

STI Epidemiology among American Indian & Alaska Natives & HHS National STI Strategic Plan

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Learning Objectives

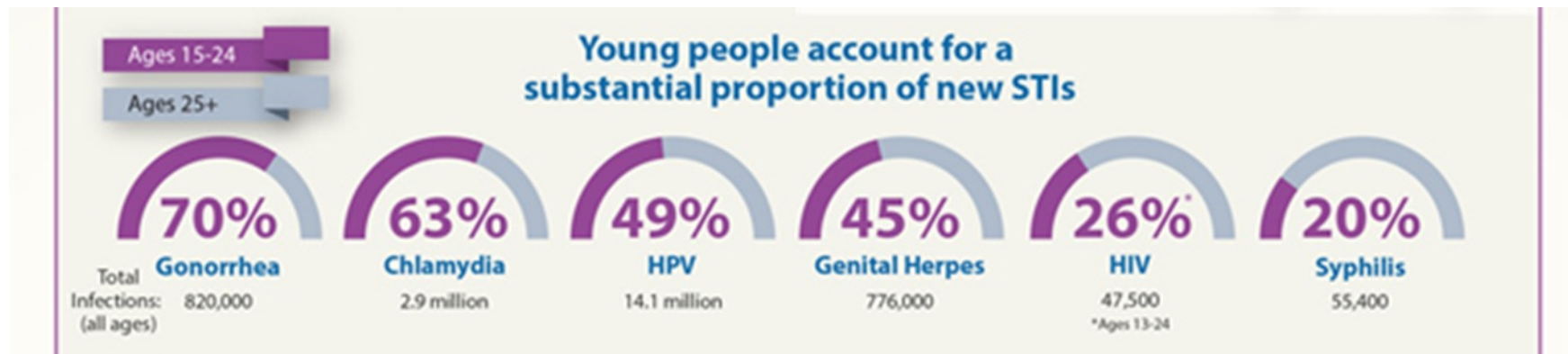
1. Describe the epidemiology of STIs (sexually transmitted infections) among AI/AN populations
2. Identify the goals and activities of the IHS National STD (sexually transmitted diseases) Program
3. Describe the STI National Strategic Plan vision and goals

IHS National STD Program Goals

- Raise awareness of STIs as a high priority health issue for AI/AN populations
- Support partnerships and collaborations with state STD programs, IHS, tribal, urban Indian (I/T/U), and other public health agencies
- Support improvement of I/T/U, state, and local STD programs for AI/AN
- Increase access to up-to-date STD training for clinicians and public health practitioners
- Support and strengthen surveillance systems to monitor STD trends
- Promote STD research and identify effective interventions for reducing STD morbidity
- Support STD outbreak response efforts

Sexually Transmitted Infections

- 20 million new cases of Sexually Transmitted Infections (STIs) occur in the U.S. each year
- Serious health consequences of unrecognized STIs, including infertility, might occur without prompt diagnosis & treatment
- Half of all STIs occur in those under 25 years of age, AND this age group is about 1/4 of all those who are sexually active
- \$16 billion in direct medical costs (\$1.1 billion attributed to chlamydia, gonorrhea, syphilis)



STI prevalence, incidence and costs in the United States: New estimates, new approach. Weinstock H, et al. Sex Transm Dis. 2021, Jan 23. accessed 3/16/21 on line

STIs Disproportionately Affect Vulnerable Populations

- Special populations disproportionately affected by STIs include adolescents and young adults, pregnant women, MSM, and racial and ethnic minorities
- AI/AN bear a disproportionate burden
- Chlamydia & gonorrhea rates among AI/AN are ~4 times those of non-Native whites
- Syphilis and human immunodeficiency virus (HIV) also have disproportionately higher impact on AI/AN people

Sexually Transmitted Infections

- 2.5 million reported cases of gonorrhea, chlamydia and syphilis in 2019
- Increases in STIs continued for 5 consecutive years from 2014 to 2019:
 - Syphilis cases increased by 74%
 - Gonorrhea cases increased by 56%
 - Chlamydia remained at record highs
 - HPV remains the most common STI in the U.S.
 - Newborn syphilis cases more than double in four years, reaching 20-year high
 - During 2018–2019, rates of reported chlamydia, gonorrhea and syphilis **increased** among **both males and females, in all regions** of the United States, and among **all racial/Hispanic ethnicity groups**.

