

Stopping Syphilis: The HHS Summer Seminar Series

Office of Infectious Disease and HIV/AIDS Policy
Office of the Assistant Secretary for Health

August 27, 2024



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Office of the
Assistant Secretary
for Health

Webinar Agenda

Topic
Welcome and Opening Remarks
Syphilis and Congenital Syphilis in American Indian and Alaska Native Communities
Regional Syphilis Partnership Summits Findings
Indian Country Congenital Syphilis Taskforce Themes
Q&A Session
Close

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Insights: Regional Syphilis Partnerships Summits and Indian Country Congenital Syphilis Taskforce Findings

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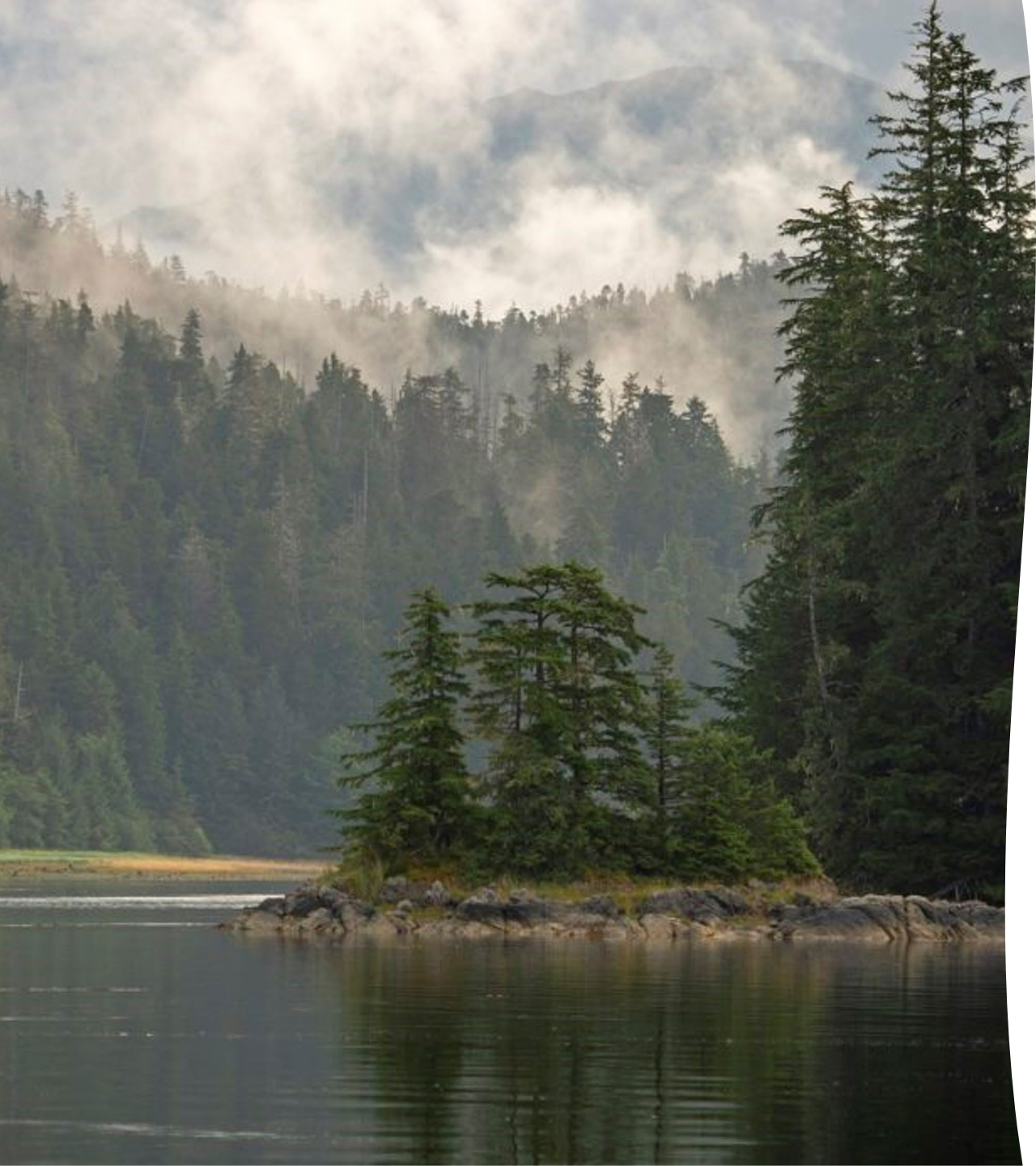


Insights: Regional Syphilis Partnerships Summits and Indian Country Congenital Syphilis Taskforce Findings

August 27, 2024

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Director, STI Programs
National Association of County & City Health Officials



