.
- Sample **letter announcement**: This can be used by installation and unit commanders to announce town hall meetings to the installation's Army community.

\* "Army community members" include Soldiers and their Family members, Army civilian employees, and anyone who works on an installation. It is recommended that civilian and contract employee family members be included if space permits. \*\*All of the information products in this toolkit are subject to change as more information regarding the H1N1 virus and vaccination becomes available. Please check online for the most up-to-date version available.

- Suggested text for a **public service announcement** (PSA) about H1N1 prevention for installations with broadcast capabilities. Two links to MEDCOM H1N1 PSAs.
- Sample **follow-up letter**: This letter can be sent (either via mail or e-mail) to the installation Army community following completion of the town hall meetings as a reminder of content covered and to serve as a reference for community members.
- **Brochure**: This brochure contains information on H1N1 and the H1N1 vaccine.
- **Poster**: The poster can be displayed at the town hall meeting and throughout the installation at locations such as unit spaces, commissaries, dining halls, gyms, health clinics, offices, etc.
- **Widgets**: A widget that will direct the user to the Army Medicine web page has been designed for use on an organization's website. A second widget that directs the user to the American Lung Association is also provided.
- **Fact Sheet**: The fact sheet is designed for medical personnel and provides risk communication tips for discussing H1N1 influenza with those they treat.
- **Health Information Products** from the U.S. Army Center for Health Promotion & Preventive Medicine: The following products are available online and at no cost from the USACHPPM Publications & Products e-Catalog (<http://usachppm.amedd.army.mil/HIOShoppingCart/>). They may either be downloaded and reproduced locally or ordered directly from USACHPPM:
  - Wash Your Hands (poster)
  - Stop the Spread of Germs (poster)
  - Protect Yourself and Your Patients from Influenza (poster)
  - Fight Germs and Stay Healthy (sticker)
  - Influenza Prevention (tip card)

Additional information about H1N1 influenza is available through these sources:

- Army Medicine, <http://www.armymedicine.army.mil/>
- USACHPPM, <http://usachppm.amedd.army.mil/>
- DOD Health Affairs, <http://fhp.osd.mil/aiWatchboard/>
- Military Vaccine Agency, <http://www.vaccines.mil/h1n1>
- The U.S. Centers for Disease Control and Prevention, [www.cdc.gov](http://www.cdc.gov)
  - H1N1 Flu, <http://www.cdc.gov/h1n1flu/>
  - H1N1 Influenza Vaccination, <http://www.cdc.gov/h1n1flu/vaccination/>
  - Information for travelers, <http://wwwnc.cdc.gov/travel/content/novel-h1n1-flu.aspx>

# Messages & Talking Points

## Messages and Talking Points

### Main Messages

- Prepare for H1N1 flu the same way you do for seasonal flu.
- Get vaccinated as soon as you can. You'll need both H1N1 and seasonal flu vaccines.
- Take everyday steps to protect your health:
  - Wash your hands often.
  - Cover your nose and mouth when you cough or sneeze.
  - Avoid touching your eyes, nose or mouth. Germs spread this way.
  - Try to avoid close contact with sick people.
- Stay home if you are sick.

### Supporting Messages

#### *General:*

- Primary concern is the health and welfare of Soldiers, their Family members, Army Civilians and Contractors worldwide.
- The Army and DoD are taking steps to educate and safeguard our Soldiers, their Families, Army Civilians, Contractors and other Army personnel.
- The Army and DoD have been working with other government agencies to strengthen detection and response to outbreaks.

#### *Prevention:*

- 1) Non-pharmaceutical measures are important in decreasing the spread of virus. Take these everyday steps to protect your health:
  - Cough or sneeze into a tissue. Throw the tissue in the trash after you use it. If a tissue isn't available, cough or sneeze into your upper sleeve (not your hands).
  - Wash your hands often with soap and water, especially after you cough or sneeze. Alcohol-based hand cleaners are also effective.
  - Children should sing Happy Birthday or the ABCs twice to ensure proper hand washing time; Soldiers should recite the Soldier's Creed or Warrior Ethos twice.
  - Avoid touching your eyes, nose or mouth. Germs spread this way.
  - Try to avoid close contact with sick people.

- If you are sick with flu-like illness, [CDC recommends that you stay home until 24 hours after your fever is gone](#) except to get medical care or for other necessities. (Your fever should be gone without the use of a fever-reducing medicine.) Keep away from others as much as possible to keep from making others sick. Consider wearing a mask if you must leave the home or when in close proximity to others.
- 2) Stay informed of public health guidance regarding community-based methods to decrease spread of H1N1 influenza within your community:
    - Dismissal of students from school (including public and private schools as well as colleges and universities), closure of childcare programs, and reduction of out-of-school social contacts and community mixing.
    - Use of social distancing measures to reduce contact between adults in the community and workplace, including, for example, cancellation of large public gatherings and alteration of workplace environments and schedules to decrease social density.
    - Isolation of sick people and treatment with antiviral medications. Isolation may occur in the barracks, home, healthcare facilities, or other specially-designated locations.
  - 3) [Everyone for whom the CDC recommends annual vaccination](#) should be vaccinated for the seasonal flu in accordance with the recommendations found at <http://www.cdc.gov/flu/professionals/acip/index.htm>.
  - 4) The Army will be providing vaccine to Soldiers to ensure mission readiness.
  - 5) OCONUS Army Family members will receive H1N1 vaccine through their local MTF.
  - 6) Inactive Individual Mobilization Augmentee (IMA) Reservists, Army Civilians and Contractors should obtain the H1N1 vaccine through their local health departments according to the local supplies and priorities. These populations are encouraged to do so as soon as it becomes available. Local health departments can be located at <http://www.naccho.org/about/lhd/>.
  - 7) The H1N1 vaccine will be given in addition to the annual seasonal influenza vaccine.
  - 8) Everyone should receive the annual seasonal influenza vaccine as soon as possible. This vaccine will be available before the H1N1 influenza vaccine.