1.8 million
CASES OF CHLAMYDIA
19% increase since 2015

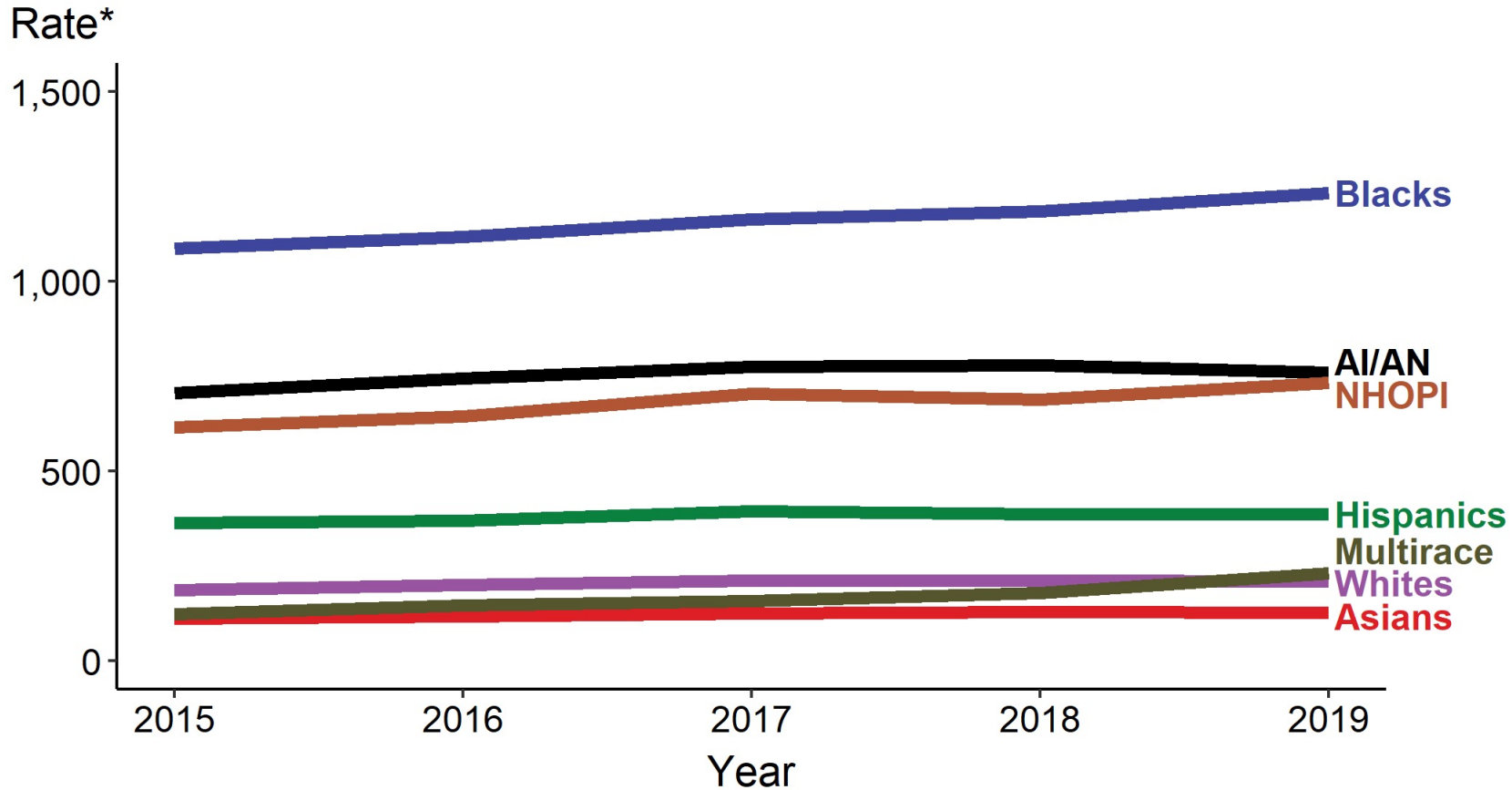
616,392
CASES OF GONORRHEA
56% increase since 2015

129,813
CASES OF SYPHILIS
74% increase since 2015

1,870
CASES OF SYPHILIS
AMONG NEWBORNS
279% increase since 2015

Rates of Reported Cases by Race/Hispanic Ethnicity, United States, 2015–2019

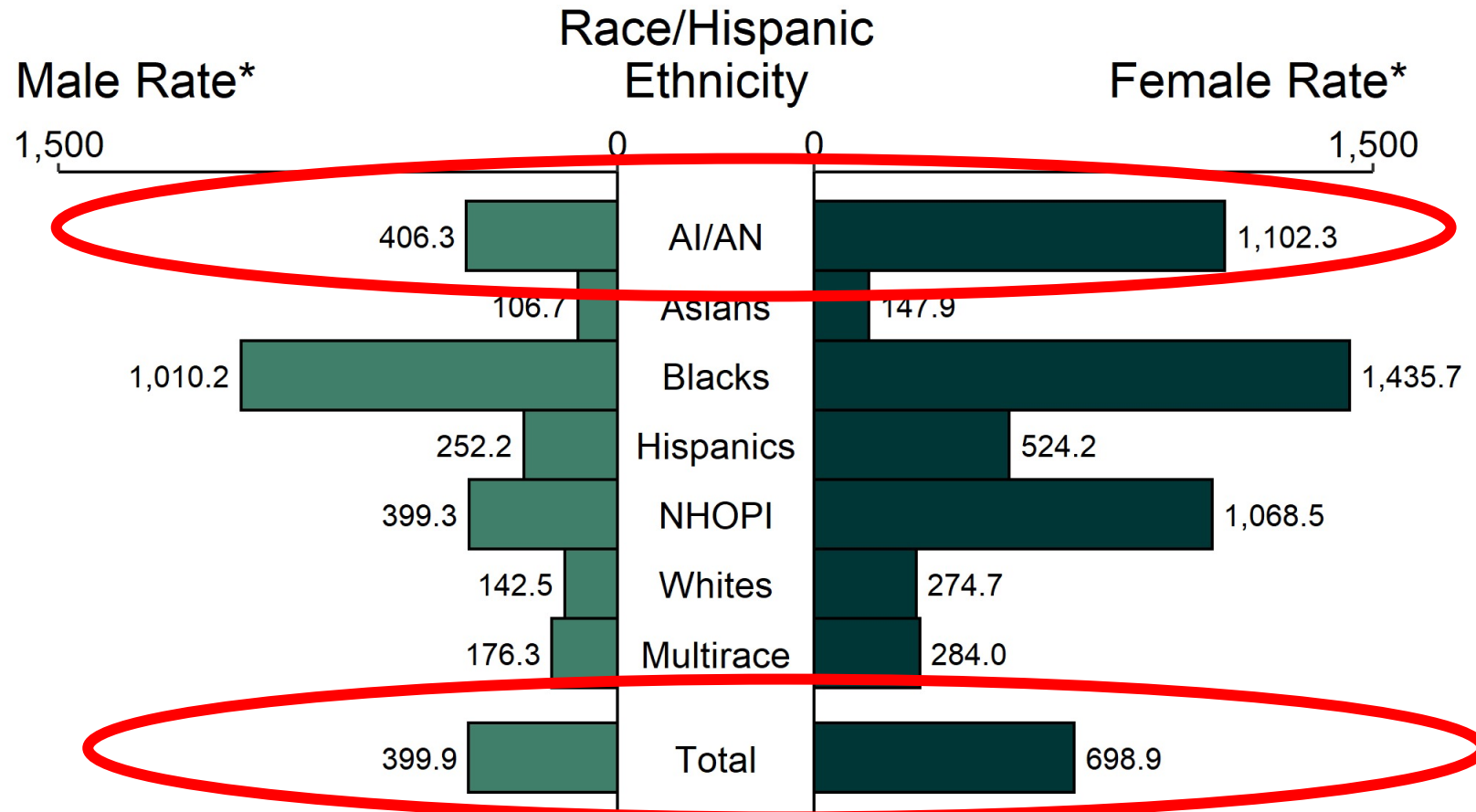
Chlamydia — Rates of Reported Cases by Race/Hispanic Ethnicity, United States, 2015–2019



