

# Indigenous Syphilis Prevention Campaigns

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# Presenter



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➤ **Alicia Edwards, MPH, CHES (Colville)**  
**Syndemics Communications Manager**  
[www.npaihb.org](http://www.npaihb.org)

➤ **Brigg Reilley, MPH**  
**Epidemiologist**  
[www.ih.gov](http://www.ih.gov)

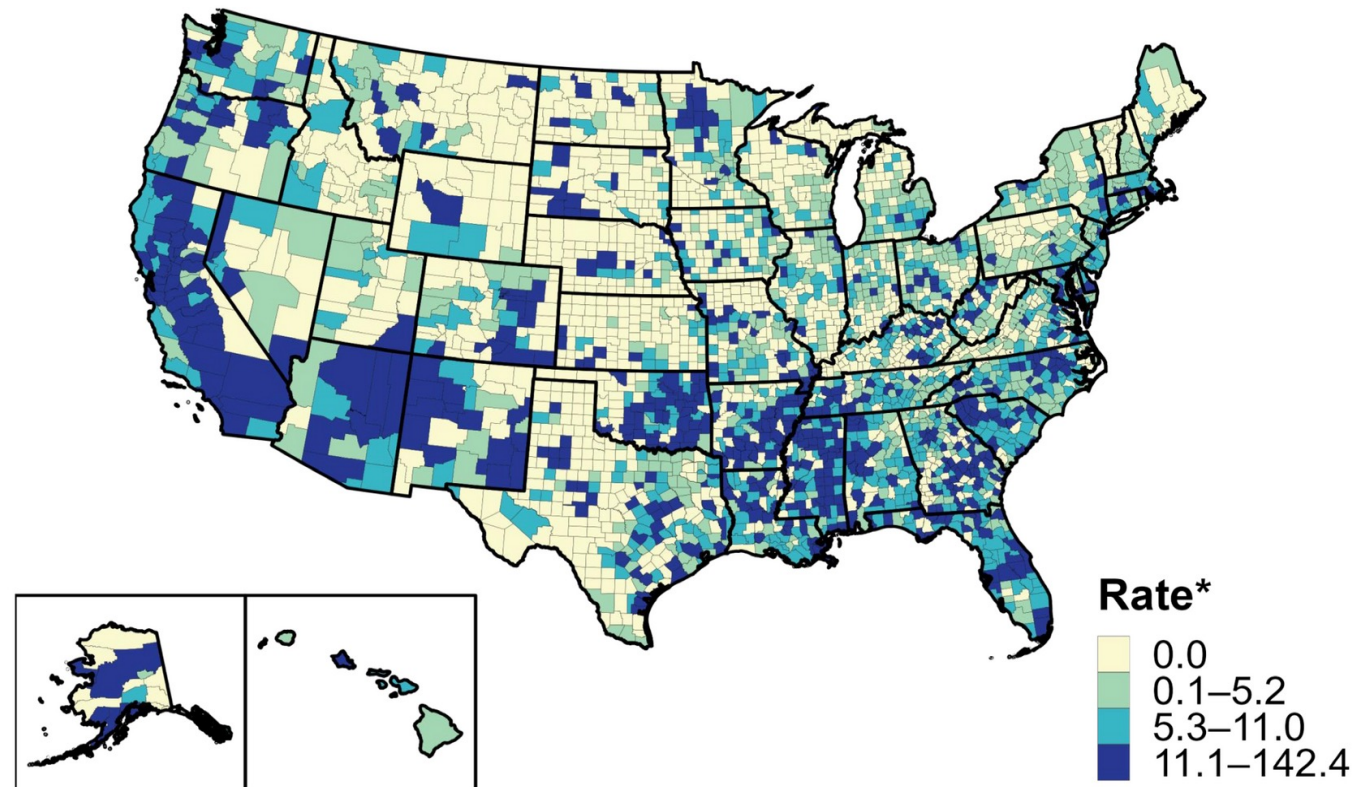
# Epidemiology



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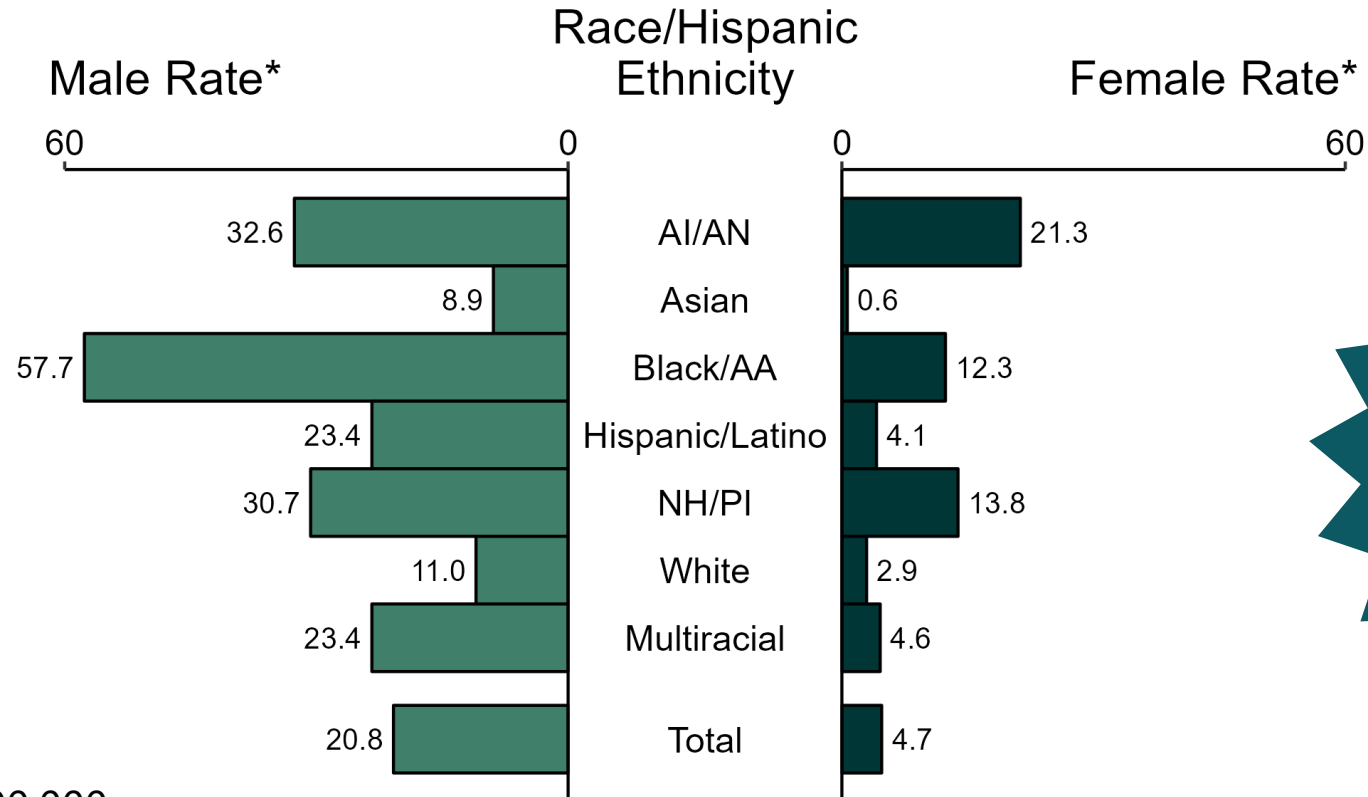
## Primary and Secondary Syphilis — Rates of Reported Cases by County, United States, 2020



