How can we decrease the spread of STDs in NYC?

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Description of the Public Health Program

What is the scope of the Public Health issue you have chosen, and who is your target population?

Sexually transmitted diseases (STDs) are preventable, treatable, and even curable in some cases. Despite that, the current rise in STDs remains a serious public health issue that has yet to be adequately addressed. The purpose of this public health program is to counteract the rise of STIs/STDs in NYC and to propose local interventions in hopes of alleviating the public health burden altogether. A report by the NYC Health Department reveals that in NYC, "gonorrhea and chlamydia disproportionately affect people living in very high poverty neighborhoods (30-100% below the federal poverty level), with case rates approximately three times higher than rates amongst people living in low poverty neighborhoods". Furthermore, chlamydia has the highest rate of infection in Mott Haven, Bronx, with 1,351 cases per 100,000 population. In 2020, it was also reported that cases of chlamydia and gonorrhea were the highest amongst the 15-24 year old population. For this reason, we've decided to target lower income communities and the youth for our program. By emphasizing sex education and safe sex practices, increasing access/funding to healthcare centers, and expanding access to contraceptives, this public health program can be the first step in effectively mitigating the climbing rates of STDs in NYC.

Who do you think will be able to use your program once implemented? Choose only 2 stakeholders — a non-profit organization with a similar cause, community partners, or elected officials.

We believe that existing programs like the Neighborhood Health Action Center and New York City Teen Connections will find our public health program useful, for they too are actively pushing for increased health center funding, safe sex education, and greater access to contraceptives.

1. <u>Neighborhood Health Action Center</u>: This program was established in 2016 to actively bring together providers and services to community residents in an effort to increase healthcare access. The Neighborhood Health Action Center holds spaces for seminars, testing, and educational workshops. Furthermore, they have the potential to serve as a strong force in combating the

rise of STD rates in NYC. Increasing funding for this center and similar programs will help increase their community outreach, thus magnifying the patient population for which they serve.

2. <u>New York City Teen Connections</u>: This organization works to educate teens in NYC schools about pregnancy and sexual health. New York City Teen Connection offers services to help connect adolescents to proper healthcare, while utilizing community action teams and youth leadership to build trust with adolescents. Utilizing this organization, who also shares a common goal of youth education, will provide the infrastructure to effectively carry out our program's educational mission. Taking advantage of an already established relationship between New York City Teen Connections and the community will help promote public trust and allow for direct access to the youth of NYC.

INPUTS	OUTPUTS		OUTCOMES/IMPACT		
	ACTIVITIES	PARTICIPATION	SHORT	MEDIUM	LONG
- Meetings can be held via online platforms, i.e. Zoom, when possible for cost-effectiveness	- Improve sex education/literacy & raising STD awareness by incorporating comprehensive sex	- General Public (including affected individuals & parents to those who are below 18 years old)	- Dissemination of information regarding STDs across social media platforms	 Decrease in promiscuous/high risk activities Proper use & handling of 	 Decrease in the incidence of STDs Increase in STD screening
- Seminars, STD testing, & educational workshops can be held in spaces as provided by existing programs like Neighborhood Health Action Center	education (CSE)/replacing abstinence-only programs & using cost-free social media platforms as advertisement to spread STD awareness	 Like-minded organizations/stakeho lders, i.e. Neighborhood Health Action Center & New York City Teen Connections New York State 	 Increased understanding & awareness of STDs & their irreversible complications Increased use of contraceptives 	contraceptives - Increased funding & involvement from Local & State Governments - Decrease in transmission of STDs	 Increase in STD treatment Decrease in STD- related complications

Program Plan

INPUTS	OUTPUTS		OUTCOMES/IMPACT		
	ACTIVITIES	PARTICIPATION	SHORT	MEDIUM	LONG
- Federally Qualified Health Clinics & Planned Parenthood can provide low-cost options for contraceptives	 Increase access/funding to clinics in affected communities throughout NYC by establishing community health centers in highly affected areas & lobbying local & state governments for funding Expand access to contraceptives with increased guidance on safe sex practices by distributing free condoms in highly affected areas & in schools; directing those without insurance to commu nity/non-profit clinics for low-cost options; & incorporating the proper use of contraceptives within the sex education 	Education Department - State & Local Governments - Community Health Centers/Non-Profit Organizations			

INPUTS	OUTPUTS		OUTCOMES/IMPACT				
	ACTIVITIES	PARTICIPATION	SHORT	MEDIUM	LONG		
	curriculum						
EXTERNAL FACTORS							
 Funding limitations due to other organization's refusal to collaborate Pushback from New York State Education Department & parents about the incorporation of a comprehensive sex education Persistent rebellious attitudes from adolescent age group & peer pressure from other individuals Lack of access to electronic devices, rendering social media intervention ineffective 							

Development & Dissemination of Interventions

1. Improve Sex Education/Literacy & Raising STD Awareness

- a. Collaborating with local public/middle schools to incorporate a sex education curriculum (if one is not already in place) is one of many priorities when it comes to STD prevention as it can have lasting, positive effects on individuals later in life, i.e. STD prevention in adulthood, decreased unplanned pregnancies, etc.
 - i. Currently, sex education programs vary greatly across the U.S. and **only 39 states and the District of Columbia are required to have some sort of sex education and/or HIV education**, ranging from abstinenceonly programs to comprehensive sex education (CSE). This in itself is an issue, as adolescents and young adults are especially prone to STDs due to a lack of knowledge/misinformation on the subject. tarting from a young and impressionable, it is important to instill the importance of proper *and* consistent use of condoms in the event that abstinence is not possible, since these are the most reliable ways of preventing an STI in all age groups.