* Per 100,000

ACRONYMS: AI/AN = American Indians/Alaska Natives; NHOPI = Native Hawaiians/Other Pacific Islanders

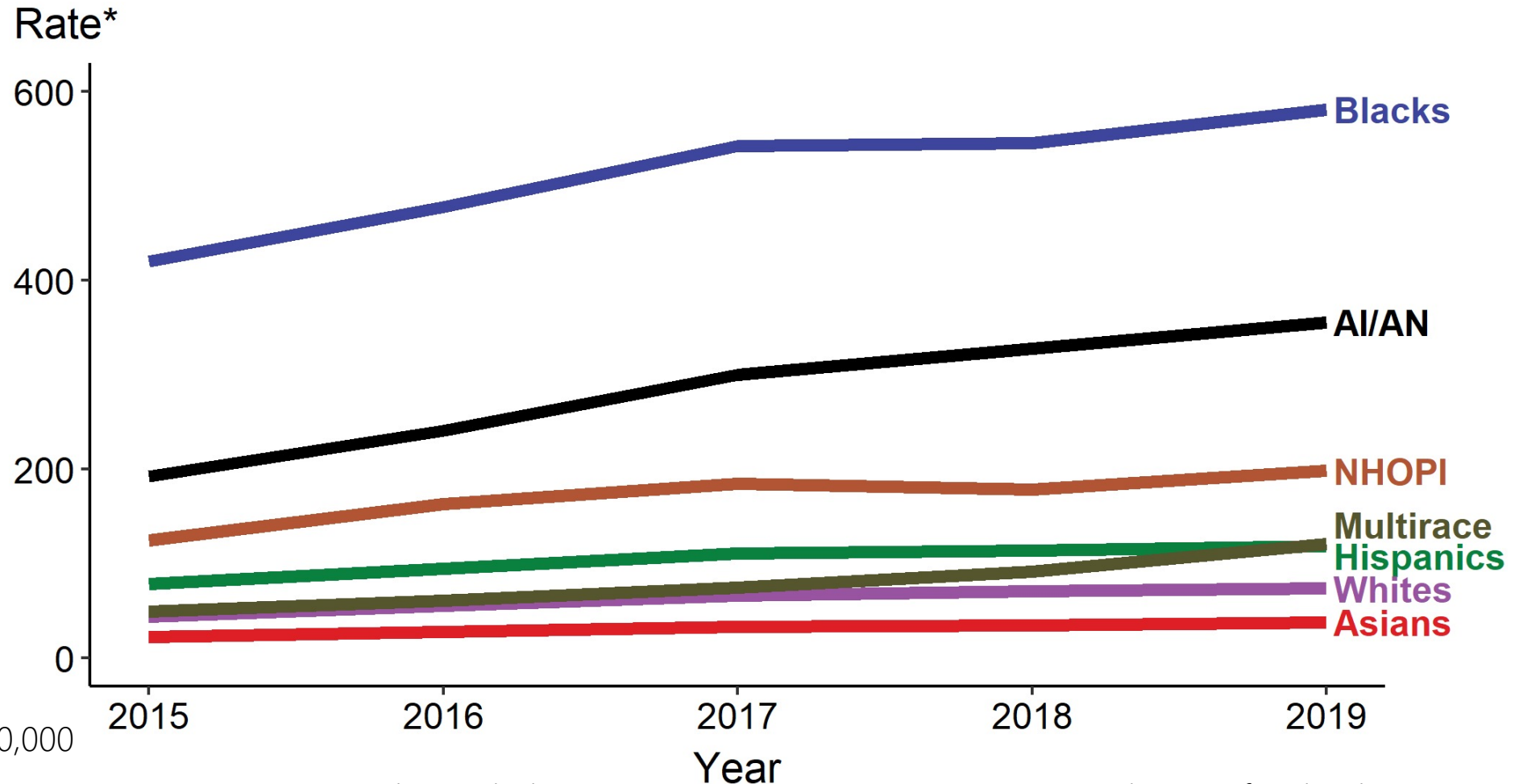
Chlamydia — Rates of Reported Cases by Race/Hispanic Ethnicity and Sex, United States, 2019



