



MOBILIZING COMMUNITY-BASED ORGANIZATIONS (CBOs) TO HELP ELIMINATE SYPHILIS AMONG MEN WHO HAVE SEX WITH MEN (MSM)



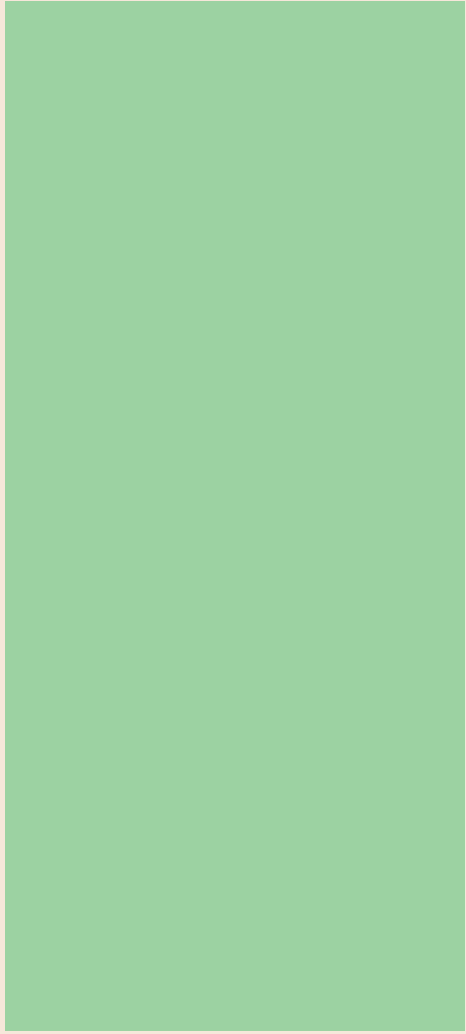
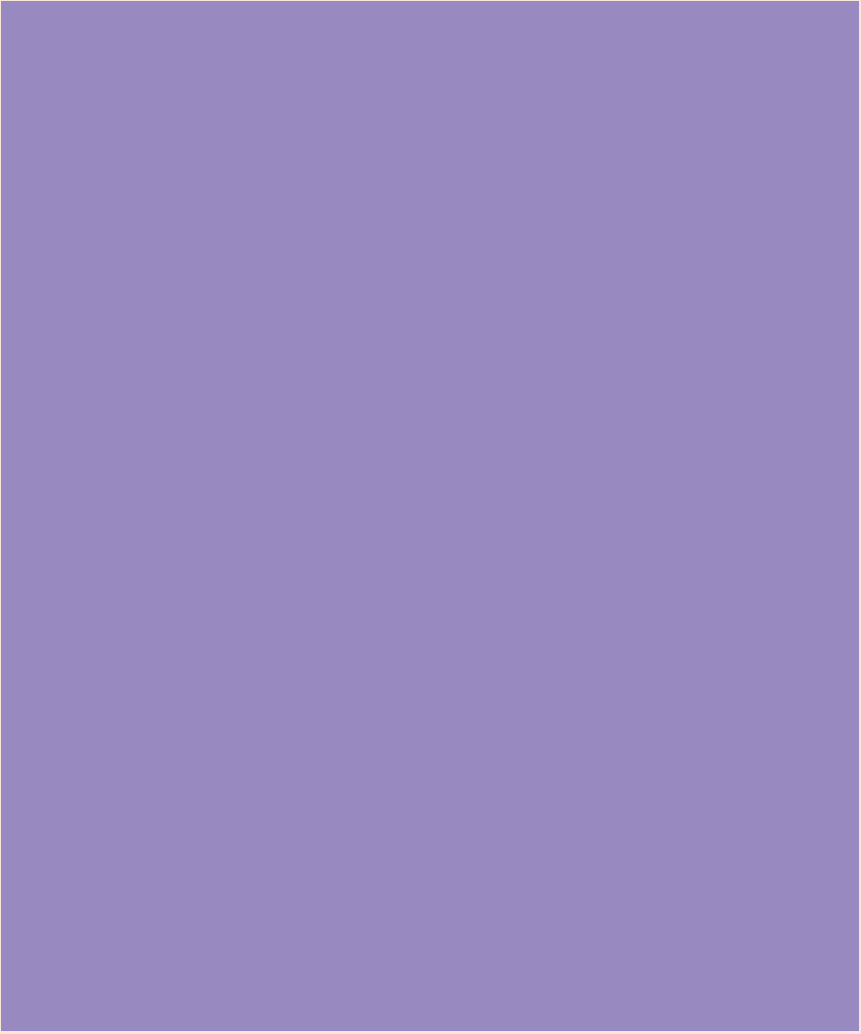
DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR DISEASE CONTROL AND PREVENTION



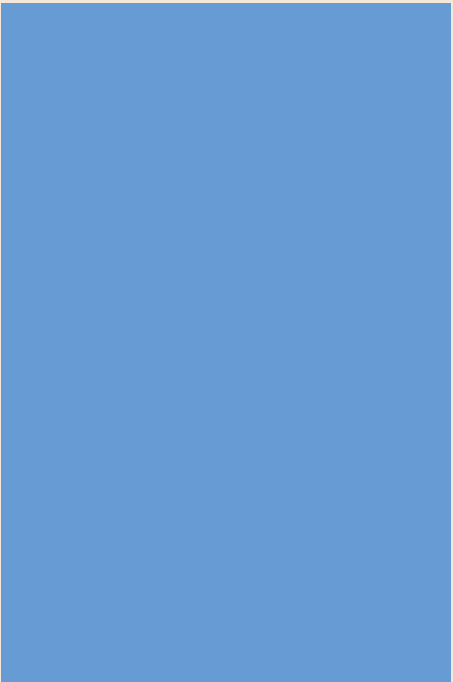
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SECTION I: INTRODUCTION



■ ■ ■ WHY IS IT IMPORTANT TO ELIMINATE SYPHILIS NOW?

According to Centers for Disease Control and Prevention (CDC) data, the number of reported U.S. cases of primary and secondary (P&S) syphilis increased slightly in 2001 (the first annual rate increase since 1990). In 2000, syphilis rates declined to 2.1 cases per 100,000 population, the lowest rate since 1941. In 2001, P&S syphilis rates increased 2.1 percent. The number of reported P&S syphilis cases increased 12.4 percent between 2001 and 2002. Increases in cases during 2000 to 2002 were observed only among men. In 2003, the rate of reported P&S syphilis among men was 5.2 times greater than the rate among women. Syphilis case increases among men are associated with outbreaks among men who have sex with men (MSM) in several cities. Such outbreaks have been characterized by high rates of HIV co-infection.