\* Per 100,000

<https://www.cdc.gov/std/statistics/2020/figures.htm>

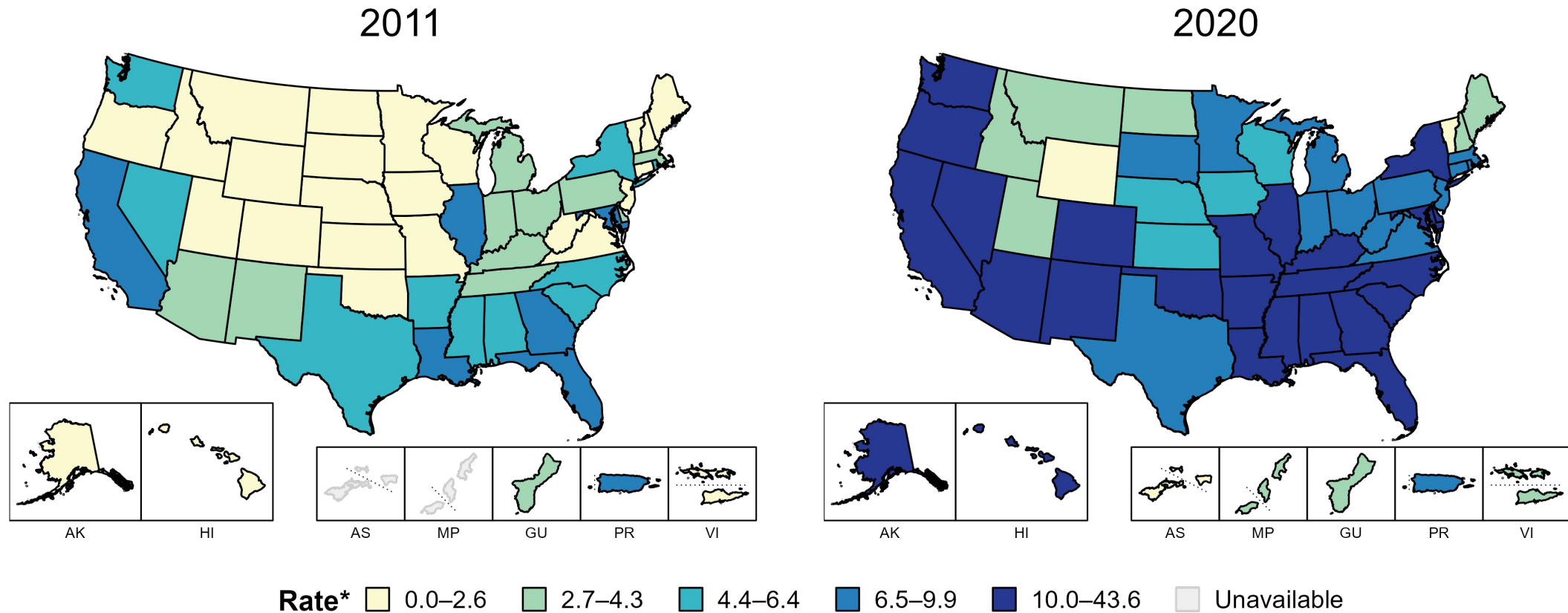
# Primary and Secondary Syphilis — Rates of Reported Cases by Race/Hispanic Ethnicity and Sex, United States, 2020



Rate of syphilis among AI/AN females **7x greater** than NHW females

- Per 100,000
- **ACRONYMS:** AI/AN = American Indian/Alaska Native; Black/AA = Black or African American; NH/PI = Native Hawaiian/Pacific Islander
- **NOTE:** Total includes all cases including those with unknown race/Hispanic ethnicity.

