New York City Council Technology Chair Jennifer Gutiérrez, Health Chair Lynn Schulman, and Council Members Respond to City’s Failure of Monkeypox Vaccine Roll Out; Call for Emergency Hearing

NEW YORK - City Council Member and Chair of the Technology Committee Jennifer Gutiérrez and Health Chair Lynn Schulman are calling for an emergency Oversight Hearing to address the failure of the recent monkeypox vaccine rollout, raising concerns about Mayor Adams’ administration’s emergency preparedness, and the capability of New York City’s technology infrastructure to address another pandemic and any other immediate issues of public health.

Upon Mayor Eric Adams’ inauguration, he invested significant resources in DoITT’s reorganization and rebranding as the Office of Technology and Innovation (OTI). However, OTI’s involvement in the monkeypox vaccine rollout is either limited or nonexistent, while the Department of Health has stumbled in the vaccine platform’s implementation.

New York City’s monkeypox vaccine rollout continues to be marred by problems - both from health equity and technological perspectives. The first 1000 available vaccines were announced only on Twitter at a single location in Chelsea in Manhattan. On July 6th, within a few hours of releasing another round of appointments, the Department of Health announced there was an “unfortunate glitch” and the appointments were gone. On Tuesday, July 12th, the online appointment scheduler crashed 30 minutes after the Department of Health announced limited slots were available. This crash was attributed to an unexpected level of traffic - raising questions about why the Department of Health did not anticipate this demand after the past two years.

After the Department of Health was tasked with building the Covid-19 vaccine platform in 2021, significant issues of functionality and access required former Mayor de Blasio to shift the platform to be built and managed by the Department of Information Technology and Telecommunications (DoITT), in partnership with the Department of Health and Hospitals (DOHMH). New York City then built out one of the most robust responses to the Covid-19 pandemic: from a functioning vaccine website that integrated multiple health care providers, to a robust testing network for individuals and schools alike, to a comprehensive outreach system, reaching millions of New Yorkers by phone, text, and door knocking. Those teams worked within the New York City Department of Health and Mental Hygiene and worked closely with DoITT on implementation.

But the teams that built and kept those systems going were functionally disbanded at the end of June 2022.

“The City’s response to the monkeypox public health crisis has been wholly inadequate and deeply inequitable. Given the Mayor’s investments in reorganizing and rebranding the Department of Information Technology and Telecommunications as the Office of Technology and Innovation, it is deeply concerning that they are not leading the technological aspects of the vaccine response,” said Council Member Jennifer Gutiérrez. “This administration dissolved our Covid defense infrastructure as cases continue to rise, and they are approaching the issue of monkeypox seemingly without incorporating any previous learnings about the importance of a robust, widely accessible vaccine platform. We are no longer in an era in which these outbreaks should come as a surprise, but this response looks as if the administration is starting from scratch.”

“The City’s response to the Monkeypox outbreak reinstates deep inequities the LGBTQIA+ community is already all too familiar with,” said Council Member & Health Chair Lynn Schulman. “Outbreaks like this should be met with adequate supplies, communication, and resources, but my community has once again been dealt an empty hand that we remember from the traumatic days of the HIV/AIDS epidemic. The needs of the LGBTQIA+ community need to be put at the forefront so history does not repeat itself, and as Health Chair I will stand with the LGBTQIA+ community in holding the City accountable for these shortcomings and ensuring the needs of our community are appropriately addressed moving forward.”

“We spotted the danger of Monkeypox from a mile away,” said Council Member Chi Ossé. “We had time to prepare, as well as an excellent template for combating an outbreak, following the City’s response to the Covid-19 pandemic. These early failures are unacceptable. Inequitable and inaccessible vaccine distribution is dangerous. We still have an opportunity to get
ahead of this virus, but only if we act quickly with the tools at our disposal and the hard-learned lessons of these past two years."

"The City’s response to the surge of monkeypox cases has been distressing, not to mention inequitable. The availability of vaccine appointments has largely been announced on Twitter, failing to reach the majority of New Yorkers. Only two (soon to be three) clinics distribute the vaccine and offer very little public notice. In Harlem, the line to be vaccinated reportedly stretched around the block. The vaccine appointment portal crashed immediately upon launching, which was the second time this occurred since the vaccine has been made available. Over the last two years, we’ve seen and experienced the effects of what it means to be woefully unprepared to handle a public health emergency with no infrastructure in place for support. This time should be different. New Yorkers have every right to expect that we have the tools we need to ensure we curb infections efficiently and effectively,” said Council Member Tiffany Caban.

“Over the last few years, we’ve witnessed the importance technology plays in keeping us safe during public health emergencies—from adequate test scheduling infrastructure to contact tracing and vaccination passes. Yet, even with this knowledge, we continue to fumble the rollout of an already-available vaccine,” said Council Member Crystal Hudson. “The Department of Health and Mental Hygiene needs to come before the Council and explain to all New Yorkers why their digital infrastructure was once again unprepared to protect us from an outbreak.”

There are currently 267 reported monkeypox cases in New York City, with cases steadily increasing. These cases are currently the most prevalent and pose the highest risk to, the LGBTQ+ community. This administration’s clear lack of preparation, as well as disinvestment from the entities that would enable equitable protection for New Yorkers raises troubling questions about Mayor Adams’ priorities, especially in relation to the clear threat monkeypox poses to the LGBTQ+ community.

Council Member Gutiérrez and Council Member Schulman, Chair of the Committee on Health, call on OTI and DOHMH to provide transparency around the failures in the monkeypox vaccine rollout, and their immediate plans to provide equitable and comprehensive access to vaccines for New Yorkers in this public health crisis, and future ones to come.

###