Overview

The Need

The Context

The Work

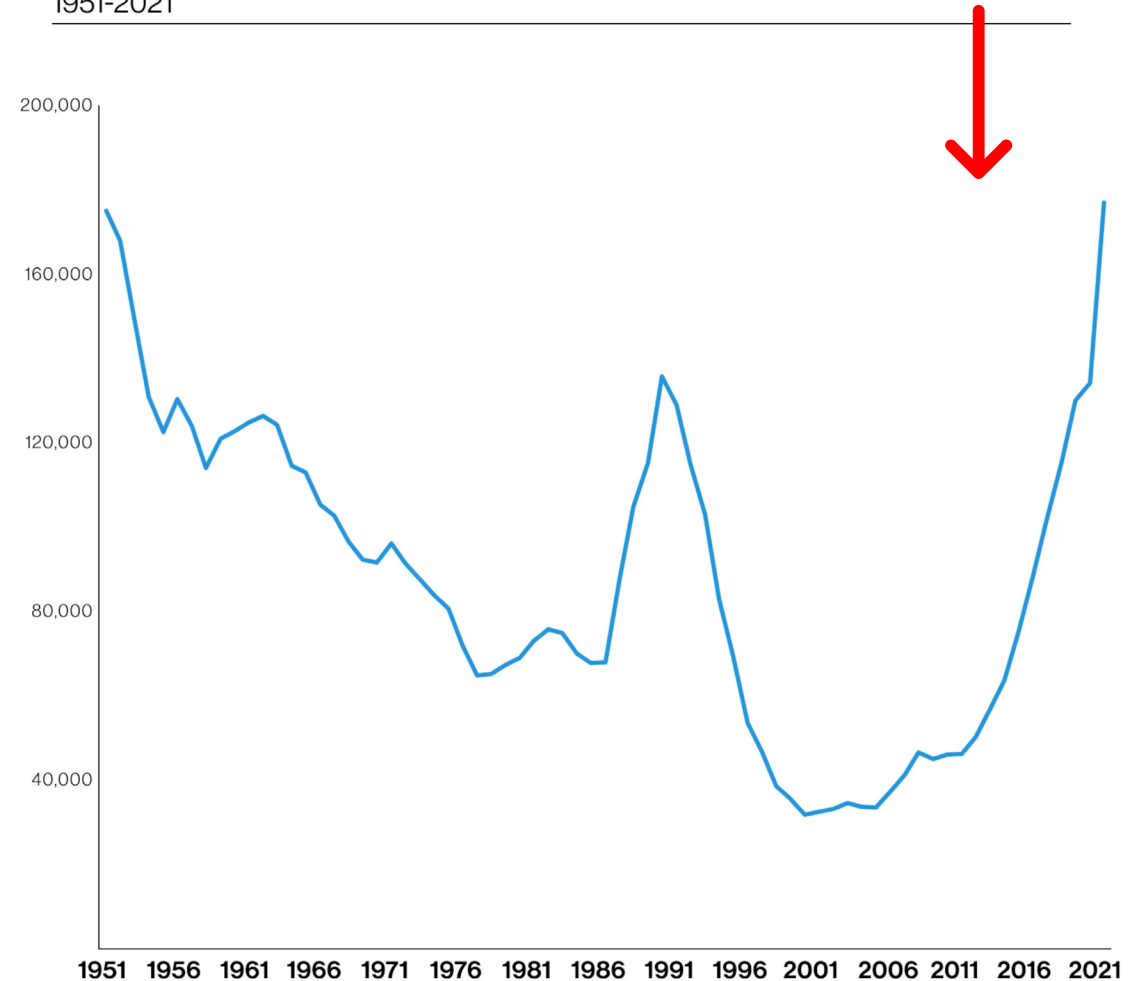
Regional Syphilis
Partnership Summits

Congenital Syphilis
Taskforce

A Way Forward

The Need

Syphilis Cases in the United States
1951-2021



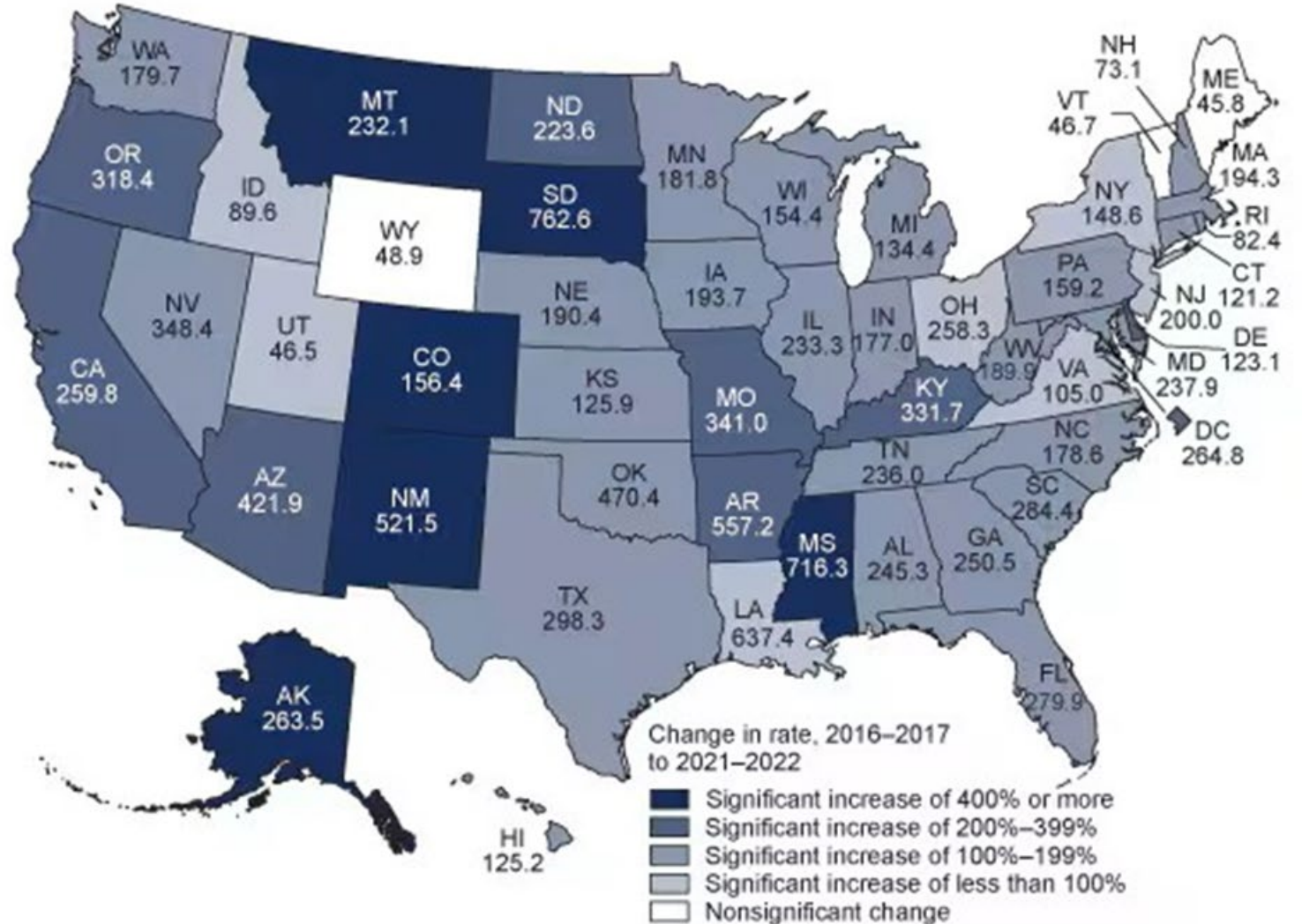
SOURCE: CDC

abc NEWS

<https://abcnews.go.com/Health/stis-including-syphilis-rose-2nd-year-pandemic-cdc/story?id=98478883>

