MSM and Syphilis:

What’s the Message?

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Building Healthy Online Communities

California Syphilis Prevention Summit
January 9, 2017
Early Syphilis Among Men in CA 2000 - 2015

We went from 501 cases to 8,469 cases.
During that time, we tried all this…
Did We Blow It?

DON'T BLOW IT!
SEXUAL HEALTH IS NO DRAMA!
Failure is Relative

• Did we really fail?
  – Some campaigns showed increased testing
  – Some campaigns coincided with morbidity dips or plateaus

• To the extent that we were unsuccessful, how much of that was due to problems of:
  – Scale or duration?
  – Changes in the landscape?
  – Our fundamental product (e.g., condoms, testing)?
What we hope you get out of this:

• What’s the question: a messaging vocabulary
  – What have we learned?
  – What’s new in our landscape – how must we adapt?

• Where do we go from here? (with discussion)
  – What data do we need?
  – What resources do we have, or can we get?
  – How can we collaborate to achieve needed scale?
  – How can we think strategically about messaging in a sustained way?
A Messaging Vocabulary: the “5 P’s” (The “Social Marketing Mix”)

- **Product**: Behavior to be adopted, *and its benefits*
- **Price**: What consumer must give up to get benefits
- **Place**: “Channels of distribution”
  - Where target is encountered (communications)
  - Where desired behavior is available to target
- **Promotion**: Means of conveying the message
- **Publics**:
  - Target audience
  - Gatekeepers (e.g., providers, media influencers)
  - Policymakers
Some syphilis prevention messaging has focused on behavioral prevention...
Partner Notification

If you can't tell him in person...
There's another way.
Telling your partner you've got an STD or HIV is not easy. With inSPOTLA.org, it's whole lot easier. Send an ecard from inSPOTLA.org. It's free. It's fast. It's completely anonymous. You can include a personal note.
The ecard will have links to what your partner needs to know. inSPOTLA also has information on local STD and HIV testing. You can do this. They deserve to know.

Tell your partners, www.inSPOTLA.org
...and now we have PrEP
But mostly, it’s been testing and treatment.

Healthy Penis, San Francisco, Cleveland, Seattle, Santa Clara, Palm Springs, San Jose, Winnipeg, 2002-2005, 2009

Stop the Sores, LA County, 2002-2005, also Portland, Philadelphia

I Have Syphilis, New York, 2016
Why is “Testing” our Main Product?

- We think most sexual risk-reduction messages won’t work
- Clear, simple, message
- Measurable
- In theory, effective (curable, stops transmission)
Explicit and Implicit Benefits Used in Recent campaigns

Being cured / disease free (in contrast with HIV)
Prevent serious complications like neurosyphilis. “Check Yourself” (LA County)
Getting syphilis can be especially devastating for anybody with HIV. Your viral load shoots up. Your CD4 count drops. You just made it harder for your meds to work. Worse, if you don’t get treated fast, you put yourself at risk for early brain and nerve damage.

You can get syphilis through oral or anal sex. Fortunately, it’s curable. But it’s tough to catch, which is why it’s important to get tested regularly.

Grizzly night? CHECK YOURSELF.

ReallyCheckYourself.org
Prevent getting or transmitting HIV.

“"I have syphilis,” NY, 2016, website FAQ

<table>
<thead>
<tr>
<th>Syphilis and HIV</th>
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</thead>
<tbody>
<tr>
<td><strong>If you are HIV negative...</strong></td>
</tr>
<tr>
<td>Syphilis causes open sores. If you're exposed to HIV while you have sores, the risk of an HIV infection increases. Anyone diagnosed with syphilis should also be tested for HIV. HIV-negative people diagnosed with a new syphilis infection should seek education on PrEP. Anyone at high-risk for HIV can benefit from prevention services, routine medical care, access to condoms, and ongoing screenings.</td>
</tr>
<tr>
<td><strong>If you are HIV positive...</strong></td>
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<tr>
<td>Someone with both HIV and syphilis is more likely to transmit HIV to sex partners. Anyone with HIV who is sexually active should be tested for syphilis at least annually, and more frequently depending on their sexual practices.</td>
</tr>
</tbody>
</table>
Prevent unsightly symptoms

Hi, Hi, Hi, it's ADORA with your local STD報告!

HIV: Be careful ladies, beautiful South Florida comes in at No.2 in the nation with this bad boy! GONORRHEA: Honey, the clap is back!
HEPATITIS C: It's alive and well and this one owns beachfront property on SOBE!

