Combating a Collective Threat: Protecting U.S. Forces and the Asia-Pacific from Pandemic Flu*

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* The views expressed in this study are those of the author. This study is based on public sources and does not represent the official position of the U.S. Navy or any other organization of the U.S. government.
Protecting U.S. Forces

...in today’s interconnected world acting in the global interest is likely to mean acting in one's national interest as well. In other words, exercising sovereignty and contributing to global security are no longer mutually exclusive events.

—Admiral Michael Mullen
U.S. Chief of Naval Operations

In light of the substantial global responsibilities of the U.S. armed forces, the U.S. military cannot afford to be immobilized by pandemic influenza. Yet the widespread deployment of U.S. forces and the sheer scope of U.S. military operations illustrate the challenges inherent in guarding against this contingency. Within the U.S. government, efforts to prepare for pandemic influenza are apportioned as follows: the Department of Homeland Security has overall responsibility, the Department of Health and Human Services oversees domestic efforts and medical issues, the Department of State manages public diplomacy (and most overseas issues), and the Department of Agriculture manages animal-related issues. The U.S. Pacific Command (PACOM), due to its scope of operations and interactions with regions in Asia known to be potential incubators of avian flu, is also on the front lines of the pandemic flu threat. Though not itself a lead agency in avian flu prevention efforts, PACOM is preparing to support the U.S. government in its effort to combat domestic and international outbreaks of influenza.

In the event of pandemic influenza, PACOM must be prepared both to maintain the operational capabilities of U.S. forces and to protect military troops, civilians, and dependents as well as PACOM’s military bases and facilities. This will be a difficult task: PACOM’s area of operation spans 169 million square kilometers over 16 time zones, and encompasses 43 nations that are collectively home to 60% of the world’s population. This region is also the site of the world’s six largest armed forces, five of the seven U.S. mutual defense treaties, and 35% of U.S. trade (over $550 billion). More than 300,000 U.S. troops are based in the region. The dimensions of PACOM’s responsibilities are exacerbated by the fact that, though ten pandemics have erupted in the past three centuries, the eleventh

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will be the first to occur in a world characterized by instant communication and increasing interconnectedness.  

Given the potential for pandemic flu to spread rapidly and to inflict devastation on human societies, PACOM must develop coordinated capabilities that can rapidly respond to, address, and continue to ensure the function of relevant organizations during such an outbreak. Because this is a task that no nation can accomplish alone, proper prevention and treatment will hinge upon multilateral cooperation. Effective information sharing will thus be essential to the success of such a broad-based effort. Because of the potential need to engage the active involvement of law enforcement agencies and even militaries from many countries in the Asia-Pacific region, significant mutual trust is essential if preparation efforts are to meet with success.

This essay surveys the strategic planning goals formulated by PACOM to respond to a pandemic outbreak in the Asia-Pacific region. Given the importance of cooperation between countries in combating a pandemic, this essay also explores the challenges and opportunities of working with China—the Asia-Pacific’s largest developing member—to combat the spread of avian flu. Working with China in this regard may be a potentially productive area of cooperation for the U.S. and Chinese militaries.

**Preparations to Protect U.S. Troops, Dependents, and Asian Neighbors**

In order to assist U.S. forces, military dependents, and citizens of other countries to prepare for an influenza pandemic, PACOM has developed a set of planning goals to address all foreseeable contingencies. These goals involve regional cooperation, preparation and prevention, containment, and recovery.

PACOM is currently seeking to improve the regional security environment by cooperating with Asia-Pacific nations. The United States has much to learn from experts in the countries that have experienced clusters of H5N1 infection, and PACOM is well aware that preparations for avian influenza have been more

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thoroughly tested in some Asian countries than in the United States, which thus far has been fortunate not to have suffered from an outbreak of avian flu. In order to facilitate this learning process, the United States plans to build a Pacific Region Coordination Center, which will “allow rapid communications, coordination, and information sharing among the 43 [Pacific] nations, their militaries, international organizations, and U.S. interagency representatives active in the Pacific.” It is hoped that this effort will forge a positive basis for collective health security.

