When I was listening to WGBH's radio show, "From The Top" last Sunday, I was reminded, once again, how much the domains of parenting and public health share. I was listening to these young people who are so accomplished in classical music and I thought about the effort, the focus, the dedication and love they devote to their craft. Then I thought about their parents and all the work and support they offered all through the years so that their children could, in fact, arrive at and enjoy those accomplishments.

Never listened to the show? Don't make assumptions here. These still growing and developing youth are funny and well adjusted and so is the show. In fact, they present themselves in such a light of "normalcy", that we relate even if our family has not reached their pinnacles, let alone even considered it. What we do relate to, though, is the planning, effort and coordination that goes into every school play, art show, book report with diorama and science fair. On the day of the culminating event, with anxiety, relief and hopefully, pride and satisfaction, we witness the fruits of our labor and then, in minutes or hours, the much practiced event is over. The lessons and benefits last a lifetime, though, don't they?

The same pride and effort is expended toward public health programs all the time, most of it quietly and behind the scenes in response to events past and in preparation for those in the future. The current issue just passing the peak of a learning curve is our response to swine flu, now referred to as H1N1. First there was fear. Then, as the numbers came in, it was compared to seasonal flu and it was reined back in by many to the arena of 'usual" and "normal". Then it spread to the point of being worldwide and for the first time in many decades, the much-dreaded word 'pandemic' was applicable. Still, at this point, it has fortunately not changed in severity. This influenza is still very much among us though and lives have been lost to it. Across the nation our state departments of public health have been conferring with the Centers for Disease Control (and Prevention) gathering data and learning from the virus' patterns in order to prepare, minimize, mitigate and appropriately respond.

Updates by email have been numerous but they are never sufficient in an important and evolving situation. Posters, pamphlets can be ordered for free. There are templates for letters and situation specific guidance for school teachers and administrators, preschool through college. I, for one, am grateful for the numerous conference calls allowing for questions and dialogue.

This learning process and the production of the vaccine for the H1N1 has taken us right to the point where we are now chomping at the bit for the seasonal flu vaccinations and ramping up for the H1N1. Your local boards of health have begun coordinating efforts with new players and new program components. While the seasonal vaccinations should play out without a problem and with the usual providers, both commercial and public, the new flu inoculation response will be so widespread that no one sector could handle it all. Pediatricians have said they could not handle the influx of appointments. If they can vaccinate the little ones, we can initiate a plan that hasn't been used since my childhood: school based vaccinations. We will probably see a combination of students vaccinated in school with a consent form and also family clinics after school or on a Saturday, to allow parents to accompany their children. Information about that will soon be sent home to parents of school age children.

If the high risk groups for this new virus were the elderly, those with chronic conditions and pregnant women, they could probably be seen by their primary care physician and OBGYN. With our young people of six months old to 24 years old being at high risk, we need to vaccinate as many of that huge number of our society as fast as we can to slow down the virus and to create a "herd immunity" offering protection to us all.

New situations require new responses. We will need more nurses to assist the public health nurses and the school nurses. Their earned praises will follow when all of this has calmed down. The vaccine will be provided for free but new entities, such as the schools, will need to register and apply in order to receive it. That takes time. There is funding from several federal avenues to pay for or reimburse H1N1 related costs. Documenting those costs also takes time. These extra efforts will exact a toll of their own from health agents. Routine inspections may be delayed or missed. Paperwork may not be filed or phone calls returned. However, this is an unusual need requiring out of the ordinary responses. Isn't saving a life worth it?

Cathleen Drinan is the health agent for the Town of Halifax, MA. More information about this developing issue is right around the corner. What do you think about your child receiving the H1N1 vaccine? She can be reached at 781 293 6768 or cdrinan@town.halifax.ma.us