New York City’s Monkeypox Response

The New York City Department of Health and Mental Hygiene (NYC Health Department) is responding to the current monkeypox outbreak. This handout outlines our five-part, equity-driven approach to addressing monkeypox in NYC and reaching New Yorkers who are at the highest risk. We are committed to engaging community organizations, partners and other stakeholders to make sure our monkeypox response is informed by science and community input. We will continue to identify, monitor and address equity-related issues in our response to help keep New Yorkers safe.

The following goals will drive an urgent and equitable monkeypox response in NYC:

- Prevent and limit the spread of the virus
- Minimize suffering and sickness caused by the disease
- Eliminate stigma and promote equitable access to vaccine, testing and treatment resources

Based on current NYC vaccination eligibility criteria, up to 150,000 New Yorkers may be at risk for monkeypox exposure. As of July 28, 2022, NYC has had more monkeypox cases than any other part of the United States, with more than 25% of cases nationwide. As NYC continues to be the epicenter of this outbreak, New Yorkers need a more adequate proportion of the vaccine doses and tools, including funding, that more heavily accounts for our disease burden and population. The City continues to advocate to all levels of government on issues related to monkeypox response resources and equitable access for New Yorkers. Visit nyc.gov/health and search for Statements and Letters to learn more about the City’s advocacy efforts on monkeypox.

We welcome the public to join us in these calls to action to ensure New York has what it needs to reduce transmission, protect at-risk populations and expand our current vaccine, testing and treatment access resources to more people in more neighborhoods and through more partners and health care providers.

NYC’s Approach to Addressing Monkeypox

1. Prevention
   - Provide information to New Yorkers about how to avoid or reduce their exposure to monkeypox and what to do if they are exposed or have symptoms.
   - Engage community-based organizations, providers, those in high-risk settings and others as trusted messengers in providing education and outreach, particularly groups that work with communities at the highest risk of exposure to or severe infection from monkeypox.
   - Disseminate timely information to New Yorkers, including materials in additional languages spoken in NYC.
2. **Surveillance and Contact Tracing**
   - Determine the epidemiology of monkeypox in NYC, including new cases, how many people have the disease, the trajectory of the outbreak and risk factors.
   - Share data arranged by age, race, ethnicity, gender and other demographics, while maintaining all privacy and data protections.
   - Provide timely information to people who have monkeypox, including how to safely isolate from household members to prevent spread and get health care and social services.
   - Identify high-risk contacts of people who have monkeypox and provide post-exposure prophylaxis (PEP) vaccination to reduce spread.
   - Share information on what to expect if someone is identified by the NYC Health Department or if they self-identify as having had an exposure to someone who has monkeypox.

3. **Testing**
   - Ensure access to testing through the NYC Public Health Laboratory and NYC Health + Hospitals facilities.
   - Work with local and national partners to increase testing capacity.
   - Educate providers on clinical presentation, testing protocols and how to tell patients their test results.
   - Ensure New Yorkers understand what they should do while waiting for their results or if they test positive.
   - Advocate to the federal government for increased access to testing through commercial labs and low- or no-cost testing options at non-City sites.

4. **Treatment**
   - Educate providers on how to appropriately manage people who have monkeypox, including supportive care and antiviral therapy.
   - Advocate to the federal government to increase access to antiviral treatment (tecovirimat), which is currently only available under an expanded access investigational new drug (EA-IND) protocol, as part of overall efforts to make prescribing and administration easier for providers.
   - Provide technical assistance to providers on how to prescribe antiviral treatments available under an EA-IND protocol.
   - Educate the public about who can get antiviral treatment and how they can access it through their provider.

5. **Vaccination**
   - Up to 150,000 New Yorkers may be at risk for monkeypox exposure based on current NYC vaccination eligibility criteria. Higher vaccination rates will reduce the spread of monkeypox and protect at-risk populations in NYC. With extreme vaccine supply constraints, our vaccine campaign must balance quickly vaccinating as many people as possible with ensuring equitable access to the vaccine through mass
vaccination sites and prioritizing access for New Yorkers at the highest risk for transmission and severe outcomes. We will work to achieve this balance by partnering with community-based organizations and reserving vaccine for priority neighborhoods. NYC’s vaccine distribution plan includes:

- Vaccination clinics in all five boroughs, including temporary mass vaccination sites to vaccinate eligible New Yorkers as quickly as possible.
- Reserving appointments to ensure equitable access to the vaccine, such as referrals through community partners for eligible New Yorkers who are at higher risk of severe health outcomes from monkeypox, who lack access to health care or other resources, or who are from priority geographic areas.
- PEP distribution to close contacts of people who have monkeypox and people who have been exposed in the workplace.
- Onboarding providers as vaccinators to expand access through the health care system.
- Pop-up and mobile access vaccination points to meet people where they are.

NYC will prioritize first doses of the vaccine so more people can receive protection. When more supply is available, NYC will contact people for second doses. This single-dose strategy is consistent with the monkeypox vaccine distribution strategy taken in the U.K. and Canada and is based on available scientific evidence.

The NYC Health Department may change recommendations as the situation evolves. 7.28.22