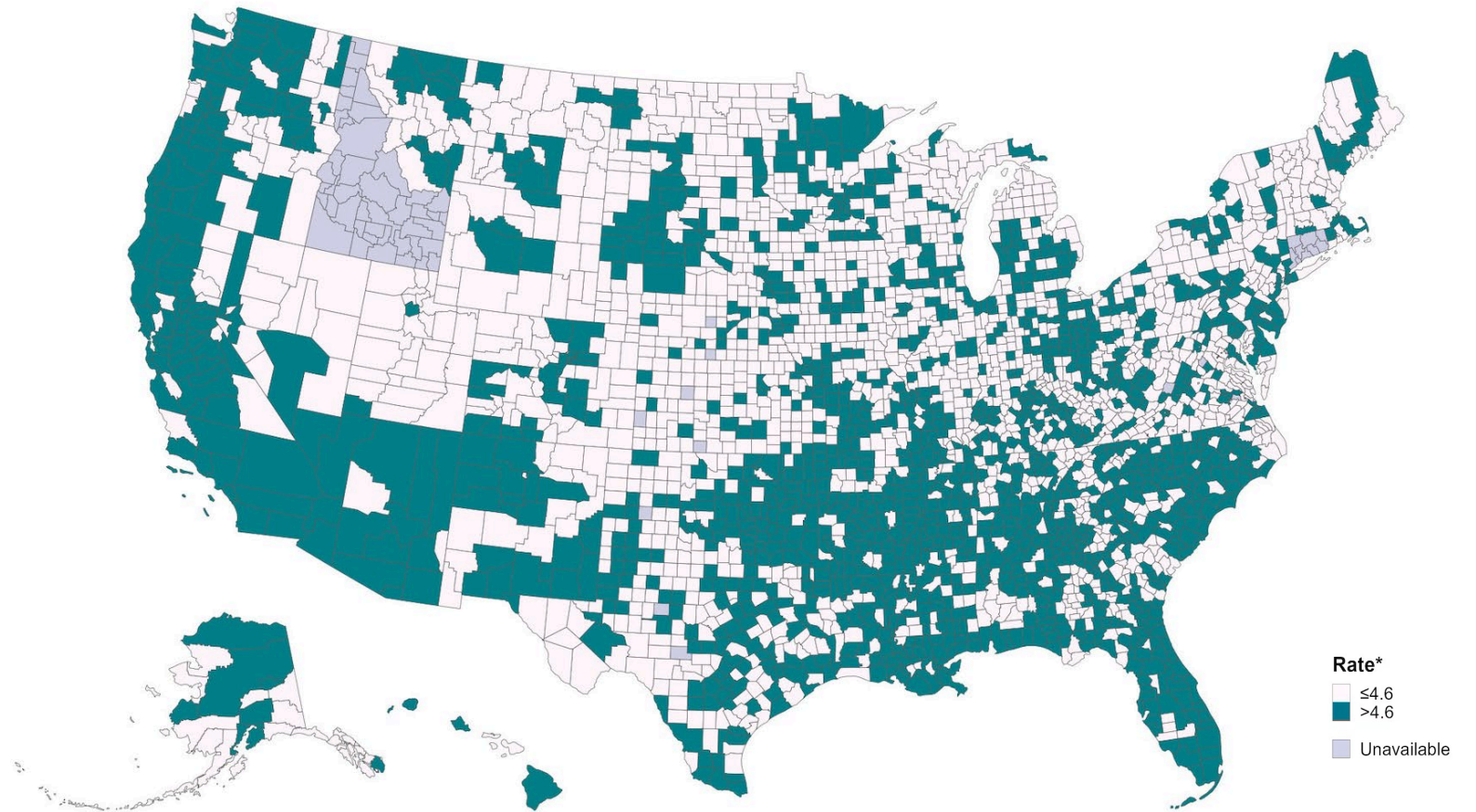
The Context

Maternal syphilis rate, by state for 2021–2022 combined, and change in rate from 2016–2017 combined to 2021–2022 combined