*Prepare:*

- 1) Develop and maintain an individual or Family emergency kit and listen to local public health officials for updated information. Know your local community plan for distributing vaccine or other pharmaceuticals. Further information on emergency kits is available at [www.Ready.Army.mil](http://www.Ready.Army.mil) and [Flu.gov](http://Flu.gov)
- 2) Army installations may issue "PI Kits" that contain pandemic influenza information, (2) N-95 masks, (4) surgical masks, and hand sanitizer. These supplies are not sufficient alone, but are meant to introduce force health protection concepts for preventing the spread of disease. Mask fitting is not required for private use; however, most people will not require use of masks during an influenza outbreak. Local Primary Care Managers (PCMs) and MTFs will have detailed information regarding necessity and proper use of masks.

#### *Treatment:*

- To date, most people have been experiencing mild to moderate flu symptoms. Follow CDC guidelines by staying at home if ill and calling your physician for treatment information.
- The DoD has secured antivirals to treat Soldiers and other military medicine beneficiaries should they become ill.

#### *Surveillance:*

- Army health officials are tracking H1N1 influenza cases among Service members and their Families worldwide, just as they do for seasonal influenza.
- Army health officials will provide guidance and recommendations to decrease the spread of H1N1 influenza to Service members and their Families.

#### *Recovery:*

- The health and welfare of Soldiers, their Families, retirees, Army Civilians and Contractors is a priority of the Army.
- The Army will use lessons learned from this pandemic and apply them to future public health emergencies.

#### Talking Points

- The Army's mission is to preserve the ability of our Soldiers, Civilians and Contractors to provide for the national defense and to sustain current military operations worldwide. To maintain combat-ready manpower, Soldiers and other mission essential personnel must be healthy.
- The health and welfare of Soldiers and Family members is a primary concern.
- The Department of Defense and the Army are monitoring this public health emergency very closely. To date, H1N1 virus has had minimal operational impact for the Department of Defense.
- The Army will respond to an outbreak of the H1N1 virus to preserve combat capabilities and readiness, save lives, and reduce human suffering for all Soldiers, their Families and Army Civilians and Contractors.
- In the event this should become a greater health crisis, the Army has plans to ensure we can preserve the fighting strength of the force.

- The U.S. Army requires all Soldiers, Civilian personnel, and Contractors en route to the Central Command (CENTCOM) Area of Operations (AO) to conduct H1N1 screening prior to travel. This includes deploying Army units; Soldiers, Civilian personnel, Contractors, and other Service Members going through the Army's CONUS Replacement Center (CRC) at Fort Benning, GA, or traveling through the Army's Personnel Assistance Points (PAP) at the Atlanta and Dallas-Fort Worth airports; and Soldiers, Civilian personnel, and Contractors traveling on commercial flights to countries in the CENTCOM AO. The screening is done per Centers for Disease Control guidelines, to include temperature readings. Personnel displaying any symptoms or with a temperature greater than 100.4 degrees Fahrenheit are not allowed to travel and are referred to the airport medical facility. That facility will determine if the traveler can be cleared or needs to be referred to a local medical treatment center.
- The Food and Drug Administration has authorized the emergency use of a diagnostic test for H1N1 for U.S. troops in combat units in the Middle East and on Navy ships.



# Frequently Asked Questions

## Frequently Asked Questions and Answers

Q: Is H1N1 the same as the seasonal flu?

No. Novel H1N1 (referred to as “swine flu” early on) is a new influenza virus causing illness in people. This new virus was first detected in people in the United States in April 2009. This virus is spreading from person to person worldwide, probably in much the same way that regular seasonal influenza viruses spread. On June 11, 2009, the [World Health Organization](#) (WHO) signaled that a pandemic of novel H1N1 flu was underway.

Q: What can I do to protect myself from H1N1 and seasonal flu?

A: In addition to personal hygiene measures, DoD requires all active duty personnel to get vaccinated against seasonal influenza and H1N1 and encourages all military beneficiaries to get both vaccines as well.

Q: Are there other ways to prevent the spread of illness?

A. Take everyday actions to stay healthy.

- Cover your nose and mouth with a tissue when you cough or sneeze. Throw the tissue in the trash after you use it. If a tissue isn't available, cough or sneeze into your upper sleeve (not into your hands)
- Wash your hands often with soap and water, especially after you cough or sneeze. Alcohol-based hands cleaners are also effective.
- Avoid touching your eyes, nose or mouth. Germs spread that way.
- Stay home if you get sick. CDC recommends that you stay home from work or school for at least 24 hours after your fever is gone. (Your temperature should be less than 100 degrees Fahrenheit or 37.8 degrees Celsius without the use of fever-reducing medicine.) Limit contact with others to keep from infecting them.

Q: How severe is illness associated with novel H1N1 flu virus?