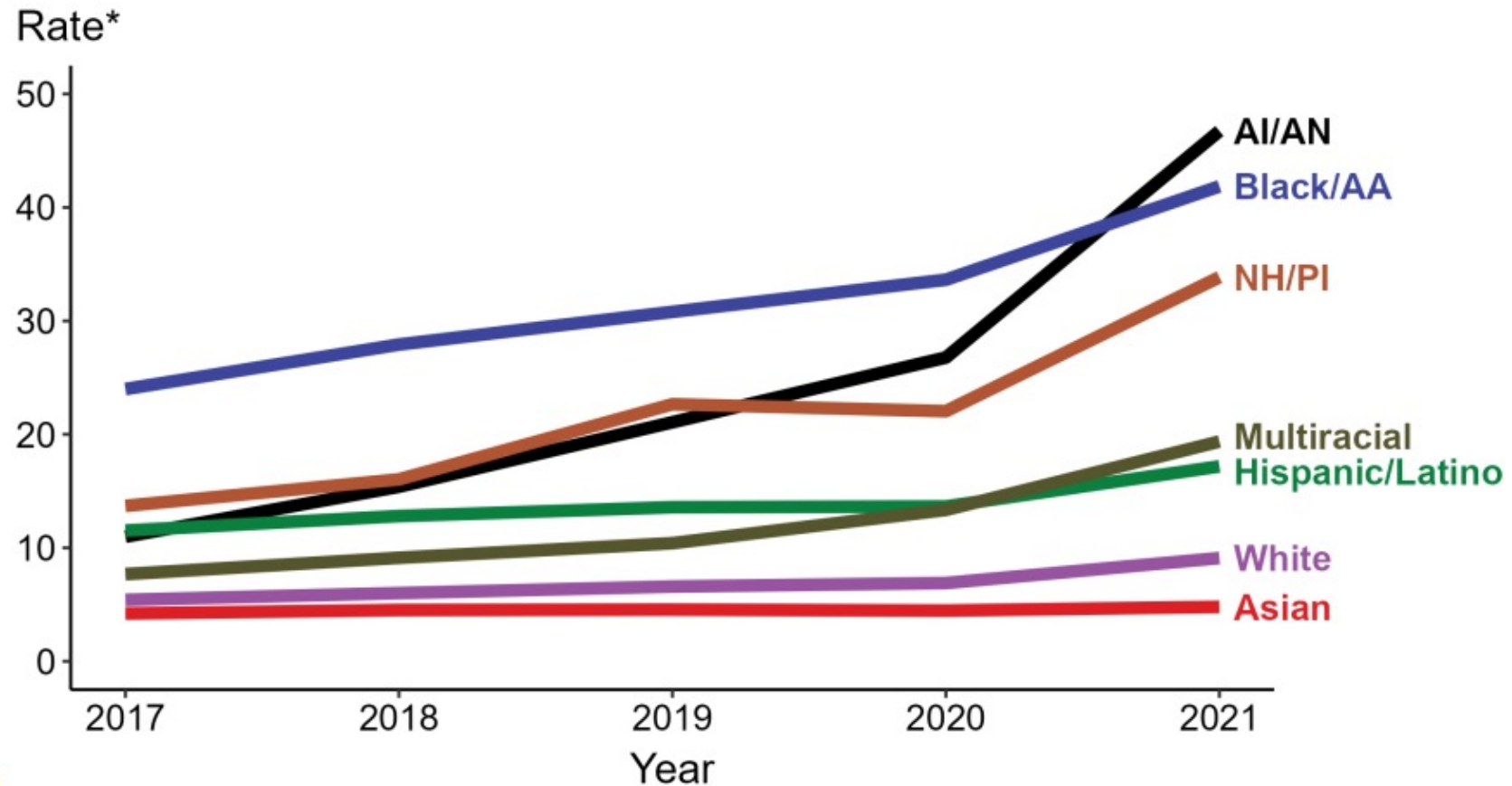
# Primary and Secondary Syphilis — Rates of Reported Cases by State, United States and Territories, 2011 and 2020



\* Per 100,000



# Primary and Secondary Syphilis – Rates of Reported Cases by Race/Hispanic Ethnicity, United States, 2017 - 2021



\* Per 100,000

ACRONYMS: AI/AN = American Indian or Alaska Native; Black/AA = Black or African American; NH/PI = Native Hawaiian or other Pacific Islander

<https://www.cdc.gov/std/statistics/2021/figures.htm>

# Primary and Secondary Syphilis – Reported Cases and Rates of Reported Cases by State, Ranked by Rates, United States, 2021

Rank*	State	Cases	Rate per 100,000 Population
1	South Dakota	436	48.7
2	New Mexico	724	34.2
3	Arkansas	990	32.7
4	Oklahoma	1,225	30.7
5	Nevada	939	29.9
6	Mississippi	829	28.1
7	Arizona	1,982	27.2
8	Alaska	194	26.5
9	★ Oregon	949	22.3
10	California	8,724	22.2
11	Louisiana	995	21.5
12	Missouri	1,316	21.3
13	Florida	4,498	20.7
14	★ Washington	1,506	19.5
15	Rhode Island	209	19.1

