

GAO Highlights

Highlights of [GAO-17-150](#), a report to the Committee on Armed Services, House of Representatives

Why GAO Did This Study

The U.S. Army estimates that if a severe infectious disease pandemic were to occur today, the number of U.S. fatalities could be almost twice the total number of battlefield fatalities in all of America's wars since the American Revolution in 1776. A pandemic occurs when an infectious agent emerges that can be efficiently transmitted between humans and has crossed international borders. DOD's day-to-day functioning and the military's readiness and operations abroad could be impaired if a large percentage of its personnel are sick or absent, and DOD's assistance to civil authorities might be limited.

House Report 114-102 included a provision for GAO to assess DOD's planning and coordination to support civil authorities during a pandemic. This report assesses the extent to which (1) DOD has guidance and plans for supporting civil authorities in the event of a domestic outbreak of a pandemic disease and (2) HHS and DHS have plans to respond to a pandemic if DOD support capabilities are limited, and they have mechanisms to coordinate their pandemic preparedness and response. GAO reviewed agency pandemic guidance and plans, interagency coordination mechanisms, and pandemic-related exercises and after-action reports.

What GAO Recommends

GAO recommends that DOD, HHS, and DHS use existing coordination mechanisms to explore opportunities to improve preparedness and response to a pandemic if DOD's capabilities are limited. DOD, HHS, and DHS concurred with GAO's recommendations.

View [GAO-17-150](#). For more information, contact Joe Kirschbaum, (202) 512-9971 or KirschbaumJ@gao.gov.

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DEFENSE CIVIL SUPPORT

DOD, HHS, and DHS Should Use Existing Coordination Mechanisms to Improve Their Pandemic Preparedness

What GAO Found

The Department of Defense (DOD) has developed guidance and plans to direct its efforts to provide assistance in support of civil authorities—in particular the Departments of Health and Human Services (HHS) and Homeland Security (DHS)—in the event of a domestic outbreak of a pandemic disease. For example, the *Department of Defense Global Campaign Plan for Pandemic Influenza and Infectious Diseases 3551-13* provides guidance to DOD and the military services on planning and preparing for a pandemic outbreak. DOD's *Strategy for Homeland Defense and Support to Civil Authorities* states that DOD often is expected to play a prominent supporting role to primary federal agencies. DOD also assists those agencies in the preparedness, detection, and response to other non-pandemic viruses, such as the recent outbreak of the Zika virus.

Figure 1: Photograph of the *Aedes aegypti* Mosquito Responsible for Spreading the Zika Virus



Source: Department of Defense | GAO-17-150

HHS and DHS have plans to guide their response to a pandemic, but their plans do not explain how they would respond in a resource-constrained environment in which capabilities like those provided by DOD are limited. DOD coordinates with the agencies, but existing coordination mechanisms among HHS, DHS, and DOD could be used to improve preparedness. HHS's *Pandemic Influenza Plan* is the departmental blueprint for its preparedness and response to an influenza pandemic. DHS's *National Response Framework* is a national guide on how federal, state, and local governments are to respond to such incidents. DOD, HHS, and DHS have mechanisms—such as interagency working groups, liaison officers, and training exercises—to coordinate their response to a pandemic. For example, training exercises are critical in preparing these agencies to respond to an incident by providing opportunities to test plans, improve proficiency, and assess capabilities and readiness. These existing mechanisms provide the agencies opportunities to improve their preparedness and response to a pandemic. HHS and DHS plans do not specifically identify what resources would be needed to support a response to a pandemic in which demands exceeded federal resources. These officials stated that there would be no way of knowing in advance what resources would be required. HHS and DHS are in the process of updating their plans and thus have an opportunity to coordinate with each other and with DOD to determine the appropriate actions to take should DOD's support be limited.