A: Illness with the new H1N1 virus has ranged from mild to severe. While most people who have been sick have recovered without needing medical treatment, hospitalizations and deaths from infection with this virus have occurred. About 70 percent of people who have been hospitalized with this novel H1N1 virus have had one or more medical conditions previously recognized as placing people at “high risk” of serious seasonal flu-related complications. This includes pregnancy, diabetes, heart disease, asthma and kidney disease. One thing that appears to be different from seasonal influenza is that adults older than 64 years do not appear to be at increased risk of novel H1N1-related complications thus far.

Q: When is it expected that the novel H1N1 vaccine will be available?

A. The initial shipments of novel H1N1 vaccine are expected in mid to late October. Additional supplies of vaccine will follow on a weekly basis until sufficient vaccine is available to everyone who needs or wants it.

Q: Will the seasonal flu vaccine also protect against the novel H1N1 flu?

A. No. The seasonal flu vaccine does not protect against the novel H1N1 flu.

Q. Can the novel H1N1 vaccine be given at the same time as other vaccines?

A. The injectable novel H1N1 vaccine may be administered at the same time as the seasonal influenza vaccine and all other inactivated or live vaccinations.

The live intranasal H1N1 vaccine must be administered on the same day as other live vaccinations or 28 days apart. However, getting the seasonal and H1N1 intranasal vaccines on the same day is NOT recommended.

Q. Which Department of Defense personnel have priority for H1N1 vaccination?

A. If the illness caused by the virus remains low in severity, the following groups will have priority: 1) deployed forces, ships afloat, high risk healthcare providers, and training sites; 2) critical personnel; and 3) other personnel. If illness severity becomes high, training sites will be moved to the priority 3 category - "other personnel."

Q. Who are the target groups to receive the novel H1N1 vaccine?

A. CDC's Advisory Committee on Immunization Practices (ACIP) has recommended that certain groups of the population receive the novel H1N1 vaccine when it first becomes available. These key populations include pregnant women, people who live with or care for children younger than 6 months of age, healthcare and emergency medical services personnel, persons between the ages of 6 months and 24 years old, and people ages of 25 through 64 years of age who are at higher risk for novel H1N1 because of chronic health disorders or compromised immune system.

In the event of a substantial delay in vaccine production or inadequate supply, the committee recommends that the following groups receive the vaccine before others: pregnant women, people who live with or care for children younger than 6 months of age, health care and emergency medical services personnel with direct patient contact, children 6 months through 4 years of age, and children 5 through 18 years of age who have chronic medical conditions.

Q. Where will the vaccine be available for Army dependents, retirees, DA civilians and contractors?

A. Every state and territory is developing a vaccine delivery plan. Vaccine will likely be available in settings such as vaccination clinics organized by local health departments, healthcare provider offices, schools, and other private settings, such as pharmacies and workplaces. Military treatment facilities may also receive vaccine from states to administer to dependents, retirees, and other beneficiaries.

Q: If an agency chooses to institute telework during a pandemic, how are employees managed?

A: Agencies should have strong, regular telework programs in place. The focus during a pandemic should be on getting as much work done as possible. Managers, employees, and organizations will have to remain flexible with each other and with their work, and will have to adapt to the changing environment.

Q: My child's school has closed. Can I telework from home while caring for my child? If so, for how long?

A: Each individual agency will determine the necessities for telework based on their individual mission and responsibilities. The OPM guidance can be found here: <http://www.chcoc.gov/Transmittals/TransmittalDetails.aspx?TransmittalID=2452>

Q: If an employee is healthy but stays home because he/she has been in direct contact with individuals infected with the flu, in what pay/leave status are they placed?

A: An employee may use accrued sick leave when he or she would, as determined by the health authorities or a health care provider, jeopardize the health of others because of his or her exposure to a communicable disease.

Q: My child's school has closed. Can I use "family friendly" sick leave to care for my child until the school reopens?

A: No. Sick leave is not appropriate if the child was sent home as a preventive measure instead of actually being sick.

Q: Are there travel restrictions due to the H1N1 flu?

A: Not currently. Check with the Department of State website as conditions may change: [http://www.travel.state.gov/travel/cis\\_pa\\_tw/pa/pa\\_4493.html](http://www.travel.state.gov/travel/cis_pa_tw/pa/pa_4493.html)

Q. What are the procedures in place to screen individuals prior to entering the CENTCOM AOR?

A. Prior to boarding the aircraft, individuals are screened for fever (temperature is taken) and H1N1 symptoms such as cough and sore throat. This screening has been implemented at embarkation ports, including the Dallas-Fort Worth and Atlanta airports.

Q. What is the medical response if an individual is identified to have symptoms of the H1N1 Influenza prior to deployment?

A. If an individual displays symptoms, that individual will not be able to deploy until cleared by a medical professional.

Q. What is the U.S. military doing to ensure host nation populations do not become infected from the U.S. personnel entering their country?

A. The U.S. military is working very closely with host nation governments to ensure anyone who may have symptoms of H1N1 is identified and evaluated. Anyone with symptoms of H1N1 is immediately isolated until lab testing is completed. The U.S. military is taking every precaution to safeguard not only our U.S. personnel but to ensure influenza does not spread to the host nation populace.

Q: Could our enemies use this flu as a weapon?