The recent outbreaks in major metropolitan areas underscore the importance of mobilization to eliminate syphilis. Although traditionally associated with minority communities burdened by poverty, racism, unemployment, and inadequate access to health care, syphilis is now affecting MSM of all social, economic, and ethnic backgrounds. Often asymptomatic, untreated syphilis can lead to serious health complications including blindness and damage to the nervous system.

■ ■ ■ WHO SHOULD USE THIS GUIDE?

This guide is designed to help State and local health departments and public health officials build their capacity to mobilize community-based organizations (CBOs) that serve MSM to join a cooperative effort to increase awareness of syphilis among MSM and to promote regular testing for syphilis and other sexually transmitted diseases (STDs).

■ ■ ■ HOW TO USE THIS GUIDE

This guide is arranged in sections on how to reach and mobilize the “gatekeepers” of CBOs that serve MSM in order to ensure their involvement in directing targeted, effective messages to raise syphilis awareness and promote regular testing for syphilis and other STDs among MSM. Each section provides suggested steps and actions to be taken. The back of this booklet contains materials to present to leaders of CBOs that serve MSM and a Resource Guide that offers information on relevant organizations, issues, and Web sites.

■ ■ ■ WHAT IS COMMUNITY MOBILIZATION?

Community mobilization engages all sectors of the population in a communitywide prevention effort. Such an undertaking brings together decision makers and policy makers; health care providers; local, State, and Federal governments; professional groups; religious associations; and CBOs. The process includes mobilizing the necessary resources, disseminating tailored information to target audiences, generating support, and fostering cooperation across all alliances.

■ ■ ■ WHY CONDUCT COMMUNITY MOBILIZATION?

Spearheading a community mobilization effort for syphilis elimination among CBOs that serve MSM in your area will require your organization’s time, energy, and resources. Depending on the syphilis and STD elimination activities already under way in your area, the goals of your community coalition could include increased awareness overall of the need to eliminate syphilis and other STDs, greater local funding for CBOs to hold syphilis education and outreach programs, and communicating with health care providers about the importance of screening for and reporting syphilis among their patients.

By building a community coalition, you will establish a unified voice and support for syphilis elimination efforts. Remember, there is strength in numbers.

Mobilizing leaders of CBOs that serve MSM to eliminate syphilis and other STDs can enhance your client base and your organization’s standing in the community. In addition to the satisfaction of helping to eliminate syphilis and other STDs, participating in community mobilization can expand the visibility and base of support for your health department, attract volunteers, possibly increase funding opportunities, and create chances for strategic partnerships that might not otherwise evolve.

■ ■ ■ WHY ARE CBOs THAT PRIMARILY SERVE MSM IMPORTANT STAKEHOLDERS IN THE EFFORT TO ELIMINATE SYPHILIS?

Syphilis is on the rise among MSM. Reports from CDC and the Chicago Department of Public Health reveal that:

- Recent outbreaks of syphilis among MSM demonstrate the underlying importance of reaching MSM with syphilis prevention and screening messages. A substantial number of newly syphilis-infected MSM also have HIV.

- Since 1997, syphilis outbreaks have occurred among MSM in Seattle, Chicago, San Francisco, Los Angeles, and Miami Beach. In each of the outbreaks, high rates of HIV co-infection were documented, ranging from 20% to 73 percent.

SYPHILIS INCREASES THE RISK OF HIV, AND HIV IS ON THE RISE AMONG MSM

- Studies show that, in addition to health risks of syphilis infection in and of itself, the presence of syphilis creates a two- to five-fold increased risk of contracting or transmitting HIV. Prevention programs working with MSM need to address STDs and their co-factor role in HIV transmission. MSM need to be exposed to the core messages:

1. Syphilis is preventable and easily cured.
2. It is important to recognize the symptoms and to get tested regularly.

- Since MSM are at increased risk for multiple STDs—including chlamydia, gonorrhea, and hepatitis A and B, as well as HIV and syphilis—intensified education about syphilis prevention and treatment should be incorporated into HIV/AIDS information already being provided for this population. Clinics and other venues that offer HIV/AIDS testing are logical locations to also offer testing for syphilis and other STDs. CDC's *Sexually Transmitted Diseases Treatment Guidelines 2006* offer recommendations you may want to consult when formulating prevention messages and programs. The guidelines are available online at www.cdc.gov/std/treatment.

- In the United States, HIV-related illness and death historically have had a devastating effect on MSM, who continue to account for the largest number of people reported with AIDS each year. As of December 2001, CDC identified MSM as accounting for 55 percent of all diagnosed AIDS cases among men.

A Look at a Promising Practice: *An innovative social marketing campaign promotes syphilis awareness and testing among MSM in San Francisco. The campaign uses cartoons that run in gay media outlets and on city bus shelters. Costumed cartoon characters have appeared at various street fairs and other events. The San Francisco Department of Public Health (SFDPH) Web site offers online syphilis test results, pictures, features, fact sheets, a list of FAQs, and answers to questions e-mailed by visitors to the site.*
<http://www.healthypenis2003.org>

A study conducted by the SFDPH between November 15 and December 6, 2002, showed the campaign resonated with its target audience. Eighty-nine percent of the 125 men surveyed had seen the campaign. Those who had seen it were more likely to have recently been tested for syphilis than those who had not—53 percent to 21 percent, respectively. Of those who had seen the campaign, 49 percent said it made them want to get tested for syphilis; 46 percent said they would wear a condom; and 30 percent said it made them want to get tested for HIV.

FRAMING THE ISSUE TO CBO LEADERS SERVING MSM TO ENSURE THEIR INVOLVEMENT

Since MSM community activists have a vested interest in fighting HIV, the syphilis–HIV connection can be a powerful incentive to participate in syphilis prevention efforts. Let CBO leaders know their effort and yours are a part of the same fight. To enlist them in your campaign, present statistics relating to the audience they serve. If you are meeting with the leader of an organization that serves a diverse clientele including women it is appropriate to talk about mother-to-child syphilis transmission in addition to providing statistics on syphilis prevalence in men, women, and children from various ethnic groups.