Two additional aspects of current operations to shape the health security environment involve preparation and prevention. The dissemination of educational materials among U.S. military personnel is an essential component of “preparing” the anti-pandemic “battlespace.” Toward this end, in October 2005 PACOM sponsored a Public Health Emergency Officer Influenza Seminar that was held in Pearl Harbor, Hawaii. Information awareness is an essential component of security maintenance. For this reason, the Military Medical Laboratories Syndromic Surveillance Network is actively monitoring over 30 sites in Southeast Asia. Laboratories in Indonesia and Thailand will help both the host nation and the World Health Organization (WHO)’s Surveillance Network for Influenza to better track the spread and evolution of the disease. In the event of an actual outbreak, such tracking methods will allow the implementation of appropriate countermeasures in a timely manner. In a recent issue of *Nature*, medical experts urged that this existing network of rapid response laboratories be enhanced in collaboration with the WHO to emulate U.S. Naval Medical Research Units (NAMRU). In order to minimize the chances that U.S. forces and related

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personnel will contract and transmit avian flu, the U.S. Department of Defense has been stockpiling the drug Tamiflu at PACOM bases. As of February 2006, six million doses had been stored. In November 2005 PACOM held a “Tabletop Exercise” in order to test preparations for a pandemic. Finally, PACOM has used a variety of forums, including ASEAN, Chiefs of Defense (CHOD) meetings, and Noncombatant Evacuation Operations (NEO) planning meetings to help provide forums for discussion on pandemic influenza and to share planning ideas with a number of foreign government and military leaders.

In the event of a pandemic, PACOM would support the relevant U.S. agencies to work with Asia-Pacific nations and the WHO to contain the outbreak. Given the capacity of the United States to provide substantial aid, the U.S. government would also work to support any recovery efforts that might ensue as a result of the outbreak. Potential regional challenges stemming from an avian flu outbreak in the Asia-Pacific region may include damage to the regional economy and threats to domestic stability. Economic threats could involve the disruption of transnational supply chains and reductions in foreign direct investment. Threats to domestic stability could occur in those Southeast Asian nations that rely heavily on poultry production as well as in those in Pacific island states that might be particularly vulnerable were a significant portion of their population to be threatened with infectious disease.

Uniting Against a Common Threat

Cooperation is vital to defend against pandemic influenza. No nation is safe from this threat, and every nation is essential to pandemic flu defense efforts. Robust partnerships involving Japan, South Korea, Australia, New Zealand, ASEAN nations, and other Asia-Pacific allies will be critical. Indeed, important

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progress has been made already.\textsuperscript{11} Several factors, however, make China worthy of particular focus. Home to some 800 million people who live in close contact with over 15 billion poultry, China will likely be at the center of any avian influenza crisis.\textsuperscript{12} China’s massive scale thus gives that country a unique importance in disease control measures. Despite continuing challenges in relations between the United States and China, no effort will be complete without cooperation between what are respectively the world’s largest developed and developing nations. Given the important work that remains to be done before such a goal can be realized, the remainder of this essay will be devoted to suggesting how effective cooperation between the United States and China might be achieved.

As two Asia-Pacific nations potentially threatened by pandemic influenza, the United States and China have significant shared interests in the area of catastrophic disease prevention. The two nations also share a strategic interest in fighting other unconventional threats such as terrorism.\textsuperscript{13} Combating catastrophic disease, however, offers even more common ground upon which to build effective cooperation.

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\textsuperscript{13} For further support of this assertion, see Jonathan D. Pollack, ed., \textit{Strategic Surprise? U.S.-China Relations in the Early Twenty-First Century} (Newport, RI: Naval War College Press, 2003). Washington, however, does not accept Beijing’s expansive definition of terrorism, which includes political activities.
The United States and China have already made considerable progress in bilateral and international fora. In October 2005, for instance, Chinese Minister of Health Gao Qiang signed an agreement with the U.S. Department of Health and Human Services to enhance cooperation on avian flu and other infectious diseases.\textsuperscript{14} On November 19, 2005 the United States and China announced a “Joint Initiative on Avian Influenza,” through which the countries’ respective ministries of Health and Agriculture will “strengthen cooperation” over vaccines, detection, and planning.\textsuperscript{15} At the January 2006 “Ministerial Pledging Conference for Avian Influenza,” attended by representatives of over 100 nations, Chinese Premier Wen Jiabao stated that “China will continue to actively participate in international cooperation in avian influenza prevention and control, share our experience with related countries and help them fight avian influenza.”\textsuperscript{16} Paul Wolfowitz, president of the World Bank, emphasized, “By hosting this event in Beijing, the Chinese Government is sending a powerful message...that we urgently need a global commitment to share information quickly and openly, and to find ways to work together effectively.”\textsuperscript{17} In April 2006 China hosted the “Asia-Pacific Economic Cooperation Symposium on Emerging Infectious Diseases.”

