



HEADS UP?!

SEXUALLY TRANSMITTED
INFECTIONS (STIs)
ARE WIDESPREAD!

Healthy Sexuality and Harm Reduction Team
Équipe de la sexualité saine et de la réduction des méfaits



Winnipeg Regional Health Authority
Office régional de la santé de Winnipeg
Caring for Health À l'écoute de notre santé

HEADS UP?! SEXUALLY TRANSMITTED INFECTIONS (STIs) ARE WIDESPREAD!

Every year, hundreds of millions of people around the world contract a sexually transmitted infection (STI) caused by bacteria, including chlamydia, gonorrhea, and syphilis. These infections are transmitted through unprotected vaginal, anal, and oral sex from an infected person to a sex partner. Although they can be prevented and cured, they can cause serious health problems if left untreated, including infertility (the inability to get pregnant). Someone infected with an untreated STI also has a higher risk of both catching and passing on HIV (human immunodeficiency virus). Even though anyone can contract an STI, where and how we live, whether we have proper access to health care, and other factors all affect the STI rate of a population or a neighbourhood.

Here in Winnipeg, over 3000 cases of chlamydia and nearly 500 cases of gonorrhea were reported in 2010 alone. In this report, we will break down these data to present an up-to-date picture of bacterial STIs in Winnipeg. Although there are many other types of STIs, we focus specifically on chlamydia, gonorrhea, and syphilis, as these infections are the most common. We will also provide an update on what the Winnipeg Regional Health Authority (WRHA) is doing to prevent and reduce the rate of these STIs in our health region.

“Sexuality and sexual orientation are still taboo topics for many people and there can still be a lot of stigma that can go along with these issues. In our online outreach we are able to reach the hidden MSM (men who have sex with men) population, the high-risk people who are not going to come ask questions on their own. The internet provides good anonymity for them and so is a good method for them to get educated in sexual health.”

– Outreach Worker

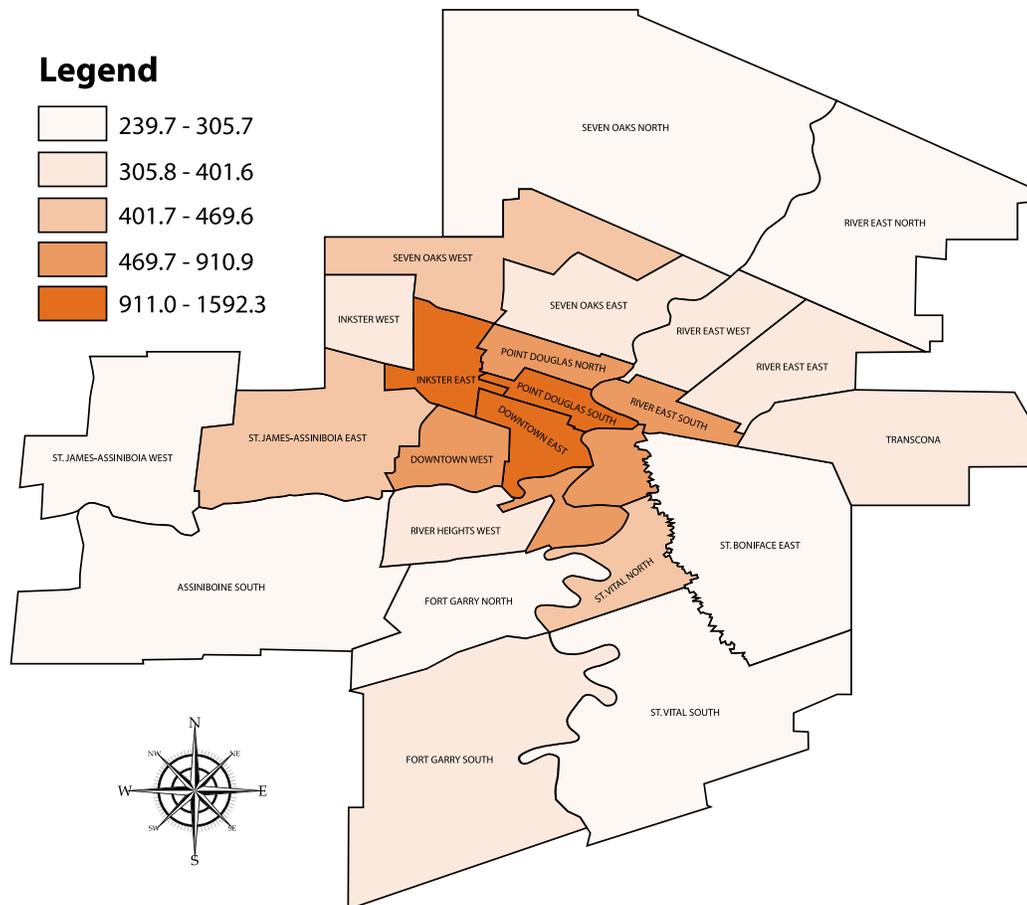
WHAT ARE THE CHARACTERISTICS OF THE MOST COMMON STIs IN WINNIPEG?