# Impact of Social Factors



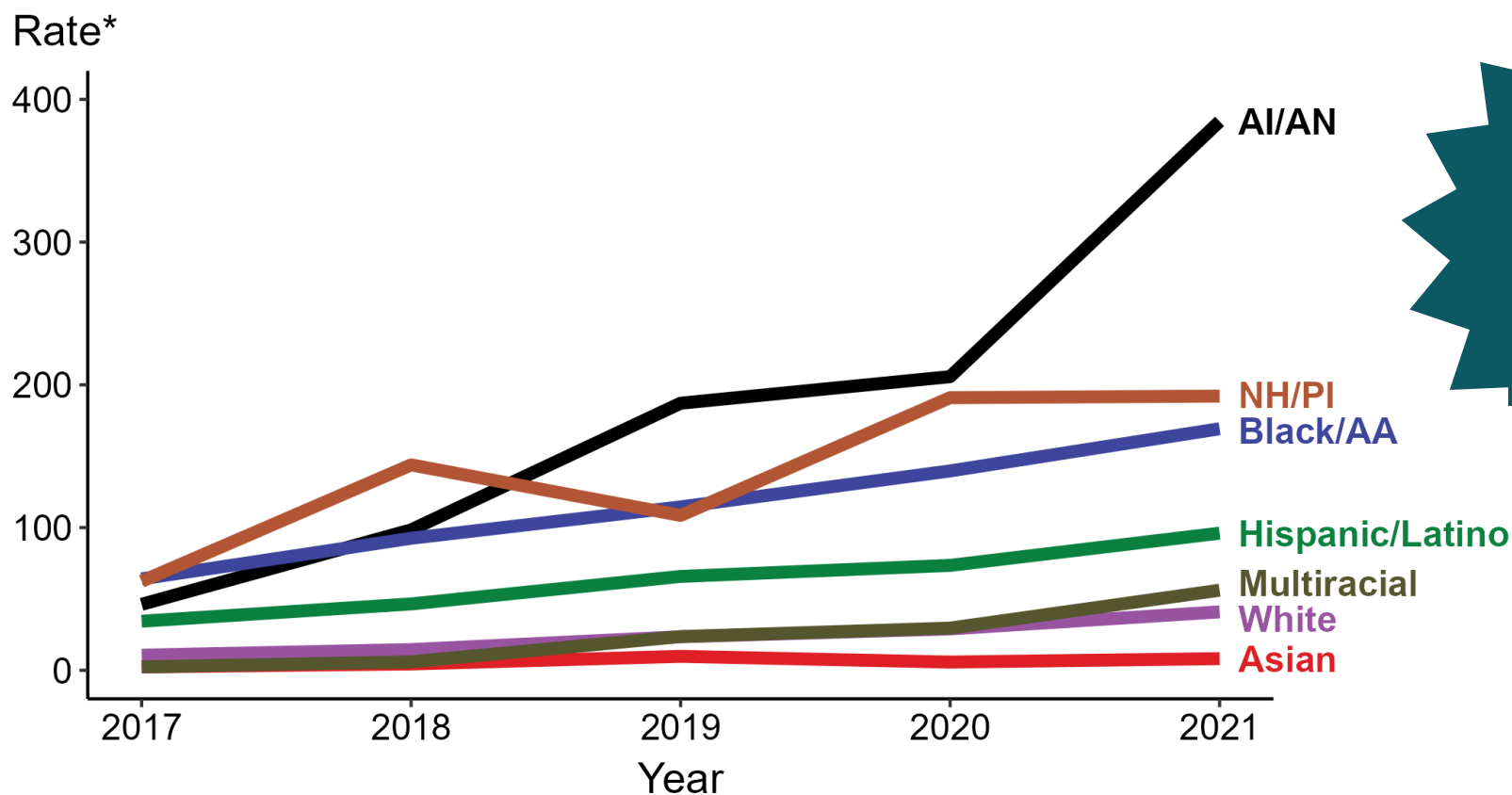
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- Difficult accessing quality sexual health services
- Distrust of the healthcare system
- Fear of discrimination
- Negative feelings around testing and treatment for STIs
- Connection to other syndromic factors such as mental health and drug use



# Congenital Syphilis — Rates of Reported Cases by Year of Birth, Race/Hispanic Ethnicity of Mother, United States, 2017–2021



In 2021, the **highest** rate of reported congenital syphilis cases among AI/AN pregnant people


• \* Per 100,000 live births

• **ACRONYMS:** AI/AN = American Indian or Alaska Native; Black/AA = Black or African American; NH/PI = Native Hawaiian or other Pacific Islander

# What can be done?



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- Increase screening
- Engage medical providers
- Enable referrals
- Get the word out 

