

Swine Flu in the Australian Higher Education Sector Anatomy of an Emerging Risk

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Writing about emerging risk issues for a journal is risky business. By their very nature, emerging risks are in a state of change, unfolding over time with circumstances radically shifting moment by moment. As a result there can be significant difference in the landscape from the time of writing an article to the release of the printed word. It can be like writing a description of a running elephant using a magnifying glass rather than binoculars. We suspect we are looking at something large, but can only focus on what's under our glass at the moment and it's moving in large strides!

That said, risk professionals have an obligation to quickly identify and treat emerging risks, and not to shy away from providing useful information as the elephant takes shape. Attention to emerging risks is never time wasted. The best risk professionals are those who know how to temper their organisations' response to rapidly emerging risks proportionally, balancing resources to ensure recommended risk mitigations not over reactions (wasting corporate resources) or under-reactions (placing assets at excessive future risk). For example, we are seeing this year's press accolades going to journalists who were ahead of the curve in reporting on the global financial crisis (GFC). These business writers early on recognised the developing economic trends and worked to focus society on that emerging risk elephant.

At the time of this writing in the winter of 2009, in Australia, 21,668 people are known to have contracted swine flu, of which 61 have died. These numbers will have increased by the time you read this. Globally, this strain of influenza has affected over 120 countries. The World Health Organisation has given up reporting on the spread of the A/H1N1 virus, as countries are no longer required to track and report the spread of the disease.

The second risk about writing on emerging risk is that perceptions of risk and danger change over the life of the event. At the time of this writing, the perceived threat of swine flu appears relatively minor as it has failed to mutate to a form which meets its deadly potential. There have even been media reports of "Swine Flu Parties" where young mothers intentionally expose their non-infected children to those who have the disease, to promote future resistance to this strain of influenza.

This relaxed view contrast with opinion at the beginning of the pandemic, when it made daily headlines. The media was concerned about a new global, deadly strain of disease. University risk professionals closely followed the freighting reports from Mexico and the US, as it appeared the Swine Flu had the potential of being the education sector's worst nightmare, a disease of unknown virulence and severity, arriving at the height of the southern hemisphere's cold and flu season.

In the higher education sector, the flu contributed to what was growing to be a “perfect storm” of developing challenges for universities, as it arrived when the education sector’s radar was crowded with two other emerging issues: finance and security. Regarding the former, a significant impact on the sector due to the GFC was the sudden loss of investment income totalling over \$800 million. While much of this loss was “on paper,” affecting mainly investment and endowment accounts, it still adversely affected overall university finance and created significant operational challenges to institutions and their ability to conduct teaching and research. Regarding the latter, the GFC was also fostering growth in student numbers as professionals were returning to higher education to increase their qualifications. Some of this growth was also the result of many years campaigning in Asian markets for overseas students; however, Australia’s university reputation was becoming tattered due to an increasing frequency of personal crimes against foreign students, who were viewed as easy targets for opportunistic criminals. Stories of foreign students assaulted and robbed as they worked late hours to support their studies or while carrying laptops and books as they walked from campus, increased in the foreign press creating a backlash attributed to racism in Australia. In spite of ongoing actions to rebuild the sector’s reputation, for a time the country was becoming a less attractive venue for overseas parents wishing to give their children the gift of a western education. This threatened an estimated \$15 billion in annual income from foreign students.

Added to this mix came the unknown of swine flu. While initial reporting was slow, the number of reported cases in Australia shot up rapidly; indicating authorities found it impossible to quarantine or adequately contain the disease. Failure to adequately contain the infection was viewed as a significant threat by the university community. By their nature, universities are made up of large congregations of people, who joined together for purposes of learning and research. A typical Australian university is like a small city, with tens of thousands of people on campus, occupying large lecture halls, eating in food courts, studying in libraries and computer labs. They are institutes designed to facilitate the free flow of information and ideas amongst numerous people, and therefore also a perfect transmission ground for a new and opportunistic virus.

As a result, Australian risk professionals quickly began tracking the course of the pandemic, including the recent development of a possible vaccine by the University of Queensland and the sudden quarantine of a piggery in Dunedoo, New South Wales due to the first human-to-pig transmission of swine flu in Australia. After several months of experience we note that in the southern hemisphere, the virus has proved to be more contagious than seasonal flu, but fairly mild in otherwise healthy people. With 61 deaths in a western medical context, there is concern that A/H1N1 presents a significant risk to those with underlying medical conditions.

