

Policy Report

# MPOX COMMUNICATIONS: A Queer Pandemic



**THE UNIVERSITY OF BRITISH COLUMBIA**

**School of Public Policy and Global Affairs**

Centre for the Study of Democratic Institutions

# Mpox Communications: A Queer Pandemic

## REPORT AUTHORS

**Heidi Tworek** (Report co-author): Canada Research Chair (Tier II) and Associate Professor, History and Public Policy; Director, Centre for the Study of Democratic Institutions

**Joseph Flores** (Research assistant, report co-author), MA, School of Public Policy and Global Affairs

**Citation:** Tworek, Heidi, and Joseph Flores. (2023) Mpox Communications: A Queer Pandemic. Vancouver: Centre for the Study of Democratic Institutions, University of British Columbia.

**Acknowledgements:** We gratefully acknowledge the support of the Canada Research Chair programme in enabling the research and writing of this report. Travis Salway provided helpful initial thoughts. Mark Gilbert shared important viewpoints on the BC provincial mpox response. We would also like to thank Dane Griffiths, Dylan Wall, and Cameron Schwartz who all gave invaluable insight into how queer communities mobilized to address mpox. Finally, we are immensely grateful to Kshitij Sharan in supporting the final editing and publication of this report.

Mpox Communications: A Queer Pandemic © 2023 by Heidi Tworek, Joseph Flores, Centre for the Study of Democratic Institutions is licensed under CC BY-NC-ND 4.0 ([creativecommons.org/licenses/by-nc-nd/4.0](https://creativecommons.org/licenses/by-nc-nd/4.0))



THE UNIVERSITY OF BRITISH COLUMBIA

School of Public Policy and Global Affairs

Centre for the Study of Democratic Institutions

## TABLE OF CONTENTS

<b>EXECUTIVE SUMMARY .....</b>	<b>3</b>
<b>INTRODUCTION.....</b>	<b>4</b>
<b>OVERVIEW OF MPOX UP TO AUGUST 31, 2022 .....</b>	<b>6</b>
<b>RELY ON AUTONOMY, NOT ORDERS .....</b>	<b>7</b>
MPOX AND COVID-19.....	7
HIGH TRUST, HIGH AUTONOMY .....	8
LOW TRUST, HIGH AUTONOMY.....	9
<b>ATTEND TO VALUES, STORIES, EMOTIONS .....</b>	<b>11</b>
SCIENCE-BASED COMMUNICATION .....	11
TRUSTED MESSENGERS .....	12
CHALLENGES WITH POOR INFORMATION AND STIGMA.....	13
ADDRESSING STIGMA IN COMMUNICATIONS .....	14
<b>PULL IN CITIZENS AND CIVIL SOCIETY .....</b>	<b>15</b>
COMMUNITY NETWORKS AS LEADERS.....	15
DISTANT COMMUNITY NETWORKS.....	16
<b>INSTITUTIONALIZE COMMUNICATIONS.....</b>	<b>18</b>
GOVERNMENT INSTITUTIONS AND COMMUNITY MOBILIZATION .....	18
MEDIA AND TECHNOLOGY AS INSTITUTIONS .....	20
<b>DESCRIBE IT DEMOCRATICALLY .....</b>	<b>21</b>
STIGMA.....	21
EQUITY .....	22
<b>CONCLUSION/RECOMMENDATIONS .....</b>	<b>24</b>
<b>APPENDIX: CASE STUDIES .....</b>	<b>25</b>
BRITISH COLUMBIA .....	25
NIGERIA.....	31
ONTARIO .....	35
SPAIN.....	40
USA.....	46
<b>ENDNOTES AND BIBLIOGRAPHY.....</b>	<b>51</b>

## Executive Summary

Just as most countries lifted Covid-19 measures, another pandemic emerged in the summer of 2022: mpox. Mpox is an infectious disease caused by the monkeypox virus. It is endemic in East, Central, and West African countries. However, in May 2022, large clusters of mpox cases began appearing outside of its endemic region, bringing global attention to the virus. More cases quickly emerged across Europe and in the Americas, spreading through sexual networks of men who have sex with men (MSM). By July 23, with over 16,000 reported cases in 75 countries and territories, World Health Organization (WHO) Director-General Dr. Tedros declared the global mpox outbreak a Public Health Emergency of International Concern (PHEIC).

Given that poor-quality information affected Covid-19 responses around the world, robust communications are more important now for pandemic preparedness than ever. Therefore, this report analyzes the efficacy of communications during the first four months of the mpox pandemic from May to August 2022 across five jurisdictions: British Columbia, Ontario, Nigeria, Spain, and the United States. Although not exhaustive, these five case studies showcase a range of approaches to communications, enabling us to identify more effective strategies and tactics. The cases were analyzed through the lens of the RAPID Principles, developed by Heidi Tworek, Ian Beacock, and Eseohé Ojo after assessing communications in the first six months of Covid-19. The principles are:

- Rely on Autonomy, not Orders
- Attend to Emotions, Values, and Stories
- Pull in Citizens and Civil Society
- Institutionalize Communications
- Describe It Democratically

Our analysis found some principles to be more pertinent than others for mpox. Mpox had a different epidemiology and affected certain populations more than others, specifically networks of men who have sex with men (MSM). This made managing stigma even more important in health guidelines than strict preventive measures. Mpox's emergence soon after the removal of Covid protections also created unique challenges. Two years of Covid-19 politicized public health in certain countries and/or pulled away resources from certain communities. Based off these considerations and analysis, we identified further recommendations for effective pandemic communications.

Our simplest recommendation is to prioritize communications for managing any pandemic or epidemic. This aspect of pandemic management often remains underprioritized, even after the experiences of Covid-19. Across all five cases, communications were crucial to managing distrust in public institutions, curbing transmission, and minimizing further marginalization of affected communities. Beyond the lessons of the original RAPID framework, mpox highlighted two further lessons for health authorities and governments. The first is the importance of managing stigma. Addressing stigma directly using the voices of the most affected communities tended to be the most effective approach to minimize stigmatization of queer and Black communities. To support this, a key recommendation is for governments to have well-established networks with community organizations that they can call on to help develop and deliver messages. The second is for governments to prioritize the health of diverse communities with specific policies that meet their needs, as this will enable quick mobilization when crises do arise. Finally, the lack of specialized aid and support for those who fall ill with the virus should be addressed.

## Introduction

In May 2023, the co-chairs of the Independent Panel on Pandemic Preparedness, Ellen Sirleaf Johnson and Helen Clark, released a roadmap to protect the world from pandemic threats.<sup>i</sup> The roadmap contains many important recommendations for reform, ranging from improving measurements and financing to strengthening the World Health Organization (WHO).

Yet, the document remained curiously silent about one crucial factor: communications. Its only mention of communications came in a sentence about the future: “What provides hope is that in this age of unparalleled scientific tools, instant communication, and fresh lessons to apply from this pandemic, the world has a real opportunity to make COVID-19 the last pandemic of such devastation.”<sup>ii</sup>

This was particularly striking, given the WHO’s own preoccupation with poor-quality information from the start of the Covid-19 pandemic. As early as February 2020, the WHO’s Director-General, Dr. Tedros Adhanom Gebreyesus, claimed that: “We’re not just fighting a pandemic; we’re fighting an infodemic.”<sup>iii</sup> Some scholars dispute the utility of the term “infodemic.”<sup>iv</sup> More importantly, though, it is concerning to see communications slip from the pandemic agenda at a time when there is more access to media and information than ever before.

This report assesses communications during another pandemic: mpox (previously known as monkeypox).<sup>v</sup> We examine communications around mpox by public health agencies, governments, and civil society organizations through five case studies: British Columbia (BC) and Ontario in Canada, the United States, Spain, and Nigeria. We explored BC and Ontario as separate case studies because health comes under provincial jurisdiction in Canada. We used Spanish-language sources for the Spain case study. Although not exhaustive, these five case studies showcase a range of approaches to communications, enabling us to identify more effective strategies and tactics.

One of this report’s two co-authors, Heidi Tworek, previously led a team that took a similar approach to assess the first six months of communication during Covid-19. Using case studies on nine jurisdictions around the world, the published report suggested a framework for thinking about democratic communications during pandemics.<sup>vi</sup> The framework was developed combining original research and drawing upon research from disciplines, including political science, social epidemiology and public health, behavioural science, sociology, media and communications studies, history, and political theory. Tworek and her co-authors, Ian Beacock and Eseohe Ojo, proposed five principles of pandemic communications, summarized in what they called the RAPID framework:

- Rely on Autonomy, not Orders
- Attend to Emotions, Values, and Stories
- Pull in Citizens and Civil Society
- Institutionalize Communications
- Describe It Democratically

This report examines our five mpox case studies through the lens of the RAPID principles. We found some principles to be more pertinent than others for mpox. This was for several reasons. First, mpox had a different epidemiology and affected particular populations more than others, meaning that communications needed to be more differentiated and possibly even more attentive to stigma in the first months of the outbreak. Second, mpox came on the heels of most countries removing Covid protections. This created challenges for public health communications, as over two

years of Covid had politicized public health further in some countries and/or pulled away resources from other diseases and communities in others.

In this report, we pay particular attention to queer communities and their needs. The concentration of mpox within networks of men who have sex with men (MSM) reminded queer communities of the homophobia and stigma that shaped the early HIV/AIDS response.<sup>vii</sup> Lessons from the HIV pandemic call for community involvement and leadership in data collection, design of prevention measures, and communications.<sup>viii</sup> Our analysis of mpox will assess if these were accomplished.

First, we provide a brief overview of mpox's development up to August 31, 2022. Then we examine our case studies through the RAPID principles to see how and whether they apply to mpox. We conclude with some broader recommendations. Finally, we include an appendix of further information on the individual case studies.

## **Overview of Mpox up to August 31, 2022**

Mpox is an infectious disease caused by the monkeypox virus. It was first discovered in animals in 1958 and later spread to humans. It is endemic in East, Central, and West African countries.<sup>ix</sup> Symptoms typically include muscle aches, swollen lymph nodes, and a painful rash that causes fluid-filled lesions on the face and body. Mpox is usually treated with supportive care, relieving discomfort caused by the lesions, until they heal and symptoms subside. Most people recover, though some experience secondary infections.

In May 2022, large clusters of mpox cases began appearing outside of its endemic region, bringing global attention to the virus. On May 7, the UK Health Security Agency reported the first mpox case believed to be imported through travel.<sup>x</sup> More cases quickly emerged across Europe and in the Americas, spreading through sexual networks of MSM.<sup>xi</sup> Spain first reported eight suspected cases on May 18. The US Centers for Disease Control and Prevention (CDC) confirmed the first American mpox case on the same day. Ontario followed, with the Public Health Agency of Canada (PHAC) reporting the first case in the province on May 22. BC was the last of the jurisdictions studied here to report its first case on May 25. By July 23, with over 16,000 reported cases in 75 countries and territories, WHO Director-General Dr. Tedros declared the global mpox outbreak a Public Health Emergency of International Concern (PHEIC).<sup>xii</sup>

The WHO noted that 99% of all cases were among MSM, except for Nigeria, where the virus was already endemic.<sup>xiii</sup> The first human mpox case was discovered in 1970 in the Democratic Republic of the Congo, and quickly spread to other countries in Central and West Africa.<sup>xiv</sup> Mpox had been endemic in this part of the world for over fifty years, but did not receive global attention until the 2022 outbreak. Vaccination campaigns were quickly mobilized around summer Pride events in higher-income countries such as Canada and the US. However, Nigeria did not receive its first supply of mpox vaccines until December 2022.<sup>xv</sup> This mirrors vaccine inequities in Covid-19: by August 2022, about 80% of people in high-income countries had received at least one vaccine dose compared with only 20% of those in lower- and middle-income countries.<sup>xvi</sup>

The 2022 mpox outbreak underscores once again how pandemics perpetuate inequality and marginalization, as was seen in Covid-19. Pandemics will become increasingly common due to the effects of climate change, agriculture, and global mobility.<sup>xvii</sup> This reinforces the importance of institutional preparation to tackle them swiftly. However, the often-reactive nature of public health institutions does not lend itself well to equitable and inclusive pandemic responses, as seen with mpox. By August 31, 2022, over 52,000 mpox cases were reported globally.<sup>xviii</sup> Here, we analyze five jurisdictions' communications during the first four months of the pandemic to reveal key learnings to apply in communicating around virus outbreaks moving forward.

## Rely on Autonomy, Not Orders

Social distancing, mask mandates, vaccine mandates, and lockdowns were all measures used to prevent the transmission of Covid-19. Many early news reports about mpox compared the new virus to Covid-19, questioning whether similar containment measures would be needed.<sup>xxix</sup> News outlets commented on public fears of imposing another round of public health orders just after many places had recently removed most protections from Covid-19. While it may be ethically justifiable for those in power to restrict rights and freedoms during a public health emergency, the Covid-19 pandemic demonstrated that there are limits to these restrictions.<sup>xxx</sup> Restrictions (or protections) are necessary instruments, particularly when there has been insufficient prevention of spread. When citizens do not understand why democratic institutions are implementing restrictions, however, this can undermine their trust in democracy and create long-term issues of adherence. This is why autonomy is a key tenet to effective public health communication, as exemplified by the first principle of the RAPID Framework—“Rely on Autonomy, Not Orders.”<sup>xxxi</sup> This does not necessarily mean no restrictions, but rather informing and equipping people to protect themselves and others.

### Mpox and Covid-19

Mpox responses did not include any strict guidelines like those seen during the peak of the COVID-19 pandemic. The WHO was quick to clarify that mpox was not epidemiologically similar to COVID-19, and therefore would not require the same kind of response.<sup>xxii</sup> Public health measures during a pandemic, of course, depend heavily on the particular disease’s epidemiology. But they also depend upon the levels of public trust in public health institutions.

Unlike during Covid-19, across all five jurisdictions studied for this report, autonomy lay at the core of public health guidance for two reasons. First, mpox and covid-19 behave completely differently. Mpox transmission occurs during close, prolonged, physical contact with active lesions.<sup>xxiii</sup> Covid-19 is an airborne virus that can be transmitted simply by being in the same room as someone.<sup>xxiv</sup> Second, the timing of mpox’s international spread in spring and summer 2022 led public health institutions to proceed with cautionary prevention measures to avoid any apparent similarities to Covid-19 restrictions enacted from 2020 to 2022.

Mpox communications occurred just as most jurisdictions had lifted their Covid-19 protections. Many were also grappling with the deep discontent of small groups of citizens. Public health authorities were keenly aware of potentially stoking further divisions and distrust through any mandatory measures for mpox. In some jurisdictions, the measures imposed during Covid-19 undermined some citizens’ sense of autonomy and, as the pandemic progressed, could disrupt democratic institutions or threaten capitals, as occurred with the Freedom Convoy in Ottawa in early 2022. Some of Ontario’s restrictions like business closures and physical distancing measures lasted over 360 days, the longest in the world for any single jurisdiction.<sup>xxv</sup> In the United States, Covid-19 restrictions became a point of political division, as former President Donald Trump accused the WHO and Dr. Anthony Fauci, Director of the National Institute of Allergy and Infectious Diseases (NIAID), of mishandling the Covid-19 response.<sup>xxvi</sup> Mpox guidelines were generally left open-ended, enabling individual autonomy and leaving space for businesses to develop their own health measures based on the principles communicated by health authorities. While all the jurisdictions we studied adopted far more autonomy in their measures for mpox than Covid-19, their mpox communications



resonated very differently depending upon whether publics displayed relatively high or low trust in public health institutions.

### High Trust, High Autonomy

Spanish health institutions pursued an autonomy-driven response, knowing that public trust gave them the permission to do so. During the Covid-19 pandemic, Spanish society displayed high levels of trust in public health and compliance with health restrictions.<sup>xxvii</sup>

The capital city, Madrid, was also preparing to host two back-to-back international events within a month of its mpox outbreak, which may have led to less institutional capacity to prepare a response. First, a NATO Summit, including heads of state, was scheduled from June 28 to 30. Second, the Madrid Pride Festival was set to follow from July 1 to 6, 2022. The Ministry of Health did not promote mpox guidelines other than sharing a set of event guidelines one week before the Madrid Pride Festival, named “This Summer, Party Healthy.”<sup>xxviii</sup> These guidelines focused on individual responsibility, and enjoying the summer safely. Following this, the Ministry of Health did not post anything about mpox on its social media channels until July 23, 2022, the day that the WHO declared mpox a global health emergency. The Ministry shared some infographics on social media with information about symptoms, transmission, and prevention.<sup>xxix</sup>

While autonomy is important in public health responses, Spain’s case could be an example of too much autonomy. Spain’s festival-driven summer culture went uninterrupted, but at what cost? Public commentary suggested that citizens felt left behind by the government in the mpox response. By July 31, Spain had 4,298 mpox cases, the second highest globally behind the US, and had reported two deaths.<sup>xxx</sup> Vaccines were not easily accessible and community members compared the vaccine booking process to “the Hunger Games.”<sup>xxxi</sup> Men who have sex with men, who were the most affected, reported completely changing their sexual behaviour due to the lack of preventive measures and inaccessibility of vaccines. These changes included practicing complete abstinence and no longer attending nightclubs or sex parties where higher risk of transmission was present.<sup>xxxii</sup> Ironically, it appears too much autonomy risked breaking trust in public health institutions.

BC also emphasized autonomy, providing values-based recommendations for the public and businesses. An August 2022 poll comparing Canada’s four most populous provinces found that BC residents had the highest level of satisfaction with their province’s Covid-19 response.<sup>xxxiii</sup> Another poll from the same month suggested that the majority of British Columbians (71%) were most likely confident in the provincial government to manage the mpox outbreak.<sup>xxxiv</sup> With high levels of public trust and low threat to the general population, BC health authorities were well-positioned to base their response on personal and institutional autonomy. BC also benefitted from a delayed spread and later pride festivals that were planned for the end of July, giving authorities more time to prepare.

BC’s public health communications towards the general public emphasized that mpox transmission occurs through “close, personal, often skin-to-skin contact,” not sexual intercourse, and that people could also contract mpox from contact with contaminated surfaces.<sup>xxxv</sup> The BC Centre for Disease Control (BC CDC) did not provide specific prevention guidelines for individuals. Instead, they supplied information on how the virus presented and what to do if someone became infected.

A similarly open-ended approach was used for businesses and private establishments. Since the virus was circulating primarily among men who have sex with men and during the summer months when various Pride events were planned, the BC CDC released a set of guidelines called “Monkeypox

Guidance for Events during Pride Season.”<sup>xxxvi</sup> These guidelines provided options for private event planners and businesses to assess risk and take actions for their contexts, including recommendations on post-event communication channels for any reported cases.

Ontario also followed an open-ended approach, with perhaps a bit more caution to avoid any further criticism of their public health management. Ontario saw a 17% decline in Covid-19 management satisfaction between May and August 2022, down to 48%.<sup>xxxvii</sup> This likely led to Public Health Ontario giving citizens more personal autonomy within mpox. Their key principle was to raise general awareness, but not anxiety due to the relatively low overall risk of mpox transmission.<sup>xxxviii</sup> This approach did, though, put the onus on the public to seek out relevant information on issues such as mpox vaccination eligibility. Social media posts about mpox vaccination clinics would often use ambiguous language such as “those most at risk for Monkeypox” or simply “eligible groups,”<sup>xxxix</sup> perhaps making it hard for certain individuals to assess if they were eligible for the vaccination or if it made sense for them. Targeted communications for queer communities who were most affected were also autonomy-based. For example, the Gay Men’s Sexual Health Alliance developed guidance called “MPX and the Party” that provided advice for how to attend large social gatherings and have sex safely before, during, and after events.<sup>xl</sup>

### Low Trust, High Autonomy

The United States and Nigeria implemented similar autonomy-based responses as their international peers but did so against a backdrop of low trust in their institutions. These two examples show how low public trust may minimize the suitability of autonomy-based health measures, given a certain level of transmission risk.

A US survey in May 2022, when the global mpox outbreak began, found that trust in public health authorities such as the CDC had fallen from 79% to 52% since the start of the Covid-19 pandemic.<sup>xli</sup> An autonomy-driven mpox response, combined with low confidence ratings in public health institutions, led to a backfire effect where the most affected populations felt that the US government was not doing enough to curb the spread.<sup>xlii</sup> The CDC developed science-based guidance and focused on providing information that was relevant to the entire US population. For instance, on July 26, the CDC released a video on their Twitter page, advising people how to protect themselves from mpox in sexual encounters and sex-focused events and venues.<sup>xliii</sup> While the CDC was also adhering to principles of personal and institutional autonomy, the lack of clear direction on mpox measures combined with rising cases in large cities such as New York and Los Angeles led to greater distrust in the CDC. This was worsened by the racial disparities seen in vaccine uptake. As of September 1, 2022, Black Americans had received only 13% of first dose vaccinations, while white Americans received 52%, despite both groups having similar numbers of reported mpox cases.<sup>xliv</sup> Queer organizations called for further concrete action such as testing and improving vaccine distribution.<sup>xlv</sup>

Nigeria too has high levels of distrust in government institutions due to years of poor state performance in the provision of public goods such as education, health, and security.<sup>xlvi</sup> Distrust in health institutions has contributed to high levels of misinformation and stigma around mpox.<sup>xlvii</sup> The government identified that public health success is compromised by an “infodemic,” referring to the spread of inaccurate health information and stigmatization.<sup>xlviii</sup> The Nigerian Centre for Disease Control (NCDC) tried to address misinformation by conducting community sensitization sessions, and training healthcare workers in better surveillance practices.<sup>xlix</sup> The government also used social

media, advising the public to visit health clinics for diagnosis if they experience mpox symptoms.<sup>1</sup> The NCDC expressed frustration at citizens' lack of compliance, thus further distancing themselves from their citizens.<sup>ii</sup> Yet, distrust in institutions is not remedied by mandated orders, but rather by community engagement and relationship building.<sup>iii</sup>

Ultimately, autonomy is only an effective public health strategy if citizens have high levels of trust in their institutions such as in BC, given a relatively low risk of transmission. Spain's response perhaps relied too heavily on autonomy, given the country's high level of transmission. In Nigeria and the US, meanwhile, lack of trust in institutions meant that communicating autonomy was less effective.

Autonomy and orders are not opposite poles of health communications, but exist on a spectrum given different levels of threat from emerging viruses. Protections can be applied like a dial rather than a switch. Covid-19 required strict orders due to its high risk for transmission in public spaces. The global mpox outbreak has shown that no matter if a government chooses to follow autonomy or order-based measures, public trust in institutions and thus the institutions' communications are a prerequisite for a successful public health response.

## Attend to Values, Stories, Emotions

Communications research has long ago confirmed the importance of emotions, values, and stories for any communications strategy. Public health communicators need to build confidence with their target audiences by connecting with and listening to them.<sup>liii</sup> This task becomes much more complex when there is pre-existing stigma for an affected group, such as men who have sex with men and the greater queer community. The WHO describes stigma as “the negative association between a person or group of people who share certain characteristics and a specific disease,” recognizing the specific need to address it in mpox.<sup>liv</sup>

Despite the importance of these strategies, governments and public health authorities generally refrained from using values, emotions, and stories holistically in their mpox communications. Instead, they focused on values avoiding stigma and fear-mongering, with little use of stories and emotions. Men who have sex with men have faced stigma for decades, which was exacerbated by HIV/AIDS. The AIDS epidemic of the 1980s and 1990s was treated as a singularly homosexual problem. For the first few years, the media largely ignored the epidemic, contributing to over 41,000 deaths in the US at its peak in 1995.<sup>lv</sup> This history acts as a strong reminder to public health authorities to handle mpox with the utmost care, especially given that queer communities continue to experience poorer physical and mental health outcomes around the world.<sup>lvi</sup>

Governments and health authorities-maintained science-based communication that was neutral in tone, speaking solely to clinical awareness of the virus, often avoiding direct calls to action, emotion, or stories. However, communications targeted to the LGBTQ+ community were often shared by trusted messengers, making use of stories and value-based language. But in some cases, media reports and public discourse also shared stigmatizing information. Each of these situations offers key lessons for public health communicators.