STI	WHAT IS IT?	WHO GETS IT?	SYMPTOMS FOR FEMALE BODIES	SYMPTOMS FOR MALE BODIES	TESTING & TREATMENT
CHLAMYDIA	Chlamydia is a very common STI caused by bacteria called <i>Chlamydia trachomatis</i> . If left untreated, it can cause complications for males and pelvic inflammatory disease (PID) in females, a serious infection of the fallopian tubes that can cause infertility.	Chlamydia is the most commonly reported STI in North America. It is common in all segments of the general population (especially among youth), but rates are highest in socio-economically marginalized communities.	Usually shows no symptoms. Sometimes vaginal discharge that is different colour or texture than usual, or a burning sensation when peeing.	Often shows no symptoms. May have a pus-like discharge from the penis, and/or burning sensation when peeing.	A urine test, taken at a health care provider's office or clinic, can diagnose chlamydia. It can be cured with antibiotics.
GONORRHEA	Gonorrhea (also known as 'the clap') is an STI caused by bacteria called <i>Neisseria gonorrhoeae</i> . Untreated gonorrhea can cause complications in males, PID and other serious conditions in females, and can cause potentially serious eye infections for newborn babies born to an infected mother.	Gonorrhea is an infection that very much reflects social and economic inequities. It is found at much higher rates in more marginalized communities, especially among youth.	Usually shows no symptoms. May have vaginal discharge that is different colour or texture than usual, or a burning sensation when peeing.	May show no symptoms. Often pus-like discharge from the penis, and/or burning when peeing.	A urine test, taken at a health care provider's office or clinic, can diagnose gonorrhea. It can be cured with antibiotics.
SYPHILIS	Syphilis is an STI caused by bacteria called <i>Treponema pallidum</i> . If left untreated, syphilis can cause serious complications, including even death. Syphilis in pregnancy can result in complications for the newborn, and globally is responsible for 1 in 4 stillbirths and 14% of newborn deaths.	In Winnipeg, there have been two outbreaks of syphilis in the last decade, one among the heterosexual population (2003-2005) and one among men who have sex with men (2004-2008). Like gonorrhea, syphilis disproportionately affects marginalized communities.	Begins with one or more painless sores on the genitals, rectum, or mouth. The second stage may produce skin rashes, lesions, fever and general illness. Late stages include heart problems, mental issues, or even death if left untreated.		Syphilis can be tested through a blood test at a health care provider's office or clinic. It can be cured with antibiotics, but the sooner it is detected and treated, the better.

WHO IS INFECTED WITH STIs IN WINNIPEG? HAS THIS CHANGED OVER THE LAST TEN YEARS?