There have been several unexpected impacts on the Australian university community during the height of the normal cold and flu season. Like all significant risk events it has presented Australian universities with both positive opportunities and significant downside risks. This article is an attempt to capture in this still-early stage of this global pandemic, some of the lessons the southern hemisphere is learning and may provide

useful experience for those about to enter their cold and flu season in the northern hemisphere.

The Opportunities of the Swine Flu Pandemic

The pandemic has provided the Australian university risk professional with some rare opportunities to develop themselves and their profession. Typical examples include:

Risk management leadership – Every few years an event occurs which allows risk professionals to take a leadership role in their organisations, such as Y2K or 9/11 when the topic of risk fills the media. The swine flu outbreak has provided an exceptional opportunity for university risk professionals to take an active, leadership role in the university community and engage their senior management and administration. We noted during the early stages of the pandemic, when the seriousness of the outbreak was still unknown, several examples of university risk professionals moving away from their comfort zones, by taking a leadership role in pandemic planning and response. The Australian university mutual, Unimutual, encouraged each institution to appoint a single pandemic co-ordinator to facilitate the sharing of information across their community. To support these co-ordinators, Unimutual created a central clearing house of information on the infection and sector responses. This enabled risk staff, who until recently viewed their role as focused on either insurance, occupational health, auditing, or some other narrow area of risk, embrace the multi-dimensional challenge of assisting their institution respond to the swine flu event. Looking back we see that those who took the challenge may have assisted their careers in respect to the high profile coordination role which engaged the most senior university administrators and professionals.

Business continuity planning – Having an emerging risk featured on the front pages of every newspaper proved to be a significant driver for business continuity planning (BCP) and testing which many Australian risk managers took advantage of the outbreak of SARS (2003/2004) and avian flu (since 2003) directly impacted many universities in the region resulting in the drive to develop pandemic response and continuity plans. The swine flu provided an opportunity for risk professionals to dust off these plans, examine them for updating requirements and in many cases use them as the basis for limited activation of their response teams to prepare their institutions for the developing pandemic.

Community health - Most Australian universities quickly recognised that standard flu prevention behaviours would be critical to minimising the spread of the disease and as a result increased their efforts in communicating health information to their campus community stakeholders. In addition to the normal wall posters on hand washing and sneeze protection, universities looked at alternative ways of communicating the health message such as dedicated web pages, staff newsletters, use of electronic campus signage, campus VPNs, etc. While it is still too early to

tell, it is expected this increase in health awareness many have a positive impact on staff attendance and overall health.

Specialised clinics- Several universities adjusted the ways they deliver health services on campus using the pandemic to seek subsidy funding from state medical services to promote the vaccination of staff and students with the seasonal flu vaccination. In addition, some campuses opened specific campus flu clinics, diverting those with symptoms away from those presenting with other illnesses. There are cases where some universities were able to encourage a large percentage of their staff and students residing on campus housing to participate in a free flu-vax administered on campus. While not designed for the current outbreak, it may provide increased protection to staff and students for the duration of the remainder of the winter flu season.

Tightening of travel controls - As an island nation, Australian students and staff frequently travel overseas and managing the risk of this frequent travel is a significant challenge for Australian risk professionals. The outbreak has helped ensure risk staff are engaged more closely in the travel process either through developing improved travel procedures, or as part of the travel approval process. To assist members, the Mutual developed a generic off-campus travel checklist, to promote consistent guidelines and procedures for approving and monitoring overseas travel.

Overseas assistance - To date several Australian universities have dealt with staff and/or students subjected to screening and quarantine procedures in foreign countries. This has been more pronounced in eastern and south-eastern Asian countries, which had experience with SARS, avian flu and Hong Kong Flu in the past and introduced comprehensive monitoring and strict quarantine regimens for international travellers. Many Australian universities unexpectedly discovered they had staff and students placed in quarantine, generally in isolated hotels for 6 to 7 days at a time, presenting significant challenges in both helping the sequestered staff or students endure this isolation and in managing the expectations of concerned family back in Australia and while under media scrutiny. This experience has proved useful to university risk professionals and the experience will be shared across the sector at upcoming conferences.