### Science-Based Communication

Once the first mpox cases in the UK were reported, more cases appeared in various European countries and North America soon after. Because the outbreak was quickly defined by how it spread primarily among networks of gay men, health experts and queer advocates expressed concern that gay men would experience further stigma.<sup>lvii</sup> The WHO released a statement on May 20, 2022 stating that “stigmatizing groups of people because of a disease is never acceptable. It can be a barrier to ending an outbreak as it may prevent people from seeking care, and lead to undetected spread.”<sup>lviii</sup>

Public health authorities in each jurisdiction aligned their responses with these concerns and used very similar language. The BCCDC focused on explaining what symptoms look like, how mpox is transmitted. Prevention was only specifically mentioned in the sections referring to Pride Events and the LGBTQ2S+ community, strategically targeting communications, based on risk level of transmission.<sup>lix</sup> The BCCDC simultaneously emphasized the relatively low risk of mpox to the general BC population<sup>lx</sup>, in an attempt to avoid stigma while addressing the needs of queer communities with science-based information.

Ontario similarly used risk as its main criterion for communications, describing the risk of mpox transmission for the general Ontario population as low with moderate uncertainty and the risk to the gbMSM (gay, bisexual, and other men who have sex with men) community as low to moderate, given risk factors such as sex with multiple partners and anonymous sex.<sup>lxi</sup> Public Health Ontario’s

guidance emphasized a “non-stigmatizing and community engagement approach” to minimize barriers to healthcare access and affirmed that anyone could contract mpox regardless of gender or sexuality.<sup>lxii</sup> When publicizing vaccine eligibility information, vaccines were recommended for those with “high risk” of exposure or “close contacts” of positive cases. Identity-based language around gender or sexuality was not the leading descriptor for eligibility in press releases and social media posts. Specific identity-based language was only found in the detailed policies found online. In fact, Toronto Public Health did not mention the affected social group of men who have sex with men at all in their social media posts about mpox.

### Trusted Messengers

The WHO’s Strategic Communications Framework recommends promoting trusted messengers to bring credibility to the message being communicated.<sup>lxiii</sup> In the North American cases, LGBTQ+ organizations led communications targeted to MSM and the greater LGBTQ2S+ community. They often incorporated much more consideration for the emotional and physical toll of mpox than public health institutions. For example, the tagline on the BC-based Health Initiative for Men’s mpox webpage was “Mpox is here, but HIM is here for you!”<sup>lxiv</sup> These community resource centres would often encompass a much more caring, humanized tone than public health guidelines. We cover the inclusion of civil society in greater depth in the next section of this report.

Recognizing the lived experiences of gay men infected with mpox was very important to reduce stigma but was not always accomplished. BC’s Chief Public Health Officer, Dr. Bonnie Henry, commented on a podcast on July 22, 2022, on how mpox is “a very mild illness” and that the lesions are “not painful.”<sup>lxv</sup> This minimized the experiences of gay men who described mpox lesions as causing “the worst pain of their lives.”<sup>lxvi</sup> To address this, gay men often took it upon themselves to speak out about their experiences. Len Tooley, a public health professional and member of the queer community, combined his professional public health experience with his personal experience having mpox to publish a blog called “igotmpox.com” for others in the community dealing with the physical and emotional impacts of the illness.<sup>lxvii</sup> It was widely shared in communications for the LGBTQ2S+ community across Canada. News outlets often interviewed gay men who had mpox to share their experiences,<sup>lxviii</sup> providing both a credible source of information for the community, but also humanizing and destigmatizing the virus for news consumers.

In the US, the Biden Administration released the first edition of its mpox strategy on June 28, 2022, framing their response as part of a global effort to assist both endemic and non-endemic countries in combating mpox, using a community-based approach.<sup>lxix</sup> They then declared mpox a public health emergency on August 4. However, this was not considered enough by queer community advocates. Tyler TerMeer, CEO of the San Francisco AIDS Foundation, noted that governments have a responsibility to not further stigmatize or politicize the issue, but that the lack of urgency made queer citizens feel left on their own.<sup>lxx</sup>

The North American jurisdictions show the importance of multiple actors and moving beyond information provision in shaping public sentiments around emerging outbreaks. Community-level messengers can provide trusted sensitive information to those who are most affected, with the support of media outlets to spread awareness. Government figures can then give credibility to those messages by relaying them to the public. This contrasts with other jurisdictions such as Spain and Nigeria, which experienced the spread of low-quality information and stigmatization.

## Challenges with Poor Information and Stigma

Spain and Nigeria both seemed to suffer from the effects of poor information on mpox to different degrees. In Nigeria, health officials recognized there was an infodemic around mpox.<sup>lxxi</sup> The term infodemic was first coined during the 2003 SARS outbreak.<sup>lxxii</sup> The WHO defines it as “too much information including false or misleading information in digital and physical environments during a disease outbreak.”<sup>lxxiii</sup> Spain’s mpox communications suffered from poor government coordination, happening through social media and news outlets instead, sometimes with deleterious effects. A popular gay bathhouse called “Sauna Paraíso” in Madrid was ordered to shut down because there appeared to be a local outbreak tied to the establishment in early June 2022. Some news outlets reported on it in a stigmatizing way, highlighting that the establishment was “ground zero” for mpox in Madrid and that patrons were often under the influence of drugs, offering sex for money, and engaging in “carnal acts.”<sup>lxxiv</sup> Stigmatizing reporting such as this marks queer spaces and men who have sex with men as devious vectors of the virus.

In another case, a doctor in Madrid took photos of a man on the subway whom he assumed to have active monkeypox lesions all over his body. He tweeted the photo and a description of the interaction, calling for stricter public enforcement. He alerted his followers to be careful on the metro and said that the individual in the photo should have been quarantined. His tweet went viral. It was later reported that the man did not have mpox. Instead, he had a chronic skin condition caused by neurofibromatosis, which is not contagious. The tweet has since been deleted.<sup>lxxv</sup> Instances such as these show why it is important not to stigmatize any subpopulation and why health communicators in Spain have used language more focused on individual risk assessment and responsibility, instead of community vigilance and reporting.

Nigeria’s long-standing issues with information since an earlier outbreak of mpox in 2017 stemmed from high levels of distrust between rural traditional communities and the government. Poor communications exacerbated by poor health infrastructure had led to high levels of stigmatization around mpox in previous outbreaks. In the 2017 outbreak, media reports described it in sensational terms such as “fatal,” “dreaded,” “small-pox like,” “deadly,” “spiritual,” “Ebola-like,” or “rare.” A prominent rumour at the time circulated that the military was injecting schoolchildren with the mpox virus, which created distrust in public health.<sup>lxxvi</sup> Because of this, the 2022 strategy was science-driven and focused on addressing the “infodemic” surrounding mpox.

The Nigerian CDC made efforts to communicate the negative impacts of misinformation and stigmatization. On May 22, 2022, the NCDC shared a story on their social media of a 2017 case where an mpox patient took his own life while at the hospital due to stigmatization around the virus.<sup>lxxvii</sup> This was the only story showcased on a public platform to communicate about the virus. The 2022 strategy focused more on a “One Health” approach, linking human and animal health, given that animal-to-human transmission is common in Nigeria.<sup>lxxviii</sup> The strategy included healthcare provider training, open forum events with health experts, and maintaining consistent messaging across all actors to minimize any misinformation.

However, despite their strong efforts, lack of compliance also led the government to openly communicate its frustration with the population. Public health officials such as Dr. John Oladejo, the NCDC Director of Health Emergency Preparedness and Response, even made a statement saying:

The main problem in the country, as related to these viral diseases, is the people themselves. When you give them instructions or protocols, they don't follow it. So, at the community level, there is always a behavioural problem that Nigerians are not complying with public health measures, and it is a behavioural issue that is leading to further transmission.<sup>lxxxix</sup>

The NCDC's social media posts also began expressing more urgency and direct commands, using the hashtag #TakeResponsibility,<sup>lxxx</sup> and asking citizens to "kindly ADHERE to our health ADVISORY."<sup>lxxxi</sup> Overall, Nigeria's strategy tried to evade further stigmatization of those with mpox, but the tone of some communications was not necessarily conducive to achieving the behaviour change they sought.

### Addressing Stigma in Communications

In BC too, public health authorities focused on the problem of stigmatization, particularly against men who have sex with men. All communications noted that anyone can be infected with mpox, despite a targeted response.<sup>lxxxii</sup> BC, like many other jurisdictions, decided to only offer the mpox vaccine to men who have sex with men. Once vaccination clinics began running and eligibility criteria were announced, Vancouver Coastal Health released social media infographics explaining that the decision to only vaccinate men who have sex with men was about prioritizing the most impacted demographic.<sup>lxxxiii</sup> Public health authorities would also reply directly to any stigma-related questions on their social media channels, informing the public as openly as possible about the logic behind their decisions.

Civil society communications targeted to MSM and the greater LGBTQ2S+ community incorporated much more consideration for the value of community connections more than general mpox communications. Len Tooley's blog about his mpox experience often emphasized the feeling of isolation and loss of community that mpox can cause.<sup>lxxxiv</sup> This value was demonstrated through the province's isolation measures. General communications from the province advised isolating until all lesions had fully healed. LGBTQ+ organization HIM advised that infected individuals could go outside if their lesions were covered and they felt well enough to do so. They also mentioned that if infected individuals chose to reduce contacts, that they do so while staying connected to loved ones to maintain their wellbeing, and seeking mental health support if needed.<sup>lxxxv</sup>

Overall, health communicators attended primarily to values, and put little emphasis on stories and emotions in their mpox strategies. Values based on science, awareness, and universality were prioritized to minimize the opportunity for stigma. Given that queer communities already experience stigma in healthcare settings, it is crucial to prevent further marginalization. However, there was a difference between communications targeted to the general public and affected communities. When speaking to affected communities, in this case queer communities, values of care and community connection were essential. Targeted communications therefore must address the unique needs of the communities being most affected.

## **Pull in Citizens and Civil Society**

Some of the world’s largest public health institutions recognize the importance of engaging directly with communities to develop robust, effective, and informed health communications. The WHO’s *Strategic Communications Framework* advises that health communicators involve partners early in the campaign, use trusted messengers, and ensure the availability of community resources.<sup>lxxxvi</sup> Similarly, the US Centres for Disease Control’s *Inclusive Communication Principles* emphasize that “community engagement should be a foundational part of the process to develop culturally relevant, unbiased communication for health promotion, research, or policy making.”<sup>lxxxvii</sup> These recommendations call for two-way communication channels that involve affected populations by establishing, fostering, and maintaining strong relationships with the intended audiences of public health messaging. The RAPID Framework’s principle to “Pull in Citizens and Civil Society” recognizes the importance of building robust feedback loops that enables affected citizens to participate in the creation of health messaging.<sup>lxxxviii</sup> Failing to do so risks spreading information that is ignored or misconstrued, furthering disinformation and stigma surrounding viruses like mpox.

This principle was essential to avoiding the stigmatization of MSM and the wider queer community in the global mpox response. Queer communities have a lingering history of being ignored and discriminated against by public health systems. The AIDS crisis of the 1980s and 90s provides a demonstrable example of how stigma can disrupt a public health response. Major media outlets largely ignored the HIV/AIDS epidemic in its early stages; initial reporting called it a “gay disease” or “gay cancer.”<sup>lxxxix</sup> Health communicators in the mpox outbreak tried much harder to avoid the effects of poor public health messaging. Many health authorities recognized the importance of building strong networks with the community, using community-relevant media and technology to spread information, and avoiding stigmatization.

### **Community Networks as Leaders**

Throughout the summer outbreaks of 2022, mpox was mainly transmitted among networks of men who have sex with men, except for the case of Nigeria where transmission was not as homogenous. As of July 22, 94% of reported mpox cases in the US had been found among men who reported having sex with another man in the three weeks prior to symptoms.<sup>xc</sup> Therefore, direct community engagement was crucial for developing public health communications. Jurisdictions like Ontario and BC had strong networks already built with queer community actors, allowing for a tactful, effective response. Nigeria’s epidemiology was not specific to gay men, but still recognized the need for rural and urban community networks for outbreak surveillance and management.

BC and Ontario offer two different examples of how health authorities might cooperate with civil society organizations, whether government-funded or not. Both showcase the importance of long-standing relationships to react swiftly to epidemics. In Ontario, the Gay Men’s Sexual Health Alliance (GMSHA) acted as the key communication mechanism for the province. They are a government-funded, community-led initiative within the province’s HIV portfolio.<sup>xcii</sup> As a support network embedded in the government system, they facilitate direct links between government, public health, and community advocates.

On the same day that the first two cases of mpox were reported in Canada (in Quebec on May 20, 2022),<sup>xciii</sup> GMSHA created and shared mpox information to their social media platforms.<sup>xciii</sup> They held weekly mobilization meetings that convened representatives from public health, government



stakeholders, communication organizations, and bathhouses. Through this partnership, they ensured consistent, community-relevant, non-stigmatizing communications in all 36 public health units across the province. GMSHA exists as part of Canada's federal HIV strategy, which poised them as the most apt community partner to develop and deliver mpox communications.

By contrast, BC civil society actors external to government institutions drove the mpox response from a community level, but still cooperated heavily with health authorities. BC's mpox response was driven by Vancouver's queer community actors, led by Health Initiative for Men (HIM) and the Community Based Research Centre (CBRC). HIM is a non-profit that focuses on the health and well-being of gay, bisexual, and queer men, and gender diverse people in BC.<sup>xciv</sup> CBRC promotes the health of people of diverse sexualities and genders through research and intervention development and acts as the community nexus when engaging with government bodies.<sup>xcv</sup>

CBRC activated this network on June 6, 2022 when they sent an open letter to the Minister of Health calling for emergency financial and housing support, co-signed by 71 organizations.<sup>xcvi</sup> Due to this advocacy and the pre-existing relationships between Vancouver's queer advocacy network and public health institutions starting with the AIDS Crisis in the 1990s,<sup>xcvii</sup> HIM and CBRC were selected as the key civil society actors to develop and deliver the province's mpox response.<sup>xcviii</sup> HIM developed targeted communications for queer communities, including information about prevention, vaccination criteria, treatment, and mental health support. They also worked with other community spaces such as gay bars and bathhouses to develop guidance for public events and to deliver pop-up vaccination clinics. An important piece of this work was to conduct storytelling sessions for public health and government officials on what bathhouses and cruising trails looked like to develop appropriate health responses.

Meanwhile, CBRC supported research and data collection efforts on mpox. They collaborated with community-based organizations to help share information on prevention, testing, and support and collected data at Pride Festivals throughout the summer to understand the community's opinion on the mpox response.<sup>xcix</sup> A CBRC staff member who had mpox combined his professional experience in public health with his personal experience to create a blog style website called "I Got Mpox" that offered a first-hand perspective of how to manage the physical and mental impacts of the virus.<sup>c</sup> It was widely shared among media and public health outlets. Due to the leadership of BC's queer health actors, over 18,000 doses of mpox vaccinations had been administered by the end of the summer and weekly case numbers consistently declined since peaking on July 10, 2022.<sup>ci</sup>

### Distant Community Networks

Ontario and British Columbia highlight how effective community engagement is essential to public health efforts. Nigeria's experience with mpox as an endemic virus has highlighted the need for better community engagement and public participation in their pandemic response plans. Misinformation and cultural stigma around the virus affected previous outbreaks. Highly-religious rural communities with little access to formal healthcare see the virus as a stigma-laden spiritual phenomenon.<sup>cii</sup> Additionally, militant violence in affected areas and the reluctance of rural communities to report suspected cases for fear of stigmatization have made communication particularly challenging.<sup>ciii</sup> There is little direct access to these communities, although the NCDC is trying to get more data on public perceptions of the virus. On June 2, 2022, the NCDC announced a public survey inviting the public to participate to gather data on the public opinion, knowledge, and awareness of mpox in Nigeria.<sup>civ</sup>

Given the challenges accessing the most affected communities, the NCDC focused on a media-based approach to influence accurate reporting and media communication on the virus. On June 28, 2022, a Media Dialogue Session was livestreamed on YouTube to give public health officials the chance to speak directly to the public, explain the country's mpox response, and answer any questions about the virus.<sup>cv</sup> They widely promoted a conference called the “Nigeria One Health Conference” to the public, to hear from the country's experts in human and animal health speak about animal to human transmission of viruses.<sup>cvi</sup> The NCDC has also used many different avenues such as Twitter, Instagram, WhatsApp, and Telegram to share public health information.

In Spain, the Ministry of Health reported that 98% of mpox cases had been in men, mostly men who have sex with men.<sup>cvi</sup> However, they did not demonstrate a coordinated, community-based communications approach. Sebastian Meyer, president of the STOP SIDA association, a Barcelona-based HIV/AIDS organization, said that governments deferred to trusted message-bearers to drive the health warning home to queer communities.<sup>cvi</sup> For example, Madrid-based sexual health advocacy group Apoyo Positivo first shared a deck of mpox infographics on May 18, 2022, with other groups posting more resources in the days and weeks after.<sup>cix</sup> While it is important to have community voices be central, the Spanish health authorities were less proactive in collaborating with civil society actors than jurisdictions like BC.

The US similarly maintained a similar divide between government and civil society actors for the first few months of the outbreak. Civil society groups called for greater collaboration and urgency from the federal government in its mpox response, holding rallies and releasing a statement of demands, led by HIV advocacy group, ACTUP NY, a New York City-based HIV/AIDS advocacy organization that started during the height of the AIDS crisis in 1987.<sup>cx</sup> The Biden Administration responded by announcing greater support for LGBTQI+ Pride events and more vaccines, recognizing the urgent calls from community groups to increase public health efforts against mpox.<sup>cx</sup> They outlined that they would increase vaccination and testing capacities, as well as work with community groups to maintain best practices as the situation unfolds. However, they did not explicitly state how this engagement would occur nor share updates on it.

Community engagement is crucial to combat stigma and misinformation. Public health authorities should work to establish strong networks with community groups, perhaps even embedding them into the health system as seen in Ontario. In all cases, doing research to understand the lived experiences of the population in regard to their health was also extremely important. To pull in citizens and civil society, the experiences of diverse, marginalized communities should inform all aspects of health communications strategies. This will help to diminish misinformation and stigma of the affected population, while ensuring accurate and relevant information for all citizens.

## Institutionalize Communications

Public health authorities need to be ready to act immediately when new health emergencies arise. That agility only emerges from institutional preparedness, meaning how quickly new, emerging health information is embedded into public health communications systems and how swiftly public health authorities can implement effective crisis communications for their diverse populations. Across the cases studied, some public health authorities had pre-existing institutions supporting the dissemination of mpox information, including connections with community actors.

However, an institution is only effective if appropriately used. The Spanish case demonstrated poor use of its institutions, despite having the potential to effectively produce and share public health information. Despite this, community actors worked to fill in gaps on social media. The institutionalization that mattered most for mpox was long-standing connections to queer communities.

### Government Institutions and Community Mobilization

Institutionalization was most effective where governments linked with community actors. Government institutions mobilized and leveraged community actors to assist in developing their mpox communications. In Nigeria, the long-standing presence of mpox led their public health authority, the NCDC, to develop new institutions that emphasized community involvement. In Ontario and BC, both provinces leveraged their networks with queer communities to develop robust communications strategies. In Spain, communications were disseminated primarily through media interviews with public health officials, which depoliticized the issue but did little to address stigma. In all cases, institutionalization of community-level efforts was imperative.

Past experience with public health emergencies appeared to be a determinant of effective institutionalization within governments. Mpox has been present in Nigeria, for example, since the 1970s. The NCDC set up a Monkeypox Technical Working Group in 2017 to respond to emerging outbreaks.<sup>cxii</sup> However, ineffective communications in these prior outbreaks and growing distrust in government institutions led the NCDC to create the National Monkeypox Emergency Operations Center.<sup>cxiii</sup> It is a working group focused on addressing the resurgence of the virus. They decided to frame the response as a One Health approach, integrating it into a wider strategy promoting overall better health for Nigerians. They also established the National Infodemic Management Team to conduct active social and community listening to find information about diseases that are currently prevailing in the population. Part of their work relevant to mpox has been a survey of the public perception and awareness of the virus.<sup>cxiv</sup> By mobilizing these institutions, the NCDC focused attention on the response and the dissemination of information.

In Ontario and British Columbia, existing institutions ensured that there were strong, swift, and inclusive responses to mpox. Mobilizing long-standing networks between queer communities and public health institutions was integral to developing effective communications. In Ontario, community actors were already embedded in government institutions, such as the GMSHA.<sup>cxv</sup> Due to the GMSHA's proximity to those most affected by mpox, the Ministry of Health called upon them to act as the communication mechanism for the province. Ontario benefitted from already having institutionalized connections with community actors.

In BC, community actors were not embedded into the government system, but prior relationships facilitated quick institutionalization in response to the mpox outbreak. Community discussions on mpox began within a pre-existing Gay Men’s and HIV Working Group. This group had built trusting relationships with local health actors through their queer health advocacy, allowing for quick action. These discussions soon developed into an institution by leveraging the relationships that existed between the BCCDC and queer health actors, establishing the Mpox 2SGBTQ+ Community Response Group. With leadership from the CBRC, the BCCDC, and HIM, the group’s purpose was to provide a community-led provincial forum for information-sharing and focused discussion of issues related to the mpox outbreak.<sup>cxvi</sup> The group met weekly, adjusting frequency as needed, informing the BCCDC how to best communicate and share knowledge with the public, and with the queer community. HIM took charge of making communications more relevant for queer community members. They had established strong relationships with local health authorities over the years from acting as the main resource for gay men’s health in the province.<sup>cxvii</sup> These institutional connections ensured a high level of existing trust between community actors and local health authorities in BC. This forum facilitated two-way communication between the community and public health authorities, allowing for direct feedback and expertise in effective health communications.

Ontario and BC both emphasized the importance of community participation in their communications development. The cases differed, however, in the positioning of community actors. In Ontario, the GMSHA is embedded in the provincial health system, while HIM acts as an independent civil society organization in BC. Government integration allows for quick mobilization. However, it means that institutions are determined by current political agendas. One of the strengths of the BC response was the external position of queer organizations in government institutions. They could advise government and public health officials from a neutral position, rather than being limited by political priorities. In Ontario, GMHSA encountered hesitancy from public health officials to address mpox as seriously as it needed to be, likely to promote the image that the government had control over the situation. The initial reports minimizing mpox as just a “rash” exemplified this.<sup>cxviii</sup> However, Ontario’s response did benefit from having GMSHA as a direct link to community actors, hosting weekly mobilization meetings. This facilitated a feedback loop between public health officials and the queer community, with GMHSA at the centre.

For example, 48 civil society groups called for government aid in a letter to Jean-Yves Duclos, Minister of Health, in early June 2022, emphasizing the need for greater community engagement to curb the spread of mpox.<sup>cxix</sup> The letter highlighted the structural stigma that men who have sex with men face in many aspects of society, justifying the urgency of the matter and the need for greater cooperation.<sup>cxx</sup> In response to this, the government announced their support of queer civil society organizations and CAD \$550,000 in aid towards mpox efforts on August 12, 2022. The Minister of Health explained that this funding would go towards the “expressed needs of their communities for prevention, education, awareness, and anti-stigma activities.”<sup>cxxi</sup> This would not have been possible without the dialogue between civil society actors and government officials. There was broad consensus among all involved that the response across Canada was based in partnership.<sup>cxxii</sup> Dr. Troy Grennan, HIV/STI lead at the BCCDC reflected on the government’s support during the early months of the mpox outbreak, noting that this was the first time he had seen “such an early and meaningful involvement of the community” in a public health response.<sup>cxxiii</sup>

## Media and Technology as Institutions

In Spain, institutional connections played out between public health and media outlets, rather than civil society and community actors. In the autonomous community of Madrid for example, the Director General of Public Health Elena Andradas Aragonés conducted frequent press conferences and television interviews.<sup>cxixiv</sup> News outlets appeared to be the communication channel of choice, but they were not managed well. Despite public health officials expressing caution and using non-stigmatizing language, news outlets often would broadcast stigmatizing and racist imagery of mpox during the interviews.<sup>cxixv</sup> Greater dialogue between public health officials and media outlets, for example, may have mitigated this. Furthermore, establishing strong networks between queer communities and media outlets may have also improved the media's coverage of the outbreak.

Technology also played a significant role in the institutionalization of mpox communications. In the United States, various state and local jurisdictions used technological solutions to share information. The state of New York set up SMS-text alerts in both Spanish and English to accommodate for the high number of Latinx citizens.<sup>cxixvi</sup> Equality California, a statewide LGBT organization, partnered with ridesharing app, Uber, to provide free rides to vaccination clinics.<sup>cxixvii</sup> Nigeria used platforms such as Twitter, Instagram, WhatsApp, and Telegram to help disseminate information.<sup>cxixviii</sup> In BC, HIM put up signage in community spaces with scannable QR codes to share mpox resources.

