

Casting light on old shadows: ending sexually transmitted infection epidemics as public health concerns by 2030

Advocacy brief

Countries can boost the response to STIs and improve the health of millions of women, men and adolescents by adopting WHO's Global STI Strategy



Why do we need to act now?

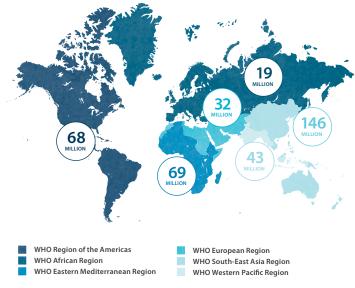
Some viral STIs, like human papillomavirus (HPV) and HIV, are still incurable and can be deadly, while some bacterial STIs – like chlamydia, gonorrhoea, syphilis and trichomoniasis – are curable if detected and treated. Each year, 357 million new cases of these four curable STIs are acquired by people aged 15–49. In addition, 417 million people in this age group have

herpes simplex virus type 2 (HSV-2) infections,² which can cause genital herpes disease.

Antimicrobial resistance (AMR) to *Neisseria gonorrhoeae* is increasing,³ which may lead to untreatable infections. In addition, new menacing diseases such as Ebola virus disease and Zika virus disease have more recently been identified and found to be sexually transmissible.

Globally, more than 1 million STIs are acquired every day

There were an estimated 377 million new cases of chlamydia, gonorrhoea, syphilis, trichomoniasis and herpes simplex virus type 2 (HSV-2) in 2012.



Source: Newman et al., 2015;1 Looker et al., 2015.2

STI impact

STI mortality

- Over 200 000 fetal and neonatal deaths each year due to syphilis in pregnancy
- 150 000 infants at increased risk of early death due to syphilis in pregnancy
- 266 000 cervical cancer deaths each year due to HPV

STI morbidity

- STIs severely compromise people's quality of life and of sexual life
- STIs such as gonorrhoea and chlamydia are important causes of infertility worldwide
- HSV-2 infection: 3-fold increased risk of acquiring HIV

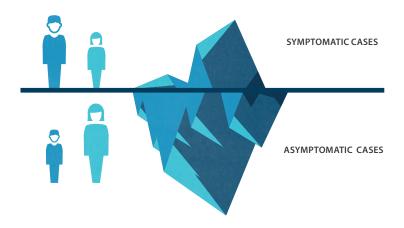
¹ Newman LM, Rowley J, Vander Hoorn S, Wijesooriya NS, Unemo M, Low N et al. Global estimates of the prevalence and incidence of four curable sexually transmitted infections in 2012 based on systematic review and global reporting. PLoS One. 2015;10(12):e0143304. doi:10.1371/journal.pone.0143304.

² Looker KJ, Magaret AS, Turner KME, Vickerman P, Gottlieb SL, Newman LM. Global estimates of prevalent and incident herpes simplex virus type 2 infections in 2012. PLoS One. 2015;10(1):e114989. doi:10.1371/journal.pone.0114989.

³ Global action plan to control the spread and impact of antimicrobial resistance in *Neisseria gonorrhoeae*. Geneva: World Health Organization; 2012 (http://who.int/reproductivehealth/publications/rtis/9789241503501/en/).

Most STIs are "silent"...

Women are more affected by asymptomatic STIs than men, and men are more likely to have symptomatic STIs than women



A strong STI response will not only alleviate the burden of STIs, but will also have a beneficial impact on other health issues, in particular on adolescent health – saving millions of lives and contributing to the well-being of millions more. The STI response needs to be integrated with different health programmes and also needs to be applied across sectors, including through school-based health education.

Effectively addressing STIs also helps with...

Combating antimicrobial resistance	Eliminating adverse neonatal outcomes	Reducing HIV transmission	Preventing cancer	Decreasing burden of infertility	Supporting health of young people
60		R			

Source: Figure provided courtesy of D. McCartney, International Planned Parenthood Federation.



"THE EMERGENCE AND SPREAD OF DRUG-RESISTANT PATHOGENS HAS ACCELERATED. THE TRENDS ARE CLEAR AND OMINOUS. NO ACTION TODAY MEANS NO CURE TOMORROW. AT A TIME OF MULTIPLE CALAMITIES IN THE WORLD, WE CANNOT ALLOW THE LOSS OF ESSENTIAL MEDICINES – ESSENTIAL CURES FOR MANY MILLIONS OF PEOPLE – TO BECOME THE NEXT GLOBAL CRISIS."

