

Emergency Preparedness Still Lagging In US

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eight years after the Sept. 11, 2001 terrorist attacks, America is still woefully under-prepared to protect the public's health in the event of bio terrorism, bird flu or other emergencies. That's the assessment of Trust for America's

Health's, Ready or Not?

Protecting the Public's Health From Disease, Disasters, and Bio terrorism,

released Tuesday.

"We wish we could be able to report to you that our nation had moved

further in preparedness," said

Dr. Margaret A. Hamburg, a member of TFAH's board of directors, and

former assistant secretary for

planning and evaluation at the U.S. Department of Health and Human

Services. "Progress has been

clear, but there's still so much more to be done." Hamburg spoke at a news

conference.

"September 11, the anthrax attacks, and Hurricane Katrina were all

wake-up calls," added Jeffrey

Levi, Trust for America's Health's executive director. "The country is still at

risk."

The report assessed all 50 states and the District of Columbia for their performance on 10 key indicators of health emergency

preparedness capabilities. Unlike

last year's report, this year's review did not include information on the

federal government. Half of

the states scored six or less on the scale of 10 indicators. Kansas and

Oklahoma scored the highest,

with nine out of 10 and 10 out of 10, respectively. California,(Now with all

the wild fires) Iowa,

Maryland and New Jersey scored the lowest, each with just four out of 10.

Among the report's other major findings:

Only 15 states were rated at the highest preparedness level

in terms of their ability to provide emergency vaccines, antidotes and

medical supplies from the

Strategic National Stockpile. "Most of the states are still not able to

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achieve the U.S. Centers for Disease Control and Prevention certification for rapidly deploying emergency supplies in the event of an emergency,
" Levi said. "This should be disconcerting to all American families ." Half the states would run out of hospital beds within two weeks of a moderate flu pandemic; 47 states would run out of beds within two weeks of a severe flu pandemic. "Experts predict a pandemic would last eight to 10 weeks," Levi said. Forty states currently have a shortage of registered nurses, let alone what would be needed in a crisis. Rates for vaccinating seniors for the "regular" seasonal flu have decreased in 13 states. "The current system of distributing vaccines is lagging," Levi said. Eleven states plus the District of Columbia lack the capability to test for biological threats in laboratories. Four states don't test year-'round for the seasonal flu, a step that's necessary to monitor for a pandemic. Six states cut their public health budgets from the last fiscal year to this fiscal year. The report also offered a set of recommendations: A single senior official within the U.S. Department of Health and Human Services should be designated to be in charge of and accountable for all public health programs. (We need to take charge of our own Emergency preparedness, and not wait for the government to do it for us) This official would streamline government efforts and be the clear leader during times of crisis. The federal government should define a limited number of "optimally achievable" priorities that every state should be accountable for. Create a state-of-emergency health benefit to make sure that

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uninsured and under insured people will seek care during emergencies.**

**"This is particularly
important in the case of infectious disease outbreaks, when delays in**

**seeking care could jeopardize
containment strategies," Levi said. Release publicly existing data on**

emergency preparedness.

"Everyone has a right to know how well their particular community is

**prepared," Levi said. Fully
fund existing public health emergency programs and establish new funds**

**for new programs. "We are
not as prepared as we ought to be, and, if something like a flu pandemic**

**were to strike the entire
country, we are not as prepared to respond and respond as effectively as**

we could," Levi said.

"Some of these events are always, tragically, going to result in illness and

loss of life.

But the more prepared we are, the greater our capacity to mitigate that

**impact, and we think we're
still a ways from being able to accomplish that." (Again the best thing that**

**we all must do, is to
make a choice to Prepare ourselves and our families for times of**

**emergencies). We never know
when we will have the need for help! That's why we need to make**

**arrangements now before the
Emergency happens. If we all have the essentials for any Emergency, we**

**would make that time a less
stressful time for ourselves and maybe not make it a life and death**

**situation, we could go on to help
others.**

Here is a list of some of the things that we all should have on hand for

Emergencies:

*** Food for 72 hours (or more) * Water for 72 hours (or more) * Blankets**

for warmth (or shelter) *

First aid supplies * Emergency lighting * Emergency power (for radios & cell

phones) * Personal

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hygiene kit (tooth brush,wet naps,sanitizer,toilet paper,ect.) * Water

**proof Matches * A bucket and
a pack (to carry it all in)**

You can easily put this all together yourself or buy a ready made 72 hour

**kit. It dose not matter just
do something NOW!! before you need it and don't have it... "Remember**

**there are no Problems Only
Solutions"**

For More Information Go To: <http://ezemergencysolutions.com>