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The Importance of Having Open Conversations about MPox in a way that Minimizes Stigma and Discrimination

The [World Health Organization \(WHO\)](#) and the [United States](#) have both declared Monkeypox (also known as MPox or MPV) a public health emergency. The last time this declaration occurred was January 2020 with SARS-CoV-2 COVID-19. Unlike the initial COVID outbreak, testing and vaccination is available for MPox.

Because of access to testing and contact tracing, we know that cases are increasing in Massachusetts. As of this writing, over 130 cases have been confirmed in Massachusetts. Our ability to maintain an accurate count, which is essential to protecting public health, is possible because people have been willing to engage in open conversations about MPox; this must remain the case.

We use the terms “MPox” or “MPV” to tackle any emerging stigma associated with the disease. This choice of language is important because the people who are currently most at risk of getting the disease are [cisgender men who identify as gay, bisexual, or as a man who has sex with men](#) (which does not only include LGBTQ+ individuals). It is critical that we ensure that information about the disease, its prevention, and its treatment reaches those who are most likely to be exposed to it in a way that is respectful, non-stigmatizing, and culturally attuned. At the same time, it is important to recognize that MPox can and does affect anyone of any sexual orientation or gender identity. Reducing the stigma around MPox supports open and honest communication, and helps public health officials to better understand the scope and spread of the disease. Without accurate information, discourse could easily become homophobic, which is also acutely harmful to the health of the LGBTQ+ community.

Anyone who has close contact with someone who is infected with MPox is at risk. MPox is not a sexually transmitted disease. It is often spread through close, personal, skin-to-skin contact but also can be spread through touching objects, fabrics (such as sheets, towels, or clothing), or through respiratory secretions during prolonged face-to-face contact.

Common symptoms of MPox include flu-like symptoms such as fever, chills, fatigue, or body aches and skin lesions like sores or blisters that can occur before or after flu-like symptoms. Anyone not feeling well should avoid attending larger events to reduce the risk of spreading MPox as well as COVID.

If you do notice an unexplained rash or sore, you can reduce the risk of transmission by avoiding skin-to-skin contact. It is also essential to have open conversations with sexual partners about your status, and theirs. Do not blame or shame anyone – including yourself. Don't panic, and seek medical attention if you have a new or unexplained rash especially in the genital or rectal area. You can get tested and find ways to keep you, your partners, and other close contacts safe.

Currently, there are two sites in Western MA where the public can receive monkeypox vaccine as post-exposure treatment: Tapestry (413)586-2016 and Baystate Brightwood Health Center (413)794-4458. Vaccine supplies are limited, and eligibility depends on whether you are a known or presumed contact of an MPox case. For more information about whether you may be eligible to receive the vaccine or to find out about other locations where the vaccine is being offered, visit; www.mass.gov/info-details/monkeypox-vaccinations#eligibility

Because of limited vaccine availability, we strongly recommend that individuals work to share accurate education around MPox, noting that this requires a careful balance of being informative without being stigmatizing. We have the

opportunity to learn from the past, namely the HIV/AIDS pandemic, and work together to keep our communities healthy.

For general Monkeypox information visit: www.cdc.gov/poxvirus/monkeypox/response/2022/index.html

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