The Emerging Risks of Swine Flu

To date, as the pandemic develops, everyone is grateful the infection has been relatively slow to mutate in the southern hemisphere for the current wave of the pandemic, and the mortality rate has been far less than that of avian flu. Our worst fears have not been yet realised. That said, there are numerous matters of concern to the university community, as the swine flu story out over the upcoming months and years. Two significant issues are:

The success of containment- Australia consistently reported a high rate of infection of the population during the early days of the pandemic. This is surprising as the health services are well developed and we are an island nation, with what we thought were easy to control borders. Overall, the quarantine efforts had limited effect in keeping the infection contained and this is a cause for concern. One area for closer examination appears to be the role played by children in day-care and primary schools in the spread of the flu. It was recently noted that the reported spread of the virus slowed down considerable over the winter school holidays. Infant and primary schools are locations where it is difficult to enforce social distancing and personal hygiene, such as hand washing, creating miniature flu incubators who may have facilitated the rapid escape of swine flu in to the general community. If the final conclusion is that pre-school and primary school students are weak points in the containment efforts, then a more rapid closure of these facilities may become part of standard planning. Many Australian universities provide these facilities on their campus, and staffs depend heavily on their services. If primary schools were closed, and parents had to remain home in self-imposed quarantine, the impact on staff availability is unknown and should be examined.

Duty of care- We note that there are individuals who are dying from exposure to this infection, for which a university, as an employer, may one day be held to have been partially responsible. In Australia, occupational health and safety laws hold employers to a very high “duty of care” to staff, students and campus visitors regarding workplace hazards. In the UK we are starting to see speculation that the flu epidemic will result in a rise in litigation as employers are similarly responsible for staff welfare. Unimutual has reviewed such possible litigation regarding student welfare, such as permitting pregnant medical school students to work in hospitals (as they are in a class of individuals who may be susceptible to serious complications from swine flu) and students with a history of respiratory problems (an estimated 25% of Australians have asthma). Will the legal system declare that the university has a duty to them when it comes to student placements, work experience or extracurricular activities? While it may be very hard to prove to a judge, it may be possible that staff will be able to file claims for personal injury if they contract swine flu at work.

Conclusion

There are other areas of concern regarding this current pandemic, but overall, the Australian university sector has shown the very best attributes in collegiality and professionalism in assisting each other in the sector to better respond to these emerging risks. There may be significant mutations in the virus which will challenge the current practices in university operations, teaching and research. We are aware that influenza pandemics tend to come in multiple waves over time. Each wave is characterised by differing in levels of infection and impact. It is possible this first flu season wave is the mildest of the cycle and that successive waves of A/H1N1 will present a greater hazard to

the public and those in the university workplace. Additional risk assessments will be required as the shape of the current wave, under the magnifying glass, is better understood and as we watch developments in the northern hemisphere flu season later in the year.

Secondly, the variations amongst the availability and use of antiviral drugs and protective masks will have to be assessed. Protocols recently developed to affect the course of the disease will have to be re-examined and additional planning will be required. Each university and medical centre has developed methodologies regarding the treatment with drugs and the use of personal protection, and the effectiveness of these treatments will have to be reviewed before the next wave arrives.

Finally, universities will have to decide whether simply reinforcing good hygiene practices is adequate to safeguard university communities or additional planning should take place regarding activities involving large congregations of people. As discussed, universities thrive on interaction, but if successive waves and mutations of the virus change the dynamics of Swine Flu, work-around and contingency plans will have to be developed for significant university activities such as campus living, teaching in large lecture halls, laboratory tutorials, the administration of examinations and even graduation ceremonies.

I am optimistic that the university sector will continue to be successful in responding to the challenges of pandemics, as greater experience was gained this winter and strong communication channels were developed. We know that perhaps this pandemic may not become the killer flu which was feared in early winter, but that another more virulent and deadly outbreak is simply a matter of time. University, government and corporate risk professionals have been tested, and have performed well, and as our sector promotes learning, we will learn lessons from this past winter's experience, which will benefit our mitigation of future emerging risks.