 Statement of WHO Director-General, Margaret Chan on World Health Day 2011

Boosting the global response: the Global STI Strategy

The WHO Global health sector strategy on sexually transmitted infections 2016–2021⁴ presents a clear vision and goal as well as specific targets and milestones.

Built upon a powerful **VISION** of **zero new infections**, **zero STI-related complications and deaths**, **and zero discrimination**, the Global STI Strategy was developed with the **GOAL** of **ending STI epidemics as major public health concerns**.



A. Strong principles

To achieve the stated vision and goal, the Global STI Strategy is guided by the following principles.

- Universal health coverage
- Government stewardship and accountability
- Evidence-based interventions, services and policies
- Protection and promotion of human rights, gender equality and health equity
- Partnership, integration and linkage with relevant sectors, programmes and strategies
- Meaningful engagement and empowerment of people most affected by STIs.

B. Milestones and targets

Global STI Strategy: 2020 milestones



70%

- of countries have STI surveillance systems in place
- of countries have at least 95% of pregnant women screened for syphilis and 90% tested for HIV and 95% of HIV positive pregnant women receiving effective treatment
- of countries provide STI services or links to such services in all primary, HIV, reproductive health, family planning and ante- and post-natal care services
- of countries deliver HPV vaccines through the national immunization programme
- of countries report on antimicrobial resistance in N. gonorrhoeae



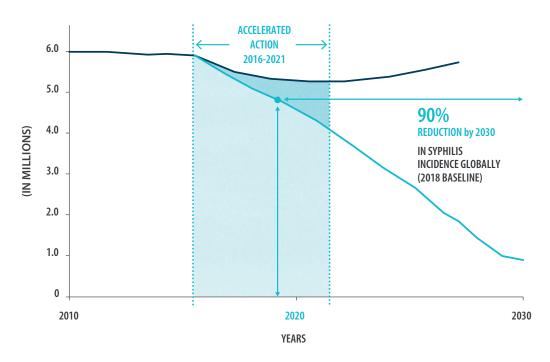
70%

of key populations have access to a full range of STI & HIV services, including condoms

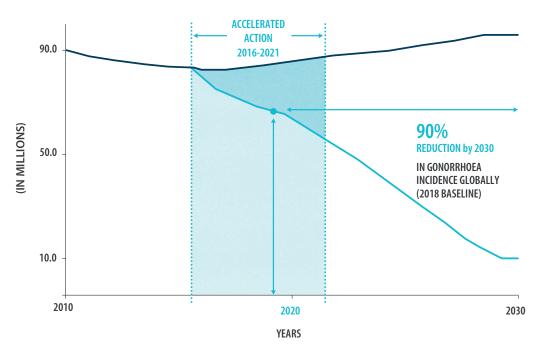
⁴ Global health sector strategy on sexually transmitted infections 2016–2021: towards ending STIs. Geneva: World Health Organization; 2016 (http://www.who.int/reproductivehealth/publications/rtis/ghss-stis/en/).

Global STI targets for 2030

SYPHILIS INCIDENCE



GONORRHOEA INCIDENCE



2030 TARGETS

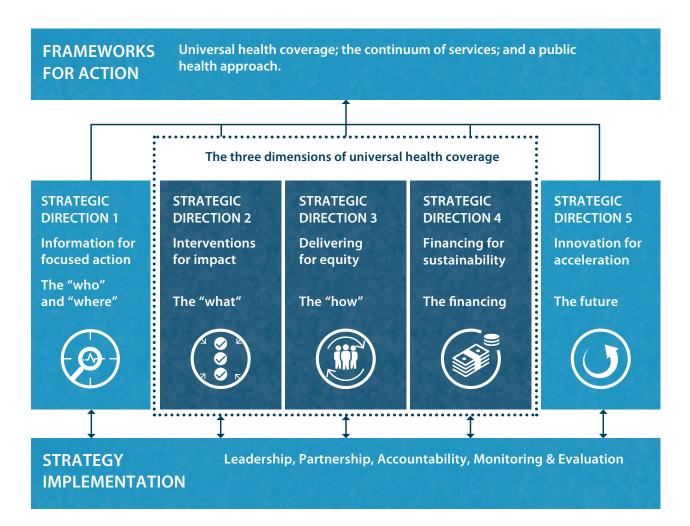
- 90% reduction of *T. pallidum* incidence globally (2018 global baseline)
- 90% reduction in *N. gonorrhoeae* incidence globally (2018 global baseline)
- ≤ 50 cases of congenital syphilis per 100 000 live births in 80% of countries
- Sustain 90% national coverage and at least 80% in every district (or equivalent administrative unit) in countries with the human papillomavirus vaccine in their national immunization programme.

