

Steel Valley Dolphins

July 2020



The official newsletter of the
USS Requin Base of the USSVI
Pittsburgh, Pennsylvania

USSVI Creed:

"To perpetuate the memory of our shipmates who gave their lives in the pursuit of duties while serving their country. That their dedication, deeds, and supreme sacrifice be a constant source of motivation toward greater accomplishments. Pledge loyalty and patriotism to the United States of America and its Constitution."



Meetings held on the second Saturday of the month normally
in BADen at the American Legion Post
and quarterly meetings held around our membership area.

- **Make a difference, get to a meeting!**

----- Pride Runs Deep -----

Our next base meeting is tentatively scheduled for Aug 8th at River Forest Country Club .

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COMMANDERS CORNER:

Kudos Shipmates on having a great meeting. It has been almost four (4) months since our last base meeting. We were back home at the American Legion in Baden, which is in Beaver County and has less restrictions than in Allegheny County! There were thirteen (13) members and one (1) first mate. Also in attendance was a prospective new member – Art Davis. He lives in Monaca and is an army brat and will become an associate member. His son is an enlisted submariner and will become an Ensign on August 1st and also will be joining the Requin Base – first father and son of the Requin Base!

In the pipeline is an old Pittsburgh Press paper boy from Murrysville. He has just returned from Hawaii to Groton. Admiral Self will be our first Admiral and LCDR PHELAN has volunteered to make it happen. Hopefully he will be joining the Captain of the Rickover – Boy, can you smell the road trips – Ha Ha!

We finally were able to induct our 2020 Holland Club Members! Shipmates Joe Campisi and Frank Nicotra were honored by the base. Joe, Carl and I made a road trip on Monday to the east end of Pittsburgh to recognize shipmate Fred Voskuhl for 76 years as being QUALIFIED in submarines. Fred is in a hospice care facility. Our base and national chaplain, Carl Stigers, Joe Campisi and myself had a video call with Fred from the parking lot outside of Manor Care. We presented Fred with a Holland Club “76” hat and a certificate from our National Commander Wayne Standerfer. He sure was happy and thrilled – So were we!

On the way home we stopped at Lot 17. That is the same pub that we met Commander Deichler when he was in town for a visit. We had to sit outside on the sidewalk because of the restrictions of covid 19! We had great food and a few brewskies. While sitting and gabbing with people around us, a young gentleman, (who could have been on the Smith Brother’s Cough Drop Box) offered and PAID for our lunch and refreshments – BIG KUDOS to him.

Sadly, Bob Timets from the Marine Corp League-Detachment 310, who was our go-to-guy when we need the Marines to be our color guard for our Memorial service has passed away. The members present voted to send the Detachment a Memorial donation to their fund in Bob’s honor.

BIRTHDAYS**MEMBERS**

Abel, Martin 8-21-81
 Ashmore, Willard 8-11-52
 Bahr, Sarah 8/18
 Bright, Don 8-01-52
 Cantwell, Dennis 8/29/47
 Hayes, Fred 8/01/53
 Keller, Robert 8/01/41
 Schwarz, James 8/26/51
 Strode, Ralph 8/07/43
 Winters, Mark 8/31/54

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FIRST MATES

Allen, Linda 8-14
 Bushko, Gwen 8/04
 Markel, Carmella 8/27
 McGee, Karen 8/10
 Osborne, Francis 8/28
 Coats, Edith 8/28
 Regrits, Marilyn 9/07
 Stass, Sandra 8/16
 Sutherin, Susan 8/12
 Stewart, Lois 8/07
 Weible, Jennifer 8/09

ANNIVERSIARIES

Abel, Martin/Kyle 8-04
 Amenti, Mike/Ashlee 8-10
 Brown, George/Cindy 8-12
 Cherock, Mike/Laura 8/21
 Cowher, James/Nicole 8/02
 Hollingsworth, H/Evelyn 8-30
 Houpt, Aaron/Erin 8/23
 Ireland, Gary/Susan 8/10
 Keller, Robert/Carol 8/11
 Larson, Merlin/Judi 8/15
 Lucas, Ron/Pamela 8/15
 Schwarz, James/Sondra 8/7
 Staas, George/Sandra 8/22
 Strang, Tom/Susan 8/03
 Winters, Mark/Brenda 8/02

Please notify us for additions, subtractions or corrections.