The Context

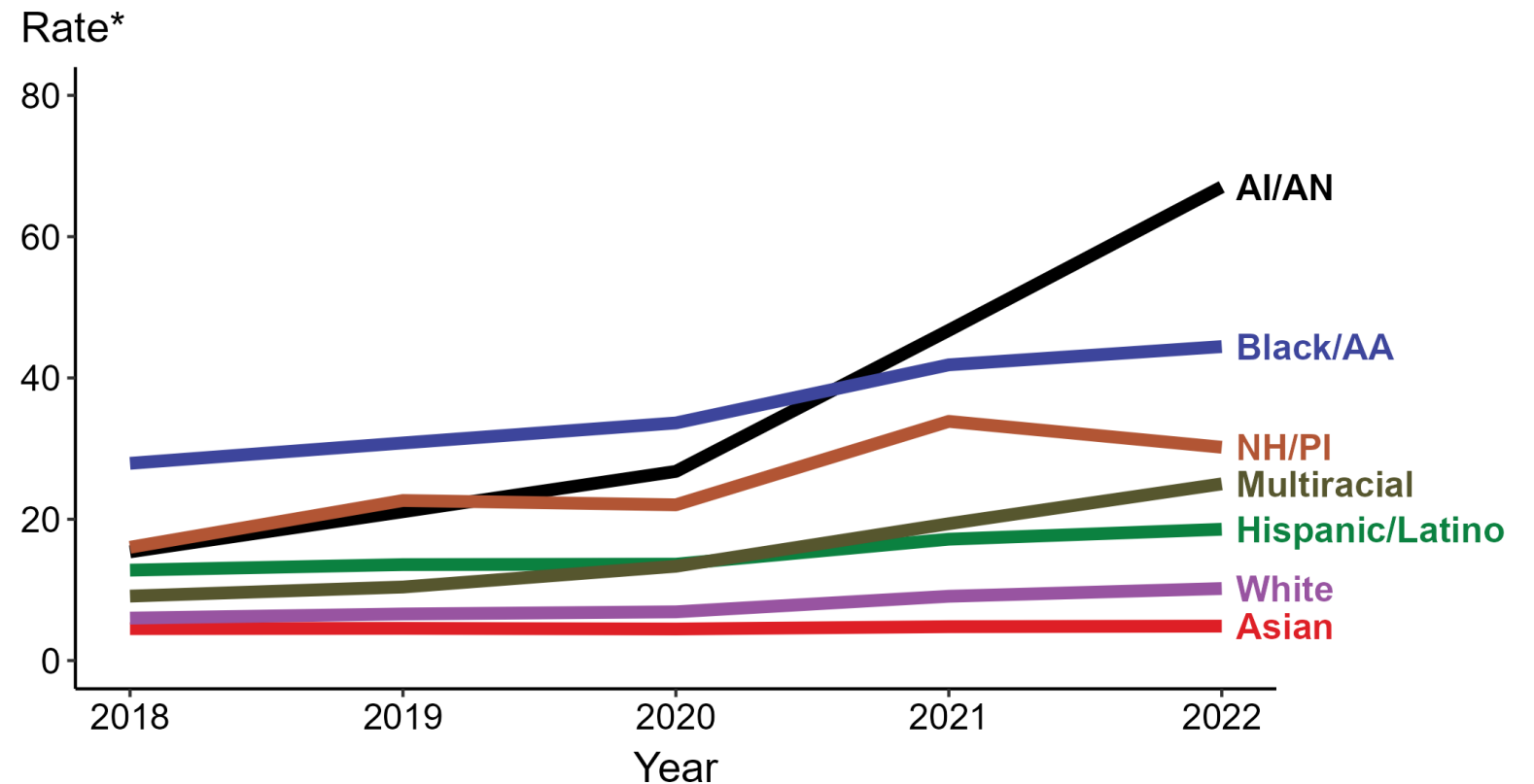
Primary and Secondary
Syphilis– Reported Cases
Among Women Aged 15-
44 Years by County, 2022



Continue to assess individual risk factors to determine screening needs*
Offer syphilis testing to all sexually active people aged 15-44 years**
Suppressed†

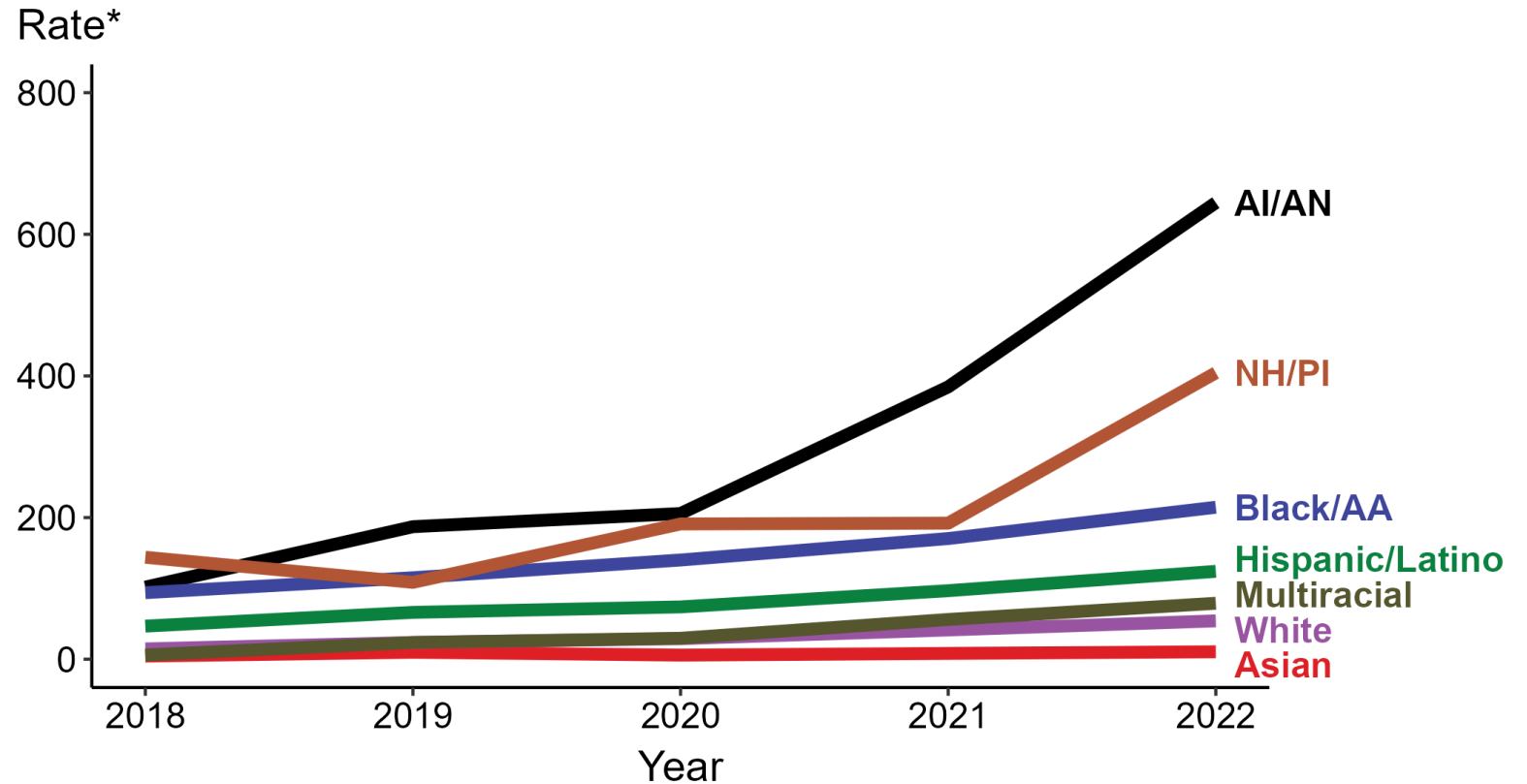
The Context

Primary and Secondary
Syphilis — Rates of
Reported Cases by
Race/Hispanic Ethnicity,
United States, 2018–2022