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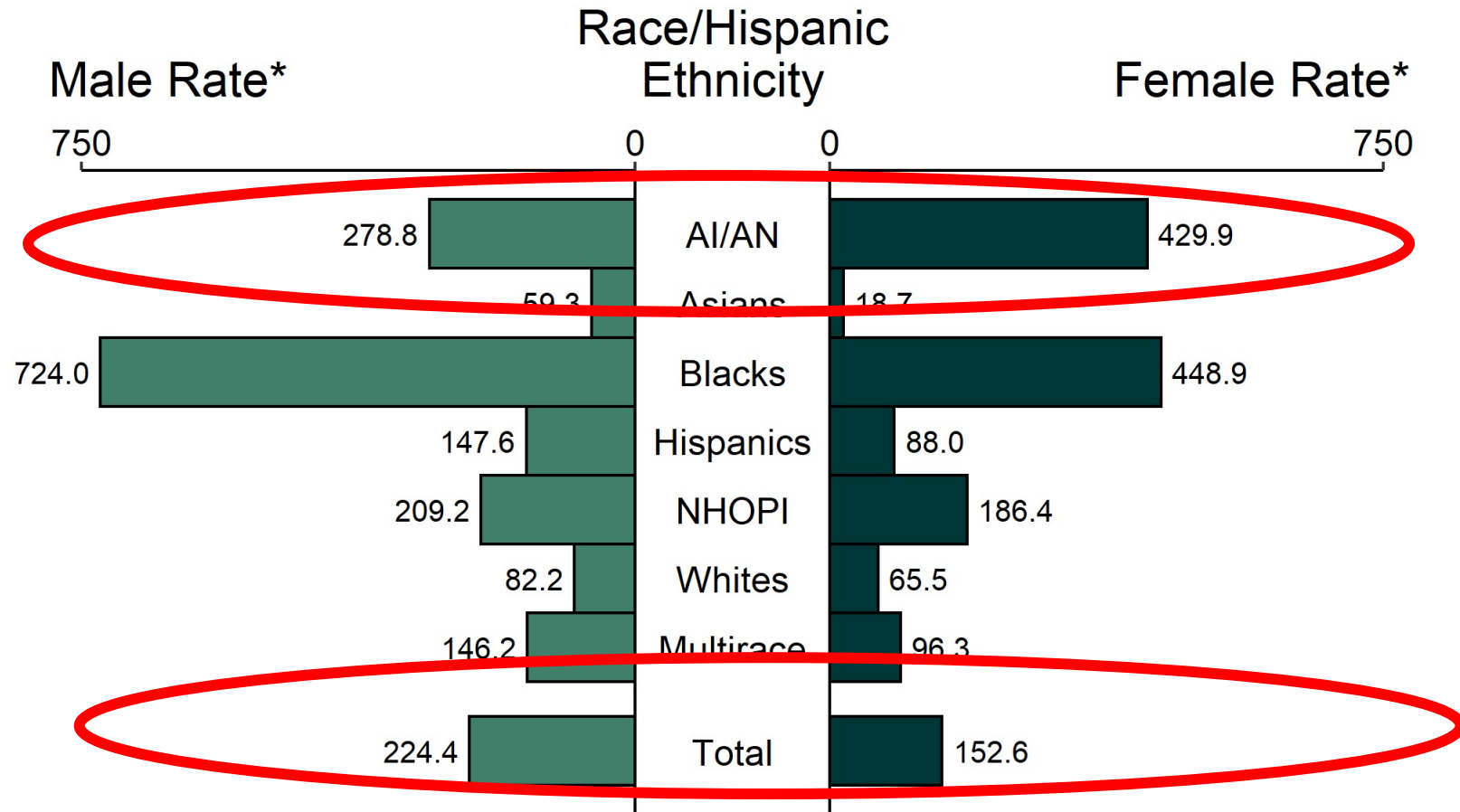
Gonorrhea — Rates of Reported Cases by Race/Hispanic Ethnicity, United States, 2015–2019