The following parades have been cancelled – Carnegie, Sewickley, Coraopolis, Canonsburg, Leetsdale, Dormont and Labor Day.

When you receive your next edition of the American Submariner Magazine – look on page seven (7). The first column is from Chaplain Carl, who is also our base chaplain. The second column is the quarterly report from the Charitable Foundation. Starting on paragraph 4 – the REQUIN base is recognized and acknowledge for our support and launched the “YEAR OF GIVING” Fundraising Campaign.

With help and assistance of the members of our base, this was possible – Hats off to you all - KUDOS shipmates.

I received an e-mail from Commander Jason. He is officially stationed in Groton and is under restrictions like the rest of us.

Jason will officially become CAPTAIN DEICHLER on September 1st. He is hoping to be able to come to the burg for his promotion ceremony.

Below is the top ten (10) bases in USSVI, with the REQUIN being the largest (inland) base.

Groton	1134	Requin	197
Hampton	288	Perch	187
Charleston	279	Mare Island	162
Bremerton	253	Long Island	162
San Diego	225	Razorback	147

Our base has four (4) prospective members in the pipe line!

Mike Wyckoff just e-mailed me and said that everything went well and he is home after having a kidney removed. Ron Goron called and informed me that he is coming along just fine, but hasn't been riding his bike.

Our next base meeting is tentatively scheduled for Aug 8th at River Forest Country Club – the members will be notified when confirmed. As of now, the Club is closed and we will be checking on it every day. If anyone wants to play a round of golf before the meeting, please let me know and Tino will set it up!



Requin Base Meeting Minutes

July 11, 2020

Baden, PA

Base Commander Huey Dietrich called the meeting to order.

Attendees: Eric Bookmiller, Lee Bookwalter, George Brown, Joe & Jill Campisi, Art Davis, Huey Dietrich, Dick Geyer, Lou Hamill, James Kontier, Bill Lindsey, Bat Masterson, Vince Metz, Frank Nicotra, Jeff Simon, Carl Stigers

Base Commander Huey Dietrich gave the quote of the day: "easy street is a blind alley"

Requin History: July 13, 1945 USS Requin joined the Pacific Fleet in the Panama Canal Zone. July 31, 1945 USS Requin arrived in Pearl Harbor Hawaii.

Base Commander Huey Dietrich: Let us at this time, with a moment of silent prayer, remember our Shipmates who made the supreme sacrifice that we may gather here in Peace. We dedicate this meeting to our Shipmates on Eternal Patrol, to perpetuate their memories in our lives and to honor our Shipmates on active duty in the service of the first line of defense of our Nation.

Boats Lost:

USS S 28 (SS 133) July 4, 1944

USS ROBALO (SS 273) July 26, 1944

USS GRUNION (SS 216) July 30, 1942

We also remember our departed shipmate of the Requin Base Dex Armstrong, John Grienberger Steve Kossler, Joe Brenkus. Ed Covey, and Ron Shook. Let us also remember the brave submariners who died performing their duties aboard submarines, some individually and some in groups, but where the submarine itself was not lost.

Chaplain Carl Stigers gave the Invocation.

Members introduced themselves and the boats they qualified on.

Base Secretary Jeff Simon reported that Minutes of the previous base and executive board meeting were published on the Requin Base website. With no objections, the minutes were approved as published.

Treasurer Lee Bookwalter gave an accounting of base assets, expenditures, and deposits are available upon request. With no objections, the report was approved.

Other Reports:

Binnacle List: Mike Wyckoff, Fred Voskuhl, Ron Goron

Membership stands at 197 making Requin the 6th largest USSVI base

Storekeeper Frank Nicotra reported on available small stores.

Shipmate Vince Metz reported on Eagle Scouts presentations

Memorial And Ceremonies

All parades and ceremonies have been cancelled for the time being.