A: Potential for weaponization of influenza has been studied by appropriate agencies of the United States Government. While it is theoretically possible, it would be exceptionally difficult to do. Further, the United States Government has no evidence suggesting that any current or potential adversary is interested in attempting it.

# Town Hall Meeting Template

## Town Hall Meeting Template

The template is a PowerPoint presentation that can be used for planning and presenting the town hall meeting; it includes sample slides and suggestions for tailoring the meeting to your installation. Slides 2-6 of the presentation provide risk communication guidance for the town hall organizer and should not be delivered with the installation presentation. The presentation template is available on AKO at: <https://www.us.army.mil/suite/files/19197951>. Once the presentation has been tailored to your installation and slides 2-6 of the template are removed, it is suitable for public presentation.

# Fill-in-the-Blank Announcement

## Sample Announcement for Command Information Channels

Up-to-date information on H1N1 influenza planning and prevention will be discussed by installation commander [rank, full name] at a town hall meeting [time, date] at [location].

[Commander last name] will brief installation Soldiers, civilian and contract workers, retirees, and family members on local and Army-wide actions to mitigate effects of the H1N1 outbreak and ensure installation readiness. The commander and medical and personnel experts [list any other experts who will participate] will be available for a question-and-answer session after the commander's brief.

[If multiple town halls are planned, change lead to reflect that and list schedule here.]

Information on H1N1 influenza prevention also is available from these sources:

[List installation Web site, if information is available there.]

USACHPPM, <http://usachppm.amedd.army.mil/>

Army Medicine, <http://www.armymedicine.army.mil/>

DOD Health Affairs, <http://www.health.mil/Pages/Page.aspx?ID=37>

Military Vaccine Agency, <http://www.vaccines.mil/h1n1>

The U.S. Centers for Disease Control and Prevention, [www.cdc.gov](http://www.cdc.gov)



# Sample E-mail Announcement

## Sample E-mail to Announce Town Hall Meeting to Installation's Army Community

[Unit name] personnel and their family members are invited to attend a town hall meeting about H1N1 influenza hosted by [rank, full name], installation commander [time, date] at [location].

The commander and medical and personnel experts [list any other experts who will participate] will provide information on local and Army-wide actions to mitigate effects of the H1N1 outbreak and ensure readiness. Information on vaccines, telework policies and other relevant issues will be available. A question-and-answer session will follow the experts' briefings.

Please plan to attend this important event and learn how to protect yourself, your family and your coworkers from H1N1. [State if childcare will be available and when/where.]

# Sample Letter Announcement

## Sample Letter to Notify Installation Community about H1N1 Town Hall Meeting

Dear Army Family member:

As you may be aware, a new flu virus, H1N1 flu (referred to as “swine flu” early on) is causing illness in people worldwide. In order to keep you informed about the H1N1 flu virus and what the Army is doing, I would like to personally invite you to my next town hall meeting. The meeting/s will be held (DATE/TIME/ LOCATION).

The purpose of this town hall meeting(s) is to present you with information on H1N1 flu planning and prevention; and to discuss any questions or concerns you may have about H1N1 flu, the upcoming flu season and how it could affect you, your family and the (INSTALLATION NAME) community. My military medical and personnel experts will also be present at this meeting, along with a representative from the (NAME OF COUNTY) Health Department.

I encourage each of you to become more familiar with the information already available on H1N1 flu by visiting or contacting these sites:

- (INSTALLATION INFORMATION-website):
- (LOCAL/ STATE HEALTH DEPARTMENT INFORMATION-website):
- Army Medicine,
  - » <http://www.armymedicine.army.mil/>
- USACHPPM,
  - » <http://usachppm.amedd.army.mil/>
- DOD Health Affairs,
  - » <http://www.health.mil/Pages/Page.aspx?ID=37>
- Military Vaccine Agency,
  - » <http://www.vaccines.mil/h1n1>
- The U.S. Centers for Disease Control and Prevention,
  - » [www.cdc.gov](http://www.cdc.gov) or 1-800-CDC-INFO (1-800-232-4636)
- U.S. Government,
  - » <http://www.flu.gov>

I want to make sure that all members of the (INSTALLATION NAME) family pay special attention to the upcoming flu season. Each of us has a responsibility to stay healthy, and to take steps to help others stay healthy as well. Please plan to attend this important event and learn how to protect yourself, your family, your neighbors, and your coworkers from H1N1. [State if childcare will be available and when/where.] I look forward to seeing each of you at the (DATE) town hall meeting.

INSTALLATION COMMANDER

# Public Service Announcements

## Text for a Public Service Announcement (PSA) on H1N1 Prevention Information

Nothing is more important to the Army than our Soldiers and their Families. That's why I am urging all of you to protect yourselves against the threat of influenza by being vaccinated this fall. This is important for our retirees and their families, as well.

In addition to the seasonal influenza we face every year, this year we must also protect against the novel H1N1 influenza. The Army will provide vaccinations against both. Seasonal flu vaccine is available at your post hospital or clinic now, and H1N1 flu vaccine should be available by mid-October. You need to get both vaccinations to be protected.

Flu vaccinations are mandatory for all Soldiers. So, get vaccinated as soon as you can.

Also, take some precautions to prevent spreading germs, like covering your nose and mouth when you cough or sneeze, and washing your hands often with soap and water. If you get sick, stay away from others as much as possible to keep from making others sick.