# Provider Resource



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A screenshot of a web browser displaying the Syphilis Resource Hub page. The browser's address bar shows the URL [indiancountryecho.org/syphilis-resources/](http://indiancountryecho.org/syphilis-resources/). The page has a blue header with the title "Syphilis Resource Hub" and a decorative pattern of fish. Below the header, the main content area is white. On the left, there is a section titled "Why Syphilis Matters" with three paragraphs of text. On the right, there is an illustration of a diverse group of people, including a woman holding a baby, a man, and several children. At the bottom of the page, there is a navigation bar with the text "The Indigenous Syndemic Strategy: Weaving Together HIV, STI, and Viral Hepatitis Plans". The Windows taskbar is visible at the bottom of the screenshot, showing the date and time as 3:15 PM on 3/9/2023.

[www.indiancountryecho.org/syphilis-resources/](http://www.indiancountryecho.org/syphilis-resources/)

# Outdated Materials, Lacking Cultural Connection



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- Materials from the 1980s
- Not culturally relevant – no diversity or AI/AN representation
- People want to see people who look/speak like them

# Indigenous Congenital Syphilis Campaign



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## Key Messages

- ✓ Syphilis is on the rise
- ✓ Syphilis can be hard to spot
- ✓ If not treated, syphilis can have serious consequences for you and your baby
- ✓ Testing is easy, and treatment is quick – it takes only one shot of antibiotics



# Print Materials




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## Syphilis cases are on the rise.


Know your status, especially if you're pregnant.

Syphilis can be hard to spot, often starting with an easily missed sore or rash. While anyone can get syphilis, pregnant people and newborn babies face serious complications if left untreated.



Testing is easy and treatment is quick.

Protect your and your baby's future by getting tested today!



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## Syphilis while pregnant

Syphilis can be hard to spot, often starting with an easily missed sore or rash. While anyone can get syphilis, pregnant people and newborn babies face serious complications if left untreated.

**How do I know if I have syphilis?**  
You can have syphilis and not have symptoms, so as part of your prenatal care, get tested! When caught early, syphilis can be treated with just one shot of antibiotics.

**How often should I get tested?**  
Getting tested twice throughout your pregnancy and again during delivery is great prenatal care.

**Why should my partner get tested?**  
Even if you've been tested and treated for syphilis, you can be reinfected if your partner is still carrying the infection.

## Protect your and your baby's future by getting tested today!



## Syphilis cases are on the rise. It's important to get tested!



POSTCARD



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## Get tested for syphilis today!