And now for our featured STD of the week!
SYphilis

Tap your shoes 3 times Dorothy because this ones a Twister!
Lesions and Rashes and Sores Oh My!!
Syphilis is more popular than the wizard at a circuit party!
So wrap up your gear, cover up and remember... there's no place like home.

For STD information, contact one of our local testing clinics:

DADE
305-325-3242

ORLANDO
407-296-5177

PALM BEACH
561-882-3120

BROWARD
954-788-6121

PINELLAS
727-824-6911

TAMPA
813-307-8000 ext. 4550

Sexually Transmitted Diseases

I have syphilis

Under the shirt are syphilis rashes. It's not a good look.
Stay healthy and active. Get checked for syphilis.

Confidential testing near you: SyphilisTestNY.org

Department of Health
Building a healthy gay community

“Healthy Penis”, San Francisco

“We All Test”, San Diego

“Meanwhile, in Palm Springs
San Francisco needs our help! To the Penismobile!”

“When we all test for syphilis, we stay informed and improve the health of the gay community.”

Sign up for syphilis testing email or text reminders at WeAllTest.com
Others depending on you?
“Dogs are Talking,” San Francisco, 2007-08

So many crotches, so little time.

“Man! People say I look like my guy, but you two even have the same rash...”

“Hey, mine’s from fleas. He needs a blood test to find out what he’s got.”
Or... routinizing sexual health
(also = freedom, intimacy, sexual vigor?)

“The Drama Downunder,” Australia
What’s the benefit / emotional connection here? “Buck Syphilis,” San Francisco, 2006
Benefit / connection?
“Check it out” Australia, 2004

LET’S TALK MAN TO MAN

No matter where you’re from, and what you’re into, if you’re having sex, you should have a regular sexual health check. Some STIs (sexually transmitted infections) don’t show symptoms – so you could have one and not know it.

To find out more, visit a doctor for a private and confidential check up.

For information and referral about sexual health checks call AIDSLINE on 1800 133 392 or go to www.checkitout.net.au.
Benefit / connection?
“Attack of the Cursed Syphilis,” Toronto, 2010, also Canada nationally
Meanwhile, outside public health:
How big is the threat in the eyes of our audience?

“What’s this obsession with syphilis? It’s more easily curable than the common cold.”
- Australia*

“An acceptable part of being sexually active…”
- Los Angeles**

**Plant, Stahlman, et al, Perspectives on Sexual and Reproductive Health, 2015
Do we agree with our audience?

• Why do we actually care about syphilis in MSM?
  – Complications?
  • Prior evidence of increased neuro in HIV-positive men
  • Recent ocular syphilis alert
  • Numerous exotic reports
  • But -- little clinical observation (that we know of…)
  – Bridging → Congenital
  – HIV facilitation

• Why do we expect MSM to care?
How do landscape changes affect our product?

• The MSM syphilis outbreak was driven by a new landscape in 1999-2000, including:
  – HAART
  – Internet sites for hooking up
  – Meth

• New changes since then:
  – Even easier hook-up apps
  – Better and more widely used HAART
  – PrEP: Less HIV risk, more STD testing access
  – Other changes in health care access (ACA?)
What’s the PRICe of our product?

- **Condoms:**
  - intimacy, etc.

- **Testing:**
  - Money
  - Time
  - Confidentiality
  - Hassle
  - Meaning of result?
Who are our PUBLICs?

- MSM: how are we segmenting our main target?
  - HIV status
  - Language
  - Ethnicity
  - Risk? (e.g., users of dating Apps, PrEP clients)
  - Syphilis history / clustering

- Do new media decrease the payoff of segmentation?

- Others:
  - Providers?
  - Community organizations and advocates?
  - Media influencers
  - Gatekeepers: porn, electronic media sites, dating apps, etc.
  - Funding agencies?
What’s the PLACE where our product (behavior) can be practiced?

- Testing:
- Risk reduction behavior
- Partner contact
What’s the PLACE of our message?

• Changing information landscape:
  – Traditional ad spaces: outdoor, gay press, radio, TV
  – Dating apps
  – Websites
  – Social media
  – YouTube channels
  – Blogosphere

• Others:
  – Clinic waiting rooms (HIV care, PrEP)
  – Other venues: bars, gyms, bathhouses, etc.
  – Porn?
December holiday promotion in gay bars:
Keychain flashlights with “check him out” slogan

“Shed Some Light on Syphilis”
LA County, Dec. 2001
What’s the PROMOTION?
How do we get the message out?