In closing, I want to thank all our Soldiers for their service, and thank all our Family members for their support and the many sacrifices they make. Please do all you can do to keep yourselves safe and healthy.

### MEDCOM Public Service Announcements

H1N1 Flu, part 1 August 20, 2009, Army Media Player, 1:56 minutes  
<http://www.army.mil/media/amp/?bcpid=6981683001&bctid=34939661001>

H1N1 Flu, part 2 September 3, 2009, Army Media Player, 1:41 minutes  
<http://www.army.mil/media/amp/?bcpid=6981683001&bctid=37198703001>

# Sample Follow-up Letter

## Sample Follow-Up Letter to the Installation Community

*NOTE TO INSTALLATION: Suggest you coordinate with your local health department and county or state education agency prior to distributing this letter or email to ensure that all information is timely, relevant, and accurate. Where possible, integrate their information to assist in protecting the Army family.*

Dear Army Family member:

The new or “novel” H1N1 flu virus (formerly referred to as “swine flu” early on) continues to cause illness worldwide. As with seasonal flu, H1N1 flu germs are believed to be passed easily from person to person.

Currently, according to the Centers for Disease Control and Prevention (CDC.gov) visits to doctors for influenza-like illness are increasing nationally. Visits to doctors for influenza-like illness are higher than expected during this time of year. (INSTALLATION COULD ADD LOCAL DATA HERE). Therefore, it is extremely important that we all take preventive measures to stay healthy. Below are some simple steps to help minimize the spread of H1N1 and seasonal flu at (INSTALLATION).

- Take everyday actions to stay healthy:
  - Wash your hands frequently with soap and water for 20 seconds, or use an alcohol-based hand cleaner if soap and water are not available. Be sure to wash your hands after coughing, sneezing, or blowing your nose.
  - Cover your coughs and sneezes with a tissue, or cough and sneeze into your elbow. Dispose of tissues in no-touch trash receptacles.
  - Avoid touching your nose, mouth, and eyes. Flu germs spread this way.
  - Keep frequently touched common surfaces clean. This includes telephones, computer keyboards, door handles, light switches, remote controls, etc. Learn how to effectively clean surfaces at home and work at: <http://www.flu.gov/individual/panfacts.html>
  - Do not use other workers’ phones, desks, offices, or other work tools and equipment. If you need to do so, clean the items first (see above).
  - Find healthy ways to deal with stress and anxiety. Getting run down could make you more susceptible to the flu viruses.
  - Maintain a healthy lifestyle through rest, diet, exercise, and relaxation.
  - Teach your children to do these things, and encourage them to speak up when they don’t feel well.
- Know the signs and symptoms of the flu, and if you or a family member is sick with flu-like illness, stay home:
  - Fever (100 degrees Fahrenheit), or chills *and* cough or sore throat. Symptoms can also include runny nose, body aches, headache, tiredness, diarrhea, or vomiting.
  - The Centers for Disease Control & Prevention (CDC), the nation’s public health agency, recommends that people should stay home if they have flu-like illness until at least 24 hours after they are free of fever without the use of fever-reducing medicines.
- Get vaccinated against:
  - Seasonal flu, when it is available in your area. Seasonal flu shots can be obtained (INSERT LOCAL INFORMATION HERE).
  - H1N1 flu, when the vaccine becomes available to you. A new H1N1 vaccine has been approved by the Food & Drug Administration (FDA) and is expected to be available nationwide by mid-October. Non-military individuals at (INSTALLATION NAME) (e.g., military family members, DA civilians, contractors) can get the H1N1 vaccine at the (NAME OF LOCAL Health Department or MTF). For more information about Army priority groups for vaccination, visit: [http://www.defenselink.mil/home/features/2009/0509\\_h1n1/](http://www.defenselink.mil/home/features/2009/0509_h1n1/)



- Develop a home emergency kit. This will help ensure you have food, water, and necessary medicines if the H1N1 flu becomes more severe.
- Stay informed:
  - Listen to local and national radio, watch news reports on television, and read your newspaper and other sources of printed and Web-based information.
  - For more information, visit or contact these agencies:
    - (INSTALLATION INFORMATION):
  
    - (LOCAL/ STATE HEALTH DEPARTMENT INFORMATION):
  
    - U.S. government's central influenza website:
      - » <http://www.flu.gov>
    - Centers for Disease Control and Prevention (CDC):
      - » <http://cdc.gov/h1n1flu/>
      - » 1-800-CDC-INFO (1-800-232-4636)
    - Military Vaccine Agency:
      - » <http://www.vaccines.mil/h1n1>

I strongly encourage you to join me in our shared responsibility to protect ourselves, our families and the rest of the Army family as the coming flu season evolves. It is only through our shared responsibility to each other that we can then prevent the spread of germs this coming flu season. Thank you in advance for your cooperation.

INSTALLATION COMMANDER

# Brochure

# Brochure: H1N1 Flu: Novel H1N1 Influenza Facts for Service Members and Families

This brochure is available for download or order from the USACHPPM Publications & Products e-Catalog (<http://usachppm.amedd.army.mil/HIOShoppingCart/>)

**5. How do I prevent the spread of the novel H1N1 virus?**

There are everyday actions that can help prevent the spread of flu.