Chlamydia

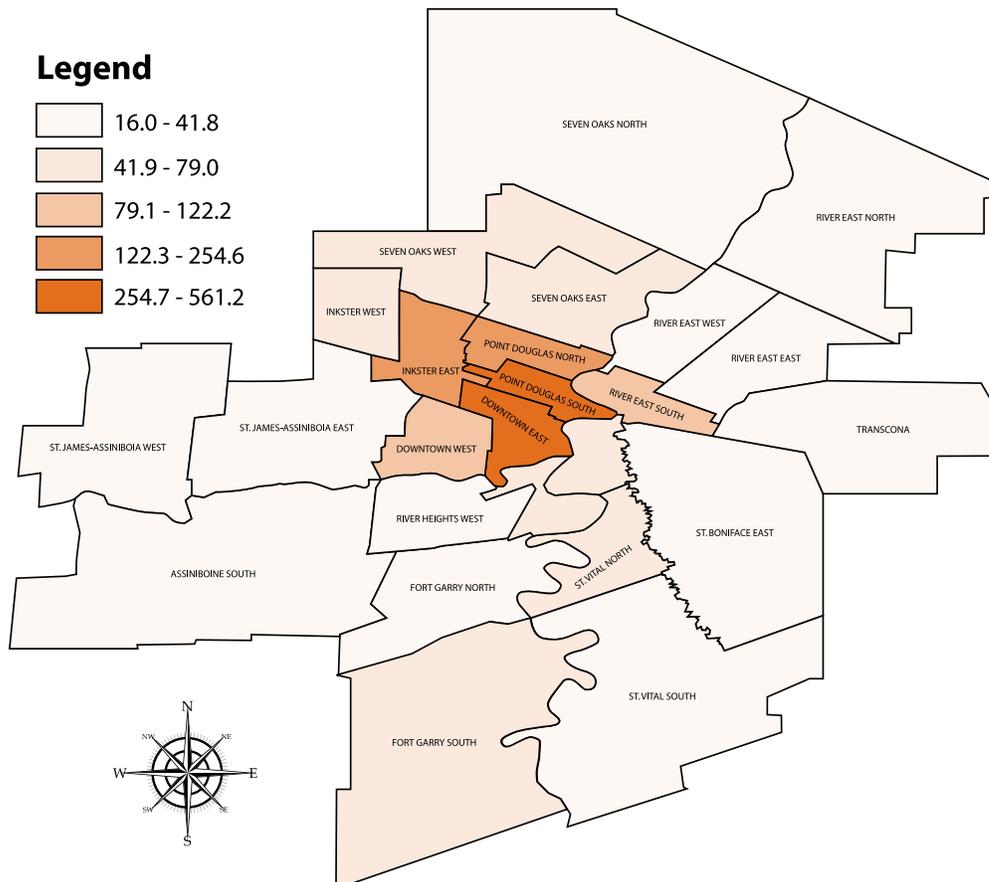
Manitoba has had among the highest rates of reported chlamydia infection in Canada, due in large part to high rates in Winnipeg. The number of chlamydia infections reported in Winnipeg in 2010 was almost triple what it was in 1996, but the good news is that the rate seems to have stabilized since 2008. Still, chlamydia represents a tremendous burden on public health resources due to the costs of investigations, treatment, and follow-up. While the Point Douglas and Downtown community areas consistently experience the highest rates of infection in Winnipeg, the rest of the city is also greatly affected. Most often, chlamydia is reported among youth aged 15 to 24 years and among females – due in large part to routine screening when young women seek reproductive health services.



Map 1: Age-standardized rates (per 100,000) of reported chlamydia, Winnipeg Health Region 2010, by neighbourhood cluster.

Gonorrhea

After an extended and marked increase starting in 1996, the rate of gonorrhea infection in Winnipeg has been decreasing since 2006, especially among men. In 2006, the rate of infection in Winnipeg was nearly four times the national average. But by 2009, the rate had dropped to less than three times the national average, falling even further in 2010. Like chlamydia, gonorrhea is most commonly reported among youth aged 15 to 24 years. Unlike chlamydia, though, gonorrhea is less common outside of the core communities of Downtown and Point Douglas. Also unlike chlamydia, men are just as likely as women to report a gonorrhea infection, in large part because the bacteria cause more noticeable symptoms in men than does chlamydia.



Map 2: Age-standardized rates (per 100,000) of reported gonorrhea, Winnipeg Health Region 2010, by neighbourhood cluster.

Infectious Syphilis

Throughout Canada, rates of syphilis have been increasing, but in Winnipeg (and Manitoba as a whole), apart from two outbreaks between 2003 and 2008, rates of syphilis have remained quite low. In 2009 and 2010, cases of infectious syphilis were quite sporadic with no obvious outbreaks. Most of the cases reported in 2009 and 2010 were imported into Manitoba from other parts of Canada and the USA, with limited to no known local transmission. The low rates of infectious syphilis in Winnipeg are a major public health success and the result of ongoing intensive prevention and control programs.

WHAT IS THE WRHA DOING TO PREVENT AND REDUCE THE SPREAD OF STIs IN WINNIPEG?

STIs are widespread in Winnipeg, and their public health significance is substantial and real. For this reason, our Healthy Sexuality and Harm Reduction (HSHR) team and regional partners employ multiple approaches to prevent and reduce the burden of infection. A variety of strategies and interventions are in place to target both individuals who may be at risk and the population as a whole. These strategies encompass four main areas of focus: 1) health promotion and education; 2) outreach; 3) testing, treatment, and partner notification; and 4) collaboration and partnerships.