- Most individuals who lead MSM-focused CBOs have prior experience in community mobilization, having raised community awareness about HIV/AIDS. They helped improve community infrastructures to deal with the epidemic, and they empowered other CBOs to take part in HIV/AIDS prevention planning and implementation. Be sure to let CBO leaders know that you value their expertise, experience, and the knowledge and skills they can contribute to the fight against syphilis.

- Leaders of CBOs that serve MSM are likely to be aware of MSM-friendly health care providers. Encourage CBO leaders to contact these health care providers to encourage them to speak with their MSM patients about (1) syphilis outbreaks in the area, (2) the signs and symptoms of syphilis, (3) the need to be on the lookout for syphilis symptoms, and (4) the need to be tested at regular intervals if at risk. Although physicians are generally receptive to an effort to eliminate any disease, some health care providers may not be aware of symptoms of the disease and treatment protocols. Offering doctors small plastic cards that outline diagnostics and stan-

dards of care for syphilis patients and holding workshops to educate medical staff about the disease are two suggested ways the coalition can cooperate with the medical community to promote comprehensive health care services for MSM.

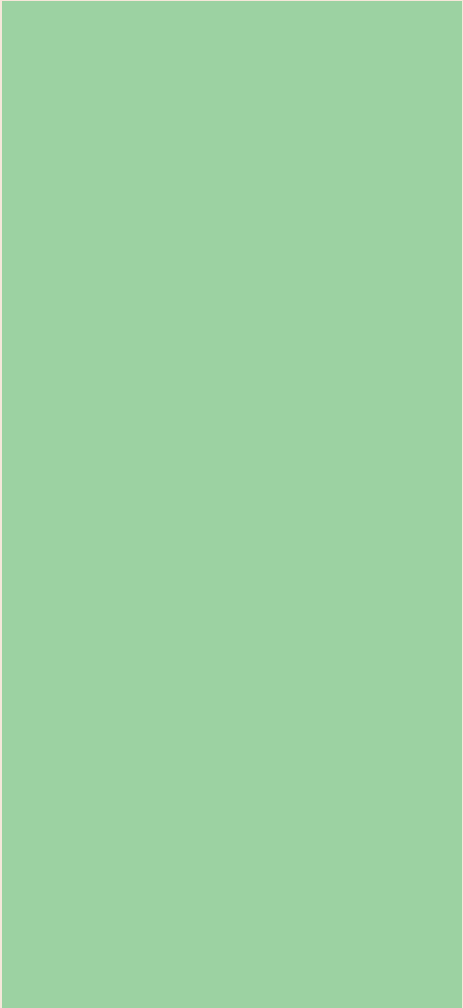
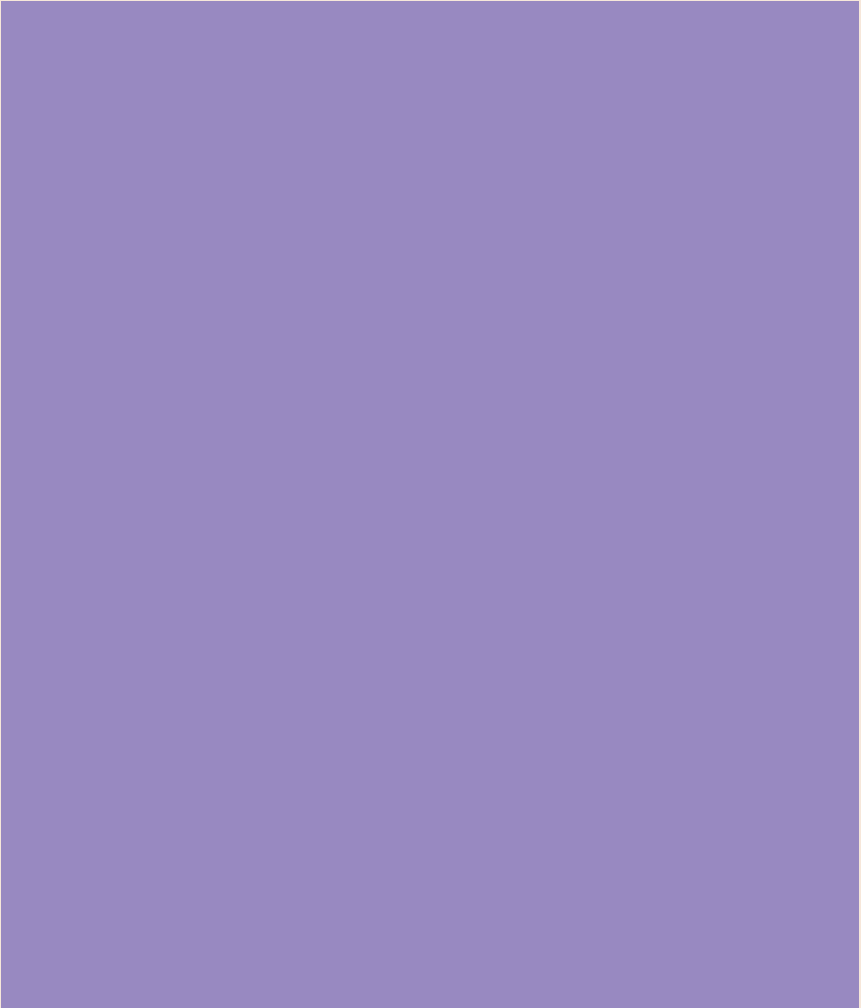
■ ■ ■ CHALLENGES TO COMMUNITY MOBILIZATION EFFORTS TO ELIMINATE SYPHILIS

Together with the Syphilis Elimination Effort (SEE) Community Mobilization Guide, other resources (*A Guide for the Leaders of Community-Based Organizations* and *Screening and Testing Men Who Have Sex with Men for Syphilis—A Guide for Health Care Professionals*) provide you with the tools and counsel for conducting community mobilization efforts. Yet, it is important to recognize and prepare for challenges you may experience along the way. Such challenges might include:

