

# Responding to Mpox: Communities, Communication, and Infrastructures

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## Background:

- Mpox—formerly known as Monkeypox—is a zoonotic infection endemic to Central and West Africa.
- Between 2022 and 2023**, non-endemic countries experienced an **unprecedented outbreak of the disease**. In August 2022, the World Health Organisation deemed the outbreak a “**public health emergency of international concern**.”
- By March 15<sup>th</sup>, 2023, **86,516 cases had been confirmed** across 110 countries, with 111 deaths.
- The mpox outbreak became a **critical moment for sexual and public health** in the UK.
- It **required developing responses that were rapid and engaged** with a multitude of stakeholders, including community organisations, clinicians, and policy actors.

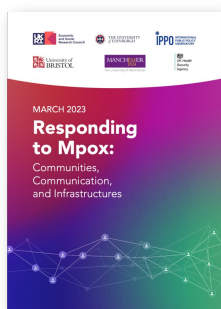
## Our work:

- We set up a team** led by UCL IPPO, with Bristol, Manchester, UKHSA and Edinburgh as partners, to conduct the project “Social Sciences Issues related to Mpox”, funded by the Economic and Social Research Council.
- Project duration:** October 2022-March 2023
- Method:** Interviews and focus groups with third sector, clinicians, policymakers, individuals with lived experience of mpox (n=30).

## Our goal:

To conduct **rapid research** exploring how the response to mpox had been articulated, its strengths and weaknesses, and **develop guidance for future pandemic preparedness** and outbreak response

## Outputs:



Project report



Paper

## Some key findings



### Community Involvement

#### Key finding:

- Community organisations played an important role** in developing and distributing information that was suitable and impactful for affected communities, but community involvement faced barriers.

#### Recommendation:

Collaborative networks should be **developed, supported and integrated into service provision** and planning for future outbreak scenarios



“Even the health [authorities] we work closely with sometimes will have information and we just don't know about it until months later because it's not communicated to us.”

— Activist in the UK



### Novel partners in outbreak response

#### Key findings:

- Social media** became a powerful mechanism for communicating about Mpox.
- Health promotion on social media relied on individuals' personal networks or on influencers, which led to **disparities**.

#### Recommendation:

**Develop communication strategies** that build relationships with key social media partners that can be prioritised and mobilised during future outbreaks



“The massive lines for our at-risk communities to get vaccinated are an example of how social media got the word out and got people in line and ready.”

— Long-term activist in the UK



### Rethinking collaboration and networks

#### Key findings:

- Established collaborative networks** were key to responding quickly and effectively to the Mpox outbreak.
- Successful networks were commonly based on **prior relationships** as well as investments made in these.

#### Recommendation:

**Focus investment** on developing high quality, long term, and collaborative relationships that link front line clinicians, public health professionals, community representatives, and community spaces



“We already had a sexual network that met quarterly to discuss emerging infections, and we involve the third sector and other organisations like primary care, so that was a really useful channel to disseminate information.”

— Clinician working in the UK

## Conclusions:



- The 2022 Mpox outbreak saw **community organisations and sexual health services rise to the challenge** of rapidly responding to a public health emergency. Nevertheless, the experience showed that successfully **responding to an outbreak** is often dependent on **preparedness, planning, and existing infrastructure**, and success in future outbreaks and scenarios may depend on this work being undertaken now.



- The report findings were endorsed by UKHSA and Terrence Higgins Trust.