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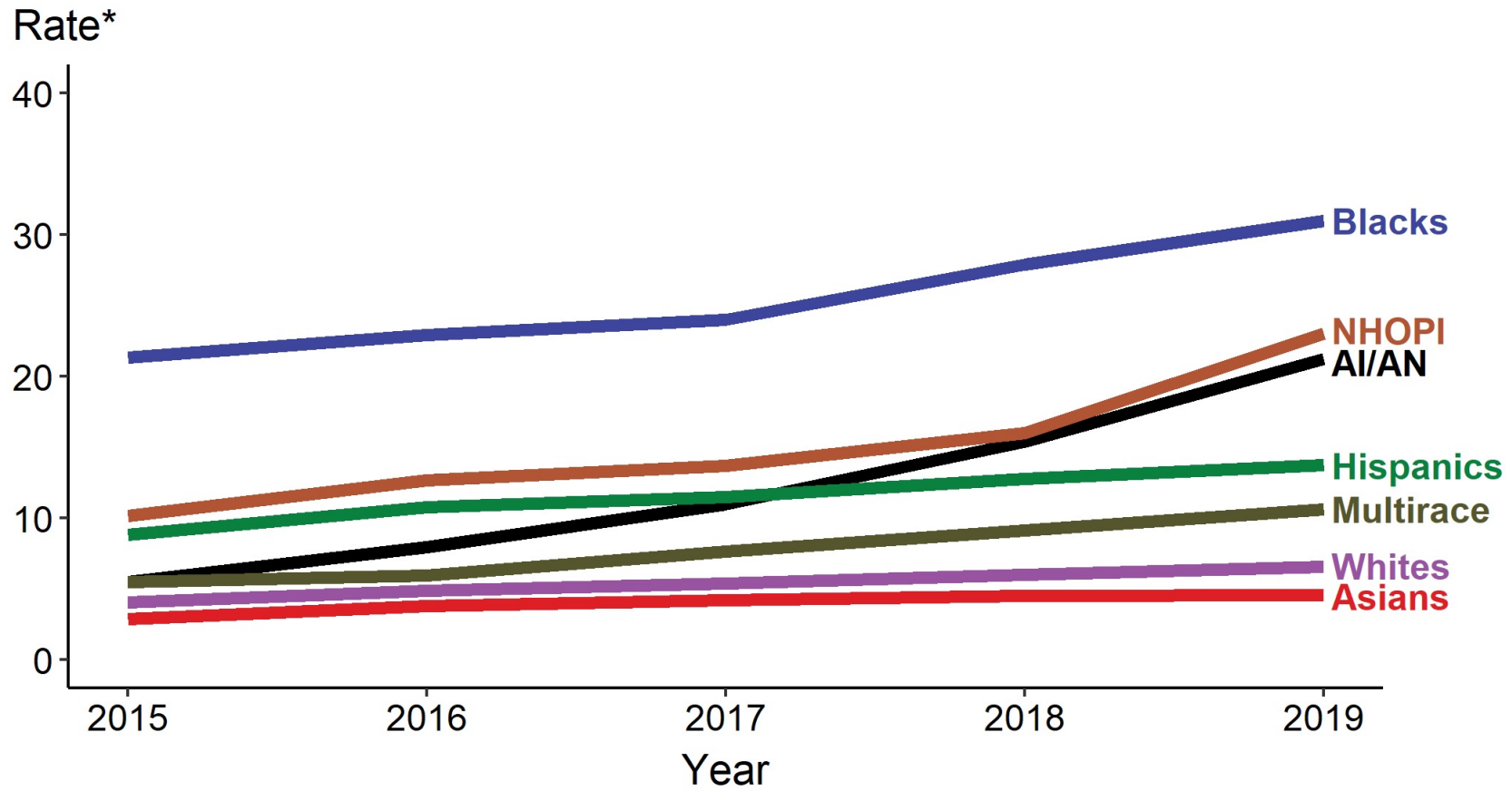
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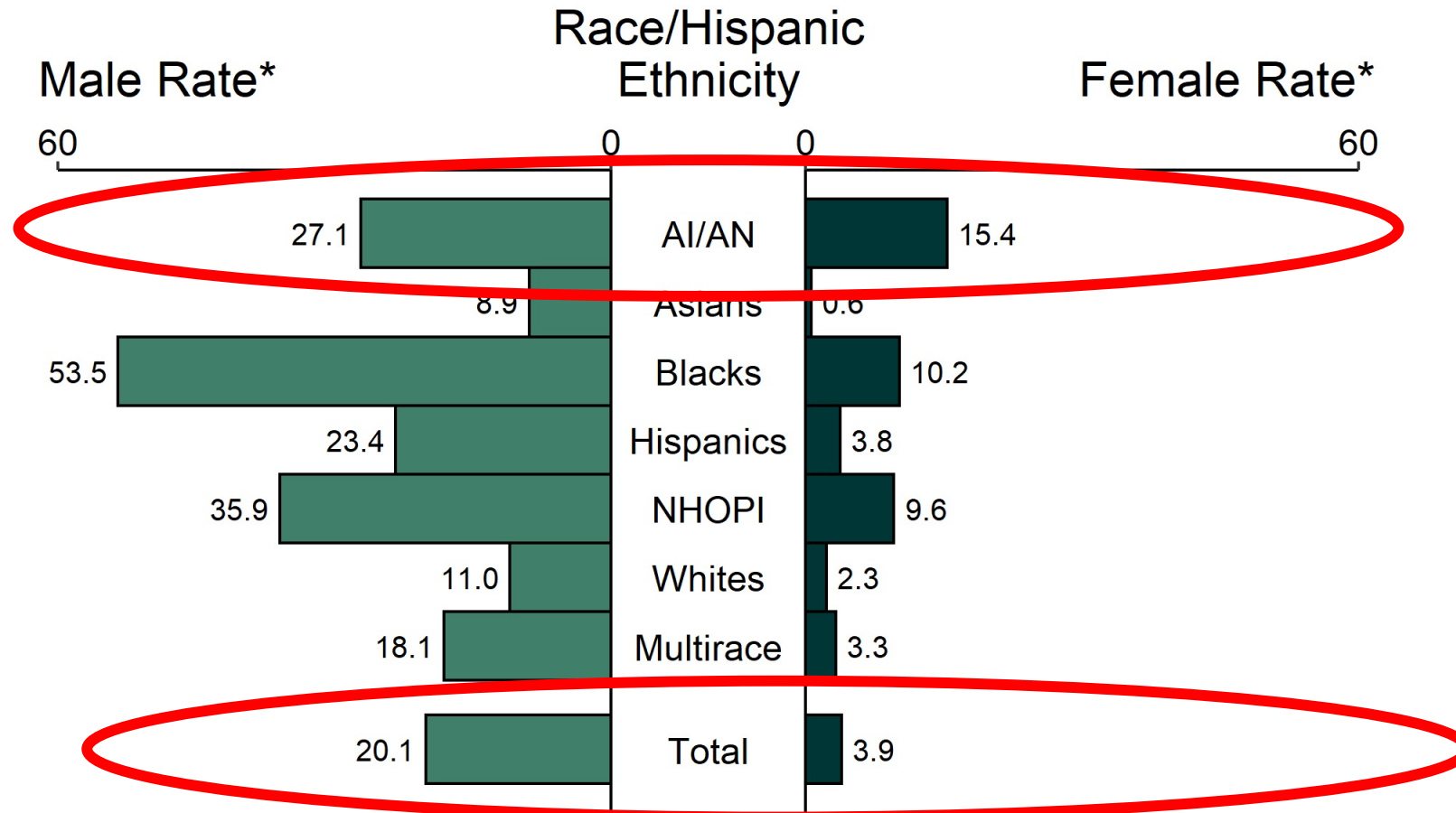
Primary and Secondary Syphilis — Rates of Reported Cases by Race/Hispanic Ethnicity, United States, 2015–2019