Old Business:

None

New Business:

Motion to make donation in memory of Bob Timits was approved by the members present.

The base website will be replacing the SVD newsletter for base communications.

National website has been hacked, so change your password and use BCC when sending out group emails.

Holland club members were honored at today's meeting: Joe Campisi MT2(SS), Frank Nicotra MM2(SS)

For The Good Of The Order:

Letter regarding Admiral Self was read.

Charitable Foundation report was read where Requin Base was recognized for their donation.

A memorial ceremony is being investigated for December 7th at Soldiers And Sailors.

Chaplain Carl Stigers gave the Benediction and blessing of today's meal.

Adjournment: The meeting was adjourned.

Next meeting: (Tentative) River Forest Country Club, Freeport PA at 1230 hours on August 8, 2019

Requin Base Executive Board Meeting Minutes

June 27, 2020

Voting Members Present: Lee Bookwalter, Huey Dietrich, Jeff Simon, Carl Stigers

Non-Voting Members Present: Joe Campisi, Chad Underkoffler, Bat Masterson, Dick Geyer

Topics Discussed:

- 1) Baden American Legion is now smoke free and can support meetings up to 50 persons. Caterer is also able to support our meetings.
- 2) Holland Club inductees will be honored at the next available opportunity, either privately or at a Base meeting.

- 3) July 11th meeting will be held at Baden PA American Legion with the following requirements. No food or refreshments to be served, small stores will not be sold, face coverings are recommended to be worn at all times, and computer access to the meeting will be available via Zoom for those who wish to attend remotely.
- 4) Future issues of the Steel Valley Dolphins will be published via the Requin Base website.
- 5) The practice of holding meetings at a location other than Baden PA will now be chosen based upon continue quality of the venue versus physical location.
- 6) A Tolling Of The Boats ceremony is being investigated for December 7th at Soldiers And Sailors.

VA Suicide Prevention

Update 63: White House/VA Launch REACH

The White House and Department of Veterans Affairs (VA) on 7 JUL launched the REACH national public health campaign aimed at empowering all Americans to play a critical role in preventing suicide. The goal of REACH, which was established by the President's *Roadmap to Empower Veterans and End a National Tragedy of Suicide (PREVENTS)* is to change the conversation around suicide by urging people to recognize their own risk and protective factors — as well as the risk and protective factors of their loved ones.

VA Secretary Robert Wilkie said, "REACH will empower our nation's Veterans to seek and receive help and it will encourage them to reach out to their brothers and sisters in need who may be vulnerable. The power of this campaign will change how we talk about mental health and suicide in our nation. It will ensure that those in need, especially the men and women who have served our great nation, will receive the care and support they deserve." PREVENTS Executive Director Dr. Barbara Van Dahlen said, "The REACH campaign will inspire and educate all Americans — encouraging them to share their own struggles and to reach out to those who are hurting. It will engage our Veterans to help lead the way as we change how we think about, talk about and address suicide. I urge everyone to go to <https://www.wearewithinreach.net> and take the PREVENTS Pledge to REACH and be part of the solution. Together, we will prevent suicide."

The website also includes information on factors that may protect against suicide, such as belonging to a faith-based community, healthy family relationships, having a purpose in life and strong problem-solving skills. REACH encourages everyone to intentionally strengthen their protective factors — to care for their emotional health and well-being just as they do their physical well-being.