• Paid ads and materials
• Publicity / free media / editorial
• Spokespersons (and their social networks)
• Digital content (and those networks)
• Electronic reminders (text, email)
• Contests
• Events
Big Free Promotion
Examples of Earned (Free) Media from “Stop the Sores”

Daily Show, “Sore Loser”
7/23/02

YouTube.com
Generating your own news coverage: Stop the Sores TV Ban Press Release

Nov. 2004:

- Campaign community partner AHF protested CBS refusal to show Stop the Sores cable ad.

- Refusal expected, response planned in advance.

- Huge media response.
Some young African American gay men report taking cues from the kind of porn they watch.*

Growing proportion of gay porn producers making bareback films (30/41)**

*Arrington-Sanders, R., Arch Sex Behav 2015.
** Str8upgayporn, 2015
What did we achieve with all that?

• Clear evidence of capacity to build brands

• Clear evidence of capacity to increase syphilis awareness

• Clear evidence of some capacity to increase testing

• Some ecologic correlation with morbidity dips and plateaus (highly speculative, and combined with many other efforts)
<table>
<thead>
<tr>
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<th>Pub. Date</th>
<th>Methods</th>
<th>Results</th>
<th>Testing Effect</th>
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<tbody>
<tr>
<td>Check-It-Out, Victoria, Australia, <strong>2004</strong> (3 segmented campaigns)</td>
<td>Guy 2009</td>
<td>Lab records, MGCPS convenience sample, 2004-2006, n=2,794-3,394</td>
<td>Over three surveys, no changes in syphilis testing, but increase in other STD tests, past 12 mos. Lab records showed no testing increase either.</td>
<td>No increased syphilis testing.</td>
</tr>
<tr>
<td>Dogs Are Talking, SF, <strong>2007</strong></td>
<td>Stephens 2008</td>
<td>Street intercept, n=289</td>
<td>Only one-third recall. No overall effect on testing. But effect on HIV+ men.</td>
<td>P&lt;0.031 (HIV+ men only)</td>
</tr>
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<td>Attack of the Cursed Syphilis, Totonto, <strong>2010</strong></td>
<td>Canada ACT Report 2011</td>
<td>Pre/Post Online surveys, n=871 and 610, 71% and 74% MSM</td>
<td>66% recall. Increased knowledge – syphilis and testing access. Limited increase in testing (ever or in past 6-12 mos.). But clinics did report increases.</td>
<td>Survey: limited increase. One clinic: &gt;78% increase.</td>
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## More Problems Showing Testing Impact

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<td>Drama Downunder Australia, 2008-09</td>
<td>Pedrana 2012</td>
<td>Online surveys convenience / snowball cohort, n=295; clinic data</td>
<td>86% campaign recall. Aided recall associated with increased syphilis testing, last 6 mos, but NOT unaided. Significant increases in clinic testing.</td>
<td>1.6 PR (aided recall only)</td>
</tr>
<tr>
<td>Drama Downunder Australia, 2010-14</td>
<td>Wilkinson 2016</td>
<td>Online surveys convenience / snowball cohort, n=242 (completed 3 surveys); clinic data</td>
<td>71-78% campaign awareness, but only 43-53% slogan recall. No impact on syphilis testing; among HIV+ men actual decline in syphilis testing trend, possibly due to clinic practice changes.</td>
<td>No change in HIV neg. men, decline in prior increase in testing among HIV+ men.</td>
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## Evidence of Increased Testing from Social Marketing Campaigns for MSM

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<td>Healthy Penis, SF, 2002-03 (Also 2004-05)</td>
<td>Montoya 2005, Ahrens 2006</td>
<td>Street intercept survey, n=244</td>
<td>80% campaign recall. “Unaided awareness” (33% of sample) = more testing, last 6 mos</td>
<td>3.2x</td>
</tr>
<tr>
<td>Stop the Sores, LAC, 2002-03, 2004</td>
<td>Plant 2010</td>
<td>Street intercept survey, n=277</td>
<td>71% campaign recall. Aware of campaign = more testing, last 6 mos</td>
<td>1.83x</td>
</tr>
<tr>
<td>Check Yourself, LAC, 2009</td>
<td>Plant 2014</td>
<td>Time-location survey, n=306</td>
<td>88% campaign recall. “Confirmed awareness” of campaign (knew it was about syphilis) = more testing, last 6 mos</td>
<td>6.37x</td>
</tr>
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Key Features of these campaigns

- Formative research
- Extensive involvement of gay community
- Street outreach
- Multi-media
- Inter-jurisdictional collaboration (STS, HP)
- Formal evaluation, shared results in peer journals
- Substantial scale:
  - Stop the Sores ~ 3 yrs
  - Check Yourself 3+ yrs
  - Healthy Penis 3+ years
The Perils of Insufficient Scale / Dosage

Syphilis Cases in Men
L.A. County, 2000
as reported by the L.A. Times

![Syphilis Cases Graph]

Board Votes $1.5 Million to Fight Syphilis Outbreak

Responding to an outbreak of 52 syphilis cases among predominantly gay men with multiple sexual partners, the Los Angeles Board of Supervisors approved a $1.5 million emergency campaign Tuesday to combat the disease and promote safe sex.