* Per 100,000

ACRONYMS: AI/AN = American Indians/Alaska Natives; NHOPI = Native Hawaiians/Other Pacific Islanders

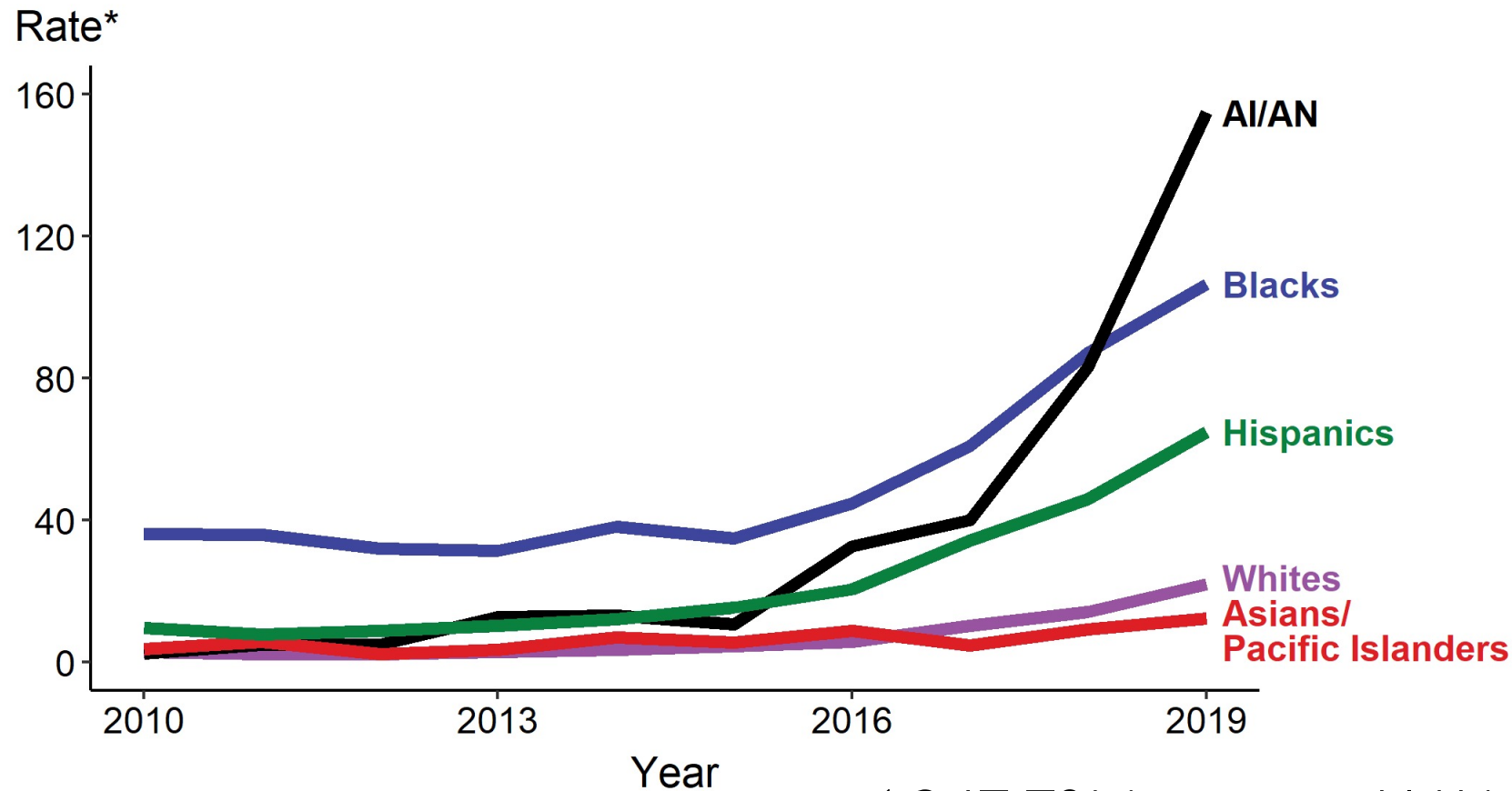
Primary and Secondary Syphilis — Rates of Reported Cases by Race/Hispanic Ethnicity and Sex, United States, 2019