Although suicide is preventable, the nation is facing an epidemic in deaths, with 132 Americans dying by suicide each day. In 2017 there were 47,173 suicide deaths and an estimated 1.4 million suicide attempts. For Veterans, the overall suicide rate is 1.5 times higher and the female Veteran suicide rate is 2.2 times higher than the general population after adjusting for age and/or gender. To that end, the REACH campaign website, *we are within reach*, provides information to help people recognize risk factors for suicide, including financial stress, chronic illness or pain, isolation and mental illness, in themselves and in their loved ones. It also links to resources that can provide assistance in avoiding the hopelessness that can lead to suicide. Campaign messages and imagery using the hashtag #REACHNow will be evident on a wide range of digital platforms immediately after the launch. The website will include a video public service announcement supported by a partnership with the PenFed Foundation and Soldier-Strong and created by Tree Media. Media covering this issue can download VA's Safe Messaging Best Practices fact sheet for important guidance on how to communicate about suicide. If you or someone you know are experiencing thoughts of suicide or are in crisis, please contact the National Suicide Prevention Lifeline for confidential support 24 hours a day at 800-273-8255. Veterans and service members, including National Guard and Reserve, who need immediate help should call the 1-800 number and press 1 to reach the Veterans Crisis Line, chat online at www.veteranscrisisline.net/get-help/chat or text 838255. [Source: VA News Release | July 7, 2020 ++]

Vet Unemployment

Update 22: June Rate Decreased 0.4%

The unemployment rate (<https://www.bls.gov/news.release/empsit.t05.htm>) among veterans fell for the second consecutive month in June but still sits at more than double the number of jobless veterans reported in March, according to data released 2 JUL from the Bureau of Labor Statistics. About 30,000 fewer veterans applied for unemployment benefits last month as compared to May, pushing the jobless rate from 9 percent to 8.6 percent. That figure translates into about 776,000 veterans nationwide struggling to find work. In March, before the coronavirus pandemic forced the closure of businesses across the country, the veterans unemployment rate was 4.1 percent. It has been as low as 2.3 percent in recent years, routinely outpacing the national unemployment rate.

BLS officials announced that the national rate decreased from 13.3 percent in May to 11.1 percent in June, still nearly three times higher than the rate seen at the end of 2019. Younger veterans did not see the same positive employment trend last month as their older peers, according to Department of Labor researchers. The jobless rate for veterans of the Iraq and Afghanistan War era group held steady at 10.3 percent. That group represents about 40 percent of all veterans in the American workforce today. Veterans of the first Gulf War era — who make up about a quarter of all working veterans — had a jobless rate of just 6 percent.

Boosting veteran employment has been a priority for lawmakers in recent years. However, employment experts have said that most of the recent troubles with veterans employment are tied to the country's overall economic downturn, and can't be fully reversed until those underlying national problems are addressed. A large portion of the improvement in the national unemployment rate came from workers who had been temporarily laid off from their jobs because of the fast-spreading illness. BLS officials said that total dropped by 4.8 million people in June alone, and now sits at about 10.6 million.

However, in the week ending 3 JUN 1.3 million workers filed first-time claims for unemployment insurance, the Labor Department said 9 JUL. That latest round of applications means roughly 50 million Americans have made initial jobless benefits claims in

16 weeks. Initial jobless claims are the nation's most reliable gauge of layoffs, and there has been progress. About 1.43 million sought such aid the previous week, and the latest number marks the 14th week in a row that initial claims have declined. But it's also the 16th week in a row that first-time applications for unemployment insurance hovered above 1 million. The high number of jobless claims punctures the positive news last week that the U.S. economy added a record number of jobs in June as states allowed more businesses to reopen and a growing number of Americans returned to work. The economy has suffered a net loss of 14.7 million jobs during the downturn sparked by the pandemic, and the data for the most recent monthly jobs report was collected in mid-June before a spike in virus cases in dozens of states.

More layoffs loom. United Airlines warned this week that it may lay off 36,000 employees in the USA, including flight attendants and customer service agents, if travel doesn't rebound. Retailers could shed even more jobs if stores such as Bed, Bath & Beyond continue to shutter locations. The number of those receiving benefits for consecutive weeks is dropping, sliding by 698,000 to 18.06 million for the week that ended June 27, which confirms "that some rehiring continues to occur," Oxford Economics said in an investors note. "Still, the number of individuals collecting regular state benefits is nearly three times the Great Recession peak," the note continued. "A full recovery in the labor market is going to be a multi-year process, and it is thought that the resurgence in COVID-19 infections raises the risk that there will be a pause in the progress." [Source: MilitaryTimes/USA Today | Leo Shane III/Charisse Jones | July 2 & 9, 2020 ++]

Emergency Planning

Earth, Wind, and Fire | Plan for Health Needs

The COVID-19 pandemic has kept people close to home so they can avoid the contagious virus. But the National Oceanic and Atmospheric Administration predicts a more active than normal hurricane season. It is also wildfire season for those living in the Western half of the United States. So now's the best time to prepare for health care needs if an emergency requires leaving home to seek safe shelter elsewhere.