Across all cases, civil society was integral to institutionalizing communications. Jurisdictions with extant institutional ties with community actors could develop effective and culturally relevant communications strategies, enabling crucial two-way communication between affected communities and governments to inform public health messaging. While technology can help, the most important factor for effective institutions is trust. Such trust needs to be built long in advance of any outbreak. By leveraging that trust, quick coordination can occur in the face of emergent health crises, leading to culturally relevant and effective communications for diverse communities.

## Describe it Democratically

Democracy encompasses institutions, practices, and habits that structure daily life.<sup>cxxxix</sup> From an institutional perspective, mpox caused minimal disturbances to democratic processes. They were still threatened and challenged, however. UNAIDS released a statement recalling lessons from the AIDS response in the 1980s about how stigma and blame directed at certain groups of people can rapidly undermine outbreak response.<sup>cxxx</sup> Since the AIDS crisis, Canadian immigration processes have required mandatory HIV screening, which disproportionately stigmatizes and limits the migration of HIV-positive individuals, often from sub-Saharan Africa.<sup>cxxx</sup> Mpox poses a similar risk of further excluding certain groups from democratic institutions.

Given this history, democratic descriptions of mpox had two goals. The first was to use non-stigmatizing language to minimize and avoid any stigma of the queer community, and of the African countries where mpox has been endemic. The second was to promote equity in the outbreak response, within and across jurisdictions. This was done strategically by some governments, but also by queer communities and health advocates using their democratic freedoms to protest. The cases demonstrate the delicate nature of managing stigma democratically.

### Stigma

When mpox first began spreading through Europe and into other parts of the world, community advocates called upon governments to remember the lasting stigma of HIV/AIDS for queer communities.<sup>cxxxii</sup> In line with these lessons, mpox communications across the cases refrained from explicitly targeting or identifying MSM and queer communities. Instead, more general language was used to describe the virus as a common threat. In BC, communications acknowledged the physical and social stigma and discomfort that comes with this virus. HIM's campaign slogan "Monkeypox is here, but HIM is here for you" exhibits this sentiment.<sup>cxxxiii</sup> In Spain, communications emphasized that transmission occurred through close, physical contact (often sexual), emphasizing safe sex and general hygiene practices.<sup>cxxxiv</sup> Public health guidance across all cases focused more on awareness of the virus, promoting only standard hygiene practices such as hand washing and avoiding close contact with those who have symptoms.

Nigeria differed and maintained that sexual transmission was not relevant in their context. Public health officials said that there was no evidence of sexual transmission in Nigeria, although they recognized that anyone can get it and that sexual transmission is possible.<sup>cxxxv</sup> Since the country criminalizes same-sex activity, patients are much less likely to disclose homosexual and bisexual relationships due to fear of stigmatization and criminalization.<sup>cxxxvi</sup> The relationships between sexual behaviour and mpox transmission in Nigeria have not been widely studied due to these views.

Avoidance of sexual-identity language occurred in other cases as well. In general, governments and health officials were reluctant to specify MSM as a key demographic due to the fear of stigmatization. In Ontario, vaccination eligibility messages were left intentionally neutral to avoid pinpointing any one group. They recommended vaccination for those with "high risk" of exposure or "close contacts" of positive cases.<sup>cxxxvii</sup> Identity-based language around gender or sexuality was not used at all when describing vaccine eligibility in social media posts. In Spain, Elena Andrades Aragonés, the Director General of Public Health for Madrid, was similarly reluctant to link gay men and sexual activity to transmission when asked about it directly in television interviews.<sup>cxxxviii</sup>

However, it is still important to directly address stigma in communications, instead of simply avoiding the topic altogether. Public health officials criticized the US federal administration for not addressing the mpox outbreak with greater urgency.<sup>cxv</sup> This created tensions between queer communities and government institutions due to a perceived lack of urgency around the virus. Failure to acknowledge how a virus affects certain communities may come off as ignorance to a concerned community. This was the case in the US, and especially in Spain. Therefore, democratic descriptions should use non-stigmatizing language, while still acknowledging stigma, so that affected communities are not erased from the narrative.

Communities around the world have also faced stigma due to place-based naming of diseases, often portraying outsiders as scapegoats to blame for outbreaks.<sup>cxvi</sup> During the summer of 2022, mpox was still called "monkeypox," which perpetuated racist, colonial stereotypes likening African people to wild animals. It was named as such only because it was first discovered in monkeys.<sup>cxvii</sup> Initial mpox reports shared graphic images of African children with severe cases of mpox, alongside images of monkeys in some cases, furthering these harmful stereotypes.<sup>cxviii</sup> At the time, many public health officials called for the official name of the virus to be changed. WHO Director-General Dr. Tedros announced on June 14, 2022 that the name would be changed.<sup>cxix</sup> Many health communicators proactively decided to use alternative names for the virus such as mpox, mpx, and mpxv.<sup>cx</sup> The WHO officially changed the name to mpox on November 28, 2022.<sup>cxvi</sup>

## Equity

In addition to addressing racist imagery and descriptions of mpox, global inequities were also discussed to democratize the response. Nigerian officials emphasized on June 28, 2022 that they needed a robust approach to address mpox, given the poor support they had received in the COVID-19 pandemic and their (ultimately justified) fears of similar treatment in the global mpox response.<sup>cxvii</sup> The United States was the only case aside from Nigeria that explicitly framed their mpox response as part of a global effort to curb the spread. The Biden Administration stated that they were working towards ending mpox in endemic and non-endemic countries, with specific aid sent to the Democratic Republic of the Congo and Nigeria.<sup>cxviii</sup> However, Nigeria did not receive its first supply of mpox vaccines until December 2022,<sup>cxviii</sup> six months after all other cases in this report had already deployed their vaccination strategies. Because of this, they situated their mpox responses within a greater One Health approach, whose goal was to promote better human and animal health for Nigerians in all aspects of life.<sup>cxix</sup> Despite the declared global support from the US, Nigeria still experienced a remarkably long and inequitable wait for mpox vaccines. In Canada, while there was an initial uptake of vaccines, Dr. Theresa Tam, Canada's Chief Public Health Officer noted that uptake was decreasing as the summer went on, with 70,000 doses supplied and only 27,000 used.<sup>cl</sup> Such a discrepancy should have been analyzed further and perhaps greater efforts could have been made to redirect those doses outside of Canada or to communities with low access.

Democratic practices such as protesting and advocacy aimed to promote equity around mpox. In Canada, a coalition of queer health actors wrote a letter to Minister of Health, Jean-Yves Duclos, calling for greater support and funding towards mpox. ACT UP led advocacy efforts around the US government's mpox response. They called for more vaccines and greater urgency to support those impacted by mpox. On July 21, 2022, ACT UP along with other local queer organizations organized a rally in New York City in support of a list of state-wide and federal demands to improve the mpox response.<sup>cli</sup> This list, found on ACT UP's social media accounts, included demands for mpox sick pay, hotels for those who need a quarantine location, more vaccines, and more appointments.<sup>clii</sup> Officials

in both Canada and the US responded to these demands with promises of greater vaccine access and funding.<sup>cliii</sup> However, demands for social support such as sick pay and quarantine accommodations were not met. By exercising their right to protest and advocate, queer community groups democratized the mpox response through community action. This reminded governments that equitable solutions need to be part of their outbreak responses, though these solutions were ultimately largely not enacted.

Governments and health authorities need to pay particular attention to how they include community actors' voices in communications. This includes using non-stigmatizing language, but that is not an absolute solution. Authorities also need to address stigma and inequity proactively. Otherwise, they risk appearing blind to stigma and inequity, which further alienates the most affected communities. They need to include stigmatized voices into the public strategy somehow, otherwise a seemingly non-stigmatizing approach could backfire. They should also listen and respond to displays of democratic practices such as protest and advocacy, to promote a unified front towards outbreaks.



## **Conclusion/Recommendations**

By the end of August 2022, the lowest number of mpox cases among the jurisdictions analyzed in this report were British Columbia (137) and Nigeria (277). The United States had the highest number of cases at 21,694, while Spain had 6,543 and Ontario 1,277. A variety of factors can explain these numbers, which aren't adjusted for population size. Still, our analysis indicates that communications play a significant role in the overall success of public health outcomes.

Our simplest recommendation, then, is to remember that communications are crucial for managing any pandemic or epidemic. In Nigeria, poor communications in past mpox outbreaks contributed to rumours about the virus and undermined trust in public institutions. This now frames the NCDC's current public health approach which focuses on regaining that trust through scientific and culturally relevant information.

Mpox also offered lessons beyond the original RAPID framework, particularly highlighting the importance of managing stigma. In addition to lack of trust, poor communications contribute to stigma around certain viruses and the people they most affect. Existing stigma of queer communities and negative racial stereotypes influenced public perceptions of mpox. Public health communicators generally approached this in one of two ways. They either avoided addressing stigmatizing notions and stereotypes altogether, such as in Spain, or produced communications educating citizens on what stigma is and why it needs to be dismantled in the outbreak response, such as in BC. Addressing stigma directly using the voices of the most affected communities tended to be the most effective approach to minimize further marginalization of queer and Black communities.

In order to do this, institutionalized community connections were key. Civil society actors in the US had to call upon the federal government for greater attention in the outbreak. The US government responded relatively late compared to other jurisdictions that had built strong, pre-existing community relationships built into their health institutions. Ontario already had an integrated structure with the Gay Men's Sexual Health Alliance (GMSHA) acting as an internal liaison to external community groups; this enabled swift action and dialogue between public health communicators and affected community members. Whether relationships are built directly into government institutions such as Ontario, or are based in longstanding trust and partnership such as in BC, the institutionalization and mobilization of civil society proved extremely important for mpox communications.

A key recommendation would be for governments to have well-established networks with community organizations such as GMSHA. Another would be for governments to have policies supporting the health of diverse communities, as this will allow for quick mobilization when crises do arise. Finally, the lack of specialized aid and support for those who fall ill with the virus also should be addressed. Community advocates called for financial support to cover lost income due to isolation and recovery times, similar to or more comprehensive than Covid supports. This never occurred.

Mpox was the first major viral pandemic outbreak since Covid-19. There will be more. The WHO ended the Public Health Emergency of International Concern for mpox on May 11, 2023, almost exactly a year since the first case was reported in the UK.<sup>cliv</sup> However, health authorities in the US already warned of resurgences as summer events return.<sup>clv</sup> Therefore, these lessons will continue to apply to both ongoing management of mpox and to future disease outbreaks. Public health institutions will need to be prepared to act swiftly and appropriately to support successful health outcomes, to avoid further stigmatization, and to bolster democracy.

## **Appendix: Case Studies**

### **British Columbia**

#### **Timeline**

May 19, 2022 - First two reported cases of mpox in Canada

May 25, 2022 - First reported case of mpox in BC

May 27, 2022 - Public Health Agency of Canada holds first meeting with provincial representatives and health experts to determine public health guidance

June 10, 2022 - National Advisory Committee on Immunization (NACI) releases interim guidance on monkeypox public health management and vaccination

July 1, 2022 - First Pop-up mpox Vaccine Clinics begin for MSM at the HIM Clinic

July 20 - August 1, 2022 - Vancouver Pride Festival

August 3, 2022 - BC mpox case numbers surpass 100

August 15, 2022 - First epidemiological report is released by the BCCDC

August 31, 2022 - Cases reach 137 by the end of the study period<sup>clvi</sup>

#### **Government and Health System**

British Columbia's provincial government is currently run by the New Democratic Party (NDP), a left-leaning social democratic party. They have held a majority government since the last provincial election in fall 2020, and before that held a minority government. A poll from August 2022 suggests that the majority of British Columbians (71%) are most likely confident in the provincial government to manage the mpox outbreak.<sup>clvii</sup>

BC has a publicly funded healthcare system that is managed at the provincial level. The federal government distributes some funding to the province, but then the province manages all service delivery and public health initiatives.<sup>clviii</sup> The province's healthcare system consists primarily of the Ministry of Health, the provincial health authority, the indigenous health authority, five regional health authorities, and the Office of the Provincial Health Officer. All public health guidance comes from the Office of the Provincial Health Officer, currently Dr. Bonnie Henry. From there, the regional health authorities are responsible for direct public communication on population health matters.<sup>clix</sup>

#### **Who is communicating?**

*Public Health Agency of Canada (PHAC)* - PHAC released ad hoc statements updating the state of mpox across the country. On August 12, 2022 the Chief Public Health Officer put out a statement

outlining the country's mpox response in a press meeting where media outlets could ask questions about the response.<sup>ckx</sup> PHAC centralized all mpox data and epidemiological guidance for the provinces to source and use. They updated their epidemiological reports twice weekly, on Wednesdays and Fridays.<sup>ckxi</sup>

*British Columbia Centre for Disease Control* - They communicated to the various regional health authorities and refer to resources from PHAC, WHO, and HiM, and SmartSexResource.<sup>ckxii</sup>

*Vancouver Coastal Health* - Largest local medical authority in BC, covering the Vancouver area. Deputy Chief Medical Health Officer Dr. Mark Lysyshyn often spoke on local news outlets providing updates or interviews ad-hoc.

*Health Initiative for Men (HiM)* - a civil society organization that supports the health and wellbeing of gay, bisexual, and queer men and gender-diverse people in British Columbia. They worked closely with public health authorities and BCCDC to develop messaging that doesn't add to the stigma their communities often face.<sup>ckxiii</sup>

*Len Tooley (igotmpox.ca)* - Public health worker and local advocate who was infected with mpox himself, and then created a website with resources for those who have contracted mpox.<sup>ckxiv</sup>

## **What is communicated?**

### *BCCDC*

The British Columbia Centre for Disease Control shared general information on the virus geared towards the general public and healthcare professionals. The headline of the webpage highlighted that mpox is spread through “close, personal, often skin-to-skin contact.”<sup>ckxv</sup> The site shared information on the epidemiological situation in the province, including the number of cases broken down by region, as well as broader guidance. The site mentioned that while most cases in the world are in men who have sex with men, that anyone can become infected, and the risk is generally low for residents of BC. Prevention is only specifically mentioned in the sections referring to Pride Events and the LGBTQ2S+ community.<sup>ckxvi</sup>

In the resources for Events during Pride Season and Guidance for the LGBTQ2SQ+ Community, the main focus is on awareness building and preventing spread, rather than protecting oneself from infection. An infographic (shown below) for the LGBTQ2S+ community contains an explanation as to why the virus is mainly presenting itself in men who have sex with men.<sup>ckxvii</sup> Noting that mpox is a virus that spreads through social networks, the site explained that LGBTQ2S+ men have close international social networks that are susceptible to transmission and also get STI testing done often, which has led to the identification of the virus in that community. It also mentioned that the virus could be circulating in any community due to close contact.

**Monkeypox Recommendations for Two-Spirit, Gay, Bisexual, Transgender, and Queer (2SGBTQ+) Communities**

**What should the 2SGBTQ+ community do?**

- Be aware –** Know the symptoms of a monkeypox infection.
- Watch for symptoms –** Look for new ulcers or blisters on your body.
- See a doctor or nurse –** If you have symptoms, seek help.

**Find a clinic**

**Protecting yourself and others**

Until you see a doctor or a nurse, follow these ways to avoid spreading monkeypox to others:

- Wear a mask.
- Do not share towels, clothing, sheets, or other things that have touched your skin.
- Don't get close to others, including people you live with. Do not have sexual contact with others.
- Clean your hands, and objects and surfaces that you touch regularly.
- Keep any sores or blisters covered as much as possible (e.g. wear long sleeves and long pants).

**Symptoms of monkeypox infection**

Infection may start with flu-like symptoms, like:

- Fever or chills
- Swollen lymph nodes
- Intense headaches
- Muscle aches
- Back pain
- Fatigue

**2-4 WEEKS**  
Symptoms can last 2-4 weeks

**1-5 days later a skin rash appears**, with blisters that can appear on genitals, hands, feet and/or mouth. The rash may start in one place and spread to other parts of the body.

**Some people only get the rash.**

**How monkeypox is spread**

Monkeypox can spread from one person to another through **CLOSE, PROLONGED CONTACT** with:

- Sores and blisters
- Items like bedding or towels that have monkeypox virus on them
- Respiratory droplets such as coughs and sneezes during close, face-to-face contact over several hours

Monkeypox is not known to infect people through sex, like syphilis or HIV. However, for most people, sexual activity involves close contact, and that's how monkeypox is spread.

**Can monkeypox be treated?**

- Most people with monkeypox have mild symptoms which will go away after 2-4 weeks and do not require any specific treatment.
- Treatment for monkeypox is usually to try to control symptoms (e.g. fever, dehydration, any other infections that could develop).
- Rarely, if a case of monkeypox is severe, doctors may treat it with medication and/or hospitalization.

**Who may be more at risk of severe disease?**

- People who are moderately or severely immunocompromised (e.g. people living with HIV who are not on treatment and have high viral loads or low CD4+ counts)
- Young children
- People who are pregnant

**Why are many cases in this global outbreak among men in 2SGBTQ+ communities?**

Viruses like monkeypox spread through contact in social networks. Some 2SGBTQ+ men are part of social networks that cross countries. This includes travel to large gatherings which may have helped the monkeypox virus to spread. Many men in these networks are active in protecting their health, including getting tested for sexually transmitted infections (STIs). This may have led to earlier detection of the outbreak in 2SGBTQ+ communities, and outbreaks may also be found in other communities.

**SYMPTOMS CAN START 5 to 21 DAYS AFTER YOU WERE IN CONTACT.**

**For more information**  
Information on monkeypox is changing as we learn more. For up-to-date information visit [bccdc.ca/monkeypox](https://bccdc.ca/monkeypox)


Version 2 July 15, 2022.

This infographic from the BCCDC and Vancouver Coastal Health on recommendations for the 2SLGBTQ+ communities include an important section explaining why mpox was affecting mainly gay men, providing nuanced information on health policy decisions and stigma (BC Centre for Disease Control and Vancouver Coastal Health, 2022).

*Vancouver Coastal Health*

Information on the Vancouver Coastal Health website is similar to that of the BCCDC. They were frequently active on their social media channels, namely Twitter, starting from July 6, just under one month before Vancouver Pride. They regularly shared information about mpox vaccination clinics that are only for “eligible members of the 2SLGBTQ+ community.”<sup>ckviii</sup> The language around eligibility also appeared to maintain a level of discretion to minimize stigma to the particular demographic that mpox is affecting, namely men who have sex with men. They also posted an mpox Q&A thread addressing more nuanced questions. They specifically posted about why the vaccinations were only available to this subgroup, highlighting that it was about prioritizing the demographic most impacted to date.<sup>ckxix</sup>



Vancouver Coastal Health [@VCHhealthcare]. "Anyone Can Get Monkeypox. So Why Is the Vaccination Campaign Currently Only Focused on Those at High Risk? Here's a Quick Breakdown."  (1/5) <https://t.co/4RoPIGDv85>." Tweet. *Twitter*, August 15, 2022. <https://twitter.com/VCHhealthcare/status/1559235603891646464>.

### *Health Initiative for Men*

HIM is considered the main communication mechanism for British Columbia’s queer community by the province’s public health authorities. The BCCDC as well as regional health authorities such as Vancouver Coastal Health all reference HIM in their communications and provide links to their resources. HIM is focused on reducing stigma through information via their “Monkeypox Bulletin.”<sup>clxxx</sup> They have several web pages devoted to mpox information.

A page called “I have Monkeypox” shares information about managing the illness.<sup>clxxxi</sup> Their recommendations differ slightly from other organizations’ communications. The BCCDC and VCH recommend isolation for those who have active mpox lesions until they have fully healed. HIM says that infected individuals can go out as long as their lesions are fully covered. They also mention that if infected individuals choose to reduce their contacts, that they do so while staying connected to their loved ones somehow to maintain their mental wellbeing. They then encourage seeking mental health resources and link their own services for those who may need it.<sup>clxxxii</sup>

### *Igotmpox.ca (Len Tooley, Community Advocate)*

Len Tooley is a community advocate who had mpox himself, and created a website to support others who were also infected with the virus. The site shared his anecdotal advice on how to manage the symptoms and speaks more about the physical and mental experience of having mpox. He used very accessible language using queer vernacular and referencing kinks that are well-known in the community. For example, he referenced leather, latex, and puppy play, when speaking about lesion covering, connecting kinkwear to wound covers. He shared many tips on how to manage the symptoms, providing lists of the best self-care products that can be found at a local pharmacy or in online stores.<sup>clxxxiii</sup>

Messaging varied slightly whether it was directed to the general public or towards the queer community. When directed towards the queer community, messaging was much more holistic, taking into account the physical and mental impacts of mpox. This included epidemiological

information about the virus, but also information about stigma, mental health, and access to support for those who become infected. The biggest difference in terms of public health guidelines was around the topic of isolation. BCCDC recommended that individuals isolate while they have symptoms until all their lesions have fully healed.<sup>clxxxiv</sup> This could take up 1 month or longer, which is much longer than typical isolations for Covid-19. HIM on the other hand explicitly stated that isolation is not mandatory, and that infected individuals can continue to go out if they feel well enough to do so.<sup>clxxxv</sup> This guidance aligned with HIM’s messaging around self-care and wellbeing, taking into account the psychological impacts of queer sexual health stigma and isolation.

### **Where is it communicated?**

Public health officials were often invited to share mpox information on public media platforms such as radio shows and podcasts, however it also contrasted what queer community voices shared. In these outlets, the public health officials tried to make the public aware of the virus, while also emphasizing its low risk to the general population. Dr. Bonnie Henry was on a podcast on July 30, 2022 where she spoke about the symptoms of the mpox virus, commenting on how it is “a very mild illness” and that the lesions are “not painful.”<sup>clxxxvi</sup> This contrasted with experiences shared by queer men such as Len Tooley that described the lesions as ranging from “annoyingly itchy” to “pretty painful”<sup>clxxxvii</sup> and various others on North American news outlets that described having mpox lesions as “the worst pain of their lives.”<sup>clxxxviii</sup>

Regional health authorities and community groups used social media platforms to disseminate information but also to advertise vaccination clinics for eligible groups. Both Vancouver Coastal Health and HIM regularly shared information about the illness and vaccination clinics on their Instagram and Twitter accounts. HIM also promoted their mpox vaccination campaign through public advertisements around Vancouver on bus stop signs and in healthcare settings. The ad had a QR code that could be scanned to find nearby vaccination clinics.



Image taken at St. Paul’s Hospital in Vancouver, BC in Feb. 2023 showing one of HIM’s mpox posters with a QR code for more info.

### **When is it communicated?**

PHAC updates their epidemiological information twice weekly, on Wednesdays and Fridays. The BCCDC updates their data weekly. However, the BCCDC only started regular reporting as of August 15, 2022, two weeks before the end of the study period.<sup>clxxxix</sup> Otherwise, regional health authority Vancouver Coastal Health and HIM began posting mpox guidance and information surrounding vaccinations on their social media much earlier. Vancouver Coastal Health began posting publicly about mpox on July 5, 2022 just under a month before Vancouver Pride.<sup>clxxx</sup> HIM launched their mpox resource hub, the “Mpox Bulletin” on July 29, 2022.<sup>clxxxi</sup> During July, they

posted several times per week promoting mpox awareness and vaccinations for eligible groups. In August, posting slowed down significantly as Vancouver Pride had passed, with VCH and HIM each posting four times about mpox on their social media.

### **How is it communicated?**

Initially, British Columbia employed a ring strategy to address mpox, following the guidance of Ontario where there were more cases at the time.<sup>clxxxii</sup> This means only vaccinating close contacts of confirmed cases. In an interview with queer media publication Xtra, Aaron Purdie, Executive Director at HIM, noted that they were preparing for the vaccination policy to change as cases increase, and the need to prevent further transmission grows.<sup>clxxxiii</sup> This change did eventually occur during the first week of July, when HIM began holding pop-up vaccine clinics for men who are at highest risk of the virus. It was widely shared on their social media, and the communications of Vancouver Coastal Health, and then disseminated on local news media as well.

### **Why is it communicated?**

The communications efforts from British Columbia really put the community of GBT2S+ men at the forefront of its strategy by working in tandem with community organization HIM, to minimize stigma but also provide swift action for those who were being most impacted by mpox. All communications appeared to follow an approach of being intentionally explicit about what was certain versus unknown. Both Vancouver Coastal Health and HIM had social media threads addressing common questions surrounding monkeypox and even dedicated shareable visuals. This directly addressed uncertainties and left little room for disinformation. All health communications also addressed stigma to some extent, making it clear that anyone could contract mpox, even though it appeared mainly in the community of GBT2SQ+ men.