* Per 100,000

ACRONYMS: AI/AN = American Indians/Alaska Natives; NHOPI = Native Hawaiians/Other Pacific Islanders

Congenital Syphilis — Rates of Reported Cases by Year of Birth, Race, and Hispanic Ethnicity of Mother, United States, 2010–2019



- 1,347.7% increase AI/AN (from 10.7 to 154.9 cases per 100,000 live births),

Table 42. Congenital Syphilis — Reported Cases and Rates of Reported Cases* by Year of Birth and Race/Hispanic Ethnicity of Mother, United States, 2015–2019

Year of Birth	American Indian/Alaska Natives		Asian/Pacific Islanders		Blacks		Whites		Other		Hispanics		Unknown		Total	
	Cases	Rates	Cases	Rates	Cases	Rates	Cases	Rates	Cases	Rates	Cases	Rates	Cases	Rates	Cases	Rates
2015	4	10.7	15	5.5	208	35.0	97	4.5	7		143	15.5	20		494	12.4
2016	12	32.8	25	8.9	263	44.7	122	5.8	8		189	20.6	22		641	16.2
2017	14	40.2	13	4.7	361	61.0	213	10.4	12		309	34.4	19		941	24.4
2018	29	83.2	26	9.4	516	87.2	291	14.2	13		413	46.0	35		1,323	34.3
2019	54	154.9	34	12.3	630	106.4	453	22.1	36		583	64.9	80		1,870	48.5

* Per 100,000 live births.

NOTE: No population data exist for other or unknown race; therefore, rates are not calculated.

STI

Sexually Transmitted Infections

National Strategic Plan

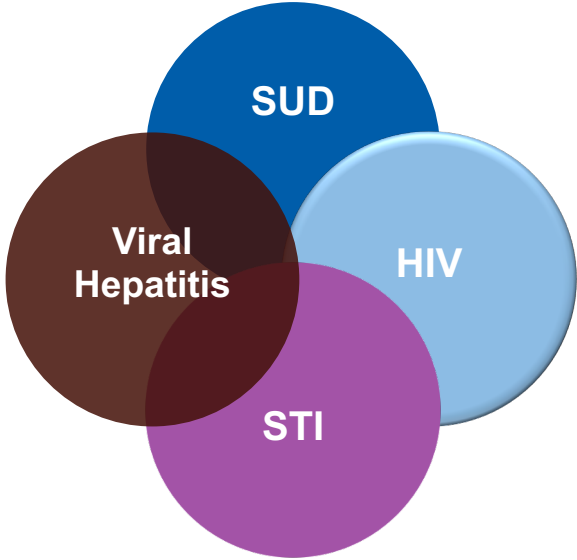
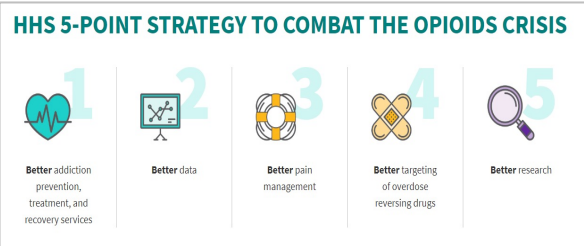
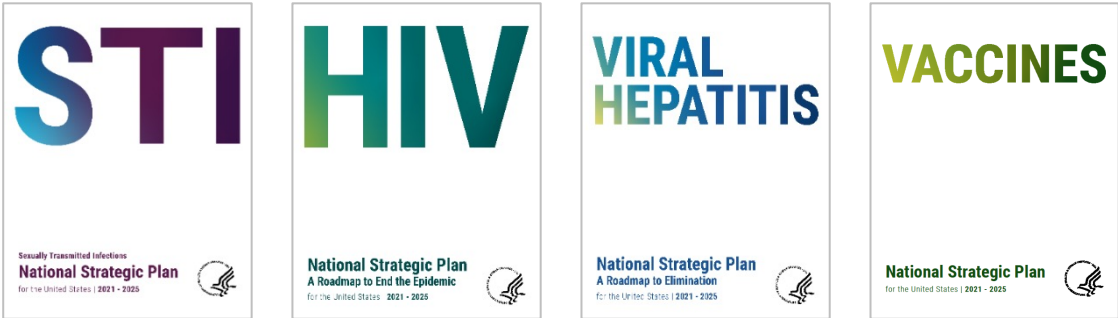
for the United States | 2021 - 2025



What is the
STI National Strategic Plan
and what are its goals?

<https://www.hhs.gov/sites/default/files/STI-National-Strategic-Plan-2021-2025.pdf>

Engaging the Syndemic Across National Strategic Plans



Stigma, discrimination, and social determinants of health are integral to addressing the syndemic

STI National Strategic Plan Overview

- Five-year plan (2021-2025) with annual quantitative targets through 2030
- Developed by a Federal Steering Committee
- Opportunities for public comment (at development and final stages)
- Stigma, discrimination and social determinants of health - integral to addressing the epidemic
- Integrated approach to prevention, screening and linkage to care among all components of the syndemic; whole-of-society approach
 - Alignment across STI, HIV, and Viral Hepatitis National Strategic Plans and Healthy People 2030

Vision & Goals

A. VISION

The United States will be a place where sexually transmitted infections are prevented and where every person has high-quality STI prevention, care, and treatment while living free from stigma and discrimination.