- Cover your nose and mouth with a tissue when you cough or sneeze. Throw the tissue in the trash after you use it. If a tissue isn't available, cough or sneeze into your upper sleeve (not into your hands).
- Wash your hands often with soap and warm water, especially after you cough or sneeze. Alcohol-based hand cleaners are also effective.
- Avoid touching your eyes, nose or mouth. Germs spread this way.
- Try to avoid close contact with sick people.
- If you are sick with flu-like illness, stay home for at least 24 hours after your fever is gone except to get medical care or for other necessities (your fever should be gone without the use of a fever-reducing medication). Keep away from others as much as possible to keep from spreading the illness.
- If you are severely ill or you are at high risk for flu complications, contact your healthcare provider. Your healthcare provider will determine whether flu testing or treatment is needed.

**Other important actions that you can take are:**

- Follow public health advice regarding school closures and other social distancing measures.
- Be prepared in case you get sick and need to stay home for a week or so: a supply of over-the-counter medicines, alcohol-based hand cleaners, tissues and other related items can help you avoid making trips out in public while you are sick and contagious.

For more information about vaccines or vaccine policy  
Military Vaccine (MVA) Agency  
<http://www.vaccines.mil/H1N1>

For medical advice about vaccinations  
DoD Vaccine Clinical Call Center  
24-hour Toll-Free: 866.210.6469

For clinical management and referrals  
DoD Vaccine Healthcare Centers  
<http://www.vhinfo.org/>  
Toll-Free: 866.210.6469

**USACHPPM**  
<http://usachppm.amedd.army.mil>

**H1N1**  
Novel H1N1 Influenza

## H1N1 Flu

**Novel H1N1 Influenza Vaccine Facts for Service Members and Families**

**Disease**

- 1. What is novel H1N1 influenza (flu)?**  
Novel H1N1 flu (also called "swine flu" or 2009 H1N1 flu) is a new strain of influenza virus. This new virus was first recognized in April 2009. Since that time, it has spread throughout the world.
- 2. Is novel H1N1 flu contagious?**  
Yes.
- How does novel H1N1 spread?**  
Novel H1N1 spreads from person-to-person in the same way that regular seasonal influenza viruses spread. After a person with the flu coughs or sneezes, other people may become infected with the droplets. They can also become infected by touching something with flu viruses on it and then touching their eyes, nose or mouth.
- How long can an infected person spread novel H1N1 to others?**  
People may be contagious from 1 day before they develop symptoms to up to 7 days after they get sick. Children, especially young children, might be contagious for even longer.
- How long can influenza virus survive on objects such as doorknobs, sinks and counters?**  
Influenza virus can survive and infect a person for 2-8 hours after being deposited on the object.
- 3. What are the symptoms of novel H1N1?**  
The symptoms of novel H1N1 are similar to the symptoms of seasonal flu and include fever, cough, sore throat, runny or stuffy nose, body aches, headache, chills and fatigue. Some people who have been infected with this virus have also reported diarrhea and vomiting. The infection can cause mild to severe illness as well as life-threatening complications.
- 4. What can I do to protect myself from getting sick?**  
Get vaccinated. A novel H1N1 vaccine has been approved by the FDA and will be available in mid-October. The vaccine to protect against seasonal influenza is already available. You should get both vaccines as soon as possible.

**Vaccine**

**6. Will the seasonal flu vaccine also protect against the novel H1N1 flu?**

No.

The seasonal flu vaccine does not protect against the novel H1N1 flu. For this reason, it is important to get both H1N1 and seasonal flu vaccines this year.

**7. Can the novel H1N1 vaccine be given at the same time as other vaccines?**

Yes.

The injectable novel H1N1 vaccine may be administered at the same time as the seasonal influenza vaccine and all other inactivated or live vaccines.

The live intranasal H1N1 vaccine must be administered either on the same day as other live vaccinations or 28 days apart. However, getting the seasonal and H1N1 intranasal vaccines on the same day is NOT recommended.

**8. Is the novel H1N1 vaccine mandatory?**

The H1N1 vaccination is mandatory for all uniformed personnel.

All others are highly encouraged to receive the vaccine. The following groups are considered high risk and are being targeted for vaccination:

- Pregnant women
- Household contacts and caregivers for children younger than 6 months of age
- Healthcare and emergency medical services workers
- Everyone 6 months to 24 years old
- People 25 to 64 who have conditions that put them at higher risk of serious infection and death
- People older than 64 years of age are NOT being targeted for H1N1 vaccination

**9. What is the novel H1N1 vaccine?**

It is a vaccine made with one strain of influenza called A/California/07/2009 (H1N1). The vaccination will be administered as a 1-dose regimen for those 10 years of age and older, and as a 2-dose regimen, administered approximately 1 month apart, for those 6 months to 9 years of age. Children under the age of 6 months are too young to receive the vaccine.

**10. Who should not get the vaccine?**

- People who have a severe allergy to eggs
- People who have had a severe allergic reaction or other serious reaction to flu vaccine
- People who have a history of Guillain-Barre syndrome
- Children less than 6 months of age
- People who have a moderate-to-severe illness with a fever (they should wait until they recover to get vaccinated)

**11. What if I'm pregnant?**

Pregnant women and newborns are at risk for flu complications, and all women who are pregnant or may become pregnant during influenza season should receive both the seasonal influenza injection and the H1N1 injection. The live nasal spray vaccine is not indicated for use in pregnant women.

**12. If I have been previously treated with antivirals, can I get the novel H1N1 vaccine?**

Yes.