The largest area of uncertainty with mpox was how it is transmitted and whether the virus is considered a sexually transmitted disease or not. To address this, all communications were consistent in saying that transmission occurred through close physical contact, not sexual intercourse, and that you could contract mpox from contact with contaminated surfaces.<sup>clxxxiv</sup> HIM published a document called “Mpox WTF” that shared information in a ‘frequently asked questions’ where they clarified that mpox is considered a sexually associated infection because it is transmitted through skin-to-skin contact.<sup>clxxxv</sup> In this document they explicitly stated what information was known versus unclear, allowing readers to understand any outstanding nuances in public health guidance.

There appeared to be little mention of enforcement, other than self-monitoring for symptoms and seeking out testing if required. The largest focus lay on prevention and awareness of the virus. Given the potential for stigma on gay men and the wider queer community, communications were often lighthearted and supportive of the stigma and discomfort that comes with this virus, both physically and socially. HIM’s campaign slogan “Monkeypox is here, but HIM is here for you” exhibited this sentiment.<sup>clxxxvi</sup>

## Nigeria

### **Timeline**

**April 4, 1971** - First case of human mpox identified in a four year-old girl in Abia State of southeast Nigeria.<sup>clxxxvii</sup>

**April 15, 1971** - First case of human-to-human mpox transmission identified, as the four-year-old girl's mother was also infected.<sup>clxxxviii</sup>

**May 7, 2022** - The UK International Health Regulations (IHR) notified the NCDC of a case of mpox detected in a patient with recent travel history to Nigeria.<sup>clxxxix</sup>

**May 12, 2022** - NCDC publishes a press release notifying that there is no active outbreak of mpox in Nigeria at that time, after reports of cases in the UK are reported to be linked to travel from Nigeria.<sup>cx</sup>

**May 22, 2022** - NCDC shared an article about an mpox patient who committed suicide due to stigmatization in 2017, to remind the public to be mindful of stigma and follow public health guidelines.<sup>cxci</sup>

**May 29, 2022** - The NCDC published a new public health advisory with updated guidelines given the global outbreak and increasing local cases.<sup>cxcii</sup>

**May 31, 2022** - The NCDC denied allegations from the chief of the Russian Radiation, Chemical, and Biological Protection Force that the US manufactured mpox in Nigerian laboratories.<sup>cxci</sup>

**June 2, 2022** - The NCDC shared a public survey, inviting the public to participate to gather data on the public opinion, knowledge, and awareness of mpox.<sup>cxci</sup>

**June 28, 2022** - NCDC held a media dialogue session to respond to questions about the country's mpox strategy.

cxv

### **Case Count Summary**

Total Suspected Cases as of Aug. 31, 2022: 704

Total Confirmed Cases as of Aug. 31, 2022: 277

Total Deaths as of Aug. 31, 2022: 6

### **Nigeria's Government and Health System**

Nigeria is a federal republic with a presidential system. Government powers are shared between three branches of government. Executive power sits with the president, who is the chief of state and head of government simultaneously. The National Assembly, made up of a 109-member Senate and 360 member House of Representatives, is the country's legislative branch. Finally, there is the independent judicial branch. The country is made up of 36 states subdivided into 774 local governments.<sup>cxvii</sup>



Nigeria has a pluralistic health care system with public and private health providers, with both modern and traditional health care systems. Health care provision is the concurrent responsibility of the three tiers of the government.<sup>cxvii</sup>

### **Who is communicating?**

Dr. Ifedayo Adetifa - General Director, NCDC

Dr. John Oladejo - NCDC Director of Health Emergency Preparedness

Dr. Yahya Disu - NCDC Head of Communications

*Nigeria Centre for Disease Control* - communicates to the public through media outlets and public forums. They had already set up a Monkeypox Technical Working Group since 2017 to develop the response as the situation unfolds.<sup>cxviii</sup> They release monthly to biweekly surveillance reports on mpox. They held a YouTube Live session on June 28 called a “Media Dialogue” to explain the country’s mpox strategy and provide a space for the general public and media outlets to ask questions and gain clarification on mpox.<sup>cxix</sup>

*National Monkeypox Emergency Operations Centre* - This working group within the NCDC started on May 26 to address the quick resurgence of mpox within the country. They used a “One-Health” approach.<sup>cc</sup>

*National Infodemic Management Team* - conducted active social and community listening to find information about diseases that are currently prevailing in the population. This team within the NCDC specifically focused on addressing “infodemics.”<sup>cci</sup>

### **What is communicated?**

Since mpox was already present in Nigeria alongside other prevalent viruses such as Covid-19, yellow fever, and lassa fever, NCDC mpox communications focused on a One-Health campaign, promoting better public health awareness between the human and animal health sectors. Since animal-human transmission is common, both animal and human health were targeted concurrently. This involved community sensitization sessions where community members and local healthcare providers learned more about mpox and other infectious diseases from both human and animal health experts.<sup>ccii</sup> Infographics on the NCDC social media accounts shared facts about animal to human transmission such as that 75% of emerging infectious diseases are transmitted from animals to humans.<sup>cciii</sup>

Communications around mpox also address misinformation, and the need to minimize stigmatization. On May 22, 2022, the NCDC shared an article retelling the case of a 34-year-old man who committed suicide while in isolation for a suspected mpox case.<sup>cciv</sup> The article concluded that more engagement with community stakeholders would reduce stigma or rumours about emerging infectious diseases, as they pose great barriers to public health. It also highlighted the need for psychosocial supports for patients undergoing isolation or are being investigated for probable cases of viruses.<sup>ccv</sup> This is reflected in the 2019 mpox guidelines, as well as the guidelines published in 2022 on the NCDC website.<sup>ccvi</sup>

More individualized messages urged the public to be aware, report cases, and seek medical attention. Messages on the NCDC's Twitter and Facebook about mpox used hashtags such as #TakeResponsibility and taglines such as "Do not self-medicate! Early reporting saves lives!"<sup>ccvii</sup> This messaging was echoed in the Media Dialogue Session held on June 28, 2022, as NCDC officials shared that lack of community engagement and awareness hindered successful management of mpox.<sup>ccviii</sup>

To address this, the NCDC provided many opportunities for civic engagement such as a public opinion poll on mpox to understand the public better. The NCDC also regularly partnered with local media outlets to hold briefings, and Q&A sessions. They widely promoted a conference called the "Nigeria One Health Conference" to the public, to hear from the country's experts in human and animal health.<sup>ccix</sup>

Like other countries' messaging, the NCDC emphasized the virus outbreak as a global threat. However, the NCDC highlighted that global inequality in vaccine access and healthcare financing were root causes of systemic challenges to control emerging infectious diseases such as mpox.<sup>ccx</sup>

### **Where is it communicated?**

Public health communications were consistent with NCDC guidelines and tried to curb misinformation through various avenues such as the Media Dialogue session on the media's responsibility to report accurately and educate the public.<sup>ccxi</sup> Over the study period, several TV interviews and news briefings were held in partnership with local media outlets. The NCDC also focused on using online avenues such as Twitter, Instagram, WhatsApp, and Telegram.

### **When is it communicated?**

There were no regular in-person briefings. Since Nigeria has had mpox cases over the past five years, communications have been ad-hoc as the situation progresses rapidly over the summer months. Their communication style is more reactive towards disinformation and rumours. For example, on May 31st, the NCDC published a statement rejecting Russian allegations that the mpox virus is a US funded laboratory creation in Nigeria.<sup>ccxii</sup>

### **How is it communicated?**

There have been challenges with surveillance around mpox. Health-care workers often could not reach affected areas due to armed bandits and militants, and the reluctance of families and communities—especially in rural areas—to report suspected cases to authorities for fear of stigmatization.<sup>ccxiii</sup>

Public health officials such as Dr. John Oladejo, the NCDC Director of Health Emergency Preparedness and Response, even stated that Nigerians were not complying with public health measures, a behavioural issue that is leading to further transmission.<sup>ccxiv</sup> In response, the NCDC scaled up surveillance and training healthcare workers to properly identify and diagnose the virus.

To fill knowledge gaps around mpox, the NCDC conducted a survey to better understand the public's knowledge of the virus alongside further epidemiological research.<sup>ccxv</sup>

### **Why is it communicated?**

Because of high levels of stigmatization in previous outbreaks of mpox, the 2022 strategy focused on addressing the “infodemic” surrounding mpox. In the 2017 outbreak, media reports described it in sensational terms such as “smallpox-like” or “fatal.” A prominent rumour circulated that the military was injecting schoolchildren with the mpox virus, which led to widespread distrust in public health measures.<sup>ccxvi</sup> This is why the government actively tried to hold healthcare provider training, open forum events, and consistent messaging across all actors to minimize any misinformation.

Due to poor compliance of public health measures, the government took a very direct tone in its public messaging telling the public to seek medical attention and take responsibility for their health. In addition to this, they set up a toll-free mpox hotline where citizens can report cases of mpox to support surveillance.<sup>ccxvii</sup>

## Ontario

### Timeline

**May 20, 2022** - PHAC confirmed the first two cases of mpox in neighbouring Quebec.<sup>ccxviii</sup> Public Health Ontario released the first testing guidance on mpox.<sup>ccxix</sup> Gay Men's Sexual Health Alliance tweeted a thread about mpox providing initial guidance for gay men.<sup>ccxx</sup>

**May 22, 2022** - First suspected case reported in Toronto in a 40-year-old man who had recently traveled to Montreal.<sup>ccxxi</sup> Ontario's top public health official also released an official order stating that all healthcare workers must report suspected cases of mpox to public health authorities.<sup>ccxxii</sup>

**May 24, 2022** - Ontario Public Health released guidance saying that all mpox patients must be isolated and workers must wear proper PPE when treating them.<sup>ccxxiii</sup>

**May 26, 2022** - First case in the province confirmed in Toronto. At this point there are only 25 other cases in the country, all in Quebec.<sup>ccxxiv</sup>

**May 28, 2022** - Preliminary guidance for PEP vaccinations released by Ontario Public Health, as well as for Tecovirimat, a drug to treat severe hospital cases.<sup>ccxxv</sup>

**June 1, 2022** - Month-long Pride Festival began in Toronto, ending on June 26. Interim guidance on Imvamune vaccine released by the province, recommending Post Exposure Prophylaxis vaccination, and for contacts of positive cases.<sup>ccxxvi</sup>

**June 2, 2022** - Ontario General Election held. The governing Progressive Conservatives, led by Premier Doug Ford, were re-elected to a second majority government, winning 7 more seats than in 2018.<sup>ccxxvii</sup>

**June 11, 2022** - First pop-up vaccine clinics appeared, specifically for bathhouse workers at high risk of contracting the virus, and close contacts of cases.<sup>ccxxviii</sup>

**June 18, 2022** - Pop-up clinics opened with expanded eligibility for MSM to get preventative vaccinations.<sup>ccxxix</sup>

**June 21-23, 2022** - Toronto Pride Parade and culminating Pride events occurred.

**July 27, 2022** - Dr. Theresa Tam, Canada's Chief Public Health Officer, stated in a news interview that vaccination uptake has slowed. Canada deployed 70,000 doses and only 27,000 had been used.<sup>ccxxx</sup>

**August 24, 2022** - Ontario expands PrEP vaccine eligibility to more within the LGBTQ community.<sup>ccxxxi</sup>

### Case Count Summary

Total Cases: 1277

Total Deaths: 0

## **Government Structure**

Ontario is governed by the right-wing Progressive Conservatives led by Doug Ford. They were in power throughout the Covid-19 pandemic, and received generally critical reviews of their tumultuous management efforts, characterized by flip-flopping guidance and long lockdowns. As mpox began appearing, this raised questions about the party's ability to handle another public health crisis, and created worry among citizens for what was to come. This occurred against the backdrop of an upcoming provincial election on June 2, 2022.<sup>ccxxxii</sup> Media and social media in the first month of the mpox outbreak in Ontario often focused on the provincial political race, and its relation to public health.

## **Ontario Health System**

Ontario has a provincial public health system funded by the federal government.<sup>ccxxxiii</sup> The federal government distributes some funding to the province, but then the province manages all service delivery and public health initiatives. The province's healthcare system consists of the Ministry of Health that oversees the administration of all healthcare services, Public Health Ontario is in charge of protecting the public from infectious diseases and environmental health concerns<sup>ccxxxiv</sup> and then various local health authorities, the largest of which is Toronto Public Health.

## **Who is communicating?**

### **Personnel:**

**Public Health Agency of Canada** - PHAC released ad hoc statements updating the state of mpox across the country. On August 12, 2022 the Chief Public Health Officer put out a statement outlining the country's mpox response.<sup>ccxxxv</sup> PHAC centralized all mpox data and epidemiological guidance for the provinces to source and use. They updated their epidemiological reports twice weekly, on Wednesdays and Fridays.<sup>ccxxxvi</sup>

**Ministry of Health** - Dr. Kieran Moore, Ontario's Chief Medical Officer, was the primary communication personnel for the Ministry of Health. He communicated mainly by releasing internal documents to Ontario's healthcare providers, providing updates on how mpox should be reported and managed. He also provided ad-hoc updates through local news outlets.<sup>ccxxxvii</sup>

**Public Health Ontario** - As the provincial health authority, Public Health Ontario provided weekly epidemiological reports on the outbreak from May 20, 2022.<sup>ccxxxviii</sup> They did not directly communicate with the public other than resources on their website.

**Toronto Public Health** - Local public health authorities communicated with community partners and provided services such as vaccination clinics and health guidelines. Toronto Public Health held Monkeypox Town Halls for community organizations to know how to support the mpox response.<sup>ccxxxix</sup> They hosted Dane Griffiths, Director of the Gay Men's Sexual Health Alliance, Dr.

Rita Shahin, Associate Medical Officer of Health for Toronto Public Health, and Peter Kelly, a local dancer who contracted the virus, to speak about their experience.<sup>ccxi</sup>

## Community Groups

***Gay Men’s Sexual Health Alliance*** - This government-funded community organization advocates for the health of GBT2S+ men in Ontario. They acted as the key community partner to queer communities. Director Dane Griffiths occasionally provided commentary on the response from the perspective of GBT2SQ+ men.<sup>ccxli</sup>

## Community Advocates

- *Dr. Isaac Bogoch, Infectious Disease Specialist, Toronto General Hospital.* He provided several news briefings on mpox to local news outlets.<sup>ccxlii</sup>
- *Michael Kwag, Director of Knowledge Exchange and Policy Development, CBRC.* Kwag provided a number of interviews as well, usually through print media articles.<sup>ccxliii</sup>
- *Aaron Clarke, Community Education and Resource Coordinator, AIDS Committee of Toronto.* Clarke spoke to news outlets regarding the mpox response.<sup>ccxliv</sup> (Chen 2022)
- *Peter Kelly, a Toronto resident who contracted mpox early in the outbreak and shared his experience with news outlets to bring awareness of the virus’ personal impact.*

Overall, there was a significant presence of community members and advocates to communicate with the public providing commentary. These individuals were all queer men who either worked for public health or queer advocacy organizations. On June 17, Toronto Public Health organized a public meeting in partnership with The 519, a queer community resource centre, at their location in Toronto’s gay village to share more about the community-based approach to vaccinate high-risk groups for mpox.<sup>ccxlv</sup>

## What is communicated?

### Public Health Authorities (Provincial/Local)

Public Health Ontario noted that it would refer to mpox by the abbreviation MPX or MPXV, to avoid any place-based stigmatization. Their publications consisted of epidemiological reports and clinical guidance for healthcare providers. These documents and online communication described mpox in a neutral tone emphasizing its low risk to the general population. The risk to the gbMSM community was described as slightly higher, at a level of low to moderate risk, given risk factors such as sex with multiple partners and anonymous sex.<sup>ccxlvii</sup> The guidance also emphasized a “non-stigmatizing and community engagement approach” to minimize barriers to healthcare access and affirmed that anyone could contract mpox regardless of gender or sexuality.

Interim vaccination guidance released on May 28 was to only vaccinate confirmed cases and their contacts as a form of Post Exposure Prophylaxis. On June 10, this was updated to include Pre-

Exposure Prophylaxis vaccination for all individuals under high risk of exposure, namely the gbMSM community.<sup>ccxlvii</sup> Identity-based language around gender or sexuality was not the leading descriptor for eligibility, unless reading into the specific guidelines. In general, the response was described as targeted to those with “high risk” of exposure, or “close contacts” of positive cases.<sup>ccxlviii</sup>

Majority of cases in Ontario were in Toronto, making Toronto Public Health the main local authority communicating to the public. Their role was mainly to communicate about vaccine clinics as they became more widely available throughout the summer. Toronto Public Health did not mention the affected social group of MSM at all in their social media posts about mpox. When referring to this group in relation to vaccines, they often used language like “eligible groups” or “those most at risk of Monkeypox” and reiterated that anyone can get mpox.<sup>ccxlix</sup> Their primary guidance for avoiding mpox did not differentiate based on identities. They advised that mpox was transmitted through prolonged close contact, especially sex.

## **Community Groups/Advocates**

### *Gay Men’s Sexual Health Alliance (GMSHA)*

They were the key community partner for communications directly targeted to the gbMSM community. Their website was potentially the most robust and detailed platform for mpox guidance in the province. For example, they included a section explaining the effectiveness and nuances of using a condom as a prevention tool for mpox during sex.

GMSHA’s tone was very matter of fact and neutral. At the end of their mpox webpage, they advised “Don’t panic, but you should be aware.” While the organization itself specifically supports gay men, their guidance positioned gay men as a small part of the entire population that was also at risk, noting that some instances of transmission did not involves sex and that it is not just queer men who were affected.<sup>cc1</sup>

## **Where is it communicated?**

The province of Ontario and local public health authorities used fairly neutral language on their websites.<sup>cc1</sup> The only targeted messaging was from GMSHA. However, this resource was also widely shared among the general population through links on provincial and municipal health authorities’ websites.

Local news outlets such as CP24, CityTV, and CBC disseminated a lot of information around the virus to the public through formats such as interviews with public health officials. There was no public forum for debate within the province’s communications.

## **When and how is it communicated?**

The Ministry of Health updated their case counts and epidemiological data weekly. Communications were ad-hoc based on local developments. For the first few months, public health officials and local health professionals spoke to local media and news outlets almost daily.

Official communications from the province usually only occurred when there was any significant update to public health guidelines. In most cases, this was due to updates from the National Advisory Committee on Immunization (NACI) on vaccination recommendations and eligibility. This would be in the form of an official statement from the Chief Public Health Officer, Dr. Kieran Moore, which would then be shared widely in news and local media.<sup>ccliii</sup>

### **Why is it communicated?**

All public health authorities and community organizations referenced only the official provincial guidelines to ensure consistency and minimize confusion.

Officials often aimed for a calming tone in press briefings and news interviews, explaining that this matter needed to be addressed, but was not cause for worry. The relationship with GMHSA furthered tactful, targeted, and quick communication.



## Spain

### Timeline

**May 18, 2022** - 8 suspected cases reported in the Autonomous Community of Madrid.

**May 19, 2022** - Madrid-based Sexual Health NGO Apoyo Positivo released mpox info on their social media.

**May 20, 2022** - 7 cases confirmed along with 31 other suspected cases from samples that had tested positive for zoonotic viruses.

**May 24, 2022** - Popular gay bathhouse in Madrid called Paraiso ordered to close due to an mpox outbreak. Media outlets called it “ground zero” of the mpox epidemic in Spain, and commented on how patrons of these establishments are often abusing substances and practicing unsafe sex.<sup>ccliii</sup>

**June 9, 2022** - Proposal for a vaccination strategy submitted to the Public Health Commission. The strategy suggested only vaccinating close contacts of confirmed cases due to short supply.

**July 1-10, 2022** - Madrid Pride Festival, the largest in Europe, held amid fears of growing case numbers of mpox.

**July 12, 2022** - Vaccination strategy approved by the Public Health Commission, focusing on pre-exposure and post-exposure vaccination for vulnerable groups.

**July 23, 2022** -WHO declared mpox a global health emergency.

**July 29, 2022** - First confirmed death in the autonomous community of Valencia due to complications caused by encephalitis.<sup>ccliv</sup> A second death was confirmed on July 30th. Little was reported about the two deaths other than that they were both young men.

**August 10, 2022** - The Community of Madrid asked for approval to distribute 5 vaccine doses per vial, in order to increase the amount of supply available. Approval given on August 22.

**August 22, 2022** - The Ministry of Health announced the arrival of 5000 doses. No further news communication since then from the Ministry of Health on mpox.

### **Cases to date as of August 31, 2022:**

6,543. 17.2% of cases linked to large scale events, mainly a variety of Gay Pride events.<sup>cclv</sup>

### Government Structure

Spain is a democratic country with a parliamentary monarch system. Spain has a monarch and a legislative head represented by a President. The government in 2022 was a coalition formed of two left-leaning parties, the Spanish Socialists’ Party and the anti-austerity United We Can party.<sup>cclvi</sup>

### Spanish Health System

The Ministry of Health is a federal ministry. Public health service provision is decentralized through the National Health System to the authority of each autonomous community in Spain. Free public health services are available to all Spanish citizens. This decentralization means that service provision varies across the autonomous communities. However, all public health guidance comes from the federal ministry.

### **Who is communicating?**

#### **Personnel:**

#### **Community groups**

*Multiple groups* acted as communicators to key vulnerable groups (MSM, people living with HIV, queer community):

##### *Gais Positius*

Gais Positius, meaning “Positive Gays” in Catalan, is a Barcelona-based HIV organization that focuses on the health and human rights of queer communities. They shared various resources on their social media and website, mainly in Catalan serving the region of Catalunya in Spain.<sup>cclvii</sup>

##### *CESIDA*

CESIDA is the leading representative entity of all HIV/AIDS-support organizations in Spain. Based in the capital city, Madrid, they support the presence and participation of HIV-affected citizens in policy development. They shared mpox resources on their social media and website, with a particular focus on stigma. They highlighted that mpox affects all people regardless of sexual orientation, and care should be taken to minimize stigma in communications.<sup>cclviii</sup>

##### *Apoyo Positivo*

Apoyo Positivo, which means, “Positive Support,” is a Madrid-based community social innovation resource that focuses on diversity in sexual and reproductive health, education, and rights.<sup>cclix</sup> They were extremely active online and produced a variety of resources and infographics on mpox health guidance that were shared on their social media and website.<sup>cclx</sup>

#### **Public Health Authorities**

The Ministry of Health communicated mainly to medical professionals providing clinical and epidemiological information. Regional Health Departments took responsibility for communicating to the general public, with no particular focus on targeting queer communities.

Ministry of Health: Published documents include a risk assessment report, surveillance information, clinical information and guidance, and vaccination strategy proposals.<sup>cclxi</sup>

Community of Madrid: Information on the Madrid Health Department website include details on transmission, symptoms, treatment, prevention, and vaccination.<sup>cclxii</sup>

Community of Catalunya: Similar to the Madrid website, however they did have content in Catalan for the local population, including an infographic that explains mpox symptoms, transmission, and treatment.<sup>cclxiii</sup>

### **What is communicated?**

Communications from government institutions were very clinical and aimed towards medical professionals. The ministry website shared clinical/epidemiological information about the virus, preventative measures, its symptoms, and how it develops. The most useful resource was a “20 facts about Monkeypox” infographic that answered questions about mpox including symptoms, transmission, treatment, and stigma.<sup>cclxiv</sup>

Government institutions provided little targeted messaging in formal communications to the public. However, the week prior to the Madrid Pride Festival (July 1-10, 2022), the Ministry of Health released public health guidance on mpox , STIs, and Covid-19 entitled “This Summer, Parties are Healthy”.<sup>cclxv</sup> This campaign seems targeted to youth and adults who would be attending the many large summer festivals that are common in Spain, including Madrid Pride. The messaging highlighted that anyone can become infected regardless of gender or sexuality.

After this, the only direct public communication around mpox was on July 23, the day the WHO declared mpox a health emergency. The Ministry of Health shared some infographics on their social media, sticking with the same messages around prevention and transmission.<sup>cclxvi</sup>

The Ministry of Health released another set of infographics on July 29, 2022. This followed up on the guidance provided before Madrid Pride, as this was named “Health Guidance for Summer Events.”<sup>cclxvii</sup> The more comprehensive guidance focused on maintaining hygienic practices such as handwashing and mask wearing, and avoiding sexual activity if you have symptoms or have come into contact with someone having symptoms. Finally, it clarified that anyone could become infected and that the close intimate nature of sexual activity leads to transmission, not sexual intercourse itself.