1) Health Promotion and Education

The best approach to any health problem is to prevent it from occurring in the first place. Our STI health promotion and education strategies have been aimed at both the general population and at health care providers. Public health nurses encourage eligible members of the public to ensure that they are immunized against specific STIs such as hepatitis B and Human Papillomavirus (HPV). Recent social marketing and public education campaigns have included “Relieve Yourself – Pee in a Cup,” to encourage STI testing in 15- to 24-year-old youth, and “Heads Up?! Use a Condom,” to promote consistent use of condoms among 15- to 19-year-olds. Both campaigns targeted Winnipeg’s youth population, the age group with the highest STI rates. Safer sex messages were placed in bus shelters, social media, movie theatres, schools, and radio advertisements to increase awareness and normalize the discussion about healthy sexuality. Equally important is educating health care providers about the most current information available, so that they are able to provide the best care possible for their clients. To that end, the HSHR team maintains updated clinical protocols and organizes an annual conference on STIs that is free of charge for health care providers.

2) Outreach

Although anyone can be infected with an STI, we know that certain populations are at a higher risk of being infected. Our HSHR team therefore provides outreach to these populations to both increase awareness of STIs and facilitate access to health care and support services. For example, our Street Connections van travels around the core areas of Winnipeg six nights per week, providing harm reduction supplies (including condoms, clean needles, and safer crack use kits), STI testing and treatment, and health information and referrals to anyone requesting services. The HSHR team also provides harm reduction services at the Bell Hotel, in partnership with other agencies collaborating to provide a range of supports to its tenants and the surrounding neighbourhood. Our work with the population of men

“It’s so rewarding when you see a change in someone because of something you did. Just recently, I was at a bathhouse doing testing. While we were there, a repeat client came in for testing. As I was walking around later I heard him telling other clients why we were there and what we were doing. He was promoting us to the other bathhouse patrons and after that we had 3 more people come see us for testing, possibly because of his peer promotion.”

– Outreach Worker

“Newcomers to Winnipeg have many challenges here, including STIs. Sometimes people got the infection somewhere else and brought it here and sometimes they get it in Canada... They have language/cultural/weather barriers to deal with. Some clients have great difficulty connecting with care. It’s very satisfying to speak with them in their own language, understand their issues and fears and help them get the care they need.”

– Public Health Nurse



who have sex with men (MSM) includes both online outreach through popular MSM social networking sites, and in-person education and STI testing in locations frequently accessed by community members. Finally, a variety of support, education, and STI testing and treatment services are provided by public health nurses in two correctional facilities: the Manitoba Youth Centre and Winnipeg Remand Centre. Of course, we are not alone in our work with specific populations. Many other WRHA programs, like primary care and midwifery, include outreach components, as do community partners and groups. For example, Sexuality Education Resource Centre and Mount Carmel Clinic promote sexual health in close partnership with immigrant and refugee communities. Working at these various levels with all of these populations is an essential component in the public health approach to reducing STIs.

3) Testing, treatment, and partner notification

Most STI testing and treatment in Winnipeg happens in the community, performed either by private physicians and clinics or at WRHA-funded primary care sites and agencies. Public health nurses support this work by helping to ensure that individuals infected with an STI receive timely and appropriate treatment, and that all associated sexual partners are identified and notified to encourage testing and treatment for infection. People who test positive for an STI also often qualify for immunizations against other STIs such as hepatitis B and HPV. In this way, public health nurses can prevent a serious STI from being transmitted in the first place.

4) Collaboration and partnerships

The WRHA HSHR team collaborates with many partner organizations who are working hard to prevent and treat STIs, and to help coordinate this range of services. Some of these partners include community clinics; specialty care; the youth-serving sector (including school divisions); local, provincial, and federal governments; correctional facilities; and nonprofit agencies. Equally important are other local networks and initiatives that independently or in partnership promote sexual health (for example, the annual *Sexual Health Awareness Week*).

OUR WORK IS ONGOING

STIs continue to be a major public health issue in Winnipeg. Through our various efforts, the HSHR team—along with many others—work hard every day to prevent and reduce the spread of infection. The stabilization of chlamydia rates, decrease in gonorrhea rates, and consistently low rates of syphilis in Winnipeg are important indications that our combined hard work has achieved important successes. Despite these efforts, there are always areas for improvement, and our work is ongoing.