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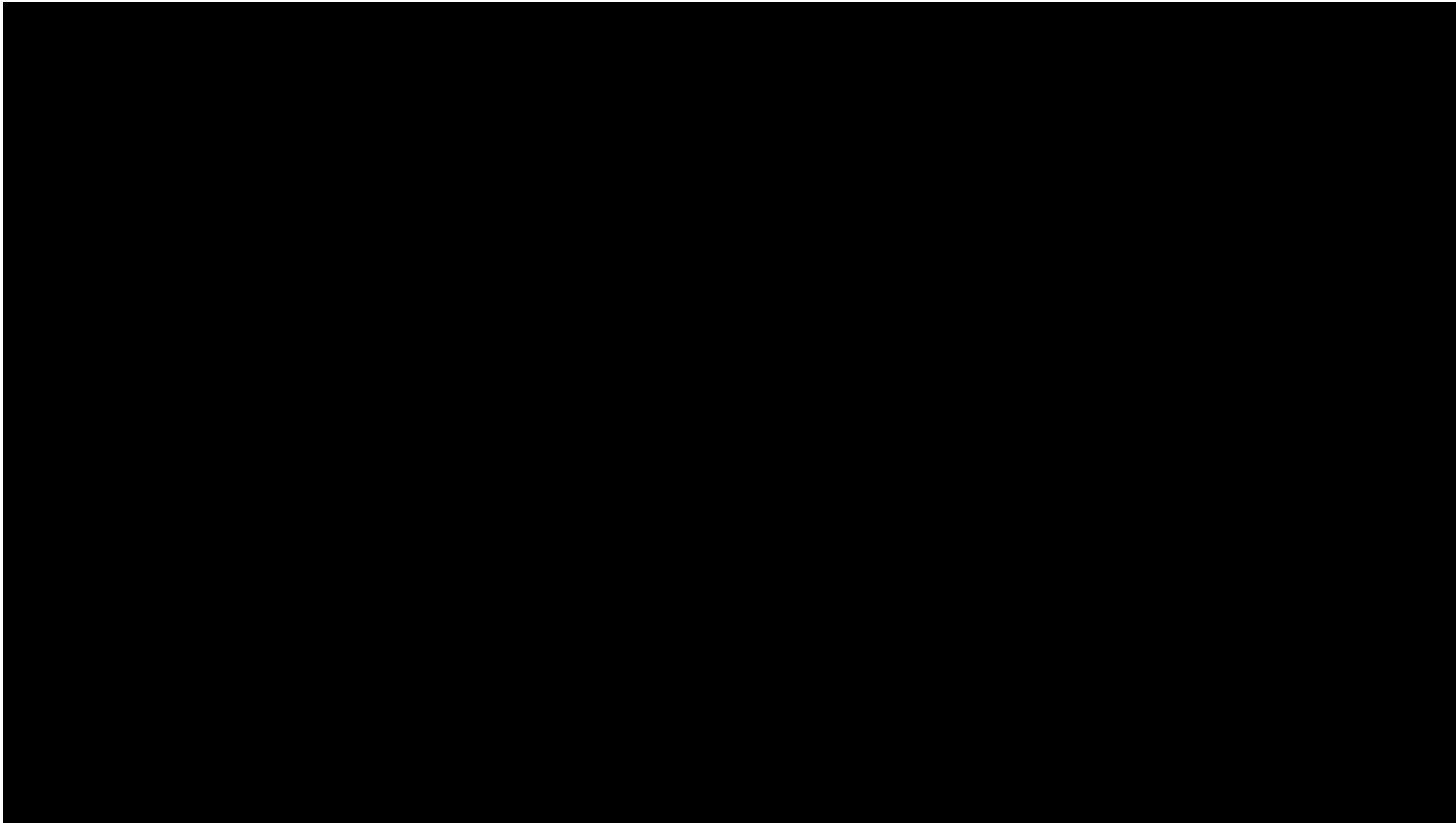
## Get tested for syphilis today.

# Videos



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# Other Materials



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Syphilis cases  
are on the rise.  
Get tested at your local clinic.

Ministry of Health and Family Welfare  
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The billboard features an illustration of a doctor, a man, and a pregnant woman in a landscape with mountains and a sun. The text on the billboard reads "Syphilis cases are on the rise. Get tested at your local clinic." At the bottom right, there are two logos: the official seal of the Ministry of Health and Family Welfare, Government of India, and the NPAIHB logo with the tagline "Indian Leadership for Indian Health".



# Website



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- Increased reach
- Easy online ordering
- Materials are FREE



# Indigenous Syphilis Awareness Campaign



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## Key Messages

- ✓ Syphilis is on the rise
- ✓ Syphilis can be hard to spot
- ✓ Anyone can get syphilis
- ✓ Testing is easy, and treatment is quick – it takes only one shot of antibiotics
- ✓ Snag safer! Get tested!



# Print Materials



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## Snag safer to prevent syphilis


Take steps to protect yourself and others!

**Safer sex means:**




**DoxyPEP**

Take DoxyPEP, a single dose of antibiotic, within 72 hours of having unprotected sex to prevent common STIs, including syphilis. Ask your clinician whether DoxyPEP is right for you.



**Lube**

Lube makes sex safer by preventing sores and other barriers from breaking. It can also help your body's tissues stay smooth and reduce tearing.




**Barriers**

STIs spread skin-to-skin and through fluids. Barriers like condoms, dental dams, latex or nitrile gloves, offer protection.

Get tested even if you have safer sex. Most people with STIs, like syphilis, don't know.

**Snag safer. Get tested. Syphilis is on the rise.**



## Syphilis is on the rise.

It's important to get tested!

Syphilis spreads skin-to-skin during anal, oral, and vaginal sex. Pregnant people can also pass syphilis to their babies during pregnancy and childbirth.

**Anyone can get syphilis.**

Most people don't notice any symptoms and feel healthy and mostly fine. But, sometimes, symptoms appear.

Syphilis can cause small potholes sores on your genitals, lips, mouth, hands, and feet that can be easily confused with psoriasis, ingrown hairs, tiny bumps, or a mild rash.