The Atlantic hurricane season typically starts in June and goes through the end of November. The Eastern Pacific hurricane season usually runs from mid-May to the end of November. Already, there have been three named storms, including Cristobal. NOAA predicts 13 to 19 named storms bringing heavy rain and wind. Six to 10 could become hurricanes, according to NOAA, including three to six major hurricanes. "Major" is defined as category 3, 4, or 5, with winds of at least 111 miles per hour. For those living in the Rocky Mountains, Texas, and the West Coast, wildfires are of particular concern. Peak season is from May through October. More wildfires occur in eastern and central states, according to the National Interagency Fire Center, or NIFC. Wildfires in the West are larger and burn more acreage, the NIFC said. California's 2018 wildfire season was the most destructive on record, according to the Centers for Disease Control and Prevention, citing data from the California Department of Forestry and Fire Protection. In California alone, more than 7,500 fires burned nearly 1.7 million acres of land, damaged or destroyed over 23,000 structures, and caused 93 deaths.

To prepare for emergencies, TRICARE experts recommend first signing up for disaster alerts which can be done at <https://public.govdelivery.com/accounts/USMHSTMA/subscriber/new>. The alerts are sent via text and email. TRICARE will give updated information from federal agencies and departments, state and local governments, and the news and other media. TRICARE also will announce procedures for accessing emergency prescription refills, and the dates during which these procedures apply. Recent events that led to disaster alerts included flooding in Michigan, in May; severe storms in Louisiana, Mississippi, and Arkansas, in January; and wildfires in California, in October.

The TRICARE disaster information resource webpage <https://www.tricare.mil/Resources/DisasterInfo> offers additional advice for preparing for possible evacuation. Here are some tips:

- *Plan your exit.* Identify a safe escape route as well as a place to shelter outside of the evacuation area. Make sure you share your plan with someone who lives outside of the affected area.
- *Make a list.* This list should include your health care providers' names and contact information, medications with dosage and frequency, and type and model number of any medical devices you use.
- *Get it together.* Gather immunization records, insurance paperwork, and medical documents in a waterproof container that's easy to carry. Put together a basic first-aid kit, and make sure you have enough medication to cover your time away.
- *Be mindful of special needs.* Those with chronic health conditions or issues with vision, hearing, or mobility should get medical alert tags or bracelets, and identify how they will arrange to get disaster warnings and find assistance to safety.

For those with pets, the U.S. Army Public Health Center publication Vet Connections recommends gathering an emergency kit that includes a two-week supply of pet food, water, and any medications. Make sure you have copies of vaccination and medical records as well. Some emergency shelters will accept only service animals, the APHC notes, so it's a good idea to identify pet-friendly housing options outside of the evacuation area. Make sure your pet's ID tags include your current contact information. You also may want to ask your veterinarian about getting your pet microchipped, the APHC says, in case you become separated during the emergency.

Another resource is the Federal Emergency Management Agency guide "Are You Ready." The 200-page, in-depth guide available at https://www.fema.gov/pdf/areyouready/areyouready_full.pdf offers information for people to protect themselves and their families in case of weather emergencies, wildfires, and other hazards. [Source: Health.mil | July 7, 2020 ++]

Covid-19 Pharmacy

Update 04: Gilead Sets Price for Remdesivir Prescriptions

The drugmaker Gilead has set the price for its coronavirus treatment remdesivir at \$390 per vial for the U.S. government and developed countries. That puts the price of a five-day treatment course at \$2,340 per patient for people enrolled in federal health programs like Medicare and Medicaid — but private insurers will pay \$520 per vial, or \$3,120 for five days of treatment, the company said 29 JUN. The U.S. is the only country for which has set tiered pricing. A senior HHS official said during a background briefing that the Department of Veterans Affairs helped to negotiate the lower price for government programs.