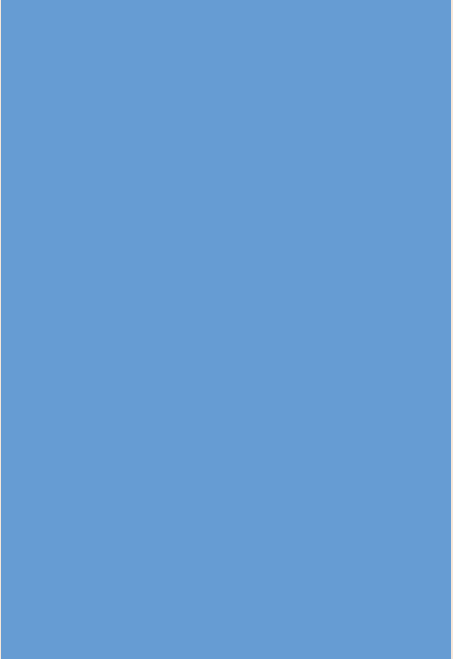
- **Perceived severity of the problem:** Because syphilis is curable, some community activists and health care providers may not believe that a concerted effort to eliminate syphilis is a high priority. Syphilis elimination may not be a priority in your own health department. Often, communities focus on other public health and social concerns such as asthma, cancer, heart disease, HIV/AIDS, drug abuse, homelessness, crime, and poverty. However, as mentioned above, CBOs serving the MSM community know the link between syphilis and HIV transmission, and these CBOs will be amenable to cooperating in the syphilis elimination effort—to the extent that their resources allow.
- **Resource allocation:** Most CBOs that serve MSM operate within limited budgets, and some may see syphilis elimination as an issue that would compete with HIV/AIDS for media attention, resource allocation, and political focus. They may think that HIV/AIDS, a fatal disease, overshadows syphilis and other curable STDs. If budget is a concern, remind leaders of the following:
 - Collaborating offers a way to leverage scarce funds and can spread the cost of a large-scale initiative, and HIV/AIDS prevention messages can be combined with syphilis messages to target MSM for better health.

- Joining a community mobilization effort may enable them to qualify for more grants from foundations and government agencies.
- Partnering with similar organizations can raise their public profile and provide valuable opportunities for future interagency cooperation.

- **Lack of knowledge about the disease and its consequences:** There is a lack of awareness in the general public about syphilis being an STD that still affects people. Most people do not realize syphilis is a public health problem that needs to be addressed. Some people believe that syphilis is “a thing of the past.” Even after well-publicized outbreaks of the disease in several major U.S. cities, public awareness decreased as people perceived the outbreaks were under control. Additionally, public needs to be made aware that syphilis can spread by oral sex. Partnering with CBOs that serve MSM can enhance the dissemination of pamphlets and other informational materials about syphilis. These may be included in information packets that organizations routinely hand out at MSM venues.
- **Lack of a spokesperson:** Because there is no visible advocate for syphilis elimination some community members may be skeptical that a campaign to eliminate syphilis would succeed. One way to overcome this barrier is to enlist local celebrities, elected officials, or community leaders to speak out about the syphilis problem and to appear at public press conferences, health fairs, and community events.
- **Social taboos:** To some people, syphilis connotes “dirtiness,” promiscuous sex, and lower class associations. Among MSM, syphilis may be regarded with more stigma than HIV. Among African Americans, HIV is linked with homosexuality, while syphilis is still considered a heterosexual disease. Leaders of CBOs that serve MSM are likely to understand that stigma surrounding a disease is harmful to efforts to cure, contain, or eliminate it. After all, their organizations have done much to lift the stigma from HIV/AIDS among the general public.



SECTION II: MOBILIZING LEADERS OF MSM-FOCUSED CBOs TO HELP ELIMINATE SYPHILIS



Mobilizing community activists to help eliminate syphilis may seem to be a very challenging task. However, if you break the effort into phases, you will find you can manage it in a focused, systematic fashion.

■ ■ ■ PHASE I: PLANNING

INVOLVE THE RIGHT PEOPLE

To effectively reach the MSM community for syphilis elimination, partnership with CBOs that serve MSM is crucial. MSM-focused CBOs play an influential role in the gay community.

- Unlike community organizations that work on issues affecting a broader population, or social issues such as homelessness, hunger, and drug abuse, MSM-focused Seek out CBOs serve a specific clientele. These CBOs are already involved with the MSM community and have established communication networks, programs, and interventions that directly target this population. While these groups may have different missions, it is possible to bring them together to work for a common cause. Look for CBOs that have worked on issues together in the past.
- CBOs are familiar with local MSM-friendly business establishments, religious institutions, health care providers, and entertainment venues, and they are aware of specific barriers to reaching the community.
- CBOs that focus specifically on HIV/AIDS can provide insight into local HIV testing, treatment, and prevention initiatives that have and have not been successful, and what the community tends to respond positively to and support.
- CBOs and health-care providers that serve MSMs have established credibility in the MSM community for addressing health, social, and other issues. Cooperation among MSM-focused CBOs, clinics, private physicians, medical societies, other health care providers and your department can help foster the goal of providing and promoting comprehensive, integrated health services for MSM and encouraging them to ask their doctors about receiving such services.

A Look at a Best Practice: *Howard Brown Health Center in Chicago, the Midwest's largest lesbian, gay, bisexual, and transgender health organization, is a syphilis elimination partner agency. The center offers syphilis testing as part of its comprehensive health care program. An online column about the disease, "Ask the Syphilis Guy," can be accessed at <http://www.howardbrown.org>.*

SELECT A STRONG LEADER

Appropriate leadership is key to the success of your community mobilization effort. Whether it is someone in your health department or a member of the community, the leader needs to be creative and adept at bringing together people from different segments of the MSM community who may have different perspectives and vested interests to protect. The leader needs to become a change agent who can organize coalition members and the target audience into agents of change.