This vision includes all people, regardless of age, sex, gender identity, sexual orientation, race, ethnicity, religion, disability, geographic location, or socioeconomic circumstance.

B. Goals

In pursuit of this vision, the STI Plan establishes five goals:



1. Prevent new STIs



2. Improve the health of people by reducing adverse outcomes of STIs



3. Accelerate progress in STI research, technology, and innovation



4. Reduce STI-related health disparities and health inequities



5. Achieve integrated, coordinated efforts that address the STI epidemic

Disproportionately Impacted Populations

Infections



Chlamydia



Gonorrhea



Syphilis



HPV



Adolescents and Young Adults



MSM

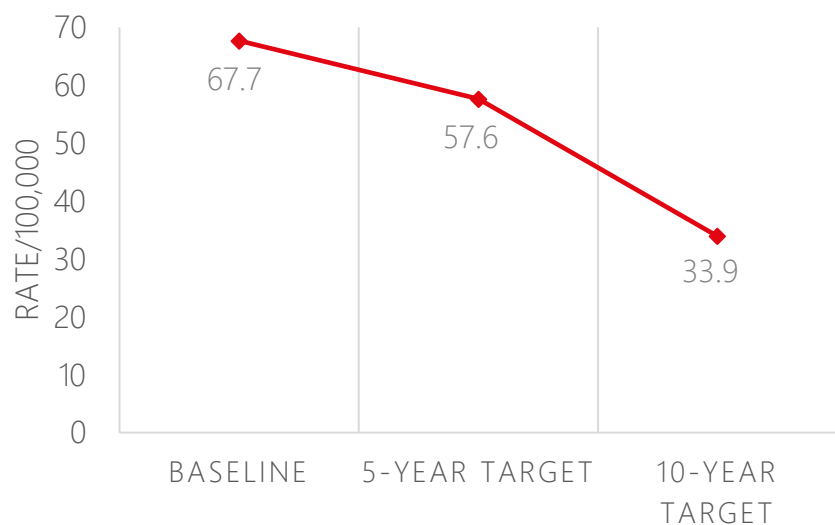


Pregnant Women

Subgroups: Racial and ethnic minorities (Blacks, **American Indians/Alaska Natives**, Hispanics); South and West regions of the U.S.

How will we measure success?

STI Plan Indicators



Reduce congenital syphilis rate by 15% by 2025 and 50% by 2030

	Core Indicators	Related Goal
1	Increase the percentage of adolescents aged 13-17 years who receive the routinely recommended doses of HPV vaccine	1, 2, 4
2	Reduce primary and secondary syphilis rate	1, 2
3	Reduce congenital syphilis rate	1, 2, 4
4	Reduce gonorrhea rate	1, 2, 4
5	Increase chlamydia screening in sexually active females aged 16-24 years	1, 2, 4
6	Reduce pelvic inflammatory disease in females aged 15-24 years	1, 2, 4
7	Increase condom use at last sexual intercourse among sexually active high school students	1, 4

Table 4. STI Plan Disparities Indicators

Disparities Indicator	Measure	Baseline ^a	5-Year Target	10-Year Target
8. Reduce P&S syphilis rate in MSM				
	Rate/100,000	461.1	440.4	392.0
9. Reduce congenital syphilis rate among African American/Blacks				
	Rate/100,000	167.5	139.9	75.4
10. Reduce congenital syphilis rate among AI/AN				
	Rate/100,000	207.6	173.3	93.4
11. Reduce congenital syphilis rate in the West				
	Rate/100,000	89.7	74.9	40.3
12. Reduce gonorrhea rate among African Americans/Blacks				
	Rate/100,000	632.9	604.5	538.0
13. Reduce gonorrhea rate in the South				
	Rate/100,000	211.3	201.0	179.6
14. Increase condom use at last sexual encounter among sexually active MSM high school students				
	Percentage	53.8	56.9	61.9

^a 2020 unless indicated otherwise. 2020 data points are projected based on indicator trajectory in recent years.

What's Next?

- Whole of society approach
- Federal Implementation Plan - FY 2021
 - Accountability among federal agencies
 - Identify areas for collaboration
 - Facilitate cross-disciplinary funding, services and communication
- Implementation by non-federal stakeholders
- Annual Reporting



National AI/AN STD Prevention Workgroup

- Focus on convening diverse stakeholders from the healthcare, public health and community sectors to:
 - discuss STD prevention activities
 - share resources and network
 - work collaboratively in developing culturally driven approaches, resources, and interventions for our communities
- Members chose to break into 3 sub-workgroups
 - Provider education
 - Community Education and Outreach
 - Data
- Meeting quarterly with the larger workgroup and 1-2/month with sub-workgroup
- If interested to participate please contact me: andria.apostolou@ihs.gov

Resources

- IHS National STD Program: <https://www.ihs.gov/Epi/std/>
- IHS STD Listserv: https://www.ihs.gov/listserv/topics/signup/?list_id=167
- CDC 2019 STD Report: <https://www.cdc.gov/std/statistics/2019/default.htm>
- HHS STI National Strategic Plan <https://www.hhs.gov/sites/default/files/STI-National-Strategic-Plan-2021-2025.pdf>