The federal government has secured enough of the antiviral drug to treat more than 500,000 patients in hospitals through September, HHS said. That amounts to Gilead's entire planned production run for July and 90 percent of its production in August and September. The government has also reserved additional doses for use in clinical trials, HHS said. The health department and states will manage how the drug is allocated to U.S. hospitals through September. That extends the distribution system the federal government put in place when Gilead donated hundreds of thousands of doses of the drug earlier this year. Under the plan, HHS will allocate remdesivir doses to state health departments based on need, and states will then allocate doses to hospitals. Those facilities will then be able to purchase the drug through Gilead's distributor, AmerisourceBergen.

The company argues that, at the price it will charge, the drug could save hospitals about \$12,000 per patient in treatment costs. "Even just considering these immediate savings to the healthcare system alone, we can see the potential value that remdesivir provides," Gilead CEO Daniel O'Day said. "This is before we factor in the direct benefit to those patients who may have a shorter stay in the hospital." The initial prices for government and private insurers are in line with what many analysts had suggested. The Institute for Clinical and Economic Review, an independent research organization that analyzes drug prices, has said that remdesivir should cost about \$4,500 per patient for ten days of treatment — if it reduced deaths, which it has not yet been shown to do. The group suggested a price of \$310 for a ten-day treatment course if the drug did not decrease mortality. "Gilead made a responsible pricing decision based on the evidence we have today," ICER president Steve Pearson said.

Gilead is expected to make about \$1.3 billion from the drug in 2020, RBC Capital Markets analyst Brian Abrahams said. The drugmaker has said it spent about \$1 billion to develop remdesivir. It's unclear how Gilead's actions will play with Congress. Months before Gilead announced a price for remdesivir, Democrats started raising questions about the drug's potential cost — in part because Gilead received about \$70 million in taxpayer dollars and assistance from the National Institutes of Health to run clinical trials. [Source: Politico | Zachary Brennan | June 29, 2020 ++]

COVID-19 Vulnerability

Update 02: Where You are Most Likely to Catch It



We would all like to know where we are most likely to catch the coronavirus. Armed with such knowledge, we could simply make sure we never go there. Now, doctors are describing the places and activities that leave you most vulnerable to catching the virus that causes the COVID-19 disease. Recently, the Texas Medical Association's COVID-19 Task Force and its Committee on Infectious Diseases asked member physicians to rank places and activities based on how risky they are for transmission of the coronavirus. The doctors used a scale of 1 to 10 to rate the level of risk, with a rating of "1" indicating the lowest level of risk and "10" indicating the highest level. Some activities only rated a "1" or "2" — such as opening the mail or getting restaurant takeout, respectively. But others were considerably more dangerous. While no activity rate a "10," eight activities rated a "9" or "8" on the scale. They are:

- Going to a bar: 9
- Attending a religious service with 500-plus worshippers: 9
- Going to a sports stadium: 9
- Attending a large music concert: 9
- Going to a movie theater: 8
- Going to an amusement park: 8

- Working out at a gym: 8
- Eating at a buffet: 8

In addition, seven other activities rated a “7” on the 10-point scale. They are:

- Going to a hair salon or barbershop
- Eating in a restaurant (inside)
- Attending a wedding or funeral
- Traveling by plane
- Playing basketball
- Playing football
- Hugging or shaking hands when greeting a friend

The task force notes that these risk levels apply to people who are “following currently recommended safety protocols when possible.” So, don’t think you can engage in these activities safely if you simply exercise a little extra caution. COVID-19 poses a serious threat to all of us. But there are things we all can do to keep the coronavirus from wreaking havoc. Understanding your own personal risk level is a crucial starting place. Younger, healthier people have less to fear than those with underlying health issues. And seniors are especially vulnerable. Regardless of your risk level, there are things all of us should do to help lower our risk of infection. Some are obvious — such as washing your hands regularly and practicing social distancing. Others are more involved such as sanitizing everything. [Source: MoneyTalksNews | Chris Kissell | July 9, 2020 ++]