A Look at a Best Practice: *In King County, WA, the MSM HIV/STD Prevention Task Force developed and presented an historic community manifesto calling for new norms and responsibility in sexual practices due to skyrocketing rates of HIV and STDs in local MSM. Controversial in its pronouncements, "A Community Manifesto: A New Response to HIV and STDs," was presented at a press conference attended by signers. The Task Force was formed in 2001 in response to recommendations from the a December 2000 Seattle Gay Men's Summit. It provides community-level input and direction toward energizing local HIV/STD prevention efforts for MSM. Task Force membership is open to anyone, and members have varied backgrounds and community experiences in gay and bisexual men's health issues. The Task Force strives to be inclusive of opinions and philosophies related to eliminating the spread of HIV/STDs, while also improving the overall health outcomes of MSM. It also coordinates prevention messages and provide up-to-date information to the community, <http://www.homohealth.org>.*

DEFINE GOALS AND STRATEGIES

The basis of successful community partnerships is establishing a clear statement of your objectives. Know your objectives for involving MSM-focused CBOs in the effort to eliminate syphilis. That way, you can successfully communicate your message to the leaders and members of these organizations. Your objectives in collaborating with MSM-focused organizations and health professionals could be, for example:

- To create successful partnerships with MSM-focused CBOs, health care professionals, and community and business leaders to increase awareness of syphilis and other STDs among MSM
- To use community resources to mount an awareness campaign targeting MSM, focusing on the need for regular syphilis testing and the fact that syphilis is curable

- To elicit ideas from coalition members and partners to maximize the effectiveness of information targeted to MSM

DEVELOP WAYS TO REGULARLY MEASURE PROGRESS

Creating change takes time. Tracking your achievements will help you maintain the momentum necessary for success. Early in your mobilization process, determine how and when you will measure your short- and long-term goals.

SECURE FUNDING AND RESOURCES

Community mobilization initiatives require ongoing financial support. Identify the financial and other resources you will need and possible sources to meet those needs. Figure out how to make the case for additional resources should the need arise, and determine whom you need to contact and what person in your organization would be the person to speak with possible program sponsors.

ACTION STEPS

Conduct a Community Assessment

Find out where the MSM community currently stands in regard to syphilis elimination (e.g., who is currently involved, what has been accomplished, and future plans).

Identify Potential Coalition Members and Partners

The rise of HIV in the 1980s and 1990s helped spur a growing awareness and recognition of MSM as a “separate consumer group” with distinctive needs, concerns, and issues around health, employment, personal relationships, and buying habits. To serve this population, a well-networked group of community organizations, health centers, and health care providers arose to primarily serve MSM. The following are ways to identify CBOs that serve MSM, MSM-friendly health care professionals, gay community centers, and other organizations that can aid in your syphilis elimination efforts:

- **Publications:** Search the Internet to find local community magazines and newspapers that are geared toward MSM. Obtain copies of the publications, and review advertisements and health, community organization, or calendar listings to identify MSM-friendly social, sports, faith-based organizations, support groups, and health care providers.

- **Health Care Web Pages:** The Gay and Lesbian Medical Association provides referrals for MSM-friendly doctors and clinics in all 50 States. Many Web sites provide extensive medical and dental referrals for certain areas of the country.

- **MSM Yellow Pages:** Most large cities have gay Yellow Pages that can be accessed online to search for MSM organizations, support groups, medical personnel, and community centers, as well as AIDS service organizations (ASOs) that serve MSM and other populations affected by HIV.

- **Internet Searches:** Using Internet search engines such as Yahoo and Google, find lists of MSM organizations and their Web sites. Exploring these Web sites and clicking on their resource pages can often lead to more MSM organizations and businesses. Examples of pages that offer extensive links to MSM organizations, support groups, medical news, and other resources can be found in the Resource Guide in the back of this booklet.

Know Your Audience

MSM come from all types of socioeconomic and educational backgrounds. Because the MSM community is diverse, messages must be culturally sensitive and targeted for attitude variance among the various segments of the community.

MSM organizations, businesses, and health care providers may already be aware of rising syphilis rates among MSM, and many—especially those who may already provide HIV testing, treatment, and counseling (e.g., ASOs)—promote testing for syphilis and other STDs. Explain the importance of their cooperation to help eliminate syphilis among their client base.

Leaders of CBOs that serve MSM will likely be ahead of the learning curve compared to leaders of non-MSM-focused CBOs because of their expertise in the following areas:

- Dealing with a variety of issues surrounding same-gender sex, including HIV prevention, education, and testing; case management; support groups; one-on-one counseling; housing and financial assistance; legal services; employment assistance; and food and clothing assistance
- Developing culturally competent interventions for MSM from various ethnic and cultural backgrounds and from varying socioeconomic levels

- Generating creative strategies for disseminating HIV/AIDS information to the MSM population—such as mobilizing members of their own client base to be active in prevention efforts—which may be adapted to disseminate syphilis-prevention materials and information
- Being aware of the challenges and obstacles to effectively educating the MSM population and encouraging them to test for HIV/AIDS and STDs, including:
 - The historical reluctance of marginalized communities to seek out health department services
 - The need for mobile testing at nontraditional venues (e.g., at a gay softball tournament or gay rodeo) and during nontraditional work hours
 - The need for staff sensitivity training, nonjudgmental questions, and assurances that test results and other sensitive information will be used with discretion to help individuals
 - Overcoming the “one test is enough” mentality, when in fact regular testing for syphilis is recommended
 - The challenge of disseminating syphilis elimination messages to non-gay-identified MSM

■ ■ ■ PHASE II: BUILDING A COALITION

IDENTIFY THE “GATEKEEPERS”

Establishing a relationship with one MSM community leader or MSM-friendly health care provider may also lead you to many other key influencers within the MSM community. MSM communities tend to be very well connected, and most leaders know each other and have worked together on political, social, or health-related issues that affect the whole MSM community. Asking each contact for referrals can create a “snowball” effect that will greatly enhance your network of possible coalition members. Frame the issue of syphilis elimination as one health issue that can have a positive outcome for MSM.

The key people to contact are executive directors of CBOs that serve MSM; editors or managing editors of MSM-related publications; and CEOs and owners of MSM social, entertainment, and business establishments including bathhouses, bars, clubs, gyms, public sex venues, and bookstores.

LISTEN CAREFULLY TO CBO LEADERS

As mentioned above, CBO leaders know best how to reach their populations. Be sure to elicit their input on all aspects of the community mobilization strategy, materials, and action steps. Organizations may have a history with government groups that makes them skeptical about becoming involved. Commit to listen and plan well with them, offer to help, and let them know how important their role is in reaching those most affected. Then follow through on the commitment.

ACTION STEPS

Contact CBOs, health care providers, and business leaders involved with the MSM community.

Phone contact may be most effective and time efficient, especially if you reach one influential leader who can put you in contact with several others.

Gauge contacts’ interest level in the issue and their interest in becoming involved in efforts to eliminate syphilis and decrease other STDs.

Sample questions are listed in the appendix.

