

# Pathways to Congenital Syphilis Elimination

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2018 California Congenital Syphilis Elimination Summit | Oakland, CA

Thursday, September 20, 2018 | 9:00 – 10:45am





# A Plan to Eliminate Congenital Syphilis in California

## Vision

Achieve congenital syphilis elimination in California by 2023.

## Purpose

Provide all stakeholders in congenital syphilis prevention with a specific, measurable goal and action steps to guide their prevention efforts.

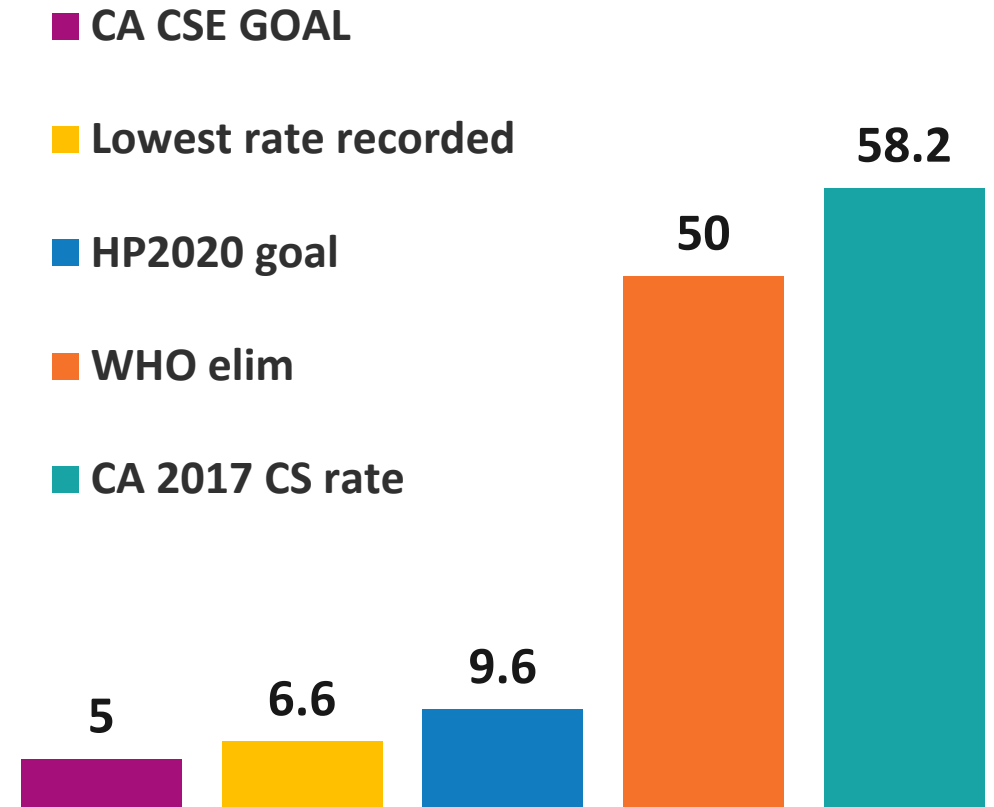


# Why a Plan to Elimination CS in CA?

- Set a goal to work towards in our CS elimination efforts
- List stakeholders to engage with and describe what those stakeholders can do to support CS elimination efforts

# Proposed Congenital Syphilis Elimination Goal

- Proposed elimination goal for births in CA: 5 per 100,000
  - Lowest rate in CA (2012) was 6.6 per 100,000
  - Healthy people 2020 goal is 9.6 per 100,000
  - WHO elimination defined as 50 per 100,000
  - CA CS rate in 2017 was 58.2 per 100,000
- Where: Statewide AND in every county with over 8,000 births
- By When: 2023