Antivirals do not interfere with inactivated vaccines such as the H1N1 or seasonal flu vaccines. (They can, however, interfere with the recently administered flu vaccines; antivirals should be stopped 48 hours prior to receiving the nasal vaccine and should not be used for 2 weeks afterwards.)

**Side Effects**

**13. What are the common side effects?**

Local swelling, soreness, and redness at the injection site, and headache are common side effects that are often resolved quickly, and do not constitute an allergic reaction. Fever, weakness, muscle aches, and other symptoms may occur 1-12 hours after immunization and can persist for 1-2 days.

Rare adverse events may include muscle weakness, injured vision or a severe allergic reaction.

**14. If I have a health problem after vaccination, what do I do?**

If a health problem occurs following any vaccination, seek medical care. You or your provider may also contact the DoD Clinical Call Center at 866.210.6469. Follow the information below to file a report with the Vaccine Adverse Event Reporting System (VAERS).

**15. When do I file a VAERS report?**

Severe illness following vaccination is reported to VAERS. Forms are available at <http://www.vaers.hhs.gov> or call 800-822-7967. Healthcare workers and vaccine recipients are encouraged to report events that require medical treatment or interfere with work or recreation. DoD requires VAERS reporting by healthcare workers for adverse events that cause hospitalization or missing work for 24 hours or more.

You or any healthcare provider treating you may contact the Vaccine Healthcare Centers (VHC) Network at 866.210.6469 (24-hour toll free) or at <http://www.vhinfo.org> for a vaccine adverse event consultation or help with preparing a VAERS report.

- Prepare for H1N1 flu the same way you do for seasonal flu.
- Get vaccinated as soon as you can. You'll need both H1N1 and seasonal flu vaccines.
- Take everyday steps to protect your health:
  - Wash your hands often.
  - Cover your nose and mouth when you cough or sneeze. Avoid touching your eyes, nose or mouth. Germs spread this way.
  - Try to avoid close contact with sick people.
  - Stay home if you are sick.

**To Civilian Healthcare Providers:** If a Reservist or Active Duty Service member contacts you with a condition that may be an adverse event caused by a military vaccination, please provide care. For authorization and payment, contact the Military Treatment Facility where the member is enrolled. If not enrolled in an MTF, contact the Military Medical Support Office of the TRICARE Management Activity: 888.547.8675.

# Poster

Poster: Arm Yourself This Flu Season – Get Vaccinated for  
Both H1N1 and Seasonal Flu This Year

This poster is available for download or order from the USACHPPM Publications &  
Products e-Catalog (<http://usachppm.amedd.army.mil/HIOShoppingCart/>)



**Arm yourself this flu season**  
You will need both H1N1 and seasonal flu vaccines this year.

Get vaccinated as soon as you can!

For more information go to:  
<http://www.armymedicine.army.mil>

**H1N1**  

**USACHPPM**  
<http://usachppm.amedd.army.mil>  
1-800-222-9636

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Not intended to be an accurate representation of any event.

STAY ARMY STRONG - FIGHT H1N1

# Widgets

## Widgets

This widget can be posted to your organization's website to attract attention and direct the user to the Army Medicine web page.

[http://chppm-www.apgea.army.mil/H1N1\\_widget\\_new/New%20Widget%20Text%20Only.html](http://chppm-www.apgea.army.mil/H1N1_widget_new/New%20Widget%20Text%20Only.html)



This Flu Locator widget from the American Lung Association allows users to input their zip code and locate nearby flu clinics. It is expected that there will be an additional widget for H1N1 flu clinics.

[http://www.lungusa2.org/banners/FCL/FCL\\_banners07.html](http://www.lungusa2.org/banners/FCL/FCL_banners07.html)



# Fact Sheet



## Fact Sheet: Risk Communication “Tips” for Army Preventive Medicine/Medical Staff Related to H1N1 Flu

This fact sheet is available online at <http://chppm-www.apgea.army.mil/documents/H1N1/H1N1FlubasicHRguidance.pdf>



33-004-1009

### *Just the Facts...*

#### Risk Communication “Tips” for Army Preventive Medicine/Medical Staff Related to H1N1 Flu (October 2009)

Source: USACHPPM Health Risk Communication Program

##### **Background:**

Due to the spread of H1N1 flu throughout the United States and the world, Commanders, Soldiers, military Families, civilians, retirees, and contractors will turn to Preventive Medicine (PM) and/or medical staff for information and answers. While the Army’s public health surveillance efforts are intensifying to identify possible trends in cases and symptoms, PM and medical staff may be called upon to provide guidance, advice, medical treatment, and at times, opinions on the seriousness of this situation because of their extensive knowledge, training, and experience. These interactions, whether one-on-one or in a group setting, can present communication challenges for which medical experts must be prepared.

Risk communication is a research-based approach for communicating effectively in situations involving high concern/emotions; controversy; sensitivity; and/or low trust. The goal of risk communication efforts is to increase public knowledge and understanding; enhance trust in you and your organization; and minimize negative impacts, such as undue fear and concern. People who simply want more information and are not unduly concerned should be referred to the identified resources provided at the end of this tip sheet, or others identified locally. For all others, this document outlines some proven health risk communication principles/tools to assist medical/PM staff in communicating effectively with worried individuals/audiences.