COVID-19 Vulnerability

Update 03: Flu Impact | Get Vaccinated

With many states seeing increasing coronavirus infections, it's clear that covid-19 is not leaving the U.S. anytime soon. That's a problem now, and it stands to become an even bigger one this fall, when a return to school and other indoor activities and the onset of flu season threaten to intensify outbreaks. One essential strategy to minimize covid-19's potential second wave and keep the economy going as much as possible until there is a covid-19 vaccine is to boost the rate of flu vaccination in the U.S. This can help build the infrastructure and experience that will be needed to inoculate millions of people against the coronavirus, once those vaccines become available. More important, it can enable the U.S. health care system to continue focusing on patients with covid-19.

Seasonal flu, after all, is one infectious disease that doctors are able to minimize through vaccination. Note that in a typical season, hundreds of thousands of people are hospitalized with the flu, and 12,000 to 61,000 die. It's always important to minimize this toll - but this fall, more than ever. The nightmare scenario would be an exceptionally severe flu season arriving along with covid-19. Normally, the U.S. fails to meet public health goals for flu vaccination. During the 2018-19 season, only 45.3% of adults got a flu shot. That is above average but below the 70% target set by the Department of Health and Human Services for 2020.

The CDC's immunization advisory committee recommends universal flu vaccination to cut individual and population risk, and sees 70% in the general population as an "ambitious but achievable" goal. Children and older adults are more likely than young adults to be vaccinated, but the U.S. misses its targets in those populations, too. Rates are also lower among black and Hispanic Americans - populations that have been hit especially hard by covid-19. Fortunately for public health, all the hand-washing, mask-wearing and social distancing that people are practicing to prevent covid-19 will help reduce flu infections, too. Boosting the flu vaccination rate would improve the picture much more.

As always, some people will worry that there are risks in getting the flu vaccine. Or they will say it doesn't work, so why bother? It's true that the vaccine is never perfectly protective - and its efficacy varies year to year - but it consistently reduces the severity of flu infections, and thus hospitalizations. And side effects beyond a fleeting headache or soreness around the injection site are extremely rare. An enduring misconception is that the flu vaccine causes influenza. It doesn't. Efforts to communicate the value of vaccination - especially for health care workers - should be made broadly, starting now. This year, the case for vaccination is stronger than ever, and Americans need to hear it from the CDC, state and local public health authorities, and political leaders.

Vaccines are especially important in risky environments such as classrooms. School districts should require children to be vaccinated against seasonal flu this year, just as they are required to be vaccinated against measles. Employers, too, should institute vaccine mandates especially for those working in dense, high-contact environments. Yes, some people would object, but a certain amount of controversy may be the price of protection. People also need to be assured that they can be inoculated in places where they are safe from contracting covid-19. State and local governments should open dedicated vaccination sites, perhaps coexisting with covid-19 testing tents and drive-through centers, and advertise their existence via TV, radio, the internet, direct mail and tele-

phone. This would help accommodate people who have no primary care doctor or easy access to vaccination at a workplace or college campus. This infrastructure could be repurposed for the rapid distribution of covid-19 vaccines when they exist.

Who will pay for all these shots? Federal law requires health insurers to pick up the cost of annual flu vaccination, as Medicare does. But Medicaid vaccine coverage varies by state. And as unemployment has shot up during the pandemic, millions have lost employer-based health insurance. This year especially, it's important for states and the federal government to work together to make shots free or at least very inexpensive for the uninsured. (Given the urgency, it might even make sense to provide cash incentives for vaccination in some neighborhoods.) The government should also contract with vaccine manufacturers for additional supplies to meet extraordinarily high demand. There are many ways to prepare for an autumn surge in covid-19 - from strengthening public health efforts to track outbreaks to stocking up on personal protective equipment for health care workers. No strategy should be overlooked, especially not a tried-and-true approach to minimizing seasonal flu. [Source: Bloomberg | Jared Bilski | July 13, 2020 ++]