**MENSAJES DE SALUD EN EVENTOS ESTIVALES**  
**VIRUELA DEL MONO**

En los últimos meses, se ha producido un brote de una enfermedad **muy poco frecuente**, causada por el virus de la **VIRUELA DEL MONO**.

**¿CÓMO SE TRANSMITE?**

Mediante un **CONTACTO ESTRECHO** con las **lesiones y costras** en la piel, los fluidos corporales, gotas respiratorias gruesas y material contaminado, como ropa de cama, toallas o cualquier objeto que pueda utilizarse durante las relaciones sexuales –un sling (columpio para apoyarse), un aro o ropa interior.

A pesar de que el mayor número de casos se están produciendo en hombres gais, bisexuales y otros hombres que tienen sexo con hombres, **el virus del mono NO está relacionado con la orientación sexual.**

Aunque, por el momento, **no hay evidencia** disponible de que la **viruela de mono** pueda transmitirse a través del **semen** y los **fluidos vaginales**, **SI** se ha mostrado que **puede transmitirse en las relaciones sexuales**, independientemente del sexo, la orientación y la identidad sexual, debido al **contacto íntimo y estrecho** que se produce durante las relaciones sexuales (incluidos los besos, las caricias, el sexo oral, la penetración... con alguien que tiene la infección).

**CUALQUIER PERSONA PUEDE CONTAGIARSE.**

La infección se inicia con síntomas **similares a los de una gripe** (fiebre, dolor de cabeza, dolores musculares, dolor de espalda, escalofríos y agotamiento), al que se asemeja una inflamación de los ganglios.

**SÍNTOMAS Y TRANSMISIÓN**

Posteriormente aparece una **ERUPCIÓN**, que en el brote actual se presenta más frecuentemente con lesiones en los genitales y el ano. También puede aparecer en la cara y extenderse a otras partes del cuerpo, como las plantas de las manos y de los pies.

Estas lesiones de la piel, **llenas de un líquido claro o amarillento**, van pasando por diferentes etapas hasta que se **transforman en costras** que finalmente caen.

El virus se puede transmitir a otra persona mientras **DUREN las lesiones cutáneas**.

Existen otros mecanismos de transmisión descritos clásicamente para esta enfermedad, como es la transmisión a través de gotas respiratorias grandes durante el contacto cara a cara directo y prolongado.

**DURACIÓN Y PREVENCIÓN**

La enfermedad suele **durar de 2 a 4 SEMANAS**.

El **período infeccioso** comienza desde el inicio de los síntomas y dura hasta que se caen las costras de todas las lesiones cutáneas.

Para su **PREVENCIÓN**, es importante seguir las **medidas de higiene estándar** (lavado frecuente de manos con agua y jabón o soluciones alcohólicas) y **evitar el contacto estrecho e íntimo** con cualquier persona que tenga síntomas.

**¿QUÉ HACER TRAS UNA EXPOSICIÓN?**

La **AUTOEXPLORACIÓN** es fundamental, especialmente en **zonas genitales**.

**Si has estado en contacto** con alguien que ha sido diagnosticado de viruela de mono o sospechas que puedas tener síntomas, se aconseja que **te aisles en casa** y te pongas en contacto por teléfono con tu **centro de salud** o con el **066**. Los profesionales sanitarios te indicarán las medidas a tomar y el procedimiento a seguir.

**Si tienes síntomas graves**, puedes acudir al **Servicio de Urgencias** de un centro hospitalario (mejor en vehículo propio o a pie) y tomando las medidas de prevención oportunas como el **uso de mascarilla**.

**LAS PERSONAS CONTAGIADAS** con el virus de la viruela del mono tendrán que **aislarse en casa** y solo podrán salir para ir al médico, mientras que sus contactos, aunque no es necesario que realicen cuarentena, **si deberán reducir al máximo las interacciones, las relaciones sexuales** y usar de manera constante la **mascarilla** hasta que se descarte la enfermedad.

Es importante que prestes atención a las **redes sociales y página web de la organización del evento, tras la finalización del mismo**, por si se ha producido un brote.

**MÁS INFORMACIÓN**  
[https://www.sanidad.gob.es/profesionales/saludPublica/cccyes/alertasActual/alertasMoningona/docs/20220610\\_ProtocoloMFX.pdf](https://www.sanidad.gob.es/profesionales/saludPublica/cccyes/alertasActual/alertasMoningona/docs/20220610_ProtocoloMFX.pdf)

Health Guidance for Summer Events, Ministry of Health, Government of Spain  
Source: <https://twitter.com/sanidadgob/status/1553086957374226432>

Community groups were quick to begin sharing educational resources. Madrid-based sexual health advocacy group Apoyo Positivo first shared a deck of mpox infographics on May 18, 2022. These only included information on the history of mpox and what the symptoms look like.<sup>cclxviii</sup> HIV organizations such as CESIDA also shared infographics on their social media on May 19 about the disease, symptoms, and disease trajectory.<sup>cclxix</sup> On May 25, CESIDA shared an article reminding readers that “viruses do not infect specific populations based solely on their sexual orientation or other social category.”<sup>cclxx</sup>

Some tabloid-style news outlets and social media commentary tended to use more incendiary rhetoric that stigmatized the LGBT community and fear mongered. These outlets reported on the closure of a popular gay bathhouse in Madrid by claiming that the establishment was “ground zero” for mpox in Madrid and that patrons were often under the influence of drugs, offering sex for money, and engaging in “carnal acts.”<sup>cclxxi</sup> The bathhouse, Sauna Paraíso, put out a statement shortly after such headlines, clarifying that their establishment met all health and safety standards and that the closure was a preventative measure with the guidance of public health officials.<sup>cclxxii</sup>

### **Where is it communicated?**

The Ministry of Health publishes all their communications on their website, differentiated between media for medical professionals and the general public. Only information for the general public was shared through the Ministry of Health's Twitter page and other social media.

Community groups used Twitter and Instagram to share their resources. Many of them focused on destigmatization and awareness raising. CESIDA also partnered with the gay social networking app, Grindr, to provide resources directly through the app. On the app's menu there is a directory for mpox resources and users frequently receive reminders to inform themselves on the virus.

Local TV news outlets and publications reported on the situation frequently and often quoted information shared by the Ministry of Health or municipal health officials. There were no other public fora for communication though. Sebastian Meyer, president of the STOP SIDA association dedicated to AIDS/HIV care in Barcelona's LGBTQ community, said the logic of official ministries only providing written guidance was that his group and others like it would be trusted message-bearers with person-by-person knowledge of how to drive the health warning home.<sup>cclxxiii</sup>

### **When is it communicated?**

The Red Nacional de Vigilancia Epidemiológica (National Network of Epidemiological Vigilance) published reports on case numbers and other epidemiological data surrounding mpox in Spain twice per week. This reporting began on July 15, almost two months after the first cases were reported. While epidemiological reports were published twice per week, this is not communicated to the public. Generally, communications were ad-hoc depending on any new updates through public statements from the Ministry of Health.

### **How is it communicated?**

There was a big focus on preventative measures, without telling people to significantly change their daily habits. The "This Summer, Partying is Healthy" campaign disseminated messages advising how to have fun, safely during what was expected to be a very busy, eventful summer.<sup>cclxxiv</sup> All communications stressed that prolonged close contact was how this virus is transmitted, not just sexual relations, and therefore to be cautious about having many sexual partners, and to self-monitor for symptoms.

During the Covid-19 pandemic, Spanish society displayed high levels of trust in health guidance and compliance with health restrictions. According to a 2021 survey, about 70% of respondents were very confident in the information shared by their healthcare professional, and 76% of respondents reported high levels of preventive measure compliance.<sup>cclxxv</sup> Health officials may have felt confident that effective, clear communication would suffice for public compliance along with communications from community groups to MSM.

### **Why is it communicated?**

All communications appeared to focus on preventing stigma against MSM and the wider queer community.

Additionally, this was the first summer after Covid-19 where Spain held several major summer festivals, including Pride, music festivals, and several cultural celebrations. Madrid Pride is the largest Pride celebration in Europe and the country's largest public event with two million attendees.<sup>cclxxvi</sup> Consequently, communications focused on individual responsibility, and enjoying the summer in an informed and safe manner so as not to disturb the summer's festivities.

While the idea of individual responsibility was important not to stigmatize any subset of the population, this also created a bit of worry in public spaces if someone was seen to be out in public with any sort of rash-like symptoms on their bodies. In one case, a doctor in Madrid took photos of a man on the subway whom he assumed had active mpox lesions all over his body. He tweeted the photo and a description of the interaction, calling for stricter public enforcement. He alerted his followers to be careful on the metro and said that the individual should be quarantined. His tweet went viral. It was later reported that the man did not have mpox. Instead, he had a chronic skin condition caused by neurofibromatosis, which is not contagious. The tweet has since been deleted.<sup>cclxxvii</sup> Instances such as these show why it is important not to stigmatize any subpopulation and why health communicators in Spain have used language more focused on individual risk assessment and responsibility, instead of community vigilance and reporting.

## USA

### Timeline

**May 18, 2022** - First mpox case reported in the US.

**June 3, 2022** - The Advisory Committee on Immunization Practices recommended using the JYNNEOS vaccine for post-exposure prophylaxis.

**June 11-12, 2022** - Los Angeles Pride Festival held.

**June 26, 2022** - NYC Pride March with various events planned throughout the month of June and the summer.

**June 28, 2022** - The White House announced a government wide strategy and approach to scale up vaccination and expand testing capacity. The CDC activated its Emergency Operations Centre.

**July 23, 2022** - WHO declared the mpox outbreak a Public Health Emergency of International Concern.

**July 29, 2022** - The Governor of New York Kathy Hochul declared a state of emergency.

**August 1, 2022** - Governors of California and Illinois declared states of emergency in their jurisdictions, as they had the second and third highest number of cases behind New York, respectively.

**August 22, 2022** - Survey results on gbMSM found that respondents reported changing their sexual behaviours due to the mpox outbreak.<sup>cclxxviii</sup>

**August 23, 2022** - FDA and CDC introduced an alternative vaccination method using intradermal vaccination. This allows up to 5 doses per vial, increasing the total amount of available doses in stock.

### Case and Testing Numbers

**Total cases as of August 31, 2022:** 21,694

**Weekly testing numbers as of May 21, 2022:** 7 positive, 3 negative

**Weekly testing numbers as of August 31, 2022:** 2455 positive, 8694 negative

### Government Structure

During the 2022 mpox outbreak, the United States was led by Democrat President Joe Biden, a change from Republican former President Donald Trump who was in charge during the beginning of the Covid-19 pandemic.

The US public healthcare system is headed by the United States Public Health Service, which encompasses the Centers for Disease Control and other agencies. The federal level oversees administration, regulation and monitoring of healthcare. The state level has much more

responsibility in the day-to-day health of Americans. Local health authorities are the frontline of healthcare in the US. They are responsible for direct service delivery. Local health authorities often have delegated powers from the state to make decisions that are best for their populations.<sup>cclxxxix</sup>

## **Who is communicating?**

### **National Communications**

**CDC** - Main authority for communications. The CDC has a communication system to maintain the most up-to-date publications on current health issues called the Mortality and Morbidity Weekly Report. The first report on mpox was released on June 3rd, 2022.<sup>cclxxx</sup> The CDC also tracks epidemiological data such as case numbers, testing numbers, demographic information, and global tracking.<sup>cclxxxii</sup>

### **State Communications**

**New York State Department of Health** - The NYSDOH manages communications at the state level. They published ad-hoc press releases on their website as new information becomes available about the outbreak. They posted weekly tweets on case numbers within the state. The Governor of New York, Kathy Hochul, was the primary public figure communicating through briefings and press releases.<sup>cclxxxiii</sup>

**California State Department of Health** - The Californian state public health department released ad hoc press releases on its website to communicate updates on mpox guidelines, vaccine eligibility and availability, and healthcare provider guidance.<sup>cclxxxiii</sup> As of August 21, the Department of Health announced that its Twitter account would only be used for informational purposes, no longer replying to questions from followers in the tweet replies and all future tweets would not have reply capabilities. Questions and opportunities for discussion now existed during organized town hall events. Followers could still send direct messages to the account and receive replies.<sup>cclxxxiv</sup>

### **Civil Society**

Civil society organizations mainly acted as liaisons between the government and public health actors and provided information targeted to the LGBTQ2S+ community, as well as providing information on vaccine access. They also played an advocacy role in calling for a stronger response from the government given the demand for vaccines in highly-affected areas such as New York City and the difficulties in scheduling appointments.

**ACT UP New York** - ACT UP is an HIV/AIDS advocacy organization based in New York City that started during the height of the AIDS crisis in 1987. They led advocacy efforts around the US government's mpox response, calling for more vaccines and greater urgency to support those impacted by mpox. On July 2, ACT UP, along with other local LGBT organizations organized a rally in New York City in support of a list of state-wide and federal demands to improve the mpox response.<sup>cclxxxv</sup> This list, found on ACT UP's social media accounts, includes demands for mpox sick pay, hotels for those who need a quarantine location, more vaccines, and more appointments.<sup>cclxxxvi</sup>



**NYC LGBT Center** - This LGBT community resource centre advocated for a stronger response and sharing resources for the queer community. On July 7, they released a statement critiquing the government’s vaccine rollout, saying the response was inadequate and should be community-led. Their recommendations included securing additional vaccines, institutionalizing communications and providing regular comprehensive updates, not simply ad-hoc, having public health guidelines published in various languages, and addressing regional equity.<sup>ccxxxvii</sup> Additionally, the LGBT Centre held a panel discussion of local healthcare experts and queer health advocates on July 15 with time for public questions.<sup>ccxxxviii</sup>

**LA LGBT Centre** - The LA LGBT Centre is a local community resource centre that offers tailored services to queer and trans people in the Greater Los Angeles area.<sup>ccxxxix</sup> They communicated guidelines from the CDC to the local community, provided vaccination clinics, but also had a strong role in advocacy, guided by their mpox strategy to vaccinate, educate, and advocate.<sup>ccxc</sup> On July 20, the Centre released a joint open-letter to the CDC requesting expanded vaccine access, and a name change of the virus to hMPXV.<sup>ccxc</sup>

**Equality California** - Equality California is the country’s largest statewide LGBTQ+ civil rights organization. They advocate for LGBTQ+ inclusion and justice at the local, state, and national levels.<sup>ccxcii</sup> They do a lot of political and legal advocacy, and created a lot of online resources for the mpox outbreak.<sup>ccxciii</sup>

### **What is communicated?**

The initial report from the CDC after the first case was discovered in Massachusetts advised awareness of mpox symptoms and that anyone could contract mpox, regardless of sexual orientation.<sup>ccxciv</sup> The report advised healthcare providers not to make assumptions about how mpox presents itself and not to limit their concerns only to MSM.

The CDC released several videos and posts on social media. On June 2, the CDC released a two-minute video on Twitter called “5 things you need to know about Monkeypox.”<sup>ccxcv</sup> The video emphasized that the risk to the general public is low. The video did not mention the queer community or MSM. Other videos and Twitter posts in July and August focused on sexually-active people or clarified mpox transmission.

The CDC’s vaccination eligibility criteria did not specify men who have sex with men or any particular sexual identity group. Instead, they emphasized that many risk factors go into someone’s eligibility for a mpox vaccine, such as location, contact with confirmed cases, etc.

On June 28, the Biden Harris administration released a fact sheet on their mpox strategy on the White House news webpage, after NYC and LA Pride had both already occurred. The administration recognized the urgent calls from community groups to increase public health efforts against mpox and outlined their plans to increase vaccination and testing capacities, as well as working with community groups. The tone was serious but calm, providing numbers on how many vaccine doses had been secured, and how they were scaling up their response efforts. The content was fact-driven and mentioned a “feedback loop” of consultations with health experts and community members. They also framed the response as part of a greater global response to mpox in endemic and non-endemic countries, with specific aid sent to the Democratic Republic of the Congo and Nigeria.<sup>ccxcvi</sup>

### State Health Departments

Communications in New York mainly consisted of updates from the office of Governor Kathy Hochul and shareable graphics from the Department of Health. The messaging focuses on protecting the state from mpox, and refers to the collective population of “New Yorkers” in all communications.<sup>ccxcvii</sup> Other than mentioning that most cases appeared in gbMSM, all guidelines were addressed to the entire population.

Guidance from California similarly focused on informing the entire population and advised healthcare providers and the general population to recognize that this virus does not only affect gbMSM.<sup>ccxcviii</sup> There were no public civic engagement efforts, but local civil society groups, Los Angeles LGBT Centre, and the LA Blade, held public town halls with epidemiology experts and recovered mpox patients.<sup>ccxcix</sup>

### **Where is it communicated?**

The CDC website holds all of the reference information for mpox and acts as the major authority of communication within the United States. On June 28, a Monkeypox Call Centre was established through the activation of the CDC Emergency Operations Center.<sup>ccc</sup> They used their social media, specifically Twitter and YouTube, to regularly share updates on the national response. They archived all communications and news releases on their CDC Newsroom page, while offering an extensive array of resources and health publications targeted towards different audiences. Their audiences include the general population, healthcare professionals, laboratories, health departments, and veterinarians. They also created shareable resources for community, work, and school audiences. These included event organizers, people experiencing homelessness, sex workers, higher education institutions, workplaces, schools, and sex-on-premises establishments.

The NYSDOH website published all of their information, in both English and Spanish.<sup>ccci</sup> Other than their website, the state distributed these resources to local community groups, LGBT organizations, local health units, and businesses. They also put up posters in public congregate settings. Additionally, the state set up SMS-Text alerts to share automatic updates directly with the public.<sup>cccii</sup>

Similar to New York, the Californian public health guidance was housed within its website, and did not identify any key audience for their communications. However, a section on Health Equity displayed demographic information about who was being most affected by mpox and how the jurisdiction was working to combat stigma.<sup>ccciii</sup> They were also very active throughout the early months of the outbreak on their social media, sharing infographics and posting videos, for example explaining how they were increasing access to tecovirimat, an antiviral used to treat severe cases of mpox.<sup>ccciv</sup>

Equality California appears to be the largest civil society actor that shared information on mpox specifically targeted towards LGBT communities. Their website, the Monkeypox Resource Center, shared general guidance around awareness, prevention, and vaccinations. They developed a partnership with ride-sharing app Uber, with free Uber rides to mpox Vaccination Clinics through a redemption code offer. Their social media accounts on Twitter and Instagram were also very active.<sup>cccv</sup>

### **When is it communicated?**

The CDC publishes Morbidity and Mortality reports on mpox at least twice per month, starting on June 3rd. Otherwise their data tracking numbers are updated weekly.

There was no regularity to communications from any actor. Communications were published ad-hoc, as new information from the CDC or government was made available, and as case numbers increased. LGBT community advocates criticized this lack of regular communications and included this in the list of demands by ACT UP and their partners in a July 21 open letter to government officials shared to their Instagram account.<sup>ccvvi</sup>

### **How is it communicated?**

The CDC initially communicates official guidance and Mortality and Morbidity reports on mpox. These messages were then disseminated through various local health communication channels.

Public discourse around the mpox response was limited to community groups and advocacy circles. The CDC held webinars and information sessions for healthcare providers to inform them about how to identify and manage the virus in patients, but these were solely informational. At the more local level, state health departments held in-person and virtual town halls in areas that were most affected by mpox throughout the summer. Various advocacy groups called for a more urgent response from the government. The White House statement outlining the country's mpox response noted that they were engaging with community members, however the extent of this was not clear.

### **Why is it communicated?**

All health units and community groups referenced the CDC for guidance to try to minimize disinformation and maintain consistency. Community groups and regional public health units also organized webinars and town halls over the summer for communities that were most affected. The tone of all guidance emphasized the need for awareness, not alarm.

However, while the country's institutions projected the image of having everything under control, LGBTQ+ advocacy groups called for a more urgent response, more testing, and more vaccines. While the government did update their strategy, there appeared to be very little direct contact between community voices and institutions, perhaps because these relationships were not as developed.

## Endnotes and Bibliography

- <sup>i</sup> Sirleaf and Clark, “A Road Map for a World Protected from Pandemic Threats.”
- <sup>ii</sup> *ibid.*, p. 5
- <sup>iii</sup> WHO, “Speech by Dr. Tedros, Munich Security Conference (February 11, 2020).”
- <sup>iv</sup> Simon and Camargo, “Autopsy of a Metaphor: The Origins, Use and Blind Spots of the ‘Infodemic’.”
- <sup>v</sup> WHO, “WHO Recommends New Name for Monkeypox Disease.” The WHO recommended the name change in November 2022 after concerns were raised that the older name had led to racism and stigma.
- <sup>vi</sup> Tworek, Ian Beacock, and Eseho Ojo, “Democratic Health Communications during Covid-19: A RAPID Response.”
- <sup>vii</sup> Daniels and Cancryn, “U.S. Monkeypox Response Stirs up Anxious Memories of AIDS Era for Activists”; Landers, Kapadia, and Tarantola, “Monkeypox, After HIV/AIDS and COVID-19.”
- <sup>viii</sup> Landers, Kapadia, and Tarantola.
- <sup>ix</sup> “Mpox (Monkeypox) Outbreak 2022.”
- <sup>x</sup> “Monkeypox Cases Reported in UK and Portugal.”
- <sup>xi</sup> “Mpox (Monkeypox) Outbreak 2022.”
- <sup>xii</sup> WHO, “WHO Director-General’s Statement at the Press Conference Following IHR Emergency Committee Regarding the Multi-Country Outbreak of Monkeypox - 23 July 2022.”
- <sup>xiii</sup> WHO, “Second Meeting of the International Health Regulations (2005) (IHR) Emergency Committee Regarding the Multi-Country Outbreak of Monkeypox.”
- <sup>xiv</sup> Malta et al., “Monkeypox and Global Health Inequities.”
- <sup>xv</sup> “Africa to Receive First Batch of 50,000 Mpox Vaccines.”
- <sup>xvi</sup> Malta et al., “Monkeypox and Global Health Inequities.”
- <sup>xvii</sup> Malta et al.
- <sup>xviii</sup> WHO, “Multi-Country Outbreak of Monkeypox, External Situation Report #5 - 7 September 2022.”
- <sup>xix</sup> Sullivan and Doucleff, “Monkeypox Isn’t like COVID-19 — and That’s a Good Thing”; Sheikh, “How Serious Is Monkeypox?”; Gallagher, “Monkeypox.”
- <sup>xx</sup> Isaacs, “Freedom Comes with Responsibilities.”
- <sup>xxi</sup> Tworek, Ian Beacock, and Eseho Ojo, “Democratic Health Communications during Covid-19: A RAPID Response.”
- <sup>xxii</sup> Sullivan and Doucleff, “Monkeypox Isn’t like COVID-19 — and That’s a Good Thing.”
- <sup>xxiii</sup> CDC, “Mpox in the U.S.”
- <sup>xxiv</sup> “Coronavirus Disease (COVID-19).”
- <sup>xxv</sup> Levinson-King, “Toronto Lockdown - One of the World’s Longest?”
- <sup>xxvi</sup> Donald G. McNeil, “Fauci on What Working for Trump Was Really Like.”
- <sup>xxvii</sup> Beca-Martinez, “Compliance with the Main Preventive Measures of COVID-19 in Spain: The Role of Knowledge, Attitudes, Practices, and Risk Perception - Beca-Martínez - 2022 - Transboundary and Emerging Diseases - Wiley Online Library.”
- <sup>xxviii</sup> “Ministerio de Sanidad - Ciudadanos - Este Verano La Fiesta Es Saludable.”
- <sup>xxix</sup> Ministerio de Sanidad [@sanidadgob]. Twitter Post. July 29, 2022, 11:36 AM.
- <sup>xxx</sup> Associated Press, “Spain Leads Europe in Monkeypox, Struggles to Check Spread.”
- <sup>xxxi</sup> Farnós, “Carrera a medianoche contra Monkeypox.”
- <sup>xxxii</sup> Semana, “Comunidad gay de España se resigna a la abstinencia para protegerse de la viruela del mono.”
- <sup>xxxiii</sup> 68% reported being satisfied with the province’s COVID-19 management. “Majority of B.C. Residents Satisfied with Government’s COVID-19 Response, Poll Suggests.”
- <sup>xxxiv</sup> “Early Monkeypox Concerns.”
- <sup>xxxv</sup> BC Centre for Disease Control, “Monkeypox.”
- <sup>xxxvi</sup> BC Centre for Disease Control and Vancouver Coastal Health, “Monkeypox Guidance for Events During Pride Season.”
- <sup>xxxvii</sup> Benzie, “How the Election Was Won.”
- <sup>xxxviii</sup> Public Health Ontario, “Monkeypox.”
- <sup>xxxix</sup> Toronto Public Health [@TOPublicHealth], Twitter Post. July 8, 2022, 7:00 PM.
- <sup>xl</sup> Gay Men’s Sexual Health Alliance, “MPX.”
- <sup>xli</sup> Nadeem, “Americans Reflect on Nation’s COVID-19 Response.”
- <sup>xlii</sup> Chan, Wilfred. “Nobody’s Acting like This Is an Emergency’: Act Up Veteran Peter Staley Condemns US Monkeypox Response.” *The Guardian*, July 22, 2022, sec. US news.  
<https://www.theguardian.com/politics/2022/jul/22/peter-staley-monkeypox-response-us-interview>.