**Good risk communication is everyone’s responsibility.** Every person who interacts with a worried individual has a role in practicing good risk communication skills, and in identifying concerns and responding to them well. Research shows that people judge the quality of information and responses based on trustworthiness. A poor response or interaction only serves to exacerbate undue concern about the risk, and at times, concern about the quality of care. A poor risk communication response by even one individual could likely increase a patient’s concern or outrage, which makes everyone’s job harder.

**Verbally acknowledge concerns of worried people, patients and their families once identified.**

Research shows that during times of a looming crisis, worried people need to know that you understand and accept that they are concerned, regardless of the validity of concerns. Verbally acknowledging concerns (e.g., “I can see that you’re worried. Let me tell you what I’ve learned about this situation...”) is an important step in diminishing them, and has the potential to minimize repeat medical visits by the “worried well.” This also holds true for medical facility staff, who may be worried due to their close, frequent interactions with ill patients.

**Address and acknowledge the uncertainties and unknowns** related to the H1N1 flu situation, followed by what's being done to decrease them. Setting the stage upfront helps people mentally prepare for future cases, more severe symptoms, etc. and provides reassurance that you, your medical facility, the state, and the federal government is taking active steps to continue to protect public health.

**Be willing to listen more.** Although everyone in the Army medical system is over-extended, truly listening and being understanding are proven risk communication tools in decreasing unnecessary concerns. Be aware of your own non-verbal actions, such as focusing on the person while he/she is talking, as well as those of the worried person, such as facial expressions, etc. Active listening helps demonstrate you care about the other person's wellbeing, and that you are committed to protecting the health of that individual. Through active listening (coupled with other risk communication skills), non-technical people can eventually "convince themselves" that personal actions can be the most effective steps in protecting themselves and their families (i.e., good hygiene practices; develop a family preparedness plan, etc.).

**Don't over-reassure.** Although worried people want to know that things will turn out fine, research shows that most people also cope well with incomplete reassurance. In fact, downplaying the risk, over reassuring, and/or making false promises can eventually backfire by negatively affecting your credibility and ultimately increasing concerns.

**Be willing to say "I don't know" and be committed to finding the answer.** In the face of uncertainties related to the H1N1 flu situation, no one can be expected to have all the answers to every question. Provide information that you do have, honestly state that you don't know the answer, and then take steps yourself to close the information gap, or refer the person to someone who can help.

**Provide hope and explicitly emphasize what people can do to protect themselves.** Research shows that in a crisis, people want to be engaged in the response and empowered to take protective actions. Emphasizing standard actions (e.g., good hygiene, stay home when ill, etc.) affords people some level of personal control as this situation continues to unfold. Additional risk communication resources are listed below.

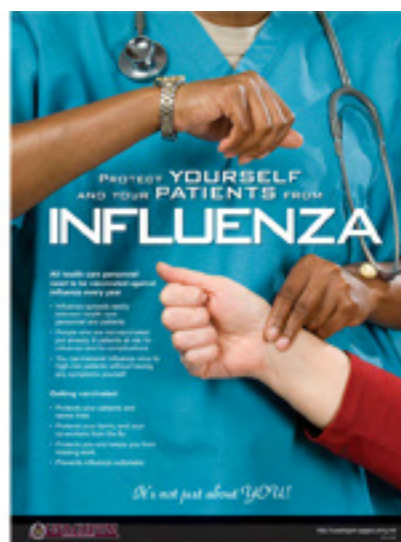
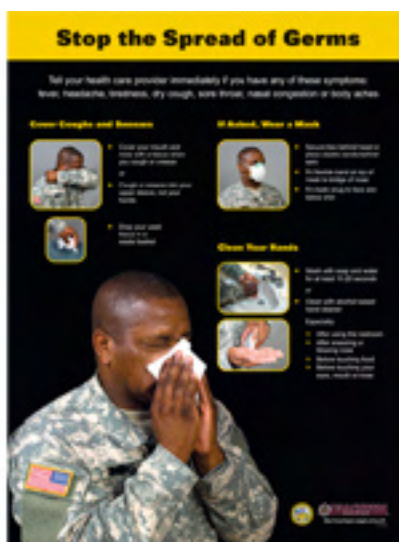
U.S. Army Center for Health Promotion and Preventive Medicine - Health Risk Communication Program Ph: 410-436- 7715/7709 <a href="mailto:usachppmhrpc@amedd.army.mil">usachppmhrpc@amedd.army.mil</a>	U.S Department of Health & Human Services: Communicating in a Crisis: Risk Communication Guidelines for Public Officials <a href="http://www.riskcommunication.samhsa.gov/index.htm">http://www.riskcommunication.samhsa.gov/index.htm</a>
Centers for Disease Control and Prevention: Crisis & Emergency Risk Communication <a href="http://www.bt.cdc.gov/cerc/">http://www.bt.cdc.gov/cerc/</a>	Agency for Toxic Substances and Disease Registry: Risk Communication Primer <a href="http://www.atsdr.cdc.gov/risk/riskprimer/">http://www.atsdr.cdc.gov/risk/riskprimer/</a>

# Health Information Products

## Additional Health Information Products

These and additional materials are available for order from the USACHPPM Publications & Products e-Catalog (<http://usachppm.amedd.army.mil/HIOShoppingCart/>)

- Wash Your Hands (poster)
- Stop the Spread of Germs (poster)
- Protect Yourself and Your Patients from Influenza (poster)
- Fight Germs and Stay Healthy (sticker)
- Influenza Prevention (tips card)





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