Over time, though, if left untreated, syphilis can lead to permanent health problems like:

-  RASH
-  BLINDNESS
-  CANCER

You won't get syphilis through everyday contact with others, including:

-  HOLDING HANDS OR HUGGING
-  COUGHING OR SNEEZING
-  SITTING ON TOILET SEATS
-  SWIMMING
-  SHARING FORKES
-  SHARING FOOD OR DRINK

Luckily, your health provider can test you for syphilis, and syphilis can be cured!

**Get Tested Today!**

Schedule an appointment with your health care provider



Snag safer. Get tested. Syphilis is on the rise.



**Snag safer. Get tested.**

## Syphilis is on the rise.

Talk with your partner about safer sex.



Sex should be safe and fun.

Talk about your needs - like STI testing and using protection. Starting the conversation can be hard, but try to be open and honest.

**Snag safer. Get tested. Syphilis is on the rise.**



# Other Materials



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# Videos



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Our sexual health matters because  
we matter and it's time to take control.

# Place an order today!



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## To place an order:

- **Visit:** [www.stopsyphilis.org](http://www.stopsyphilis.org)
- **Please note:** If you need expedited shipping or quantities of products greater than allowed on the site, reach out to me directly (aedwards@npaihb.org)

# Campaigns in the Works



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## **HIV/PrEP Campaigns (Launch Date October 2023)**

- Six different target populations
  - *Youth, PLWHA, MSM, Women & PrEP, General PrEP (18-64), and General HIV (18-64)*

## **Native Health Resources (Launch Date November 2023)**

- Organization-wide website under development inspired by [www.stopsyphilis.org](http://www.stopsyphilis.org)
  - *Site will hold a variety of NPAIHB health education resources*

## **Family Care Plans (Launch Date October 2023)**

- Formerly Plans of Safe Care
- Working on Version 2
- Creating some best practice videos

## **Adult Sexual Health Texting Service (Launch Date TBD)**

- Working on a texting campaign similar to the youth Text SEX to 94449 campaign created by the WRN team, but for Adults

# Action Across Indian Country



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## WERNATIVE

For Native Youth, by Native Youth



**You've got questions, we've got answers.**

If you are a Native youth and have a 'mind, body or spirit' question on your heart that a Relative can assist with good medicine, ask us!





# Action Across Indian Country



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INDIAN + COUNTRY  
**ECHO**

# Indigi-HAS



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## The Indigenous HIV/AIDS Syndemic Strategy: Weaving Together the National HIV, STI, and Viral Hepatitis Plans



# Indigi-HAS



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## Vision

*We envision a world in which all Indigenous people are healthy in mind, body, and spirit; the spread of HIV, STIs, and viral hepatitis is prevented; every person knows their status and lives free from stigma and discrimination; and every person has access to high quality, holistic care that reflects Indigenous values, promoting relationships with each other, the land and all beings.*

*This vision includes all Indigenous people, regardless of age, sex, gender identity, sexual orientation, religion, disability, geographic location, socioeconomic circumstance, or health status.*



# Acknowledgements



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- Tribes of the Pacific Northwest
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- Brigg Reilley, MPH
- Michelle Singer
- Ashley Hoover, MPH

# Thank you!



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## **Contact Info:**

Alicia Edwards

Syndemics Communications Manager

[aedwards@npaihb.org](mailto:aedwards@npaihb.org)

# What resources/support do you need in your community?



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# Case Study



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- Tanya, 22 y.o. struggling with SUD. HCG+ during primary care visit, and tested for syphilis
- She is referred to external SUD care and PN care

# What happens now?



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- 4 days later, the syphilis result comes back positive
- Tanya's cell phone number seems turned off. Unclear if it is no longer in service, or she only connects to wi-fi, or is not answering unknown calls
- Tanya housing and transport options unknown



# Who notices? Who is responsible? Who follows up?



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## **What happens now?**

- 1) Tanya cannot be reached for syphilis treatment
- 2) Tanya accesses the IHS ER for a minor trauma
- 3) Tanya accesses an external ER/Urgent care for a minor trauma
- 4) Tanya does not go to PN care
- 5) Tanya does not go to SUD care
- 6) Tanya is HCG+ and SUD+ what is tribal code