

MAYOR OF LONDON

Emma Best AM

Chairman of the London Assembly Health
Committee
C/o Richard.Berry@london.gov.uk

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Date: 7 May 2026

Dear Emma,

Thank you for your letter as Chair of the London Assembly Health Committee regarding the recent measles outbreak in London and for setting out the Committee's findings and recommendations on the matter.

I fully recognise the seriousness of the recent measles outbreak in North London and the ongoing challenge of low vaccination uptake in parts of the capital. Measles is a highly infectious disease that poses a serious risk to public health, particularly for unvaccinated children. That is why I was grateful for the response led by the UK Health Security Agency and the NHS, working with London's local authorities. Their coordinated response to the outbreak has been critical in protecting communities.

As Mayor of London, I play my part to support partner efforts by ensuring Londoners have access to clear, reliable public health information. During the recent measles outbreak, I used my social media channels to amplify key public health messages – highlighting the rise in cases, the highly infectious nature of measles, and the importance of MMRV vaccination to prevent illness. I also encouraged Londoners to check their vaccination status with their GP and sought to provide reassurance about the safety and effectiveness of the vaccine.

However, as public health experts highlighted during the session, communications and campaigns alone are not a magic bullet when it comes to increasing vaccination uptake. That is why I have been pleased to see tailored messages where language, faith and culturally relevant campaigns are coupled with sustained, community-led engagement. Improving community trust in vaccination, along with greater access to services is essential to reaching people in a city as diverse as London – and especially those who face the greatest health inequalities.

Evidence consistently shows that locally tailored approaches, delivered through schools, faith organisations and community settings, are most effective in building trust and confidence in vaccination. I am aware that local health partners are doing a great deal of targeted engagement with communities, including workshops with the voluntary and community sectors and webinars with schools and early years settings, as well as engagement with local faith forums and target demographic groups.

To complement this work, I encouraged Greater London Authority (GLA) officers to reach out to networks that could further engage target communities around measles, ensuring that reliable health advice came directly from credible messengers and local leadership. This included sharing UK

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Health Security Agency (UKHSA) and NHS resources through organisations supporting newly arrived migrants and refugees and with schools, sharing materials with early years settings and families through our Healthy Early Years and Healthy Schools London networks, as well as through London Community Emergency Partnerships.

We have done this in response to the measles outbreak, but we have also supported national initiatives to improve vaccination uptake – including the *Why We Get Vaccinated* campaign – by sharing information and campaign materials directly with relevant networks through established channels.

In addition, the GLA Public Health Unit remains closely engaged in outbreak preparedness work and maintains regular contact with the UKHSA, the NHS and local health partners. This ensures that I, my Deputy Mayors, and senior leaders at the GLA, have timely sight of emerging public health risks and system pressures and that we can support with information sharing and partnership working where appropriate.

I share the Committee's view on the importance of improving the consistency of vaccination-status data collection and sharing to inform targeted interventions and long-term planning. As you will have heard during the session, these systems are led by national bodies and NHS commissioners. The GLA supports wider system planning and coordination through its involvement in the London Immunisation Board, which provides system-wide leadership and coordination to support vaccination uptake.

I hope this provides reassurance for how we work alongside – but do not replicate – the role of the wider health system in responding to outbreaks and improving vaccination uptake. The NHS, UKHSA, London boroughs and communities rightly lead in this space, as they hold the clinical expertise, operational responsibility and trusted relationship with the communities that are essential for effective delivery. In my role, I remain committed to working with all health partners to support an effective, joined-up, pan-London response that protects Londoners' health.

Yours sincerely,

A handwritten signature in blue ink, appearing to read 'Sadiq Khan', with a small number '2' written below the name.

Sir Sadiq Khan
Mayor of London