\textbf{U.S.-China Military Medical Cooperation: Challenges and Opportunities}

The fight against avian influenza has proven fertile ground for enhanced levels of U.S.-China cooperation. There is now potential for both countries to build upon this success to achieve progress in the area of military information exchange. Military information and related technology lacks direct offensive


\textsuperscript{17} “Paul Wolfowitz Remarks to the International Pledging Conference on Avian and Human Influenza” (statement made via videoconference to the International Pledging Conference on Avian and Human Influenza, Beijing, China, January 18, 2006), http://www.undg.org/documents/7327-Statement_by_Paul_Wolfowitz.doc.
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military application, and is abundantly available in both countries. Having
played a significant role in the handling of the 2003 SARS crisis, China’s People’s
Liberation Army (PLA) can now claim valuable experience in infectious disease
control measures. In fact, due to its large network of hospitals and research
facilities, the PLA holds jurisdiction over a crucial element of China’s disease
prevention responsibility and expertise. This raises the possibility of both parties
benefiting equally. Concerns that such mutual benefits could not be achieved has
frustrated previous military exchanges. Admiral William J. Fallon, commander
of PACOM, has already extended an invitation to the Chinese military to engage
in a discussion concerning avian influenza. In March 2006 a PACOM medical
team met with medical leaders in the PLA to discuss pandemic influenza (PI)
planning efforts and opportunities for the U.S. military and the PLA to work
together.

To be sure, the timely flow of information could stand some improvement.
Due to both the Chinese political landscape and concerns that Chinese
scientists receive proper credit for their research, some inherent challenges may
accompany such exchanges. Aside from domestic politics, one major reason for
the curtailment of U.S.-China military contacts has been U.S. concern that military
transparency and cooperative benefits will be asymmetric. This discrepancy can
be addressed, however, by determining which areas demand an absolute equality
of exchange, and which disparities might be compensated for by alternative areas

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18 See, for example, Fan Shunliang and Zhou Meng, “Quanjun fangzhi qinliugan gongzuo
dianshi dianhua huiyi zhaokai” [Army-Wide Avian Flu Prevention and Control Work
Television Teleconference Convenes], Jiefang junbao, February 6, 2004; Tao Zhiping,
“Qunfang qunkong jianjue dahao fangzhi qinliugan yingzhang” [Group Defense and
Crowd Control for Preventing and Curing Avian Flu], Renmin junduibao, February 7,
2004, 1; Yin Fei, “Yifa zuohao gaozhi bingxing qinliugan fangzhi gongzuo” [Conduct
Effective Avian Flu Prevention and Cure Work on the Basis of Law], Jiefang junbao,

19 Keith Bradsher, “U.S. Seeks Cooperation with China,” New York Times, September 12,
2005.

20 See, for example, Chi Fulin, ed., Jingzhong—Zhongguo: SARS weiji yu zhidu biange,
Zhongguo gaige fazhan yanjiuyuan 2003 nian zhuangui yanjiu baogao [Alarm—China:
SARS Crisis and System Reform, Transition Report 2003], (Beijing: China Institute for
Reform and Development (CIRD), 2003); Yi Ping, “Xinxi gongkai yu fazhi zhengfu—cong
‘feidian’ dao ‘qinliugan’ de qishi” [Information Publication and Government by Law—

21 Nicholas Zamiska, “How Academic Flap Hurt World Effort on Chinese Bird Flu,” Wall
of comparative advantage and willingness to share information. Cooperation undertaken in response to the mutual threat of avian flu could be an excellent place to begin efforts to improve military relations between the United States and China.

One way to increase mutual understanding and goodwill would be for the U.S. Foreign Broadcast Information Service (FBIS) to translate unclassified Chinese documents—starting with those concerning avian flu and related public health threats—into English and facilitate a wider distribution among Western experts. Such dissemination could increase Western knowledge of Chinese advances in disease prevention and control. Moreover, from a broader perspective, analysts and scholars could use such documents to augment their analysis and understanding of China. A robust and nuanced spectrum of U.S. analyses is in China's interest. Such analyses could demonstrate that, although the United States and China have differences in their national interests, they also have many mutual interests, which should serve as a strong basis for positive engagement. Specifically, fostering the emergence of a peaceful and prosperous China that acts as a responsible stakeholder in the international system is in both Beijing and Washington's interest. Much like its foreign counterparts, the U.S. military is duty-bound to anticipate and prepare for worst case scenarios. An exclusive focus on the possibility for conflict, however, could negatively influence U.S.-China relations. Thus more optimistic projections, produced by other analysts free from the responsibility to prepare for worst case military scenarios, are extremely important as well.

