Florida Public Health Preparedness at a Crossroads

Policy Alignment During Active Measles Response

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This Is Not a Hypothetical Scenario

- Florida counties are managing active measles transmission
- Public health departments are operating under heightened alert protocols
- Outbreak response requires coordination across health systems, schools, and communities

The Preparedness Contradiction

Public Health Reality

Active outbreak response in progress

Dependence on high vaccination coverage

Need for rapid containment measures

Policy Direction

Expansion of nonmedical vaccine exemptions

Reduction in emergency response authority

New administrative barriers to routine immunization

Sources: Florida Senate Bill Analysis, SB 1756 (2026); Florida DOH outbreak reporting

Why Measles Changes the Preparedness Equation

- Measles is among the most contagious respiratory viruses
- Requires 95%+ community immunity to prevent sustained transmission
- Spreads rapidly in schools, universities, and congregate settings
- Vulnerable populations include immunocompromised individuals and infants too young to vaccinate

Preparedness Is Not Messaging—
It Is Systems Capacity

Legal Authority: Clear statutory tools for outbreak response

Surveillance Systems: Real-time case reporting and epidemiological tracking

Workforce Capacity: Adequate staffing for investigation, contact tracing, and community engagement

Prevention Tools: High baseline immunity and accessible post-exposure prophylaxis

Operational Barriers to Effective Response

- Expanded nonmedical exemptions during active outbreaks
- Delayed or inconsistent public case reporting
- Reduced emergency response authority
- Administrative friction in routine prevention workflows

What Effective Preparedness Infrastructure Requires

- Temporary policy safeguards activated during declared outbreaks
- Transparent, timely public reporting with county-level specificity
- Clear emergency authority with defined scope and sunset provisions
- Surge support for counties managing active transmission

This Analysis Is About Risk Management, Not Belief Systems

- Preparedness policy protects immunocompromised populations who cannot be vaccinated
- Outbreak control keeps schools, workplaces, and healthcare facilities operational
- Evidence-based prevention reduces healthcare system burden and community disruption

"Preparedness means preserving prevention tools during outbreaks, not weakening them."

Questions Policymakers Must Address

- How does exemption expansion impact county-level outbreak control during active transmission?
- What protection protocols exist for medically fragile populations if coverage rates decline?
- What is the justification for reducing emergency response authority during documented communicable disease activity?
- What real-time reporting standards ensure communities can make informed decisions during outbreaks?

What Should Happen Now

- Pause exemption expansion during declared outbreak periods
- Strengthen reporting standards for 48–72 hour public case updates
- Preserve emergency response authority with clear scope and accountability measures
- Provide surge support to counties managing active transmission

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Professional Service

- Co-Chair, Policy Committee, American Public Health Association Human Rights Forum
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Disclosure: This presentation reflects independent public health policy analysis and does not represent official positions of affiliated organizations.