Determine which community leader(s) you want in your community coalition for strategic direction and which organizations you want to involve in promoting syphilis testing, treatment, and prevention in their public education efforts.

When meeting with leaders of MSM-focused CBOs, present communications tools that they and their client base can relate to. CBOs that serve MSM might need specific materials (brochures, fact sheets, videotapes) explaining partner notification, why it is necessary, and how results are shared, and/or materials specifically tailored to their organization and/or client base.

Successful community coalition building requires respect for other members’ time. You should schedule regular meetings with your members, have an agenda to keep meetings on track, make followup calls to see how things are going, and let them know how much you appreciate their efforts.

■ ■ ■ PHASE III: INTEGRATING ACTION

IMPLEMENT OUTREACH

When you have built a community coalition and its members have agreed on common goals, it is time to implement the outreach and action phase of your

syphilis elimination effort. As you develop and implement your action plan, bear in mind the importance of educating your target audience about the need for regular syphilis screening, treatment of the disease, and monitoring/reporting.

A Look at a Best Practice: *The San Francisco-based Stop AIDS Project outreach team engages gay and bisexual men in a discussion about their individual risk for contracting or transmitting HIV and other STDs, and invite MSM to participate in a Stop AIDS meeting or discussion group. The organization conducts outreach in several different areas and venues and teaches outreach volunteers different skills appropriate to each venue, including bars, clubs, well-traveled streets, street fairs, and festivals. Find their Web site at <http://www.stopaids.org>.*

Some organizations may be well suited to outreach, others may have a strong spokesperson for the coalition, and others may have individuals who sit on boards or health department committees. Find out and use each organization's particular strength to contribute to the community mobilization mission of the whole.

INTERNET INTERVENTIONS

Many MSM use the Internet to find partners for sex. Researchers at the Center for AIDS Prevention Studies, University of California-San Francisco, found that three of four MSM using gay-oriented Internet chatrooms reported having had sex in the previous 2 months with someone they met online; 39 percent reported unprotected anal sex with partners found online.

Internet HIV prevention interventions have two advantages over traditional interventions: They reach people when they are seeking anonymous sex partners, and they offer anonymity regarding sexual questions and problems.

A Look at Best Practices: *The following groups have successfully communicated safe sex messages, answered questions, and made referrals through Internet outreach:*

- *SexEd4U, a program of the Midwest AIDS Prevention Project, compiled a computer database of HIV/AIDS resources and sent letters to gay publications to assure them the intervention was legitimate and to establish trust and rapport with Internet users. Counselors, trained to deflect sexual propositions and to understand Internet symbols and abbreviations, log onto MSM sex chat rooms, using SexEd4U as their pseudonym, and anonymously answer ques-*

tions and offer referrals. When counselors found the same questions cropping up repeatedly, they instituted a topic-of-the-month feature. Counselors answer questions promptly because MSM in chat rooms are looking for sex partners and do not have much patience with other agendas. The project has averaged three MSM interventions during each 1-hour online discussion in the past year and has made referrals to local agencies for HIV testing, treatment, and other services. SexEd4U does not have a separate budget but relies on a core group of committed HIV counselors.

- *Prevention Organizations With Empowerment Resources On The Net (PowerON) of Seattle is part of the HIV/AIDS Project Development and Evaluation Unit of the School of Social Work at the University of Washington in Seattle. According to the program director, "We knew that saying it was about HIV prevention wouldn't interest people, so we marketed it as a gay health site." The Web site's referral service, updated monthly, helps users find the agency and staffer who can help them with a particular problem or issue. The site received more than 55,000 hits in its first 2 months.*
- *Internet Sexuality Information Service Inc., of San Francisco (ISIS), conducted a study in which a counselor answered an average of 15 questions per hour in a Gay.com chat room. ISIS posted a banner ad campaign online and facilitated 32,370 links between people seeking information and the San Francisco Department of Health Web site. During 57 hours of Internet outreach on three other sites, researchers conducted 212 exchanges of prevention information. Thirty-five coupons for free syphilis testing, distributed online, were redeemed. The researchers found one-on-one outreach in chat rooms was more effective than larger online presentations.*

ACTION STEPS

Create a Strategic Plan of Action

Once you have your community coalition members on board and committed, you are ready to devise a strategic action plan that will guide you and your coalition in implementing syphilis elimination activities. If you have already conducted a community assessment and have determined your coalition's visions and goals, refer to this information when developing the plan. The following is an outline of key components of a strategic action plan that can be adapted to your needs:

Vision Statement: Your vision is your dream, a statement of the way you want things to be. For example:

- Building the public health capacity to eliminate syphilis in the MSM community.

Mission Statement: A statement of what is going to be done and why. For example:

- To eliminate syphilis in the MSM population by mobilizing CBOs that serve MSM to assist in the effort to increase monitoring and evaluation of syphilis cases, create a comprehensive community mobilization effort, expand accessible treatment and counseling facilities, and conduct health promotion activities.

Objectives: Develop statements that indicate specific, measurable results intended from your work. A plan may have several objectives such as:

- By an agreed-upon time, to have established partnerships with CBOs that serve MSM and developed culturally competent interventions to heighten syphilis awareness.
- To have enhanced syphilis education and improved screening practices among MSM-friendly health care providers and to have documented an increase in syphilis reporting and partner notification by an agreed-upon date.
- To document an increase in syphilis screening among MSM by a certain year.

Strategies: Broadly describe the paths your coalition will take to achieve your objectives, such as:

- Change STD clinic environments so they are patient-friendly and nonjudgmental regarding syphilis screening and testing.
- Encourage MSM clinicians and HIV testing sites to also test for syphilis and other STDs.
- Test for syphilis and other STDs at MSM community and social events such as street fairs, sporting events, and festivals and in nightclubs, bars, and other venues frequented by MSM.

Actions: State the specifics of what will be done to further your strategies and reach your objectives.

Timeline and Responsibility Chart: Develop a chart for your project that lets coalition members know what activities are to be completed by what dates and who is involved in each effort.

■ ■ ■ PHASE IV: MONITORING AND EVALUATING

DEVELOP A SYSTEM TO TRACK ACTIVITIES

With any community mobilization effort, it is important to keep track of activities that are most effective in your community and those that may need improvement to more successfully reach your goals. Plan how you will track your efforts and evaluate progress based on the plan of action.