Cooperation against the threat of avian influenza could build mutual confidence and gain momentum for initiatives in other areas. In addition to enhancing communication, the building of bilateral contacts could instill in both sides a healthy respect for each other’s capabilities, thereby reducing the chance of dangerous miscalculations. Ongoing tensions in U.S.-China relations are based in part upon enduring differences in national interests. A bilateral military relationship will not in and of itself resolve these tensions. But such a relationship could offer realistic first steps that might serve to outline and safeguard mutual interests and thereby provide incentives to avoid unnecessary escalation. The bottom line is that differences in national interests should not prevent the United States and China—or, for that matter, any nation—from recognizing the world's
Growing collective interest in combating emerging borderless threats such as pandemic influenza.
An Avian Flu Pandemic:
What Would It Mean, and What Can We Do?

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Foreword

The media bombards us daily with stories about the possibility of an avian flu pandemic that could kill up to tens of millions of people. We are warned of the massive and traumatic effect a pandemic could have on the lives and livelihoods of people worldwide. But even as these reports drive our anxiety and concern to dangerous levels, we seldom hear discussion of what a pandemic might mean for international politics. For example, what effect would a pandemic have on the increasingly integrated economy of the Asia-Pacific region? What are the implications of a “coordinated” global response for the traditional sovereign rights of states to manage their domestic affairs? In the wake of the Indian Ocean tsunami of 2004–05, how has the military’s role changed with regard to disaster relief? How does this role differ when the military is faced with a natural disaster, a disease outbreak, or a man-made disaster (such as bioterrorism)?

This publication grapples with these questions through a two-part roundtable. Panel #1 features six essays that reconsider the familiar concept of “national security” from the vantage point of public health and the implications of a pandemic on international politics and trade. The five essays contained in Panel #2 compare the private and public sectors and their respective roles and responsibilities in the event of a pandemic crisis.

A growing crescendo of voices from the government and public health sectors suggest the need for better preparedness measures. But how should organizations prepare for a pandemic and, in the event of an actual pandemic, respond? This publication is premised on the belief that we can better prepare for a future crisis by looking back to see how governments and private sector organizations responded to the SARS crisis in 2003. What types of private-public sector communication and collaboration will be necessary for us to survive an avian flu pandemic?

These essays focus on a wide range of issues and challenges related to pandemic preparedness and response that we hope will spark discussion among policymakers, industry leaders, small business owners, public health officials, and a concerned public worldwide. This document also serves as the initial platform for the Emerging Infections/Pandemics Workgroup, a collaborative project proposed and launched at the June 2005 Pacific Health Summit in Seattle.
The Pacific Health Summit (http://www.pacifichealthsummit.org) is an annual conference that brings together the best minds in science, policy, medicine, public health, and industry to address global health concerns and develop innovative and effective responses. Co-presented by The National Bureau of Asian Research and the Fred Hutchinson Cancer Research Center, the Summit seeks to build a global health model that better utilizes emerging science and technology to promote health and detect and treat disease early enough to make a real difference. Guided by a senior advisory group co-chaired by George F. Russell, Jr. and William H. Gates, Sr., the inaugural Summit in 2005 welcomed 300 select participants from 16 countries. Sponsors for 2006 include GE Healthcare, Microsoft, Coca-Cola’s Beverage Institute for Health and Wellness, Intel, Pfizer, National Cancer Institute, Fujitsu, Roche Diagnostics, Affymetrix, GlaxoSmithKline, Miraca, and the Canary Foundation.

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Panel #1:
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Asian Development Bank

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University of Queensland

Ann Marie Kimball
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The goal of the Pacific Health Summit Emerging Infections/Pandemics Workgroup is to support programs and inform policies that save lives and minimize the economic impact of emerging infections and pandemic disease outbreaks worldwide.

For more information about the Workgroup please visit www.pacifichealthsummit.org or contact Claire Topal, Pacific Health Summit Workgroups Manager, at ctopal@nbr.org.
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