- ii. Schools that offer limited sex education, i.e. those with abstinence-only programs, should work towards *replacing them* with comprehensive sex education (CSE), as CSE has proven to be more effective at preventing STIs than those that only focus on abstinence. CSE includes topics like:
 - 1. Human development, contraception, childbirth, and STIs, including HIV
 - 2. Anatomy and reproductive health
 - 3. Discussions about family life, relationships, culture, and gender roles, as well as human rights, gender equality, bodily autonomy and threats, i.e. discrimination, sexual abuse, and violence
- b. Social media, i.e. Instagram or TikTok, can also be utilized to bring about further awareness of STDs and to highlight irreversible complications, i.e. an increased risk of infertility, heart disease, and cancer, as a result of STDs while incorporating preventative strategies to decrease the spread of STDs in NYC.

2. Increase Access/Funding to Clinics in Affected Communities

- a. Analysis of data can expose communities with higher STI rates throughout NYC. These areas should be targeted by increasing access to clinics. Access to clinics with high quality healthcare providers will ensure better health services to the affected individuals. Methods could include the addition of community health care centers within heavily affected areas which can reduce travel time to follow-up appointments. By establishing a primary location of operation, this type of intervention can spread out to include pop-up testing directly in neighborhoods with high rates of STIs.
- b. For example, according to NYS Department of Health Sexually Transmitted Data and Statistics, Kings County, Brooklyn had the highest rate of gonorrheal infection in 2019. Establishment of multiple community centers in this area could provide access to care and education for the surrounding population. Community health care centers are currently located throughout the city, but are plagued with shortages and lack of resources. One way to tackle this issue is to increase funding. Funding can be provided by the local government with a focus on targeting the reduction of STIs. These community health centers can also be a safe haven for individuals with fear and anxiety, effectively removing any barriers for those seeking care and testing. In essence, community health care centers can serve multiple purposes with the overall goal of achieving a reduction in STIs and thus increasing their overall effectiveness and involvement within the community they serve.

3. Expand Access to Contraceptives & Increasing Guidance on Safe Sex Practices

- a. According to the World Health Organization, more than 1 million sexually transmitted infections (STIs) are acquired every day worldwide. Male condom use is one of the most effective means of preventing STIs. Male condoms, in addition to helping prevent pregnancy, have been known to provide protection against STIs such as HIV, gonorrhea, chlamydia, genial herpes, human papillomavirus (HPV), and syphilis.
 - Thanks to the Affordable Care Act (ACA), insurance companies provide coverage for different types of contraceptives including barrier methods. Those without insurance can look towards community/non-profit clinics, Federally Qualified Health Clinics (FQHCs) or Planned Parenthood for low-cost options. A greater effort to push forward these initiatives can have a greater impact on reducing the rates of disease transmission.
 - 2. An initiative can also be done to further instruct the proper use and handling of contraceptives so that these methods are the most effective. Focus should rest on the following:
 - a. Consistent & correct use
 - b. Latex condoms should be the material of choice, since synthetic material and "natural membrane" condoms do not protect against STIs
 - c. Latex condoms should not be used five years after the manufacturing date or past the expiration date

Evaluation & Maintenance

Our public health program aims to reduce sexually transmitted infection rate by approximately 70-80% within a two-year period. As part of our evaluation and maintenance process, the program will be evaluated on a biannual basis, where members of staff can convene and review the most updated infectious data as released by the NYSDOH. Based on this information, we can reinforce *or* modify any current interventions to better suit the needs of our target populations.

One way that we can assess the success of our program is with a thorough analysis of patient care interventions, which can be obtained from local community health centers all while complying with the HIPAA Privacy Rule. With respect to education, our main objective is to expand the reach of existing and newly instated sexual education programs, targeting as many adolescents and community members as possible. We can assess this by tracking the attendance at every educational event/seminar, as well as monitoring check-ins at health centers; after gathering and evaluating this information, we anticipate having a better sense of how *acceptable* the program is to our target populations.

According to the New York City Council, NYC Health + Hospitals received 800 million dollars from the annual city budget in 2021. Given this enormous budget, working in tandem with NYC Health + Hospitals will help provide the funding and testing

necessary to achieve our goals of reducing infection rates. Furthermore, having access to their system could provide additional data in regards to patient outcomes, measure those who are most affected by STIs/STDs, and highlight locations with the highest incidence. Finally, surveys can be conducted at the end of every office visit to assess the effectiveness of outreach programs and patient care while simultaneously providing invaluable data on the overall performance and quality of these programs.

All of the above data can then be further analyzed and interpreted using biostatistics to establish a possible correlation between marginalized communities and the rate of infections. If our public health program is in fact an effective program, we should see a decrease in the rates of transmission over the next few years, with a downward trend if/when displayed graphically. Hopefully, with the success of this program, we can help initiate a widespread effort to combat STIs/STDs on a national level.

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