- 
- xliii CDC [@CDCgov]. Twitter Post, July 26, 2022, 11:30 AM.
- xliv Kates, Artiga, and Dawson, “National Data Show Continuing Disparities in Monkeypox (MPX) Cases and Vaccinations Among Black and Hispanic People.”
- xlv Desano, “LGBTQ+ Organizations Call on CDC to Expand Monkeypox Virus Testing and Vaccine Distribution.”
- xlvi Abayomi, “Public Trust and State Management of COVID-19 Pandemic in Nigeria.”
- xlvii Oyebanji et al., “Lay Media Reporting of Monkeypox in Nigeria.”
- xlviii *NCDC Media Dialogue*.
- xlix *NCDC Media Dialogue*.
- <sup>1</sup> NCDC [@NCDCgov], Twitter Post. May 22, 2022, 6:59 PM.
- li Ali, “Monkeypox.”
- lii Abayomi, “Public Trust and State Management of COVID-19 Pandemic in Nigeria.”
- liii WHO, “Communicating for Health.”
- liv WHO, “Risk Communications and Community Engagement Public Health Advice on Understanding, Preventing and Addressing Stigma and Discrimination Related to Monkeypox.”
- lv Altshuler, “Learning from History.”
- lvi Medina-Martínez et al., “Health Inequities in LGBT People and Nursing Interventions to Reduce Them.”
- lvii Lee, Writer, and Contact, “Monkeypox Fears Could Stigmatize LGBTQ2S+ Community, Expert Says.”
- lviii WHO, “WHO Working Closely with Countries Responding to Monkeypox.”
- lix BC Centre for Disease Control and Vancouver Coastal Health, “Monkeypox Guidance for Events During Pride Season.”
- lx CBC News, “1st Monkeypox Case Identified in B.C.”
- lxi Public Health Ontario, “Monkeypox.”
- lxii Public Health Ontario.
- lxiii WHO, “Communicating for Health.”
- lxiv Health Initiative for Men, “Mpox Bulletin”
- lxv Johal, “The Full Show.”
- lxvi Smith, “Dr. Bonnie Henry Says That Monkeypox Is Presenting in B.C. ‘a Little Bit Different’ than How It Appears in Nigeria.”
- lxvii Tooley, “Igotmpox.Com.”
- lxviii “Toronto Man Speaks of Excruciating Pain, Isolation during Monkeypox Infection | CP24.Com.”
- lxix The White House, “FACT SHEET,” June 28, 2022.
- lxx “Video: ‘There’s a Stigma’: Gay Men on Government’s Response to Monkeypox | CNN.”
- lxxi *NCDC Media Dialogue*.
- lxxii Tomes, “A ‘Creation of the Media.’”
- lxxiii WHO, “Infodemic.”
- lxxiv Pascual, “Así es la sauna Paraíso, foco del brote de viruela del mono en Madrid.”
- lxxv 20minutos, “El protagonista del viral en el metro desmiente al hombre que le acusó de falta de protección.”
- lxxvi Oyebanji et al., “Lay Media Reporting of Monkeypox in Nigeria.”
- lxxvii NCDC [@NCDCgov], Twitter Post. May 22, 2022, 6:59 PM.
- lxxviii NCDC [@NCDCgov], Twitter Post. June 24, 2022, 9:51 AM.
- lxxix Ali, “Monkeypox.”
- lxxx NCDC [@NCDCgov], Twitter Post. July 26, 2022, 1:21 AM.
- lxxxi NCDC [@NCDCgov], Twitter Post. June 22, 2022, 6:11 AM.
- lxxxii BC Centre for Disease Control, “Monkeypox.”
- lxxxiii Vancouver Coastal Health [@VCHhealthcare], Twitter Post. August 15, 2022, 10:48 AM.
- lxxxiv Tooley, “Igotmpox.Com.”
- lxxxv Health Initiative for Men, “Mpox WTF.”
- lxxxvi WHO, “Communicating for Health.”
- lxxxvii CDC, “Use a Health Equity Lens for Inclusive Communication.”
- lxxxviii Tworek, Ian Beacock, and Eseho Ojo, “Democratic Health Communications during Covid-19: A RAPID Response.” p. 37-41
- lxxxix Colby and Cook, “Epidemics and Agendas.”
- xc Philpott, “Epidemiologic and Clinical Characteristics of Monkeypox Cases — United States, May 17–July 22, 2022.”
- xci Gay Men’s Sexual Health Alliance, “Who We Are.”
- xcii Public Health Agency of Canada, “Monkeypox Epidemiology Update.”
- xciii GMSH Alliance [@GMSHAlliance], Twitter Post. May 20, 2022, 11:30 PM.
- xciv HIM, “About HIM”

- 
- <sup>xcv</sup> CBRC, “Monkeypox (Mpox).”
- <sup>xcvi</sup> CBRC et al., “Emergency Supports and Services in Response to Monkeypox Infection.”
- <sup>xcvii</sup> CBRC, “About.”
- <sup>xcviii</sup> Public Health Agency of Canada, “Government of Canada Supports Community-Based Organizations to Address Monkeypox Outbreak.”
- <sup>xcix</sup> CBRC, “Monkeypox (Mpox).”
- <sup>c</sup> Tooley, “Igotmpox.Com.”
- <sup>ci</sup> BC Centre for Disease Control, “Mpox Surveillance Report - Jan. 9, 2023.”
- <sup>cii</sup> Oyebanji et al., “Lay Media Reporting of Monkeypox in Nigeria.”
- <sup>ciiii</sup> Jeremiah, “Monkeypox.”
- <sup>civ</sup> NCDC [@NCDCgov], Twitter Post. June 2, 2022, 7:28 AM.
- <sup>cv</sup> *NCDC Media Dialogue.*
- <sup>cvi</sup> NCDC [@NCDCgov], Twitter Post. June 24, 2022, 9:51 AM.
- <sup>cvii</sup> Carlos III Health Institute, “SITUACION EPIDEMIOLOGICA DE LOS CASOS DE VIRUELA DEL MONO-30082022.Pdf.”
- <sup>cviii</sup> Associated Press, “Spain Leads Europe in Monkeypox, Struggles to Check Spread.”
- <sup>cix</sup> CESIDA [@cesida\_esp], Twitter Post. May 19, 2022, 3:30 PM.
- <sup>cx</sup> Cao, “LGBTQ People Rallied In New York For Better Information And Support As Monkeypox Cases Rise.”
- <sup>cxii</sup> The White House, “FACT SHEET,” August 18, 2022.
- <sup>cxiii</sup> Tolu-Kolawole, “Lagos, Adamawa Lead as NCDC Confirms 15 Monkeypox Cases.”
- <sup>cxiiii</sup> *NCDC Media Dialogue.*
- <sup>cxv</sup> *NCDC Media Dialogue.*
- <sup>cxvi</sup> Gay Men’s Sexual Health Alliance, “Who We Are.”
- <sup>cxvii</sup> BC Centre for Disease Control and Community-Based Research Centre, “Monkeypox 2SGBTQ+ Community Response Group Terms of Reference.”
- <sup>cxviii</sup> HIM, “About HIM.”
- <sup>cxix</sup> Erman, “How Concerned Should We Be about Monkeypox? | CP24.Com.”
- <sup>cx</sup> Hurren, “Governments Aren’t Doing Enough to Prevent Monkeypox Transmission, Community Groups Warn | Xtra Magazine.”
- <sup>cxii</sup> CBRC et al., “Emergency Supports and Services in Response to Monkeypox Infection.”
- <sup>cxiii</sup> Public Health Agency of Canada, “Government of Canada Supports Community-Based Organizations to Address Monkeypox Outbreak.”
- <sup>cxiiii</sup> Hurren, “So, What Happened to Monkeypox?”
- <sup>cxv</sup> *ibid.*
- <sup>cxvi</sup> Comunidad de Madrid, “ENTREVISTA ESPEJO PÚBLICO.”
- <sup>cxvii</sup> Simón, “Salud Pública valora traer una nueva vacuna de la viruela para controlar la transmisión de la viruela del mono.”
- <sup>cxviii</sup> New York State, “Governor Hochul Announces New SMS-Text Effort to Deliver Latest Monkeypox Information to New Yorkers | Governor Kathy Hochul.”
- <sup>cxviiii</sup> Equality California, “Monkeypox Resource Center.”
- <sup>cxviiii</sup> *NCDC Media Dialogue.*
- <sup>cxviiii</sup> Tworek, Ian Beacock, and Eseohé Ojo, “Democratic Health Communications during Covid-19: A RAPID Response.”
- <sup>cxviiii</sup> “UNAIDS Warns That Stigmatizing Language on Monkeypox Jeopardises Public Health.”
- <sup>cxviiii</sup> Public Health Agency of Canada, “Original Mixed Methods Research - Mandatory HIV Screening, Migration and HIV Stigma in Canada.”
- <sup>cxviiii</sup> Alfonseca, “Rising Monkeypox Cases Alarm LGBTQ Activists.”
- <sup>cxviiii</sup> Health Initiative for Men, “Mpox Bulletin”
- <sup>cxviiii</sup> Comunidad de Madrid, “Viruela del mono.”
- <sup>cxviiii</sup> Federal Ministry of Health - Nigeria Centre for Disease Control, “National Monkeypox Public Health Guidelines.”
- <sup>cxviiii</sup> Ogoina and Yinka-Ogunleye, “Sexual History of Human Monkeypox Patients Seen at a Tertiary Hospital in Bayelsa, Nigeria.”
- <sup>cxviiii</sup> Toronto Public Health [@TOPublicHealth], Twitter Post, July 8, 2022, 7:00 PM.
- <sup>cxviiii</sup> Simón, “Salud Pública valora traer una nueva vacuna de la viruela para controlar la transmisión de la viruela del mono.”
- <sup>cxviiii</sup> Sun, Diamond, and Nirappil, “U.S. Monkeypox Response Mirrors Early Coronavirus Missteps, Experts Say.”
- <sup>cxviiii</sup> Tworek, “Why Disease Names Matter.”

- 
- cxli WHO, “WHO Recommends New Name for Monkeypox Disease.”
- cxlii Simón, “Salud Pública valora traer una nueva vacuna de la viruela para controlar la transmisión de la viruela del mono.”
- cxliii WHO, “WHO Director-General’s Opening Remarks at the COVID-19 Media Briefing– 14 June 2022.”
- cxliv Health Initiative for Men, “Mpox Bulletin”
- cxlv WHO, “WHO Recommends New Name for Monkeypox Disease.”
- cxlvi *NCDC Media Dialogue.*
- cxlvii The White House, “FACT SHEET.”
- cxlviii “Africa to Receive First Batch of 50,000 Mpox Vaccines.”
- cxlix NCDC [@NCDCgov], Twitter Post, June 24, 2022, 9:51 AM.
- cl Aaron D’Andrea, “Monkeypox: Canada’s Top Doctor Urges Those at Risk to Get Vaccinated as Cases Climb - National | Globalnews.Ca.”
- cli Cao, “LGBTQ People Rallied In New York For Better Information And Support As Monkeypox Cases Rise.”
- clii “ACT UP NY (@actupny) • Instagram.”
- cliii The White House, “FACT SHEET,” June 28, 2022; Public Health Agency of Canada, “Statement from the Chief Public Health Officer of Canada on August 12, 2022.”
- cliv WHO, “Fifth Meeting of the International Health Regulations (2005) (IHR) Emergency Committee on the Multi-Country Outbreak of Mpox (Monkeypox).”
- clv Centre for Disease Control, “Health Alert Network (HAN) - 00490 | Potential Risk for New Mpox Cases.”
- clvi BC Centre for Disease Control, “Mpox Surveillance Report - Jan. 9, 2023.”
- clvii Maru Group, “Early Monkeypox Concerns.”
- clviii Health Canada, “Canada’s Health Care System.”
- clix Ministry of Health, “Health Care Partners - Province of British Columbia.”
- clx Public Health Agency of Canada, “Statement from the Chief Public Health Officer of Canada on August 12, 2022.”
- clxi Public Health Agency of Canada, “Monkeypox Epidemiology Update.”
- clxii BC Centre for Disease Control, “Monkeypox.”
- clxiii HIM, “About HIM”
- clxiv Tooley, “Igotmpox.Com.”
- clxv BC Centre for Disease Control, “Monkeypox.”
- clxvi BC Centre for Disease Control and Vancouver Coastal Health, “Monkeypox Guidance for Events During Pride Season.”
- clxvii BC Centre for Disease Control and Vancouver Coastal Health. “Monkeypox Recommendations for Two-Spirit, Gay, Bisexual, Transgender, and Queer (2SGBTQ+) Communities.” BC Centre for Disease Control, July 15, 2022. [http://www.bccdc.ca/Health-Info-Site/Documents/Monkeypox/Monkeypox\\_2SGBTQ.pdf](http://www.bccdc.ca/Health-Info-Site/Documents/Monkeypox/Monkeypox_2SGBTQ.pdf).
- clxviii Vancouver Coastal Health [@VCHhealthcare], Twitter Post. August 15, 2022, 10:48 AM.
- clxix Vancouver Coastal Health [@VCHhealthcare].
- clxx Health Initiative for Men, “Mpox Bulletin”
- clxxi Health Initiative for Men, “I Have Monkeypox”
- clxxii Health Initiative for Men.
- clxxiii Tooley, “Igotmpox.Com.”
- clxxiv BC Centre for Disease Control, “Monkeypox.”
- clxxv Health Initiative for Men, “I Have Monkeypox”
- clxxvi Johal, “The Full Show.”
- clxxvii Tooley, “Igotmpox.Com.”
- clxxviii Smith, “Dr. Bonnie Henry Says That Monkeypox Is Presenting in B.C. ‘a Little Bit Different’ than How It Appears in Nigeria.”
- clxxix BC Centre for Disease Control, “Monkeypox Epidemiological Summary: British Columbia - As of August 15, 2022.”
- clxxx Vancouver Coastal Health [@VCHhealthcare], Twitter Post. July 5, 2022, 3:00PM.
- clxxxi Health Initiative for Men, “Mpox Bulletin”
- clxxxii Hurren, “Governments Aren’t Doing Enough to Prevent Monkeypox Transmission, Community Groups Warn | Xtra Magazine.”
- clxxxiii Hurren.
- clxxxiv BC Centre for Disease Control, “Monkeypox.”
- clxxxv Health Initiative for Men, “Mpox WTF.”
- clxxxvi Health Initiative for Men, “Mpox Bulletin”
- clxxxvii Ogoina, “A Brief History of Monkeypox in Nigeria.”

- 
- clxxxviii Ogoina.
- clxxxix Nigeria Centre for Disease Control and Prevention, “Monkeypox Case in the United Kingdom with Travel History to Nigeria.”
- cxc Nigeria Centre for Disease Control and Prevention.
- cxci NCDC [@NCDCgov], Twitter Post. July 22, 2022, 9:59 AM.; Ogoina et al., “A Case of Suicide during the 2017 Monkeypox Outbreak in Nigeria.”
- cxcii Nigeria Centre for Disease Control and Prevention, “Public Health Advisory on Monkeypox.”
- cxciiii Nigeria Centre for Disease Control and Prevention, “Nigeria Has No Laboratories Where Monkeypox Virus Is Generated.”
- cxciiv NCDC [@NCDCgov], Twitter Post, June 2, 2022, 7:28 AM.
- cxci v *NCDC Media Dialogue*.
- cxci vi Nigeria High Commission of the UK, “Government and Politics.”
- cxci vii “Nigeria Health System.”
- cxci viii Tolu-Kolawole, “Lagos, Adamawa Lead as NCDC Confirms 15 Monkeypox Cases.”
- cxci ix *NCDC Media Dialogue*.
- cc *NCDC Media Dialogue*.
- cci *NCDC Media Dialogue*.
- ccii NCDC [@NCDCgov], Twitter Post. June 14, 2022. 5:14 AM.
- cciii NCDC [@NCDCgov], Twitter Post. June 24, 2022, 9:51 AM.
- cciv NCDC [@NCDCgov], Twitter Post. May 22, 2022, 9:59 AM.
- ccv Ogoina et al., “A Case of Suicide during the 2017 Monkeypox Outbreak in Nigeria.”
- ccvi Federal Ministry of Health - Nigeria Centre for Disease Control, “National Monkeypox Public Health Guidelines”; Nigeria Centre for Disease Control and Prevention, “Public Health Advisory on Monkeypox.”
- ccvii NCDC [@NCDCgov], Twitter Post. June 22, 2022, 6:11 AM.
- ccviii *NCDC Media Dialogue*.
- ccix NCDC [@NCDCgov], Twitter Post. June 30, 2022, 10:09 AM.
- ccx *NCDC Media Dialogue*.
- ccxi *NCDC Media Dialogue*.
- ccxii Nigeria Centre for Disease Control and Prevention, “Nigeria Has No Laboratories Where Monkeypox Virus Is Generated.”
- ccxiii Jeremiah, “Monkeypox.”
- ccxiv Ali, “Monkeypox.”
- ccxv NCDC [@NCDCgov], June 2, 2022, 7:28 AM.
- ccxvi Oyebanji et al., “Lay Media Reporting of Monkeypox in Nigeria.”
- ccxvii Nigeria Centre for Disease Control and Prevention, “Public Health Advisory on Monkeypox.”
- ccxviii Public Health Agency of Canada, “Monkeypox Epidemiology Update.”
- ccxix Public Health Ontario, “Testing Indications-Monkeypox Virus.”
- ccxx GMSH Alliance [@GMSHAlliance], Twitter Post. May 20, 2022. 2:30 PM.
- ccxxi Tsekouras, “Toronto Investigating First Suspected Case of Monkeypox.”
- ccxxii DeClerq, “Ontario Chief Medical Officer Issues Reporting Order on Monkeypox Cases | CP24.Com.”
- ccxxiii DeClerq, “Ontario Releases Guide on How to Treat Monkeypox Patients in Hospital | CP24.Com.”
- ccxxiv Mosleh, “Toronto Reports Its First Confirmed Case of Monkeypox.”
- ccxxv Isaac Bogoch [@BogochIsaac], Twitter Post. May 29, 2022, 8:02 AM.
- ccxxvi “Interim Vaccine Guidance for Post-Exposure Prophylaxis (PEP) and How to Access Tecovirimat.”
- ccxxvii Benzie, “How the Election Was Won.”
- ccxxviii Lavoie, Writer, and Contact, “Toronto Bathhouse Workers among First to Be Offered Monkeypox Vaccine.”
- ccxxix DeClerq, Writer, and Contact, “Toronto to Offer 2 Monkeypox Vaccine Clinics with Expanded Eligibility This Weekend.”
- ccxxx Aaron D’Andrea, “Monkeypox: Canada’s Top Doctor Urges Those at Risk to Get Vaccinated as Cases Climb - National | Globalnews.Ca.”
- ccxxxi Smith, “Ontario Expands Monkeypox Vaccine Eligibility to More LGBTQ People, Sex Workers | CP24.Com.”
- ccxxxii Benzie, “How the Election Was Won.”
- ccxxxiii Health Canada, “Canada’s Health Care System.”
- ccxxxiv Public Health Ontario, “Vision, Mission, Mandate and Values.”
- ccxxxv Public Health Agency of Canada, “Statement from the Chief Public Health Officer of Canada on August 12, 2022.”
- ccxxxvi Public Health Agency of Canada, “Monkeypox Epidemiology Update.”
- ccxxxvii DeClerq, “Ontario Releases Guide on How to Treat Monkeypox Patients in Hospital | CP24.Com.”



- 
- ccxxxviii Public Health Ontario, “Monkeypox.”
- ccxxxix Toronto, “Monkeypox.”
- ccxl Toronto Public Health [@TOPublicHealth], Twitter Post. July 27, 2022, 10:00 AM.
- ccxli Bresge, “LGBTQ Advocates Fear Monkeypox Stigma Could ‘spread like a Virus’ | CP24.Com.”
- ccxlii CTV News [@CTVNews], Twitter Post. July 28, 2022, 10:00 AM.
- ccxliii Hurren, “Governments Aren’t Doing Enough to Prevent Monkeypox Transmission, Community Groups Warn | Xtra Magazine.”
- ccxliv Chen, “Experts Weigh in on Toronto’s Monkeypox Response.”
- ccxlv Toronto, “Toronto Public Health Holds Vaccination Clinics to Protect Community against Monkeypox.”
- ccxlvi Public Health Ontario, “Monkeypox.”
- ccxlvii “Interim Vaccine Guidance for Post-Exposure Prophylaxis (PEP) and How to Access Tecovirimat.”
- ccxlviii Public Health Ontario, “Monkeypox.”
- cclix Toronto Public Health [@TOPublicHealth], Twitter Post. July 8, 2022, 10:00 AM.
- cccl Gay Men’s Sexual Health Alliance, “MPX.”
- cccli Public Health Ontario, “Monkeypox.”
- ccclii Canada, “Guidance on Use of Inmavune in Monkeypox Outbreaks in Canada.”
- cccliii Pascual, “Así es la sauna Paraíso, foco del brote de viruela del mono en Madrid.”
- cccliv Rodríguez, “Confirman la primera muerte por viruela del mono en España.”
- ccclv Carlos III Health Institute, “SITUACION EPIDEMIOLOGICA DE LOS CASOS DE VIRUELA DEL MONO-30082022.Pdf.”
- ccclvi Jones, “Spain’s Ruling Socialists Strike Coalition Deal with Podemos.”
- ccclvii Gais Positius, “Verola del mico.”
- ccclviii Cesida, “Cesida recuerda que no existen virus que ataquen específicamente a una población por su orientación sexual u otra condición social.”
- ccclix Apoyo Positivo, “DIVERSIDAD COMO HERRAMIENTA DE FUTURO.”
- ccclx Apoyo Positivo, “MPOX.”
- ccclxi “Ministerio de Sanidad - Profesionales - Alerta de Viruela de Los Monos En España y Otros Países de Europa.”
- ccclxii Comunidad de Madrid, “Viruela del mono.”
- ccclxiii Generalitat de Catalunya, “Verola del mico.”
- ccclxiv Ministerio de Sanidad, “The 20 Most Important Messages about Monkeypox 2022.”
- ccclxv “Ministerio de Sanidad - Ciudadanos - Este Verano La Fiesta Es Saludable.”
- ccclxvi Ministerio de Sanidad [@sanidadgob], Twitter Post. July 23, 2022, 9:35 AM.
- ccclxvii “Ministerio de Sanidad [@sanidadgob], Twitter Post. July 29, 2022 11:36 AM; “Ministerio de Sanidad - Ciudadanos - Este Verano La Fiesta Es Saludable.”
- ccclxviii Apoyo Positivo [@Apoyopositivo], Twitter Post. May 19, 2022, 1:03 AM.
- ccclxix CESIDA [@cesida\_esp], Twitter Post. May 19, 2022. 6:30 AM.
- ccclxx “Cesida Recuerda Que No Existen Virus Que Ataquen Específicamente a Una Población Por Su Orientación Sexual u Otra Condición Social - Cesida.”
- ccclxxi Pascual, “Así es la sauna Paraíso, foco del brote de viruela del mono en Madrid.”
- ccclxxii “Sauna Paraíso Madrid (@sauna\_paraíso) • Instagram Photos and Videos.”
- ccclxxiii Associated Press, “Spain Leads Europe in Monkeypox, Struggles to Check Spread.”
- ccclxxiv “Ministerio de Sanidad - Ciudadanos - Este Verano La Fiesta Es Saludable.”
- ccclxxv Beca-Martinez, “Compliance with the Main Preventive Measures of COVID-19 in Spain: The Role of Knowledge, Attitudes, Practices, and Risk Perception - Beca-Martínez - 2022 - Transboundary and Emerging Diseases - Wiley Online Library.”
- ccclxxvi “Qué Es Madrid Orgullo - MADO’22 Web Oficial Del Orgullo.”
- ccclxxvii Telemadrid, “En el metro con viruela del mono”; 20 minutos, “El protagonista del viral en el metro desmiente al hombre que le acusó de falta de protección.”
- ccclxxviii Spicknall, “Modeling the Impact of Sexual Networks in the Transmission of Monkeypox Virus Among Gay, Bisexual, and Other Men Who Have Sex With Men — United States, 2022.”
- ccclxxix Health, “Summary of the Public Health System in the United States.”
- ccclxxx CDC, “MMWR Monkeypox Reports | MMWR.”
- ccclxxxi CDC, “Monkeypox in the U.S.”
- ccclxxxii Governor Kathy Hochul, “No. 20: Declaring a Disaster in the State of New York.”
- ccclxxxiii “LISTING OF L.A. COUNTY DPH PRESS RELEASES.”
- ccclxxxiv LA Public Health [@lapublichealth], Twitter Post, August 21, 2022, 11:25 AM.
- ccclxxxv Cao, “LGBTQ People Rallied In New York For Better Information And Support As Monkeypox Cases Rise.”