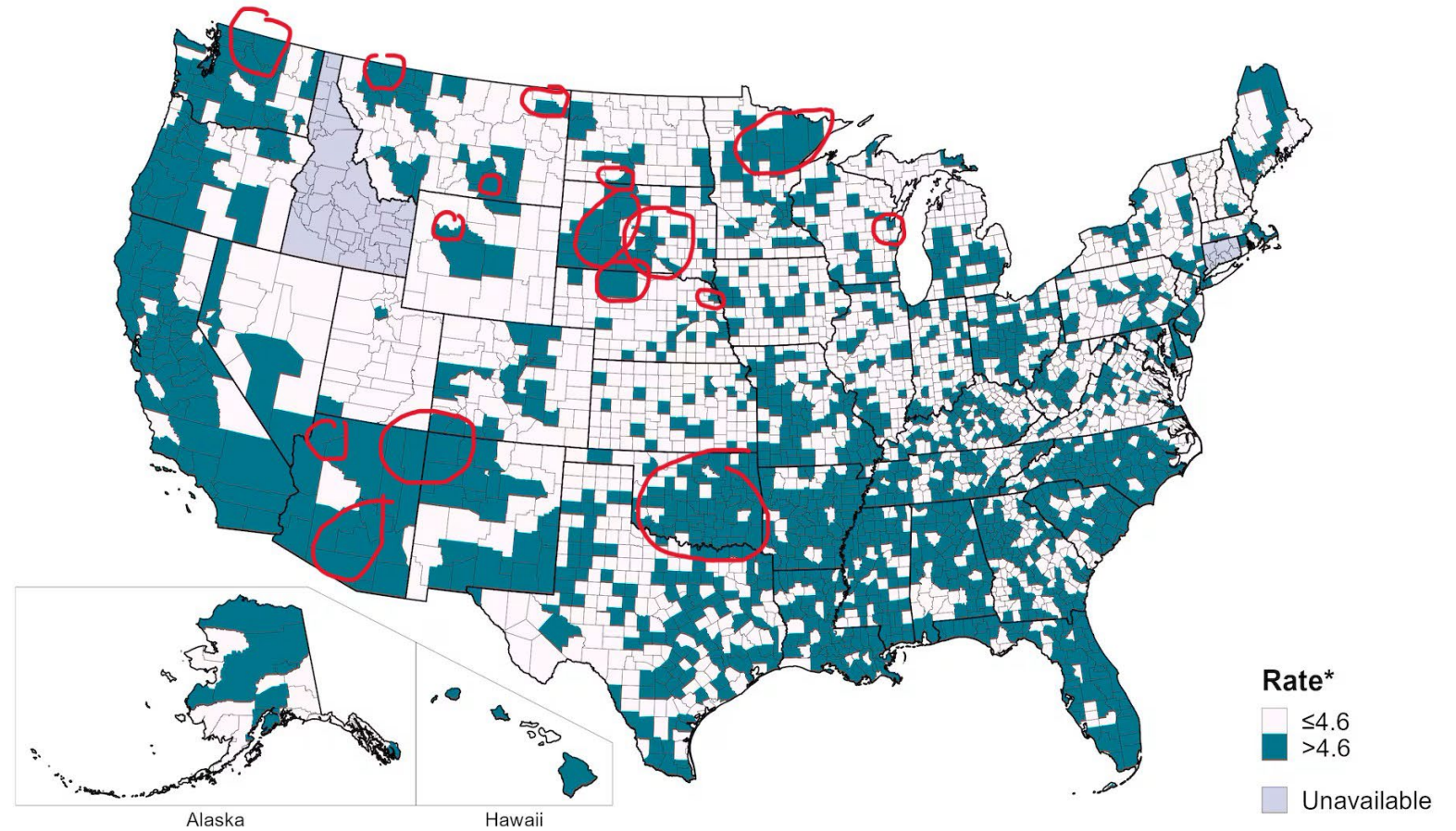
The Context

Congenital Syphilis —
Rates of Reported Cases
by Year of Birth,
Race/Hispanic Ethnicity of
Mother, United States,
2018–2022

