Highlights of GAO-24-106276, a report to congressional requesters

Why GAO Did This Study

State and local jurisdictions are often first to detect and respond to public health events. However, if their public health and medical capabilities need support, as with mpox, HHS is charged with coordinating federal assistance to supplement the response.

GAO was asked to review the federal response to the mpox public health emergency. In this report, GAO (1) describes the federal response to the mpox outbreak, (2) assesses the extent to which the federal mpox response presented challenges similar to those experienced in past public health emergencies, and (3) assesses federal efforts to address recurring public health emergency challenges.

GAO reviewed HHS documents and mpox infection data from May 18, 2022, to January 31, 2023. GAO interviewed officials from the Department of Homeland Security, HHS, and 14 selected jurisdictions (six states, the District of Columbia, and seven localities), chosen based on case rates and demographic and geographic diversity. GAO received written responses from the White House mpox response team. GAO also reviewed HHS after-action processes and documents.

What GAO Recommends

GAO is making two recommendations to HHS: to develop and implement a coordinated, department-wide afteraction program that (1) encourages after-action collaboration across HHS component agencies, and (2) includes relevant external stakeholders involved in each response when identifying challenges and associated solutions. HHS concurred with both recommendations.

View GAO-24-106276. For more information, contact Mary Denigan-Macauley at (202) 512-7114 or Deniganmacauleym@gao.gov.

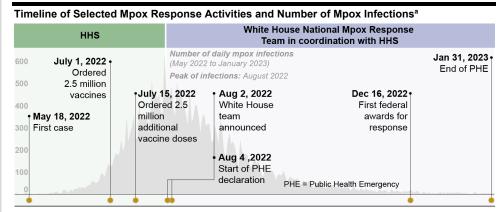
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PUBLIC HEALTH PREPAREDNESS

Mpox Response Highlights Need for HHS to Address Recurring Challenges

What GAO Found

Mpox, a serious infectious disease caused by a virus in the same family as smallpox, experienced an unprecedented global outbreak in 2022. The Department of Health and Human Services (HHS) led the initial federal response in the U.S., beginning in May 2022. According to a White House press release, a White House mpox response team was established and assumed leadership of the federal response, and the Secretary of Health and Human Services declared mpox a public health emergency in early August 2022. The federal mpox response included providing vaccines to jurisdictions for the prevention of mpox, among other efforts.



Source: GAO analysis of Department of Health and Human Services (HHS) information. | GAO-24-106276

^aThe decline in daily mpox cases was likely due to the combined effect of events in figure above.

The six states, the District of Columbia, and seven local jurisdictions GAO interviewed described challenges with HHS's initial response to mpox that were similar to those GAO identified in HHS's response to past emergencies. For example, jurisdictions noted challenges with communication and the availability of vaccines, tests, and treatments, among other problems. Similar persistent and recurring deficiencies led GAO to add HHS's leadership and coordination of public health emergencies to its High-Risk List in January 2022, calling for an HHS leadership commitment to transform its efforts.

HHS—as the designated lead for the federal public health and medical response to emergencies—does not have a coordinated, department-wide after-action program to identify and resolve recurring emergency response challenges. While some component agencies within HHS have after-action programs, these agencies work independently without coordinating with each other, and do not always engage relevant external stakeholders in identifying challenges and associated solutions. GAO's past work has shown the benefits of coordination and including stakeholders when addressing challenges. Embracing a coordinated, department-wide after-action program for each response that includes external stakeholders would help HHS develop informed and comprehensive solutions. Such solutions should, in turn, strengthen HHS's ability to respond to future emergencies, including those that could be more infectious and lethal than mpox.