- 
- ccxxxvi “ACT UP NY (@actupny) • Instagram.”
- ccxxxvii Equality New York, “Statement on the New York State and City Response to Monkeypox - Equality New York LGBTQI Advocacy.”
- ccxxxviii The Lesbian, Gay, Bisexual & Transgender Community Center, “COVID-19 and MPV (Monkeypox) Information.”
- ccxxxix Los Angeles LGBT Center, “Home.”
- ccxc Los Angeles LGBT Center, “Human Monkeypox.”
- ccxci Desano, “LGBTQ+ Organizations Call on CDC to Expand Monkeypox Virus Testing and Vaccine Distribution.”
- ccxcii Equality California “About Equality California.”
- ccxciii Equality California, “Monkeypox Resource Center.”
- ccxciv Minhaj, “Monkeypox Outbreak — Nine States, May 2022.”
- ccxcv CDC [@CDCgov], Twitter Post. June 2, 2022, 1:04 PM.
- ccxcvi The White House, “FACT SHEET,” June 28, 2022.
- ccxcvii NYS Department of Health, “Monkeypox.”
- ccxcviii California Department of Public Health, “Monkeypox.”
- ccxcix Los Angeles LGBT Center, “Human Monkeypox.”
- ccc Center for Disease Control, “CDC Activates Emergency Operations Center for Monkeypox Response | CDC Online Newsroom | CDC.”
- ccci NYS Department of Health, “Monkeypox.”
- cccii New York State, “Governor Hochul Announces New SMS-Text Effort to Deliver Latest Monkeypox Information to New Yorkers | Governor Kathy Hochul.”
- ccciii California Department of Public Health, “MPX Health Equity.”
- ccciv CA Public Health [@CAPublicHealth], Twitter Post. August 11, 2022, 9:01 AM.
- cccv “Monkeypox Resource Center”; “Equality California (@eqca) / Twitter.”
- cccvii “ACT UP NY (@actupny) • Instagram.”

---

## Bibliography

- 20minutos. “El protagonista del viral en el metro desmiente al hombre que le acusó de falta de protección: ‘Ni tengo viruela del mono ni hablé con él.’” *www.20minutos.es - Últimas Noticias*, August 2, 2022. <https://www.20minutos.es/noticia/5037778/0/el-protagonista-del-viral-en-el-metro-desmiente-al-hombre-que-le-acuso-de-falta-de-proteccion-ni-tengo-viruela-del-mono-ni-hable-con-el/>.
- Aaron D’Andrea. “Monkeypox: Canada’s Top Doctor Urges Those at Risk to Get Vaccinated as Cases Climb - National | Globalnews.Ca.” *Global News*, July 27, 2022. <https://globalnews.ca/news/9018777/monkeypox-phac-update-july-27/>.
- Abayomi, Kolapo. “Public Trust and State Management of COVID-19 Pandemic in Nigeria.” *APSA Preprints*, September 1, 2022. <https://doi.org/10.33774/apsa-2022-vz68q>.
- “ACT UP NY (@actupny) • Instagram,” 2022. <https://www.instagram.com/p/CgMwDBguag6/>.
- Al Jazeera*. “Africa to Receive First Batch of 50,000 MpoX Vaccines.” December 1, 2022. <https://www.aljazeera.com/news/2022/12/1/first-batch-of-50000-mpox-vaccines-set-to-arrive-for-africa>.
- Alfonseca, Kiara. “Rising Monkeypox Cases Alarm LGBTQ Activists.” *ABC News*, July 20, 2022. <https://abcnews.go.com/Health/lgbtq-groups-slam-government-handling-monkeypox/story?id=87119869>.
- Ali, Rabi’u Sani. “Monkeypox: NCDC Blames Nigerians for Not Following Preventive Measures.” *News Agency of Nigeria*, June 28, 2022. <https://www.nannews.ng/2022/06/28/monkeypox-ncdc-blames-nigerians-for-not-following-preventive-measures/>.
- Altshuler, Ellery. “Learning from History: Remembering the Successes and Failures of the AIDS Crisis to Fight COVID-19.” *International Public Health Journal* 13, no. 1 (2021): 111–17.
- Apoyo Positivo. “DIVERSIDAD COMO HERRAMIENTA DE FUTURO.” *Apoyo Positivo* (blog), 2023. <https://apoyopositivo.org/nosotros/diversidad/>.
- . “MPOX: Vacunación, evolución y nuevos casos. ¡Seguimos atentos!” *Apoyo Positivo* (blog), 2022. <https://apoyopositivo.org/mpox/>.
- Apoyo Positivo [@Apoyopositivo]. Twitter Post. *Twitter*, May 19, 2022., 1:03 AM. <https://twitter.com/Apoyopositivo/status/1527198359718703104>.
- Associated Press. “Spain Leads Europe in Monkeypox, Struggles to Check Spread.” *VOA*, August 5, 2022. <https://www.voanews.com/a/spain-leads-europe-in-monkeypox-struggles-to-check-spread-/6689455.html>.
- BC Centre for Disease Control. “Monkeypox,” 2022. <http://www.bccdc.ca/health-info/diseases-conditions/monkeypox>.
- . “Monkeypox Epidemiological Summary: British Columbia - As of August 15, 2022.” *BC Centre for Disease Control*, August 15, 2022. <http://www.bccdc.ca/Health-Info>

- 
- Site/Documents/Monkeypox/Epidemiological\_Summary/MPX\_Epi\_Summary\_20220815.pdf.
- . “Mpox Surveillance Report - Jan. 9, 2023,” January 9, 2023. [http://www.bccdc.ca/Health-Info-Site/Documents/Monkeypox/Epidemiological\\_Summary/Mpox\\_Surveillance\\_20230109.pdf](http://www.bccdc.ca/Health-Info-Site/Documents/Monkeypox/Epidemiological_Summary/Mpox_Surveillance_20230109.pdf).
- BC Centre for Disease Control and Community-Based Research Centre. “Monkeypox 2SGBTQ+ Community Response Group Terms of Reference,” 2022.
- BC Centre for Disease Control and Vancouver Coastal Health. “Monkeypox Guidance for Events During Pride Season.” BCCDC, 2022. [http://www.bccdc.ca/Health-Info-Site/Documents/Monkeypox/Guidelines\\_Events\\_Monkeypox.pdf](http://www.bccdc.ca/Health-Info-Site/Documents/Monkeypox/Guidelines_Events_Monkeypox.pdf).
- BC Centre for Disease Control and Vancouver Coastal Health. 2022. “Monkeypox Recommendations for Two-Spirit, Gay, Bisexual, Transgender, and Queer (2SGBTQ+) Communities.” BC Centre for Disease Control. [http://www.bccdc.ca/Health-Info-Site/Documents/Monkeypox/Monkeypox\\_2SGBTQ.pdf](http://www.bccdc.ca/Health-Info-Site/Documents/Monkeypox/Monkeypox_2SGBTQ.pdf).
- Beca-Martinez. “Compliance with the Main Preventive Measures of COVID-19 in Spain: The Role of Knowledge, Attitudes, Practices, and Risk Perception - Beca-Martínez - 2022 - Transboundary and Emerging Diseases - Wiley Online Library,” 2022. <https://onlinelibrary.wiley.com/doi/full/10.1111/tbed.14364>.
- Benzie, Robert. “How the Election Was Won: Ford’s Ideological Flexibility Made Him a Difficult Target for Overwhelmed Rivals.” *Toronto Star*, June 10, 2022, sec. News.
- Bresge, Adina. “LGBTQ Advocates Fear Monkeypox Stigma Could ‘spread like a Virus’ | CP24.Com.” CP24, May 27, 2022. <https://www.cp24.com/news/lgbtq-advocates-fear-monkeypox-stigma-could-spread-like-a-virus-1.5921835>.
- CA Public Health [@CAPublicHealth]. Twitter Post. *Twitter*, August 11, 2022, 9:01 AM. <https://twitter.com/CAPublicHealth/status/1557759037319438336>.
- California Department of Public Health. “Monkeypox,” 2022. <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/monkeypox.aspx>.
- . “MPX Health Equity,” 2022. <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/MPX/MPX-Health-Equity.aspx>.
- Canada, Public Health Agency of. “Guidance on Use of Imvamune in Monkeypox Outbreaks in Canada: NACI Rapid Response.” Guidance, July 4, 2022. <https://www.canada.ca/en/public-health/services/immunization/national-advisory-committee-on-immunization-naci/guidance-ivmune-monkeypox.html>.
- Cao, Steffi. “LGBTQ People Rallied In New York For Better Information And Support As Monkeypox Cases Rise.” BuzzFeed News, 2022. <https://www.buzzfeednews.com/article/stefficao/monkeypox-act-up-protest>.
- Carlos III Health Institute. “SITUACION EPIDEMIOLOGICA DE LOS CASOS DE VIRUELA DEL MONO-30082022.Pdf.” ISCIII, August 30, 2022. <https://www.isciii.es/QueHacemos/Servicios/VigilanciaSaludPublicaRENAVE/Enfermeda>

---

desTransmisibles/Documents/archivos%20A-Z/MPOX/SITUACION%20EPIDEMIOLOGICA%20DE%20LOS%20CASOS%20DE%20VIRUELA%20DEL%20MONO-30082022.pdf.

- CBC News. “1st Monkeypox Case Identified in B.C. | CBC News.” CBC, June 6, 2022. <https://www.cbc.ca/news/canada/british-columbia/monkeypox-bc-vancouver-1.6479314>.
- CBRC. “About.” Community-Based Research Centre, 2023. <https://www.cbrc.net/about>.
- CBRC et al. “Emergency Supports and Services in Response to Monkeypox Infection.” Community-Based Research Centre, June 6, 2022. [https://www.cbrc.net/emergency\\_supports\\_and\\_services\\_in\\_response\\_to\\_monkeypox\\_infection](https://www.cbrc.net/emergency_supports_and_services_in_response_to_monkeypox_infection).
- CDC. “MMWR Monkeypox Reports | MMWR,” November 9, 2022. <https://www.cdc.gov/mmwr/monkeypox.html>.
- . “Monkeypox in the U.S.” Centers for Disease Control and Prevention, October 18, 2022. <https://www.cdc.gov/poxvirus/monkeypox/about/faq.html>.
- . “Mpox in the U.S.” Centers for Disease Control and Prevention, February 2, 2023. <https://www.cdc.gov/poxvirus/monkeypox/if-sick/transmission.html>.
- . “Use a Health Equity Lens for Inclusive Communication.” Centers for Disease Control and Prevention, August 2, 2022. [https://www.cdc.gov/healthcommunication/Health\\_Equity\\_Lens.html](https://www.cdc.gov/healthcommunication/Health_Equity_Lens.html).
- CDC [@CDCgov]. Twitter Post. *Twitter*, June 2, 2022, 10:04 PM. <https://twitter.com/CDCgov/status/1532453139709935634>.
- . Twitter Post. *Twitter*, July 26, 2022, 11:30 AM. <https://twitter.com/CDCgov/status/1551952986997391360>.
- Center for Disease Control. “CDC Activates Emergency Operations Center for Monkeypox Response | CDC Online Newsroom | CDC,” June 28, 2022. <https://www.cdc.gov/media/releases/2022/s0628-monkeypox-eoc.html>.
- Centre for Disease Control. “Health Alert Network (HAN) - 00490 | Potential Risk for New Mpox Cases,” May 15, 2023. <https://emergency.cdc.gov/han/2023/han00490.asp>.
- Cesida. “Cesida recuerda que no existen virus que ataquen específicamente a una población por su orientación sexual u otra condición social.” *Cesida* (blog), May 25, 2022. <https://cesida.org/blog/notas-de-prensa/cesida-recuerda-que-no-existen-virus-que-ataquen-especificamente-a-una-poblacion-por-su-orientacion-sexual-u-otra-condicion-social/>.
- CESIDA [@cesida\_esp]. Twitter Post. *Twitter*. May 19, 2022, 6:30 AM. [https://twitter.com/cesida\\_esp/status/1527280536720269322](https://twitter.com/cesida_esp/status/1527280536720269322).
- “Cesida Recuerda Que No Existen Virus Que Ataquen Específicamente a Una Población Por Su Orientación Sexual u Otra Condición Social - Cesida.” Accessed September 25, 2022. <https://cesida.org/blog/notas-de-prensa/cesida-recuerda-que-no-existen-virus-que-ataquen-especificamente-a-una-poblacion-por-su-orientacion-sexual-u-otra-condicion-social/>.
- Chan, Wilfred. “‘Nobody’s Acting like This Is an Emergency’: Act Up Veteran Peter Staley

- 
- Condemns US Monkeypox Response.” *The Guardian*, July 22, 2022, sec. US news. <https://www.theguardian.com/politics/2022/jul/22/peter-staley-monkeypox-response-us-interview>.
- CHEK. “Majority of B.C. Residents Satisfied with Government’s COVID-19 Response, Poll Suggests,” August 8, 2022. <https://www.cheknews.ca/majority-of-b-c-residents-satisfied-with-governments-covid-19-response-poll-1072419/>.
- Chen, Alice. “Experts Weigh in on Toronto’s Monkeypox Response.” *Toronto Star*, July 20, 2022. <https://www.thestar.com/local-toronto-north-york/life/2022/07/20/experts-weigh-in-on-toronto-s-monkeypox-response.html>.
- Colby, David C., and Timothy E. Cook. “Epidemics and Agendas: The Politics of Nightly News Coverage of AIDS.” *Journal of Health Politics, Policy and Law* 16, no. 2 (April 1, 1991): 215–50. <https://doi.org/10.1215/03616878-16-2-215>.
- Community-Based Research Centre. “Monkeypox (Mpox).” Accessed February 3, 2023. <https://www.cbrc.net/mpox>.
- Comunidad de Madrid. “ENTREVISTA ESPEJO PÚBLICO.” Portal de Transparencia, May 19, 2022. [https://www.comunidad.madrid/transparencia/agenda/Portal de TransparenciaENTREVISTA ESPEJO PÚBLICO](https://www.comunidad.madrid/transparencia/agenda/Portal%20de%20TransparenciaENTREVISTA%20ESPEJO%20PÚBLICO).
- . “Viruela del mono.” Comunidad de Madrid, May 20, 2022. <https://www.comunidad.madrid/servicios/salud/viruela-mono>.
- “Coronavirus Disease (COVID-19): How Is It Transmitted?” Accessed February 25, 2023. <https://www.who.int/news-room/questions-and-answers/item/coronavirus-disease-covid-19-how-is-it-transmitted>.
- CTV News [@CTVNews]. Twitter Post. *Twitter*, July 28, 2022, 10:00 AM. <https://twitter.com/CTVNews/status/1552700586855899137>.
- Daniels, Eugene, and Adam Cancryn. “U.S. Monkeypox Response Stirs up Anxious Memories of AIDS Era for Activists.” *POLITICO*, August 4, 2022. <https://www.politico.com/news/2022/08/04/monkeypox-response-aids-era-parallels-00049663>.
- DeClerq, Katherine. “Ontario Chief Medical Officer Issues Reporting Order on Monkeypox Cases | CP24.Com.” CP24, May 22, 2022. <https://www.cp24.com/news/report-all-suspected-monkeypox-cases-immediately-ontario-s-top-public-health-official-orders-1.5914370>.
- . “Ontario Releases Guide on How to Treat Monkeypox Patients in Hospital | CP24.Com,” 2022. <https://www.cp24.com/news/monkeypox-patients-in-ontario-must-be-isolated-in-health-care-settings-officials-say-1.5916551?cache=yes%3Fautoplay%3Dtrue>.
- DeClerq, Katherine, CTV News Toronto Multi-Platform Writer, and Follow | Contact. “Toronto to Offer 2 Monkeypox Vaccine Clinics with Expanded Eligibility This Weekend.” Toronto, June 17, 2022. <https://toronto.ctvnews.ca/toronto-to-offer-2-monkeypox-vaccine-clinics-with-expanded-eligibility-this-weekend-1.5952345>.
- Desano, Ari. “LGBTQ+ Organizations Call on CDC to Expand Monkeypox Virus Testing and Vaccine Distribution.” Los Angeles LGBT Center, 2022. <https://lalgbtcenter.org/about-the->

- 
- center/press-releases/lgbtq-organizations-call-on-cdc-to-expand-monkeypox-virus-testing-and-vaccine-distribution.
- Donald G. McNeil, Jr. “Fauci on What Working for Trump Was Really Like.” *The New York Times*, January 25, 2021, A6(L)-A6(L).
- Equality California. “About Equality California.” Accessed June 20, 2023. <https://www.eqca.org/about/>.
- Equality California. “Monkeypox Resource Center,” 2022. <https://www.eqca.org/monkeypox/>.
- Equality New York. “Statement on the New York State and City Response to Monkeypox - Equality New York LGBTQI Advocacy,” July 7, 2022. <https://www.equalityny.org/statement-on-the-new-york-state-and-city-response-to-monkeypox/>.
- Erman, Michael. “How Concerned Should We Be about Monkeypox? | CP24.Com,” May 22, 2022. <https://www.cp24.com/news/explainer-how-concerned-should-we-be-about-monkeypox-1.5914423>.
- Farnós, Andrea. “Carrera a medianoche contra Monkeypox: la yincana de pedir cita para vacunarse en Madrid.” *elconfidencial.com*, July 30, 2022. [https://www.elconfidencial.com/espana/madrid/2022-07-30/vacunas-viruela-del-mono-madrid-contagios\\_3468738/](https://www.elconfidencial.com/espana/madrid/2022-07-30/vacunas-viruela-del-mono-madrid-contagios_3468738/).
- Federal Ministry of Health - Nigeria Centre for Disease Control. “National Monkeypox Public Health Guidelines,” 2019. [https://ncdc.gov.ng/themes/common/docs/protocols/96\\_1577798337.pdf](https://ncdc.gov.ng/themes/common/docs/protocols/96_1577798337.pdf).
- Gais Positius. “Verola del mico.” *Gais Positius* (blog), July 5, 2022. <https://gaispositius.org/verolamico/>.
- Gallagher, James. “Monkeypox: Time to Worry or One to Ignore?” *BBC News*, May 20, 2022, sec. Health. <https://www.bbc.com/news/health-61524508>.
- Gay Men’s Sexual Health Alliance. “MPX: What We Know.” GMSH, May 20, 2022. <https://gmsh.ca/mpx/>.
- . “Who We Are.” GMSHA, 2023. <https://gmsh.ca/who-we-are/>.
- Generalitat de Catalunya. “Verola del mico.” Departament de Salut, 2022. <http://canalsalut.gencat.cat/ca/salut-a-z/v/verola-mico/index.html>.
- GMSH Alliance [@GMSHAlliance]. Twitter Post. *Twitter*, May 20, 2022, 2:30 PM, <https://twitter.com/GMSHAlliance/status/1527763804695699457>.
- Governor Kathy Hochul. “No. 20: Declaring a Disaster in the State of New York.” New York State. Accessed November 25, 2022. <https://www.governor.ny.gov/executive-order/no-20-declaring-disaster-state-new-york>.
- Health Canada. “Canada’s Health Care System.” Education and awareness, May 26, 2011. <https://www.canada.ca/en/health-canada/services/health-care-system/reports-publications/health-care-system/canada.html>.
- Health Initiative for Men. “About HIM,” July 11, 2017. <https://checkhimout.ca/about-him/>.

- 
- . “I Have Monkeypox,” August 31, 2022. <https://checkhimout.ca/mpox/i-have-monkeypox/>.
- . “Mpox Bulletin,” June 16, 2022. <https://checkhimout.ca/mpox-bulletin/>.
- . “Mpox WTF-Community Member Guidance.” CheckHIMOut, August 2022. <https://checkhimout.ca/wp-content/uploads/2022/08/Mpox-WTF-Community-Member-Guidance.pdf>.
- Health, Institute of Medicine (US) Committee for the Study of the Future of Public. “Summary of the Public Health System in the United States.” In *The Future of Public Health*. National Academies Press (US), 1988. <https://www.ncbi.nlm.nih.gov/books/NBK218212/>.
- Hurren, Kevin. “Governments Aren’t Doing Enough to Prevent Monkeypox Transmission, Community Groups Warn | Xtra Magazine.” *Xtra Magazine*, June 29, 2022. <https://xtramagazine.com/health/monkeypox-vaccines-225987>.
- . “So, What Happened to Monkeypox? | Xtra Magazine.” *Xtra Magazine*, November 25, 2022. <https://xtramagazine.com/health/what-happened-to-monkeypox-241190>.
- “Interim Vaccine Guidance for Post-Exposure Prophylaxis (PEP) and How to Access Tecovirimat,” n.d., 6.
- Isaac Bogoch [@BogochIsaac]. Twitter Post. *Twitter*, May 20, 2022, 12:16 PM, <https://twitter.com/BogochIsaac/status/1527729981975154688>.
- Isaacs, David. “Freedom Comes with Responsibilities: Freedom and COVID-19.” *Journal of Paediatrics and Child Health* 58, no. 3 (March 2022): 374–75. <https://doi.org/10.1111/jpc.15906>.
- Jeremiah, Urowayino. “Monkeypox: NCDC Blames Nigerians for Not Following Preventive Measures.” *Vanguard News*, June 28, 2022. <https://www.vanguardngr.com/2022/06/monkeypox-ncdc-blames-nigerians-for-not-following-preventive-measures/>.
- Johal, Jas. “The Full Show: Dr Bonnie Henry Provides Answers on Monkeypox and a Vaccine, ABC Vancouver Flips on Comments Surrounding Park Board and the Residents of Salt Spring Island Want to See a Vacancy Tax Implemented - The Jas Johal Show.” *The Jas Johal Show*. Accessed October 5, 2022. <https://omny.fm/shows/cknw-afternoons/the-full-show-dr-bonnie-henry-provides-answers-on>.
- Jones, Sam. “Spain’s Ruling Socialists Strike Coalition Deal with Podemos.” *The Guardian*, November 12, 2019, sec. World news. <https://www.theguardian.com/world/2019/nov/12/spain-ruling-socialists-strike-coalition-deal-with-podemos-sanchez>.
- Kates, Jennifer, Samantha Artiga, and Lindsey Dawson. “National Data Show Continuing Disparities in Monkeypox (MPX) Cases and Vaccinations Among Black and Hispanic People.” KFF, October 5, 2022. <https://www.kff.org/racial-equity-and-health-policy/issue-brief/national-data-show-continuing-disparities-in-mpx-monkeypox-cases-and-vaccinations-among-black-and-hispanic-people/>.
- LA Public Health [@lapublichealth]. Twitter Post. *Twitter*, August 21, 2022, 11:25 AM,



- 
- <https://twitter.com/lapublichealth/status/1561419235238195201>.
- Landers, Stewart, Farzana Kapadia, and Daniel Tarantola. “Monkeypox, After HIV/AIDS and COVID-19: Suggestions for Collective Action and a Public Health of Consequence, November 2022.” *American Journal of Public Health* 112, no. 11 (November 2022): 1564–66. <https://doi.org/10.2105/AJPH.2022.307100>.
- Lavoie, Joanna, CP24 Web Content Writer, and Follow | Contact. “Toronto Bathhouse Workers among First to Be Offered Monkeypox Vaccine.” Toronto, June 11, 2022. <https://toronto.ctvnews.ca/toronto-bathhouse-workers-among-first-to-be-offered-monkeypox-vaccine-1.5942961>.
- Lee, Michael, CTVNews ca Writer, and Follow | Contact. “Monkeypox Fears Could Stigmatize LGBTQ2S+ Community, Expert Says.” CTVNews, May 23, 2022. <https://www.ctvnews.ca/health/monkeypox-fears-could-stigmatize-lgbtq2s-community-expert-says-1.5915135>.
- Levinson-King, Robin. “Toronto Lockdown - One of the World’s Longest?” *BBC News*, May 23, 2021, sec. US & Canada. <https://www.bbc.com/news/world-us-canada-57079577>.
- “LISTING OF L.A. COUNTY DPH PRESS RELEASES.” Accessed November 27, 2022. <http://publichealth.lacounty.gov/phcommon/public/media/mediaMPOXdisplay.cfm?unit=media&ou=ph&prog=media>.
- Los Angeles LGBT Center. “Home.” Los Angeles LGBT Center, 2022. <https://lalgbtcenter.org/>.
- . “Human Monkeypox.” *LGBT News Now* (blog), July 5, 2022. <https://lgbtnewsnow.org/monkeypox/>.
- Malta, Monica, Placide Mbala-Kingebeni, Anne W. Rimoin, and Steffanie A. Strathdee. “Monkeypox and Global Health Inequities: A Tale as Old as Time...” *International Journal of Environmental Research and Public Health* 19, no. 20 (October 2022). <https://doi.org/10.3390/ijerph192013380>.
- Maru Group. “Early Monkeypox Concerns,” 2022. <https://www.marugroup.net/public-opinion-polls/canada/early-monkeypox-concerns>.
- Medina-Martínez, Jorge, Carlos Saus-Ortega, María Montserrat Sánchez-Lorente, Eva María Sosa-Palanca, Pedro García-Martínez, and María Isabel Mármol-López. “Health Inequities in LGBT People and Nursing Interventions to Reduce Them: A Systematic Review.” *International Journal of Environmental Research and Public Health* 18, no. 22 (January 2021): 11801. <https://doi.org/10.3390/ijerph182211801>.
- Minhaj, Faisal S. “Monkeypox Outbreak — Nine States, May 2022.” *MMWR. Morbidity and Mortality Weekly Report* 71 (2022). <https://doi.org/10.15585/mmwr.mm7123e1>.
- Ministerio de Sanidad. “The 20 Most Important Messages about Monkeypox 2022,” 2022. [http://www.mscbs.es/ciudadanos/enfLesiones/enfTransmisibles/sida/documentos/MENSAJES\\_CLAVE\\_MPX.pdf](http://www.mscbs.es/ciudadanos/enfLesiones/enfTransmisibles/sida/documentos/MENSAJES_CLAVE_MPX.pdf).
- “Ministerio de Sanidad - Ciudadanos - Este Verano La Fiesta Es Saludable.” Accessed September 25, 2022. <https://www.sanidad.gob.es/ciudadanos/enfLesiones/enfTransmisibles/sida/VIRUELAD>

---

ELMONO/esteveranolafiesta.htm.