ACTION STEPS

Determine the best measurement to evaluate your campaign

Identify how your coalition will keep track of the number of syphilis tests and the expansion of testing sites for MSM. Perhaps your current surveillance system can be adapted to tracking this new initiative.

Develop evaluation plans and forms

Determine at what dates in the timeline you will carry out monitoring and evaluation activities.

Keep coalition members apprised of evaluation activities

Regular progress reports keep partners motivated and “in the loop.”

Tips to Keep in Mind

- Getting the right people involved within MSM-focused CBOs is essential for success.
- Look for CBOs that have worked together on issues in the past.
- Point out the syphilis–HIV connection.
- Work together to define goals and strategies for your effort.
- Establish actions that are measurable, and determine how you will track progress.
- Work with gatekeepers, and listen to input from them as well as partners.
- Create an action plan with a timeline and responsibilities chart.
- Track progress and adjust activities as indicated.

SECTION III: FREQUENTLY ASKED QUESTIONS

- ***Won't mobilizing leaders of CBOs that serve MSM to cooperate in the syphilis elimination effort require more time and resources than working toward eliminating syphilis alone?***

The initial effort to set up a coalition will engage your time and resources. But once you have engaged community partners with specific strengths, you will find it easier over time to share various activities and efforts associated with eliminating syphilis among MSM.

- ***What if there is competition or disagreement among various MSM-focused CBOs that may serve different types of clientele or have different approaches to syphilis elimination efforts?***

Keeping the lines of communication open and allowing all coalition partners to express their opinions and participate in activities equally will go a long way toward creating an environment of mutual cooperation. Remember, the fight to eliminate syphilis and other STDs is key to this at-risk community. CBO leaders have a vested interest in helping to make syphilis elimination work. Let them know their knowledge and expertise are valuable.

- ***We have an extremely tight budget that limits our ability to get mobilization started. Should we begin the mobilization now or wait until we have more funding?***

It will not take a lot of funding to start to mobilize. You can start with letters, e-mails, phone calls, and meetings. As you further develop your efforts, it may be possible to attract funding from CBOs, city or State governments, and interested corporations.

- ***How many participants do we need?***

There is no set number, but it is better for management and evaluation purposes to start with a small group of 10–15 people and allow the program to grow.

- ***All our resources are earmarked for HIV prevention. How can we fund a syphilis effort?***

The presence of syphilis creates a two- to five-fold increased risk of contracting or transmitting HIV. HIV prevention and syphilis elimination are the same fight. Let MSM know that it is important to recognize the symptoms and to get tested regularly for syphilis and that it is preventable and easily cured. Information about syphilis can be worked into your HIV prevention activities.

SECTION IV: RESOURCE GUIDE

■ ■ ■ REFERENCES

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MSM HIV/STD Prevention Task Force. *Mission*. www.homohealth.org/taskforce

San Francisco Department of Public Health. *Healthy Penis 2003* home page. www.healthypenis2003.org

STOP AIDS Project. *Outreach*. www.stopaids.org/programs/outreach

■ ■ ■ WEB SITES

■ StopAIDS (<http://www.stopaids.org>)

■ AIDS Education Global Information System (<http://www.aegis.com>)

■ Project Inform (<http://www.projinf.org>)

■ AIDSAction (<http://www.aidsaction.org>)

■ Gay Men's Health Crisis (<http://www.gmhc.org>)

■ AIDS & HIV @ Yahoo

■ The Body (<http://www.thebody.com>)

■ Lifelong AIDS Alliance, Men's Program (www.homohealth.org)

■ Centers for Disease Control and Prevention (<http://cdc.gov/std/>)

■ CDC National Prevention Information Network (<http://www.cdcnpin.org/scripts/index.asp>)

■ Henry J. Kaiser Family Foundation (<http://www.kaisernetwork.org/index.cfm>)

■ ■ ■ COMMUNITY-BASED ORGANIZATIONS

The Atlanta Gay and Lesbian Center

170 11th Street
Atlanta, GA 30309
Tel: 404-874-9890
Fax: 404-874-9860

The center provides information, support, and services to the lesbian, gay, bisexual, transgender, and questioning people of Atlanta.

AID Atlanta

1438 W. Peachtree Street NW, Suite 100
Atlanta, GA 30309
Tel: 404-870-7700

This nonprofit organization provides education and support services for people living with HIV.

Project Open Hand

176 Ottley Drive, NE
Atlanta, GA 30324
Tel: 404-872-8089

This group provides two freshly cooked meals and nutrition services each day to people with symptomatic HIV/AIDS.

AIDS Survival Project

139 Ralph McGill Boulevard, Suite 201
Atlanta, GA 30308
Tel: 404-874-7926

This organization comprises a diverse group of people living with HIV who work to promote self-empowerment and enhanced quality of life for HIV-affected people.

The Atlanta Gay & Lesbian Chamber of Commerce

2103 N. Decatur Road, PMB 190
Decatur, GA 30033
Tel: 404-377-4258

This nonprofit organization is dedicated to the development and growth of businesses that support the lesbian and gay community.

Chase Brexton Health Services, Inc.

1001 Cathedral Street
Baltimore, MD 21201
Tel: 410-837-2050
Fax: 410-837-2071

This nonprofit CBO provides medical, psychological, and social services.

Gay and Lesbian Community Center of Baltimore

241 W. Chase Street
Baltimore, MD 21201
Tel: 410-837-5445

This center provides social support and outreach groups.

Test Positive Aware Network

5537 N. Broadway Street
Chicago, IL 60640
Tel: 773-989-9400
Fax: 773-989-9494

The network empowers people living with HIV.

Church of the Open Door Community Center

5954 South Albany Avenue
Chicago, IL 60629
Tel: 773-778-3030

The group provides crisis counseling, community outreach, and employment services.

Chicago Area Gay and Lesbian Chamber of Commerce

1210 W. Rosedale
Chicago, IL 60660
Tel: 773-303-0167
Fax: 773-303-0168

This organization develops, educates, supports, and promotes diverse gay, lesbian, bisexual, and transgender commerce.

Horizons Community Services

961 W. Montana
Chicago, IL 60614
Tel: 773-472-6469

The group empowers people to live full, healthy, integrated lives.

Brothers United Network of Tennessee

209 10th Avenue South, Suite 160
Nashville, TN 37203
Tel: 615-259-4866
Fax: 615-259-4849

The organization provides HIV/AIDS prevention outreach and education to gay and bisexual men of color.

