

HIV Risk Reduction

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Let's Talk About Sexually Transmitted Infections

*Trends of Sexually Transmitted Infections in Georgia
An Interview with STD Office Director Michelle Allen*

In Georgia, the most common way for someone to become infected with HIV is through unprotected sex.

STIs in Georgia

Michelle Allen, Director of the STD Office for the State of Georgia, wowed a gathering of HIV Early Intervention Services (EIS) nurses and counselors at an intensive skill-building conference in May. Her talk on the connection between sexually transmitted infections (STIs) and the spread of HIV was so compelling - and so pertinent - that we asked her to expand on the theme by discussing key developments in STI trends in our state.

Georgia is ranked among the highest states in the nation for syphilis and gonorrhea (sidebar, right). While all of the infections listed (right) can be shared through sexual contact, syphilis most often correlates with HIV says Allen. "Georgia has the second highest rate of primary and secondary syphilis in the nation. And the interesting thing about secondary syphilis, which is syphilis at its more infectious state, is that you often see it in combination with HIV."

She calls the burden of co-infected HIV and infectious syphilis, "pretty blaring." In 2011, says Allen, over 50 percent of the syphilis cases reported in the state of Georgia were co-infected with HIV.



STI Trends in GA

According to 2010 national STI surveillance data from the Centers for Disease Control and Prevention, compared to other states in the nation, Georgia has the:

- 2nd highest rate of primary and secondary syphilis.
- 7th highest rate of gonorrhea.
- 12th highest rate of congenital syphilis.
- 15th highest rate of chlamydia.

One reason for this correlation is physical: the chancre sore that is typical of primary syphilis facilitates HIV transmission.

Internet-related Sex

Another reason, says Allen, is social. With the advent of the internet, there has been a change in the way people, particularly young people, connect and communicate – including how they meet their sexual partners – and a growing trend toward anonymous sex. Previously, connecting and communicating with others generally took place in the context of neighborhood, workplace, or community. For the most part, people knew where their contacts lived or worked and were often aware of their place in the constellations of church and family.

“Traditionally, when someone was infected with an STI they knew who their sex partner was, even if that sex was casual. Casual meant you didn’t have a committed relationship, but the sex wasn’t anonymous.”

“Now you have people using phone apps to help them search for partners. A person may respond to an ad for anonymous sex with a young gay male, or a young

straight female. Oftentimes very limited information is exchanged. It may just be where to meet and a first name or nickname. If someone is infected with an STI in that situation, the only clue as to the identity of their partner may be the club they chose as a meeting place. In a case like that, traditional public health approaches to partner services are ineffective.”

New Interventions

“We do work very closely with websites and chat rooms that will allow us the opportunity to do intervention online. But sometimes the best way to intervene is to target a venue. We reach out to owners of clubs and bars to see if we can come in and do testing or give out condoms.”

“If you establish a rapport with the club owner and people are expecting you, it’s not uncommon for them to provide a space and sometimes DJ announcements to let patrons know that services are being offered. Whenever possible,

we do this kind of work in conjunction with a local community based organization to allay fears that a Public Health presence may in some way stigmatize the venue.”



There has been a change in the way young people meet their sexual partners and a trend toward anonymous sex.

A System Designed to Protect

“It is the mission and the responsibility of Public Health to prevent, promote, and protect.”

The system designed to protect health by preventing the spread of infectious disease begins at the point of diagnosis. All Georgia physicians, laboratories, and healthcare providers are required by law to report patients with chlamydia, gonorrhea, and syphilis.

Allen explains why. “Whether clients go to a private doctor or a hospital, if they are diagnosed with an STI, that information must be reported to Public Health before partner services and disease intervention can begin.”

Michelle Allen says her favorite slogan is: HIV is an STI. “Many people forget that STI prevention and treatment is also HIV prevention. That’s not just because of the way people are infected. It’s also because social determinants like access to care are consistent whether you’re talking about HIV or any other STI. Which brings us to why it is important to have partner services for those who are HIV-positive.”

“When someone is infected with a STI, the first thing we want to do is make sure they are aware of the infection and that they receive treatment. The next priority is to ensure that any sexual partners who are infected also receive treatment. These efforts also provide an opportunity to educate people who are vulnerable to infection.”



When sex is anonymous, sometimes the only place to intervene is at the venue. So Public Health reaches out to club owners to offer free condoms and testing.

HIV prevention in particular has undergone a paradigm shift says Allen. “We went from prevention for people who were negative to directing prevention efforts toward people who are already positive. By ensuring that people who are living with HIV are in care and improving their health, we help them to become less infectious and therefore less likely to spread HIV. And prevention efforts for both HIV negative and HIV positive people are equally important.”

Another focus of both HIV and syphilis prevention is transmission from mother to child during pregnancy or delivery. With the proper treatment, the risk of vertical transmission of HIV drops to 2 percent or less and congenital syphilis can be prevented altogether. Because perinatal HIV transmission and congenital syphilis is virtually preventable, when a child is born with either

infection, it often signals a breakdown in the system says Allen. “While some individuals give birth without the benefit of any prenatal care, transmission of HIV or syphilis from mother to child most often represents a serious break in communication between private and Public Health.”

“When a pregnant woman is in care and receives screenings for syphilis and HIV with a prompt report of any positive diagnosis to Public Health, we have the opportunity to reach out in a timely fashion and get her into treatment.”

Symbol of STI Prevention

Allen is committed to STI prevention and looking for ways to raise awareness.

People easily identify the red ribbon as a symbol of HIV prevention. And because it is so recognizable, it promotes HIV awareness.

But, says Allen, when she wears the green ribbon intended to symbolize STI prevention, it creates confusion. “People are perplexed to see it. They ask me what it means. Once when I explained to someone that it was an STI ribbon, they asked if that meant I had survived an STI,” says Allen, laughing.

“We want to do a better job of branding our awareness and prevention message. Since HIV is an STI and the red ribbon is so well-known, we thought about creating a ribbon that is half red and half green.” Either way, Allen’s drive and capacity to engage others is drawing attention to the issue.

Substance Abuse, HIV, and STIs

Not only did Michelle Allen impress the HIV EIS nurses and counselors at the May conference, but they made quite an impression on her. “I appreciate the work that you all do,” says Allen. “You are wonderful partners to Public Health and we appreciate your role.”

The HIV EIS program and Public Health serve many of the same people says Allen. “We know that we share clients. In our sexually transmitted infection cases, frequently drugs, alcohol, and substance abuse are risk factors.” A woman who knows the value of a well-turned phrase, Allen offered this to EIS workers as a parting gift: *When it comes to Substance Abuse, HIV and STIs, it’s Buy 1 Get 1 Free.*



Life loves the liver of it. Life loves to be taken by the lapel and told: “I’m with you kid. Let’s go.”

Maya Angelou, author

This quote from author Maya Angelou reminds us of Michelle Allen’s whole-hearted enthusiasm for STI prevention and her open admiration of the HIV EIS program. It also brings to mind the passion with which so many EIS nurses and counselors embrace their work.

HIV Early Intervention Services (EIS)

is a program of

Division of Addictive
Diseases Georgia Department
of Behavioral Health and
Developmental Disabilities



Prepared by

Imagine Hope Inc.

Marie Sutton
President/CEO
404.874.4040 PH
marie@imaginehope.com

Winona Holloway
VP - Communication
404.923.8991 PH
winona@imaginehope.com

For information visit
www.hiveis.com