A regional strategy is currently being developed to improve health equity in the region. This is an extremely relevant and important initiative, as we know that most STIs in Winnipeg disproportionately affect youth and are concentrated within certain neighbourhoods and populations. Within this strategy, there will be a targeted focus on decreasing social and economic inequities that put individuals at higher risk of STIs. Because STIs do not respect borders, any strategy must extend beyond the health region to the entire province. For this reason, all of the health regions in Manitoba are partnering with Manitoba Health to develop a province-wide strategy to address a range of sexually transmitted and blood-borne infections.

Finally, ongoing program monitoring is essential to evaluate the effectiveness and quality of public health services. The WRHA is committed to ensuring that our resources are spent in ways that are optimal, efficient, and based on the best and current evidence. By continually monitoring and evaluating the outputs of our education, outreach, testing, and collaboration strategies, we will maintain effectiveness in STI surveillance, prevention, and treatment in the city of Winnipeg.

“What I am most proud of in my job is my relationship with my clients. For example, I can think of those amazing moments when the light goes on... ‘I have other options!’”

– Public Health Nurse

“We have an amazing team here. Having a public health presence in the community is essential. This group is really good at connecting with the population that we serve. We will never reach everyone but we do the best that we can and strive to connect with the community and help them live safer, healthier lives.”

– Public Health Nurse

BOTTOM LINE

- After a period of increasing rates, chlamydia infection rates in Winnipeg have been stable since 2008.
- After a period of sharply increasing rates, gonorrhea infection rates in Winnipeg have significantly declined since 2006.
- Despite increased rates in the rest of Canada, rates of syphilis in Winnipeg have remained low over the last 15 years.
- Syphilis and gonorrhea continue to disproportionately affect certain populations in Winnipeg (including within the inner-city and among youth). Chlamydia is much more widespread, affecting all communities in Winnipeg.
- The Winnipeg Regional Health Authority’s Healthy Sexuality and Harm Reduction team’s multifaceted STI strategy encompasses education, outreach, testing, and collaboration.

"[A client] was not ready to be tested at that time so all I could do was provide support and give her my card. It made me feel sick to let her leave but I also knew it had to be her decision. Six months later, she showed up at my office out of the blue and she still had my card. I recognized her right away and she came up to me and said "I'm ready, right now". We did the testing and it turned out she was negative for HIV. It was great to be a part of her happy ending."

– **Public Health Nurse**

GLOSSARY

Bell Hotel: A supportive housing complex on north Main Street, which has been redeveloped into 42 self-contained suites of affordable, permanent housing for people who have been homeless. The WRHA is one of several collaborative partners who provide various supports to residents.

Harm reduction: Strategies, programs, and policies, which aim to reduce the negative health, social, and economic outcomes associated with the use of licit or illicit substances. It is an evidence-informed and cost-effective approach – bringing benefits to the individual, community, and society.

Health equity: Health equity asserts that all people can reach their full health potential and should not be disadvantaged from attaining it because of their social and economic status, social class, racism, ethnicity, religion, age, disability, gender, gender identity, sexual orientation, or other socially determined circumstance.

Healthy Sexuality and Harm Reduction (HSHR) team: A team within the WRHA Population and Public Health Program that works to promote healthy sexuality and substance-use behaviours that discourage the transmission and spread of sexually transmitted and blood borne infections.

Pelvic inflammatory disease (PID): A general term that refers to an acute infection involving the uterus, fallopian tubes, and/or the ovaries. It is most often caused when a bacterial infection (usually gonorrhea or chlamydia) in the cervix is left untreated. It can lead to long-term abdominal pain, ectopic pregnancies (a pregnancy in the fallopian tubes instead of the uterus), and infertility. In Canada, 75% of PID cases occur in females under the age of 25.

Sexually transmitted infection (STI): An infection that is transmitted through sexual contact. STIs can be caused by bacteria, viruses, parasites, or fungi, and often do not have any symptoms. This report only discusses STIs caused by bacteria.

Winnipeg Regional Health Authority (WRHA): The body responsible for the delivery of healthcare in Winnipeg, operating or funding over 200 health service facilities and programs.

HEADS UP?! USE A CONDOM:

Population and Public Health
Winnipeg Regional Health Authority
Centre for Health Equity Promotion
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