"Health advocates fear that the syphilis outbreak signifies increasingly risky sexual behavior on the part of those who have contracted it, which could increase the spread of AIDS. Some advocates criticized the county for not moving quickly enough to stem the behavior."

"If we don’t do something fast, we’ll have a really big mess," said Kathy Watt of the Van Ness Recovery House. "It’ll be the 120 syphilis cases reported in the county involved gay men."

The recent cases involve men from West Hollywood, Hollywood, Silver Lake and Long Beach, officials said. About 80% of the men have the virus that causes AIDS, which officials say is cause for additional alarm.

Supervisor Zev Yaroslavsky, whose Westside district has been the site of much of the outbreak, reminded Fielding that the county has the power to order sex clubs and bathhouses to provide condoms to patrons, and even to close the establishments if necessary.

"I don’t know anyone here who wants to shut them down," Yaroslavsky said, "but ... if they don’t cooperate to try to curtail the spread of [sexually transmitted diseases] in their establishments, at some point there’s going to be no choice."

Fielding said the bathhouses and sex clubs had been highly cooperative and said the county wanted to work with them and ensure they voluntarily distributed condoms before taking legal action that could be tangled up in the courts.
Syphilis Cases in Men, L.A. County, 2000
as reported by the L.A. Times

It's Back, It's Curable

Syphilis Outbreak Among Gay Men Said to Be Fading

Disease: Only one new case has been reported in last six weeks. Aggressive ‘safe sex’ push is credited.

By JULIE MARQUIS
TIMES HEALTH WRITER

Los Angeles County public health officials announced Wednesday that an outbreak of syphilis primarily among gay men appears to be subsiding.

Dr. James Haughton, medical director of public health for Los Angeles County, said that despite increased surveillance and testing, just one new case of syphilis has been reported in the last six weeks.

“We are hoping the outbreak has peaked and is waning now,” he said.

Since March, the tally of reported cases climbed to 55, most of them among gay men in Hollywood, West Hollywood and Silver Lake. Ten cases were reported among gay inmates in the county jail.
Health Dept. Budgets for Advertising Online (n=92)

BHCO Survey

2015

- Min = $200
- Max = $100,000
- Total = $687,567
- 25 HDs

2016

- Min = $200
- Max = $500,000
- Total = $1,750,938
- 34 HDs
Other Campaign Impact Metrics?

- Awareness / knowledge
- Clinic visits
- Web metrics (page clicks, views, etc.)
- Media discussion
- Other feedback
Comments...

- “They loved the flashlights.”
- “…loved the flashlights.”
- “… really liked the flashlights.”
- “I have a flashlight on my keychain now.”
- “I’m still using my flashlight on my keychain.”
- “One guy wanted one after we ran out because his straight girlfriend wanted one.”
- “We get a lot of bar gimmicks. This was a real good one, a big hit.”

Bar staff survey comments,
“Shed Some Light on Syphilis”, n=12
The Ultimate Metric?
Ultimate Metric: Impact on Morbidity?

Early Syphilis Cases Among Men Who Have Sex With Men
Los Angeles County
January 1, 2000 - December 31, 2003

Stop the Sores Launch (June 20, 2002)

= 20 cases

Quarter of Diagnosis
Source: LAC DPH DHSP
Early Syphilis Cases among MSM / MSMW
L.A. County, 2000 - 2009

Sources:
1 LAC DHS STD Program Early Syphilis Surveillance Summary, Cases Reported as of July, 2005
2 LAC DPH STD Program Early Syphilis Surveillance Summary 2010, Cases Reported as of May 31, 2010
Syphilis Cases in Men, L.A. County, 2000
as reported by the L.A. Times

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Since March, the tally of reported cases climbed to 72, most of them among gay men in Hollywood, West Hollywood and Silver Lake. Ten cases were reported among gay inmates in the county jail.
Are trends local or general?