Audience: **ALL** stakeholders/partners in congenital syphilis prevention

Local health jurisdictions

State government agencies/  
programs

Healthcare providers

Community-based organizations

Corrections

Academic and Private Sectors

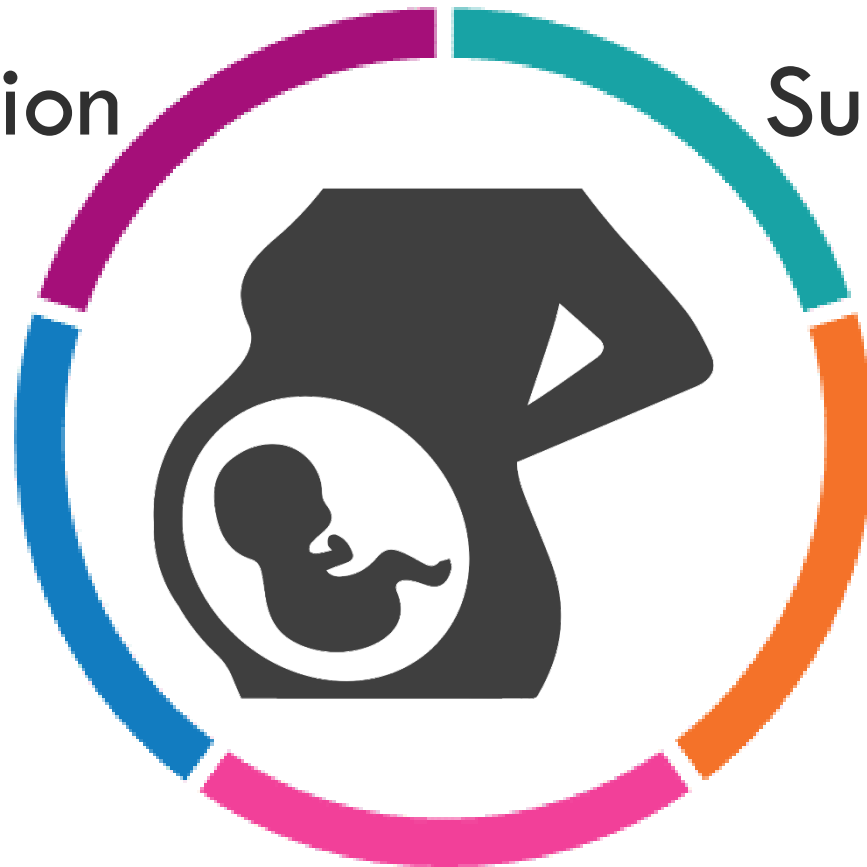
Policy makers

The public

# Framework

Disease Investigation

Surveillance/Epi



Health Promotion

Clinical

Policy & Leadership

# Sample Structure: Disease Investigation

## State STD Program:

Provide training, technical assistance, and capacity building on disease intervention and case management best practices.

## Local STD Program

Conduct case interview, management, and treatment, as well as partner elicitation, notification and treatment.

### Health Care Providers

- Ask patients about sex partners, and include information in CMR submitted to the health dept.

### Community Based Organizations

- Implement syphilis screening into programs serving the community (i.e. drug treatment facilities, homeless shelters, etc.)

### Academic and Private Sectors

- Research best practices for partner elicitation and notification of syphilis exposure

### Other Government Agencies

- MCAH coordinate with DIS to support case management as soon as a case is initiated

### Public

- Spread awareness within networks about the work DIS do and the importance of cooperation

### Corrections

- Formalize agreements with the health department about screening
- Collect locating information for individuals upon release

# Activity: Gallery Walk







# Activity: Gallery Walk – 5 Stations

**Disease Investigation**

**Surveillance / Epidemiology**

**Clinical**

**Health Promotion**

**Policy**



# Activity: Gallery Walk – Stakeholders at Each Station

- Local health jurisdictions
- State government agencies/ programs
- Healthcare providers
- Community-based organizations
- Corrections
- Academic and Private Sectors
- Policy makers
- The public
- Other stakeholders?



## Activity: Gallery Walk

- What can each of these stakeholders do to support congenital syphilis elimination efforts?
- What other stakeholders would you like included that are not seen here?

# Activity: We would like your input!

## Group A

Location: Auditorium

Facilitator:

Jessica Frasure-Williams

## Group B

Location: Room 1

Facilitator:

Ashley Dockter

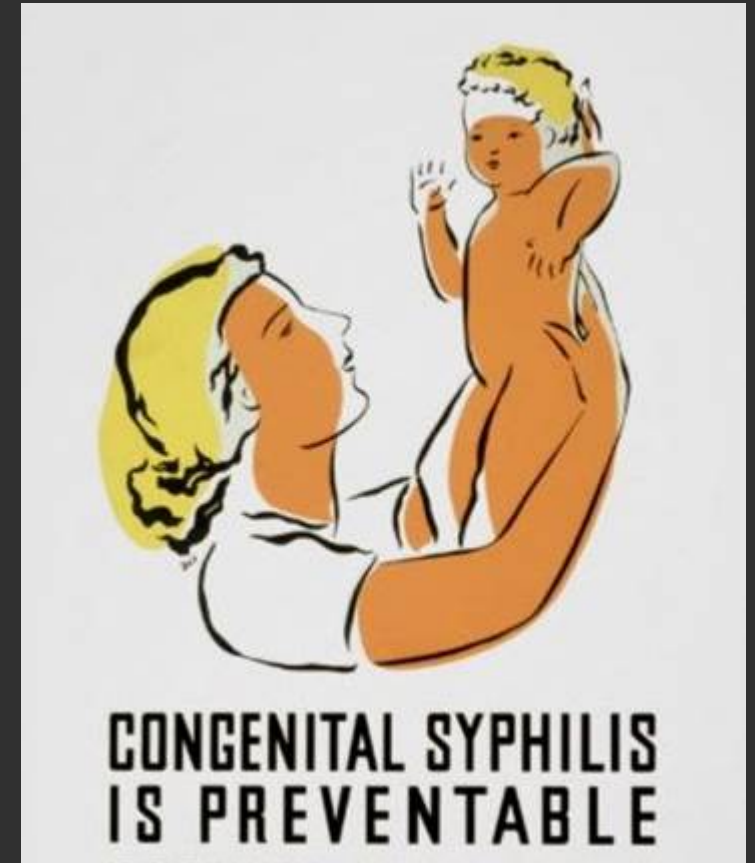
## Group C

Location: Room 10

Facilitator:

Nicole Burghardt

Thank you



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