The Rainbow Community Center

961 Woodland Street
P.O. Box 60886
Nashville, TN 37206
Tel: 615-297-0008
Fax: 615-269-9229

This group's mission is to foster personal and community growth for gay, lesbian, bisexual, and transgender people.

OutReach

600 Williamson Street
Madison, WI 53703-3588
Tel: 608-255-8582

OutReach provides services which nurture, strengthen, and celebrate the lesbian, gay, bisexual, and transgender communities.

L.A. Gay and Lesbian Center

1625 N. Schrader Blvd.
Los Angeles, CA 90028
Tel: 323-993-7400

The Gay and Lesbian Center offers the widest array of services to gay men and lesbians available anywhere in the world.

Lambda Community Center

920 20th Street, Suite 117
Sacramento, CA 95814
Tel: 916-442-0185

The center provides AIDS education and prevention.

Northcoast Lesbian, Gay, Bisexual, and Transgender Alliance

235 4th Street, Suite A
Eureka, CA 95501
Tel: 707-445-9760

The alliance provides community resource listings, assistance with welfare and public health services.

Pacific Center for Human Growth

2712 Telegraph Avenue
Berkeley, CA 94705

The center provides HIV counseling, support groups, and outreach and prevention.

Pacific Pride Foundation

126 E. Haley Street, Suite A10
Santa Barbara, CA 93101
Tel: 805-963-3636

The foundation sponsors annual Pride and AIDS walk events and provides HIV counseling and support groups.

Solano Pride Center

934 Missouri Street, Suite T
Fairfield, CA 94533
Tel: 707-246-6660

This group offers community outreach, adult services, and an information referral line.

Spectrum Center for Gay, Lesbian, and Bisexual Concerns

1000 Sir Frances Drake Boulevard, #10
San Anselmo, CA 94960
Tel: 415-457-1115

The center provides support groups and social activities.

Stonewall Alliance Center

341 Broadway, Suite 416
Chico, CA 95928
Tel: 530-893-3336

This group offers information and referral services.

The Billy DeFrank Lesbian and Gay Community Center

938 The Alameda
San Jose, CA 95126

The group's services include counseling, information and referrals, and meeting space.

The Edge

39160 State Street
Fremont, CA 94538-1436
Tel: 510-790-2887

This organization provides support groups, HIV education, and prevention services.

The Gay and Lesbian Community Center of Greater Long Beach

2017 E. 4th Street
Long Beach, CA 90814-1001
Tel: 562-434-4455

The center offers support and rap groups, hate crimes hotline, HIV/AIDS case management and client advocacy, and more.

The Gay and Lesbian Community Services of Orange County

12832 Garden Grove Boulevard, Suite A
Garden Grove, CA 92843
Tel: 714-534-0862

This group provides mental health services, AIDS education, HIV support services and testing.

The Lesbian and Gay Men's Community Center

3909 Centre Street
San Diego, CA 92103
Tel: 619-692-2077

The center offers HIV prevention programs, coming out groups, and counseling.

Ventura County Rainbow Alliance

3503 Arundell Circle, Suite A
Ventura, CA 93003
Tel: 805-339-6340

The alliance's services include HIV/STD prevention, social services, and counseling.

The Milwaukee LGBT Community Center

170 South Second Street
Milwaukee, WI 53204
Tel: 414-271-2656

The center provides community outreach, education, helpline, and other services.

Whitman-Walker Clinic

1407 S Street, NW
Washington, DC 20009
Tel: 202-797-3500
Fax: 202-797-3504

The clinic offers health care and community services for gay men and lesbians.

Gay and Lesbian Community Center of San Antonio

3126 N. Saint Mary's
San Antonio, TX 78212
Tel: 210-732-4300

This group provides HIV/AIDS testing, counseling, information, and referrals.

John Thomas Gay and Lesbian Community Center

2701 Reagan Street
Dallas, TX 75219
Tel: 214-528-9254

The mission of the center is to create awareness, foster understanding, and fulfill the needs of the gay and lesbian community.

Lesbian/Gay Community Service Center of Greater Cleveland

6600 Detroit Avenue
Cleveland, OH 44102
Tel: 216-651-5428

This group provides a helpline and drop-in center for people living with HIV/AIDS.

Stonewall Columbus Community Center

1160 N. High Street
Columbus, OH 43201
Tel: 614-299-7764

The center's services include support groups, referrals, and free meeting space.

The Dayton Lesbian and Gay Center

200 Delaware Avenue at Faith UCC
Dayton, OH 45405
Tel: 937-676-2274

The group offers women's and men's forums, a monthly community night, and a 24-hour helpline.

The Center

2135 N.W. 39th Street
Oklahoma City, OK 73112

The group offers meeting space for community organizations and annual pride events.

Northern Arizona Rainbow Community Center

1300 South Milton Road, Suite 221
Flagstaff, AZ 86001
Tel: 520-526-5419

The organization's services include an information and referral switchboard and group meeting space.

Valley of the Sun Gay and Lesbian Community Center

24 West Camelback Road, Suite C
Phoenix, AZ 85013
Tel: 602-265-7283

The group offers a lesbian and gay community switchboard and Arizona AIDS information line, support groups, and antiviolence projects.

Wingspan

300 E. 6th Street
Tucson, AZ 85705
Tel: 520-624-1779

The group conducts support groups and HIV testing, and offers meeting space.

William Way Community Center

1315 Spruce Street
Philadelphia, PA 19107-5601
Tel: 215-732-2220

The center offers support groups, seminars, social events, information, and referrals.

Affirmations Lesbian and Gay Community Center

195 West Nine Mile Road
Ferndale, MI 48220
Tel: 248-398-7105

The group's services include social services, advocacy, and education.

**Lesbian and Gay Community Network of
Western Michigan**

909 Cherry Street, SE
Grand Rapids, MI 49506
Tel: 616-458-3511

This organization provides support groups, an HIV/AIDS prevention program, social and educational activities.

**Gay and Lesbian Community Center of the
Ozarks**

518 E. Commercial
Springfield, MO 65801

This center offers rap groups, HIV and affinity groups, and a monthly newsletter.

■ ■ ■ **STD COMMUNICATIONS DATABASE**

<http://www.cdc.gov/std/commdata/default.htm>