“Ministerio de Sanidad - Profesionales - Alerta de Viruela de Los Monos En España y Otros Países de Europa.” Accessed September 7, 2022.

<https://www.sanidad.gob.es/profesionales/saludPublica/ccayes/alertasActual/alertaMonkeypox/home.htm>.

Ministerio de Sanidad [@sanidadgob]. Twitter Post, *Twitter*, July 23, 2022, 9:35 AM,

<https://twitter.com/sanidadgob/status/1550882362640171008>.

———. Twitter Post, *Twitter*, July 29, 2022, 11:36 AM,

<https://twitter.com/sanidadgob/status/1553086957374226432>.

Ministry of Health. “Health Care Partners - Province of British Columbia.” Province of British Columbia. Accessed October 11, 2022.

<https://www2.gov.bc.ca/gov/content/health/about-bc-s-health-care-system/partners>.

“Monkeypox Cases Reported in UK and Portugal,” May 19, 2022.

<https://www.ecdc.europa.eu/en/news-events/monkeypox-cases-reported-uk-and-portugal>.

Mosleh, Omar. “Toronto Reports Its First Confirmed Case of Monkeypox.” *thestar.com*, May 26, 2022. <https://www.thestar.com/news/gta/2022/05/26/toronto-reports-its-first-confirmed-case-of-monkeypox.html>.

“Mpox (Monkeypox) Outbreak 2022.” Accessed May 15, 2023.

<https://www.who.int/emergencies/situations/monkeypox-oubreak-2022>.

Nadeem, Reem. “Americans Reflect on Nation’s COVID-19 Response.” *Pew Research Center Science & Society* (blog), July 7, 2022.

<https://www.pewresearch.org/science/2022/07/07/americans-reflect-on-nations-covid-19-response/>.

*NCDC Media Dialogue: Monkeypox Spread, Infodemic & Public Health Response in Nigeria*. Lagos, Nigeria: Nigeria Centre for Disease Control, 2022.

[https://www.youtube.com/watch?v=s0U\\_ku3g3H0](https://www.youtube.com/watch?v=s0U_ku3g3H0).

NCDC [@NCDCgov]. Twitter Post. *Twitter*, June 24, 2022, 9:51 AM,

<https://twitter.com/NCDCgov/status/1540377040192524289>.

———. Twitter Post. *Twitter*, June 14, 2022, 5:14 AM,

<https://twitter.com/NCDCgov/status/1536683419190579204>.

———. Twitter Post. *Twitter*, May 22, 2022, 9:59 AM,

<https://twitter.com/NCDCgov/status/1528420227725279236>.

———. Twitter Post. *Twitter*, July 26, 2022, 1:21 AM,

<https://twitter.com/NCDCgov/status/1551845190637322240>.

———. Twitter Post. *Twitter*, June 22, 2022, 6:11 AM,

<https://twitter.com/NCDCgov/status/1539596913196113927>.

———. Twitter Post. *Twitter*, June 2, 2022, 7:28 AM,

<https://twitter.com/NCDCgov/status/1532368540774416384>.

- 
- . Twitter Post. *Twitter*, June 30, 2022, 10:09 AM, <https://twitter.com/NCDCgov/status/1542555986250137601>.
- New York State. “Governor Hochul Announces New SMS-Text Effort to Deliver Latest Monkeypox Information to New Yorkers | Governor Kathy Hochul,” 2022. <https://www.governor.ny.gov/news/governor-hochul-announces-new-sms-text-effort-deliver-latest-monkeypox-information-new-yorkers>.
- Nigeria Centre for Disease Control and Prevention. “Monkeypox Case in the United Kingdom with Travel History to Nigeria,” 2022. <https://ncdc.gov.ng/news/366/monkeypox-case-in-the-united-kingdom-with-travel-history-to-nigeria>.
- . “Nigeria Has No Laboratories Where Monkeypox Virus Is Generated,” 2022. <https://ncdc.gov.ng/news/371/nigeria-has-no-laboratories-where-monkeypox-virus-is-generated>.
- . “Public Health Advisory on Monkeypox.” Nigeria Centre for Disease Control, 2022. <https://ncdc.gov.ng/diseases/info/M>.
- Nigeria High Commission of the UK. “Government and Politics.” Nigeria High Commission, 2022. <http://www.nigeriahc.org.uk/government-politics>.
- NYS Department of Health. “Monkeypox.” Department of Health, 2022. <https://www.health.ny.gov/diseases/communicable/zoonoses/monkeypox/>.
- Ogoina, Dimie. “A Brief History of Monkeypox in Nigeria.” Accessed December 6, 2022. <https://www.idsociety.org/science-speaks-blog/2022/a-brief-history-of-monkeypox-in-nigeria/>.
- Ogoina, Dimie, Abdulaziz Mohammed, Adesola Yinka-Ogunleye, and Chikwe Ihekweazu. “A Case of Suicide during the 2017 Monkeypox Outbreak in Nigeria.” *IJID Regions* 3 (June 1, 2022): 226–27. <https://doi.org/10.1016/j.ijregi.2022.04.004>.
- Ogoina, Dimie, and Adesola Yinka-Ogunleye. “Sexual History of Human Monkeypox Patients Seen at a Tertiary Hospital in Bayelsa, Nigeria.” *International Journal of STD & AIDS* 33, no. 10 (September 1, 2022): 928–32. <https://doi.org/10.1177/09564624221119335>.
- Oyebanji, Oyeronke, Ugonna Ofonagoro, Oluwatosin Akande, Ifeanyi Nsofor, Chika Ukenedo, Tarik Benjamin Mohammed, Chimezie Anueyiagu, Jeremiah Agenyi, Adesola Yinka-Ogunleye, and Chikwe Ihekweazu. “Lay Media Reporting of Monkeypox in Nigeria.” *BMJ Global Health* 4, no. 6 (November 1, 2019): e002019. <https://doi.org/10.1136/bmjgh-2019-002019>.
- Pascual, Alfredo. “Así es la sauna Paraíso, foco del brote de viruela del mono en Madrid.” *elconfidencial.com*, May 21, 2022. [https://www.elconfidencial.com/espana/madrid/2022-05-21/sauna-paraíso-brote-viruela-mono-madrid\\_3428558/](https://www.elconfidencial.com/espana/madrid/2022-05-21/sauna-paraíso-brote-viruela-mono-madrid_3428558/).
- Philpott, David. “Epidemiologic and Clinical Characteristics of Monkeypox Cases — United States, May 17–July 22, 2022.” *MMWR. Morbidity and Mortality Weekly Report* 71 (2022). <https://doi.org/10.15585/mmwr.mm7132e3>.
- Public Health Agency of Canada. “Government of Canada Supports Community-Based Organizations to Address Monkeypox Outbreak.” News releases, August 11, 2022.

- 
- <https://www.canada.ca/en/public-health/news/2022/08/government-of-canada-supports-community-based-organizations-to-address-monkeypox-outbreak.html>.
- . “Monkeypox Epidemiology Update.” Datasets;statistics;education and awareness, August 12, 2022. <https://health-infobase.canada.ca/monkeypox/#detailedCases>.
- . “Original Mixed Methods Research - Mandatory HIV Screening, Migration and HIV Stigma in Canada: Exploring the Experiences of Sub-Saharan African Immigrants Living with HIV in Western Canada.” Research, February 12, 2020. <https://www.canada.ca/en/public-health/services/reports-publications/health-promotion-chronic-disease-prevention-canada-research-policy-practice/vol-40-no-2-2020/original-mixed-methods-research-mandatory-hiv-screening.html>.
- . “Statement from the Chief Public Health Officer of Canada on August 12, 2022.” Speeches, August 12, 2022. <https://www.canada.ca/en/public-health/news/2022/08/statement-from-the-chief-public-health-officer-of-canada-on-august-12-2022.html>.
- Public Health Ontario. “Monkeypox.” Public Health Ontario, 2022. <https://www.publichealthontario.ca/en/Diseases-and-Conditions/Infectious-Diseases/Vector-Borne-Zoonotic-Diseases/Monkeypox>.
- . “Testing Indications-Monkeypox Virus.” Public Health Ontario, 2022. <https://www.publichealthontario.ca/en/Laboratory-Services/Test-Information-Index/Monkeypox-Virus>.
- . “Vision, Mission, Mandate and Values.” Public Health Ontario, 2019. <https://www.publichealthontario.ca/en/About/Our-Organization/Vision-Mission-Mandate-Values>.
- “Qué Es Madrid Orgullo - MADO’22 Web Oficial Del Orgullo.” Accessed September 27, 2022. <https://www.madridorgullo.com/home/que-es-mado>.
- Rodríguez, Ana María. “Confirman la primera muerte por viruela del mono en España.” *elconfidencial.com*, July 29, 2022. [https://www.elconfidencial.com/espana/2022-07-29/confirmado-el-primer-fallecido-en-espana-por-viruela-del-mono\\_3469025/](https://www.elconfidencial.com/espana/2022-07-29/confirmado-el-primer-fallecido-en-espana-por-viruela-del-mono_3469025/).
- “Sauna Paraíso Madrid (@sauna\_paraiso) • Instagram Photos and Videos.” Accessed September 25, 2022. <https://www.instagram.com/p/Cd73uWRjZhW/?hl=en>.
- “Second Meeting of the International Health Regulations (2005) (IHR) Emergency Committee Regarding the Multi-Country Outbreak of Monkeypox.” Accessed May 15, 2023. [https://www.who.int/news/item/23-07-2022-second-meeting-of-the-international-health-regulations-\(2005\)-\(ihr\)-emergency-committee-regarding-the-multi-country-outbreak-of-monkeypox](https://www.who.int/news/item/23-07-2022-second-meeting-of-the-international-health-regulations-(2005)-(ihr)-emergency-committee-regarding-the-multi-country-outbreak-of-monkeypox).
- Semana. “Comunidad gay de España se resigna a la abstinencia para protegerse de la viruela del mono.” *Semana*, July 31, 2022, sec. RSC. <http://global.factiva.com/redir/default.aspx?P=sa&an=RVSEMCO020220731ei7v001e2&cat=a&ep=ASE>.
- Severe Malaria Observatory. “Nigeria Health System.” Accessed December 18, 2022.

- 
- <https://www.severemalaria.org/countries/nigeria/nigeria-health-system>.
- Sheikh, Knvul. “How Serious Is Monkeypox?” *The New York Times*, October 7, 2022, sec. Well. <https://www.nytimes.com/article/monkeypox-virus-covid.html>.
- Simon, Felix and Chico Camargo, “Autopsy of a Metaphor: The Origins, Use and Blind Spots of the ‘Infodemic’,” *New Media & Society* (2021), <https://journals.sagepub.com/doi/10.1177/14614448211031908#bibr84-14614448211031908>
- Simón, Laura. “Salud Pública valora traer una nueva vacuna de la viruela para controlar la transmisión de la viruela del mono.” *Antena3*, May 19, 2022. [https://www.antena3.com/programas/espejo-publico/noticias/salud-publica-confirma-que-transmision-viruela-mono-sea-mediante-relaciones-sexuales-aunque-trabaja-esa-hipotesis\\_20220519628643bf2c207f000187b157.html](https://www.antena3.com/programas/espejo-publico/noticias/salud-publica-confirma-que-transmision-viruela-mono-sea-mediante-relaciones-sexuales-aunque-trabaja-esa-hipotesis_20220519628643bf2c207f000187b157.html).
- Sirleaf Johnson, Ellen, and Helen Clark. “A Road Map for a World Protected from Pandemic Threats.” The Independent Panel for Pandemic Preparedness & Response, May 2023. [https://live-the-independent-panel.pantheonsite.io/wp-content/uploads/2023/05/Final-Road-Map-Report\\_May-2023\\_Interactive.pdf](https://live-the-independent-panel.pantheonsite.io/wp-content/uploads/2023/05/Final-Road-Map-Report_May-2023_Interactive.pdf).
- Smith, Charlie. “Dr. Bonnie Henry Says That Monkeypox Is Presenting in B.C. ‘a Little Bit Different’ than How It Appears in Nigeria.” *The Georgia Straight*, August 8, 2022. <https://www.straight.com/living/dr-bonnie-henry-says-that-monkeypox-is-presenting-in-bc-a-little-bit-different-than-how-it>.
- Smith, Jessica. “Ontario Expands Monkeypox Vaccine Eligibility to More LGBTQ People, Sex Workers | CP24.Com.” *CP24*, August 25, 2022. <https://www.cp24.com/news/ontario-expands-monkeypox-vaccine-eligibility-to-more-lgbtq-people-sex-workers-1.6042240>.
- Spicknall, Ian H. “Modeling the Impact of Sexual Networks in the Transmission of Monkeypox Virus Among Gay, Bisexual, and Other Men Who Have Sex With Men — United States, 2022.” *MMWR. Morbidity and Mortality Weekly Report* 71 (2022). <https://doi.org/10.15585/mmwr.mm7135e2>.
- Sullivan, Becky, and Michael Douclev. “Monkeypox Isn’t like COVID-19 — and That’s a Good Thing.” *NPR*, May 24, 2022, sec. Science. <https://www.npr.org/2022/05/24/1101003523/monkeypox-covid-19-differences>.
- Sun, Lena H., Dan Diamond, and Fenit Nirappil. “U.S. Monkeypox Response Mirrors Early Coronavirus Missteps, Experts Say.” *Washington Post*, June 24, 2022. <https://www.washingtonpost.com/health/2022/06/23/monkeypox-response-biden-administration/>.
- Telemadrid. “En el metro con viruela del mono: la denuncia de un médico que ya se ha hecho viral.” *Telemadrid*, July 31, 2022. <https://www.telemadrid.es/salud/En-el-metro-con-viruela-del-mono-la-denuncia-de-un-medico-que-ya-se-ha-hecho-viral-0-2473852592--20220731085700.html>.
- The Lesbian, Gay, Bisexual & Transgender Community Center. “COVID-19 and MPV (Monkeypox) Information.” The Lesbian, Gay, Bisexual & Transgender Community Center, 2022. <https://gaycenter.org/public-health-safety/>.

- 
- The White House. "FACT SHEET: Biden-Harris Administration's Monkeypox Outbreak Response." The White House, June 28, 2022. <https://www.whitehouse.gov/briefing-room/statements-releases/2022/06/28/fact-sheet-biden-harris-administrations-monkeypox-outbreak-response/>.
- . "FACT SHEET: White House Announces New Actions to Combat Monkeypox Outbreak." The White House, August 18, 2022. <https://www.whitehouse.gov/briefing-room/statements-releases/2022/08/18/fact-sheet-white-house-announces-new-actions-to-combat-monkeypox-outbreak/>.
- Tolu-Kolawole, Deborah. "Lagos, Adamawa Lead as NCDC Confirms 15 Monkeypox Cases." *The Punch*, May 10, 2022. <http://global.factiva.com/redirect/default.aspx?P=sa&an=TPUNC00020220511ei5a0000k&cat=a&ep=ASE>.
- Tomes, Nancy. "A 'Creation of the Media': AIDs, Sensationalism, and Media Portrayals of Epidemic Risk." *Feminist Media Histories* 8, no. 4 (October 1, 2022): 85–116. <https://doi.org/10.1525/fmh.2022.8.4.85>.
- Tooley, Len. "Igotmpox.Com." [igotmpox.com](http://www.igotmpox.com), 2022. <https://www.igotmpox.com>.
- Toronto, City of. "Monkeypox." City of Toronto. City of Toronto, May 27, 2022. Toronto, Ontario, Canada. <https://www.toronto.ca/community-people/health-wellness-care/health-programs-advice/monkeypox/>.
- . "Toronto Public Health Holds Vaccination Clinics to Protect Community against Monkeypox." City of Toronto. City of Toronto, June 11, 2022. Toronto, Ontario, Canada. <https://www.toronto.ca/news/toronto-public-health-holds-vaccination-clinics-to-protect-community-against-monkeypox/>.
- "Toronto Man Speaks of Excruciating Pain, Isolation during Monkeypox Infection | CP24.Com." Accessed October 20, 2022. <https://www.cp24.com/news/dancer-tells-of-excruciating-pain-isolation-and-stigma-of-monkeypox-infection-1.5997947>.
- Toronto Public Health [@TOPublicHealth]. Twitter Post. *Twitter*, July 27, 2022, 10:00 AM, <https://twitter.com/TOPublicHealth/status/1552338215230738433>.
- . Twitter Post. *Twitter*, July 8, 2022 10:00AM, <https://twitter.com/TOPublicHealth/status/1545452743703367681>.
- Tsekouras, Phil. "Toronto Investigating First Suspected Case of Monkeypox." CP24.com, May 21, 2022. <https://www.cp24.com/news/toronto-investigating-first-suspected-case-of-monkeypox-1.5913928>.
- Twitter. "Equality California (@eqca) / Twitter," 2022. <https://twitter.com/eqca>.
- Tworek, Heidi. "Why Disease Names Matter." *Royal Society of Canada*, RSC COVID-19 Series, no. 99 (March 24, 2021).
- Tworek, Heidi, Ian Beacock, and Eseohé Ojo. "Democratic Health Communications during Covid-19: A RAPID Response." Vancouver: UBC Centre for the Study of Democratic Institutions, September 2020. <https://democracy.ubc.ca/health/democratic-health-communications-during-covid-19/>.

- 
- “UNAIDS Warns That Stigmatizing Language on Monkeypox Jeopardises Public Health.” Accessed April 25, 2023. [https://www.unaids.org/en/resources/presscentre/pressreleaseandstatementarchive/2022/may/20220522\\_PR\\_Monkeypox](https://www.unaids.org/en/resources/presscentre/pressreleaseandstatementarchive/2022/may/20220522_PR_Monkeypox).
- Vancouver Coastal Health [@VCHhealthcare]. Twitter Post. *Twitter*, August 15, 2022, 10:48 AM, <https://twitter.com/VCHhealthcare/status/1559235603891646464>.
- . Twitter Post. *Twitter*, July 5, 2022, 3:00 PM, <https://twitter.com/VCHhealthcare/status/1544441013543981056>.
- “Video: ‘There’s a Stigma’: Gay Men on Government’s Response to Monkeypox | CNN.” Accessed May 4, 2023. <https://www.cnn.com/videos/health/2022/08/05/monkeypox-vaccine-shortage-lgbtq-gay-men-stigma-lead-culver-pkg-vpx.cnn>.
- WHO. “Communicating for Health.” World Health Organization, 2017. <https://www.who.int/about/communications>.
- . “Fifth Meeting of the International Health Regulations (2005) (IHR) Emergency Committee on the Multi-Country Outbreak of Mpox (Monkeypox),” 2023. [https://www.who.int/news/item/11-05-2023-fifth-meeting-of-the-international-health-regulations-\(2005\)-\(ihr\)-emergency-committee-on-the-multi-country-outbreak-of-monkeypox-\(mpox\)](https://www.who.int/news/item/11-05-2023-fifth-meeting-of-the-international-health-regulations-(2005)-(ihr)-emergency-committee-on-the-multi-country-outbreak-of-monkeypox-(mpox)).
- . “Infodemic,” 2022. <https://www.who.int/health-topics/infodemic>.
- . “Multi-Country Outbreak of Monkeypox, External Situation Report #5 - 7 September 2022.” WHO, September 7, 2022. <https://www.who.int/publications/m/item/multi-country-outbreak-of-monkeypox--external-situation-report--5---7-september-2022>.
- . “Risk Communications and Community Engagement Public Health Advice on Understanding, Preventing and Addressing Stigma and Discrimination Related to Monkeypox,” 2022. [https://cdn.who.int/media/docs/default-source/documents/emergencies/final-rcce-interim-guidance-on-using-inclusive-language-to-address-stigma-and-discrimination-1-september-2022.pdf?sfvrsn=b5749547\\_13](https://cdn.who.int/media/docs/default-source/documents/emergencies/final-rcce-interim-guidance-on-using-inclusive-language-to-address-stigma-and-discrimination-1-september-2022.pdf?sfvrsn=b5749547_13).
- . “Speech by Dr. Tedros, Munich Security Conference (February 11, 2020),” February 16, 2020. <https://www.who.int/director-general/speeches/detail/munich-security-conference>.
- . “WHO Director-General’s Opening Remarks at the COVID-19 Media Briefing— 14 June 2022.” Accessed April 26, 2023. <https://www.who.int/director-general/speeches/detail/who-director-general-s-opening-remarks-at-the-covid-19-media-briefing--14-june-2022>
- . “WHO Director-General’s Statement at the Press Conference Following IHR Emergency Committee Regarding the Multi-Country Outbreak of Monkeypox - 23 July 2022.” Accessed May 15, 2023. <https://www.who.int/director-general/speeches/detail/who-director-general-s-statement-on-the-press-conference-following-IHR-emergency-committee-regarding-the-multi--country-outbreak-of-monkeypox--23-july-2022>.
- . “WHO Recommends New Name for Monkeypox Disease,” November 28, 2022. <https://www.who.int/news/item/28-11-2022-who-recommends-new-name-for>

---

monkeypox-disease.

- . “WHO Working Closely with Countries Responding to Monkeypox.” Accessed March 13, 2023. <https://www.who.int/news/item/20-05-2022-who-working-closely-with-countries-responding-to-monkeypox>.