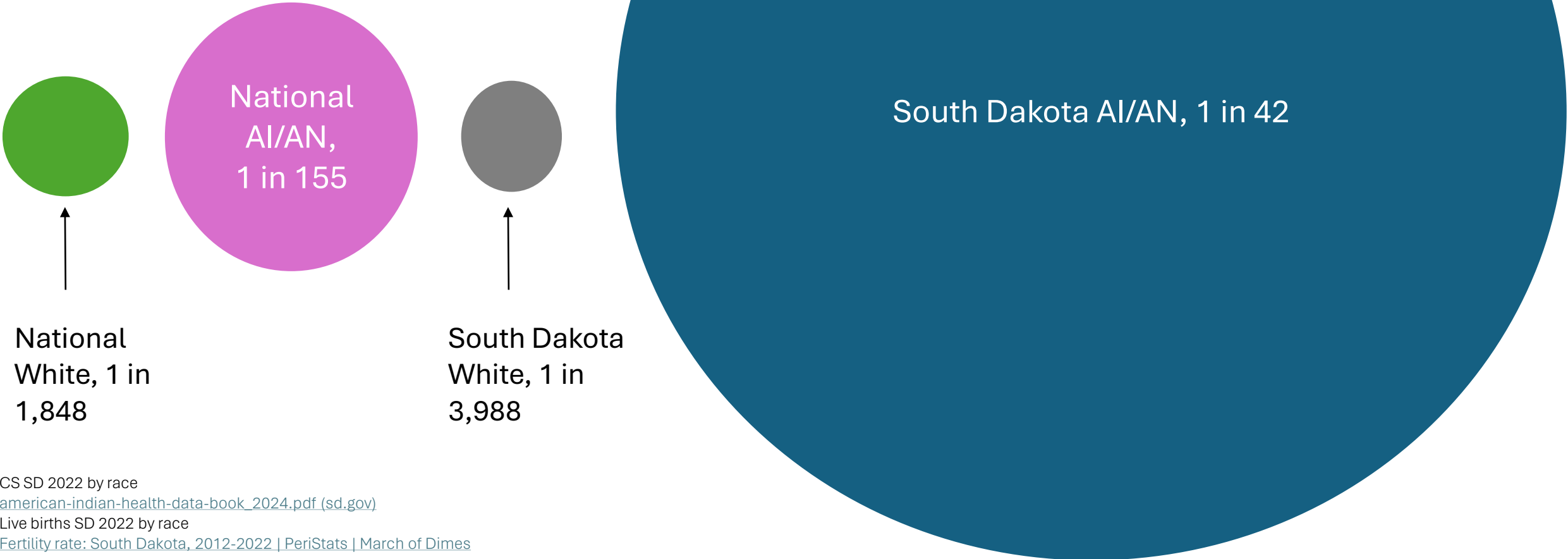


The Context

Primary and Secondary
Syphilis– Reported Cases
Among Women Aged 15-
44 Years by County, 2022

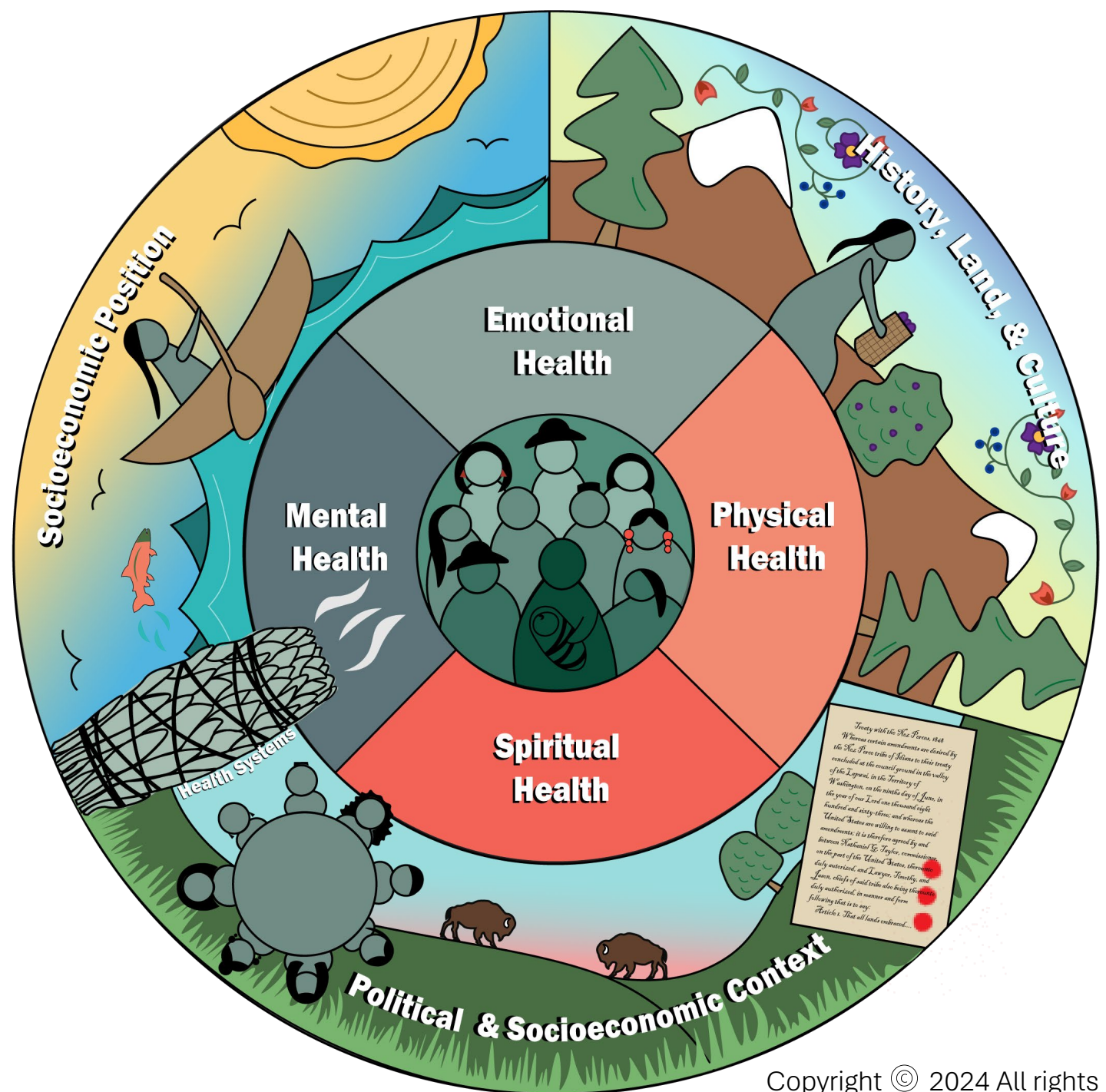


Cases of Congenital Syphilis per Live Births, 2022



CS SD 2022 by race
[american-indian-health-data-book_2024.pdf \(sd.gov\)](#)
Live births SD 2022 by race
[Fertility rate: South Dakota, 2012-2022 | PeriStats | March of Dimes](#)