Primary and Secondary Syphilis Cases in MSM, by Region and Year
CA, 2001-2013*

* Source: CA STD Control Branch, in 2013/2014 STD Surveillance Data: US, California and Los Angeles County
Los Angeles County Department of Public Health Division of HIV and STD Programs January, 2016
Where Do We Go From Here?
Stages in Developing Social Marketing Messages and Campaigns

1. Planning & Strategy Development
2. Developing & Pre-testing Concepts, Messages, & Materials
3. Implementing the Program & Tracking
4. Assessing Effectiveness & Making Refinements
Planning / 1

• Not just one talk: need ongoing strategic effort
• What is our PRODUCT?
• Who are our PUBLICS and segments?
• What scale are we prepared to attempt?
• How engage audience in process?
• Who are our partners?
• Do we have a theoretical model?
Planning / 2

• What can we do together – save $$$, achieve scale?
  – Joint campaigns to pool resources, increase saturation?
  – Strategy sharing
  – Research and formative data collection
  – Media production
  – Evaluation
Development and Pre-Testing

- Legacy of experience
- Address landscape changes
Top reasons MSM aware of Healthy Penis campaign still not tested, n= 102 (Montoya, 2005)

- Low or no risk (22%)
- Monogamous (14%)
- No symptoms, feel healthy (12%)
- No need (12%)
- Not getting around to it (9%)
- Tested > 6 mos ago (7%)
- Not convenient (4%)
Attitudes of MSM with syphilis 2x or more in last 2 years, n=19 (Plant, 2015)

- Lots of stigma: “dirty,” “nasty,” “more [stigma] than HIV”
- Did not discuss with partners or peers
- Many concerned about perceived health effects
- Most not worried enough to change risk behavior (curability)
- Sense of fatalism about being re-infected
- Only some named special risks they thought led to infection:
  - Partying more than usual
  - Unemployment → more sex
  - Meth
  - Bipolar
Pre-testing, Re-Testing: American Men’s Internet Survey (AMIS)

- Survey of MSM in US
- Objective: Assess trends in HIV risk behavior, use of HIV testing services, STD testing and access to prevention services
- Goal of ~10,000 completed surveys per cycle (year)
- Funded by MAC AIDS Fund
- Based in Emory University
New Options for Creative Development and Testing (LAC)

• Solicit numerous approaches through design contests
  – Access developers from target audience
  – Widens pool of talent and range of ideas
  – Can receive many approaches quickly
  – Low-cost way to enlist audience and get new ideas

• Assess top submissions through designated reviewers

• Test top 10-15 ideas with audience focus groups

• Partner artists with other resources as needed

• (Product issues must be built in to contest parameters)
Implementation and Tracking
Profile Option Challenges

What do they mean? Self or Partner? Status or Strategy?

- Safe(r) Sex
- Positive
- Positive/Undetectable
- Treatment as Prevention
- PrEP or I’m On PrEP
- Condoms
- Negative on PrEP
- Negative
- Don’t Know
Profile Editor

Your own words

What I do: SCRUFF Founding Partner

Cancel Safety Practices Done

For more information about what this means, visit

http://www.scruff.com/safersex

Condoms

PrEP

Treatment as Prevention

Safety Practices PrEP

Social

Scruff.com

Optional

@thejasonscruff

Profile progress

All done! Your profile is filled with details so guys you like can more easily find you.
<table>
<thead>
<tr>
<th><strong>SEXUAL HEALTH</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>HIV Status</strong></td>
</tr>
<tr>
<td><strong>Last Tested Date</strong></td>
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</tbody>
</table>

**Sexual Health FAQ**
Learn more about HIV, PrEP, getting tested, and other frequently asked questions.

**SOCIAL LINKS**

<table>
<thead>
<tr>
<th>HIV Status</th>
<th>Done</th>
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<tbody>
<tr>
<td>Do Not Show</td>
<td></td>
</tr>
<tr>
<td>Negative</td>
<td></td>
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<tr>
<td><strong>Negative, on PrEP</strong></td>
<td></td>
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<tr>
<td>Positive</td>
<td></td>
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<tr>
<td>Positive, Undetectable</td>
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PrEP Talk
(rough cut)
DaddyHunt Web Series – “Choices”
DaddyHunt Web Series – “Butt and Throat”
(Ongoing) Assessment and Refinement

Stop the Sores, 2004

REALITY HITS
Philip Morris spent 45 years killing men with this guy.

What are we prepared to do to keep them healthy?
Harlan Rotblatt
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Dan Wohlfeiler
Building Healthy Online Communities
dan,.wohlfeiler@ucsf.edu

Discuss!