C. Five strategic directions

It is now up to countries to develop their own national plans. Each country will need to:

- Strengthen the governance and accountability of programmes relating to STIs.
- Set national targets and milestones, and identify indicators for monitoring and evaluating the national STI programme.
- Ensure that relevant monitoring and evaluation frameworks track the entire continuum of services in both the public and private sectors, and are harmonized with other health information systems.

While country-level actions should be context-specific, the five strategic directions described in the Global STI Strategy provide essential guidance around which countries can develop their national goals, targets, plans and programmes. Each of the strategic directions leads to a set of priority interventions.



Strategic direction 1: Information for focused action

Countries have to know the situation of their STI epidemics and to link that information to appropriate responses. National STI response should always be guided by up-to-date, accurate information.

- Integrate surveillance with national health information systems.
- Capture more demographic details during data collection.
- Consider key populations and locations.
- Include data on risk factors and determinants.
- Strengthen laboratories to monitor gonococcal AMR.

Strategic direction 2: Interventions for impact

Three areas, for which cost-effective interventions already exist, have been identified for immediate action.

- 1. Elimination of mother-to-child transmission (EMTCT) of syphilis, HIV and hepatitis B
- 2. Ensuring high coverage of HPV and hepatitis B vaccines
- 3. Controlling the spread of gonococcal antimicrobial resistance (AMR).

Priority actions to support each of the three areas:

- Prevent and aim for early diagnosis of STIs.
- Manage symptomatic patients and their partners.
- Strengthen the supply chain for commodities.

With special consideration for: use of up-to-date and appropriate screening, diagnosis and treatment guidelines; improved quality of care; and linked and integrated services.

The three key intervention areas and global health initiatives



Strategic direction 3: Delivering for equity

Access for all to information and services for the prevention and treatment of STIs is a human right.

Investment in public awareness, comprehensive sexuality education, training of health workers, and the fight against the stigma surrounding STIs is crucial to remove the barriers that prevent effective management of STIs.

Country responsibilities:

- Strengthen health systems to provide efficient and high-quality care to all.
- Prioritize access to information and services relating to sexual and reproductive health and rights, to prevent STIs.
- Create an enabling environment.
- Integrate STI control with other national health programmes.
- Use initiatives to reach men and boys as well as women and girls.
- Reduce vulnerability and risk.
- Ensure access to health education.
- Target populations with the greatest need.
- Provide uninterrupted access to necessary commodities.
- Ensure interventions are rights-based and gender-sensitive.

Strategic direction 4: Financing for sustainability

At present, funding commitments are not sufficient to achieve the 2030 health targets,⁵ so new ways must be found to bridge the gap and scale up programmes. No one should have to face financial hardship to receive the health services they need.

- Develop a costed investment case.
- Implement health financing mechanisms to enhance access.
- Pursue strategies to reduce STI commodity prices.
- Increase efficiencies through better planning, procurement and distribution.

Strategic direction 5: Innovation for acceleration

Investment in new technologies – as well as innovative ways to improve the ways that existing technologies are used – is key to ensuring better STI control.

- Develop STI vaccines.
- Develop multi-prevention technologies.
- Implement innovative approaches to service delivery and scale-up.
- Develop new STI diagnostic tests and testing strategies.
- Develop new treatments and strategies to address drug resistance.



Collectively, when the recommendations in the Global STI Strategy are put into action, this will intensify the STI response in each country towards ending STI epidemics as public health concerns. Providing equitable access to services will improve health and well-being and ensure that no one is left behind.

TOGETHER, LET'S STOP THE PAIN AND SUFFERING, SEVERE COMPLICATIONS AND DEATHS, AS WELL AS THE STIGMA AND DISCRIMINATION CAUSED BY STIS.



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