The Context - SDoH



The Work – Regional Syphilis Partnership Summits

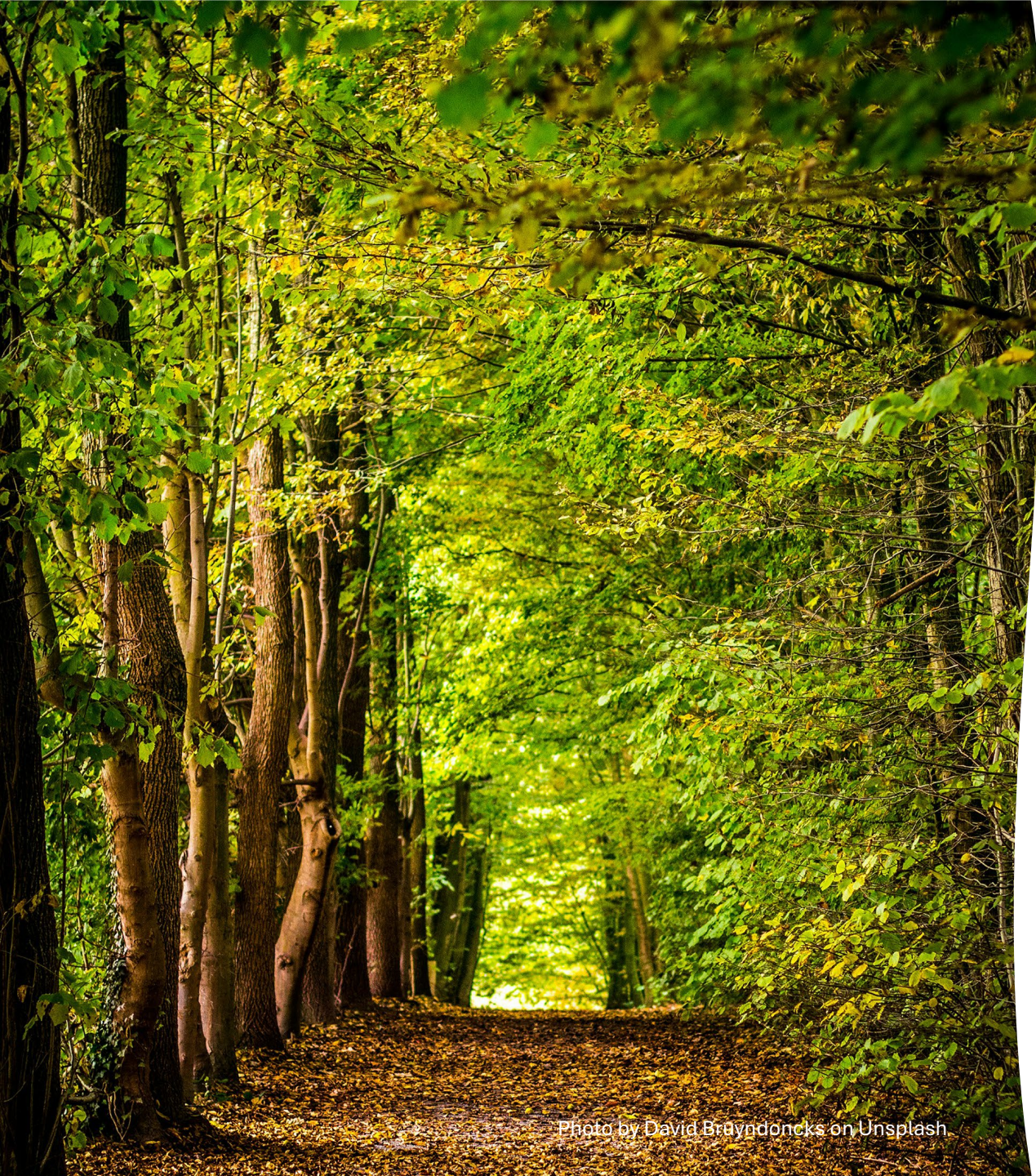


Photo by David Bruyndoncks on Unsplash

Regional Syphilis Summit Findings

Successful syphilis responses in Indian Country will depend upon **thoughtful, ongoing communication** and **active partnership** between the tribes, Indian Health Service, tribal and urban clinics, regional tribal health boards, tribal epidemiology centers, state, local, and tribal health departments, academic institutions, and private hospital networks.



Regional Syphilis Summit Findings

It is critical to **strengthen collaboration with partners outside of sexual health** (e.g., maternal and child health programs, behavioral health programs, shelters, and youth-serving organizations).



Regional Syphilis Summit Findings

High levels of stigma are impacting prevention, screening, and treatment efforts. Stigma impacting syphilis includes sex and sexuality (being able to discuss when, why, where, and with whom people are having sex), substance use disorder, substance use disorder in pregnancy, and homelessness.



Regional Syphilis Summit Findings

Community education should be **strengths-based and sex positive**, building on **Indigenous values** and concepts of health and wellness.



Regional Syphilis Summit Findings

Syphilis testing must be offered in both clinical and community sites to **meet people where they are**, address stigma, and promote access to testing and treatment.



Regional Syphilis Summit Findings

An **increase in the public health workforce** is needed - particularly for contact tracing and care coordination at the tribal level.



Regional Syphilis Summit Findings

IHS, tribal and urban clinics, tribal health departments, regional health boards, and tribal epidemiology centers **must have access to state and local data to best respond to syphilis.**

The Work – Congenital Syphilis Taskforce



Photo by [Cayetano Gil](#) on [Unsplash](#)

Congenital Syphilis Taskforce Key Themes

Cooperation and Partnerships

- Center partnerships across *programs* (maternal and child health (MCH), STI, etc.,) and *organizations* (IHS/Tribal/Urban, state, local health departments, hospitals, etc.,)
- Prioritize MCH, delivery hospitals (that may not be part of the Indian Health System) and other places where pregnant people and families go
- Develop partnerships with...
 - Children's Hospital Foundations in high-incidence states
 - Treatment programs for substance use disorders



Congenital Syphilis Taskforce Key Themes

Building the Care Framework

- Use holistic and syndemic health approaches to promote syphilis awareness, screening, etc.
- Offer connection and patient-first care at every single encounter
- *Important to meet people where they are going*
- Implement universal testing for syphilis in
- Provide support to help engage patients who would not otherwise be able to keep/make appointments



Congenital Syphilis Taskforce Key Themes

Nurture the Indigenous Workforce

- Recognize the importance of a Native workforce
- *"I would love for this work to help promote Indigenous Doulas"*
- Provide in-person opportunities to connect, learn from each other, and provide capacity building and technical assistance
- "We need a way for them to be employed"
- Contact tracing
 - *"I would love to see some support for this- we need to have community workers we can train to work closely with PHN to do contact tracing, this has been a big hold because no one really holds this piece."*
 - *"I would love to see support for this (contact tracing). It is about boots on the ground. Needs funding and program work to work within Indian Health System."*



Photo by Mladen Borisov on [Unsplash](#)

Congenital Syphilis Taskforce Key Themes

"We Need Data for Us"

- Share examples of the good work happening in Indian Country
- Do we have the data needed to make decisions about AI/AN?
- Are CDC and state-reported data shared, and is what is being shared good enough?
- How, why, when, and when are people having sex?

Congenital Syphilis Taskforce Key Themes

Indigenous Ways of Knowing and Tribal Best Practice

- "We are part of seven generations"
- Create trust and understanding
 - Center the voice of community members to foster trust
- Affirm the Indigenous value of community health and wellness and the need to take care of each other
- Respect tribal sovereignty in creating health priorities and leading health and wellness
- Uplift clinics doing well in this space and replicate when possible



Photo by Frames For Your Heart on Unsplash

Congenital Syphilis Taskforce Key Themes

Everything Is Connected

- The intersection of congenital syphilis, substance use disorder (SUD), and social determinants of health/equity (SDOH/E)
- Address SDoH/E; solutions are upstream
- Partner with SUD (and other) programs that overlap with congenital syphilis
- Transmission routes are similar to other conditions. We need to prevent and treat it and ALSO other conditions (HIV, other STIs, HCV, etc.)
- Decriminalize SU in pregnancy
 - "Number one problem is the way we treat substance use in pregnancy. "
 - "Building more places that people who use substances can go, especially when they are pregnant and when it's criminalized."



Congenital Syphilis Taskforce Key Themes

Building Connections and Support for Pregnant People

- "I am just pregnant and having a baby"
- Women's circles
- Men's circles
- What is a healthy pregnancy
- Resource for ALL pregnancy needs
- Incentives
 - "Cost of incentives is so much more reasonable than the cost of someone not being treated."
 - "Incentives are always an opportunity to provide really good education to people when we sit with them face to face. It gives the person an excuse for going in - to get a gift card not just get tested. A certain portion of the population is going to perceive this as a love language -- like someone cares about me."
- It is important to reach people on social media

Future Webinar Dates and Topics

Stopping Syphilis: The HHS Summer Seminar Series

Aug. 27, 2024	Regional Insights: Syphilis Partnerships Summits and Indian Country Congenital Syphilis Taskforce Findings
Sept. 10, 2024	Future Forward: Emerging Trends in the Syphilis Syndemic



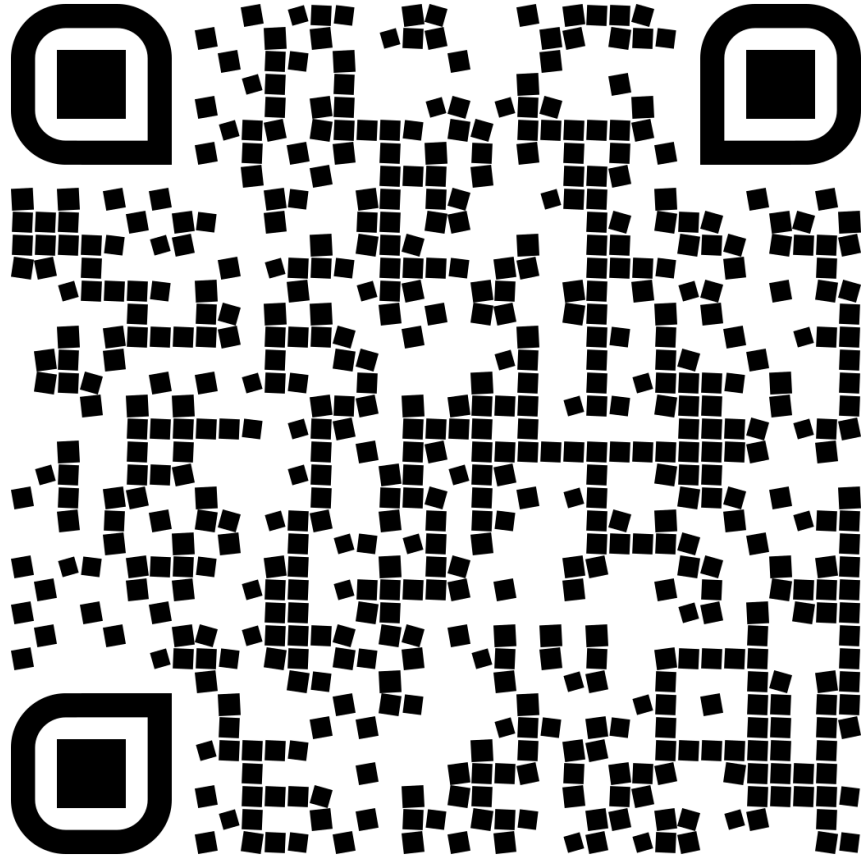
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Additional Resources and Information



Scan the QR Code to see:

- Webinar schedule
- Various resources related to the series including:
 - **Slide decks from each webinar**
 - **Federal agency funding flexibilities**
 - **Professional and clinical resources for syphilis and congenital syphilis**

Thank You and Contact Information

To learn more about the work presented today, contact Jessica Leston at jessica@theravencollective.org and Rebekah Horowitz at rhorowitz@naccho.org.

For more information, or if you have any questions or feedback, contact the HHS Sexually Transmitted Infections Inbox at STI@hhs.gov.

Notify CDC's DSTDP (stdshortages@cdc.gov) of any shortage or low inventories of STI treatments in your jurisdiction so CDC can continue monitoring treatment availability.

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