



Engaging Sex Workers

AND OTHER HARD-TO-REACH GROUPS WITH SEXUAL HEALTH OUTREACH WORK IN DONCASTER

The Public Health commissioned adult sexual health services include testing and treatment for sexually transmitted infections (STIs), contraception provision and psychosexual therapy services. Advice, prevention and promotion are embedded across all service elements delivered. In Doncaster, these services are delivered by Solutions 4 Health Ltd, under the name 'Sexual Health Services 4 Doncaster (SHS4D)'.

Syphilis is a sexually transmitted infection (STI). If it's not treated, it can cause serious and potentially life-threatening problems.

Symptoms include; small sores around the penis, vagina, anus or mouth, rashes on the palm of your hands or soles of your feet, flu-like symptoms, swollen glands or patchy hair loss. Not everyone who catches syphilis will show symptoms and sometimes symptoms will go away by themselves, even though the person still has it.

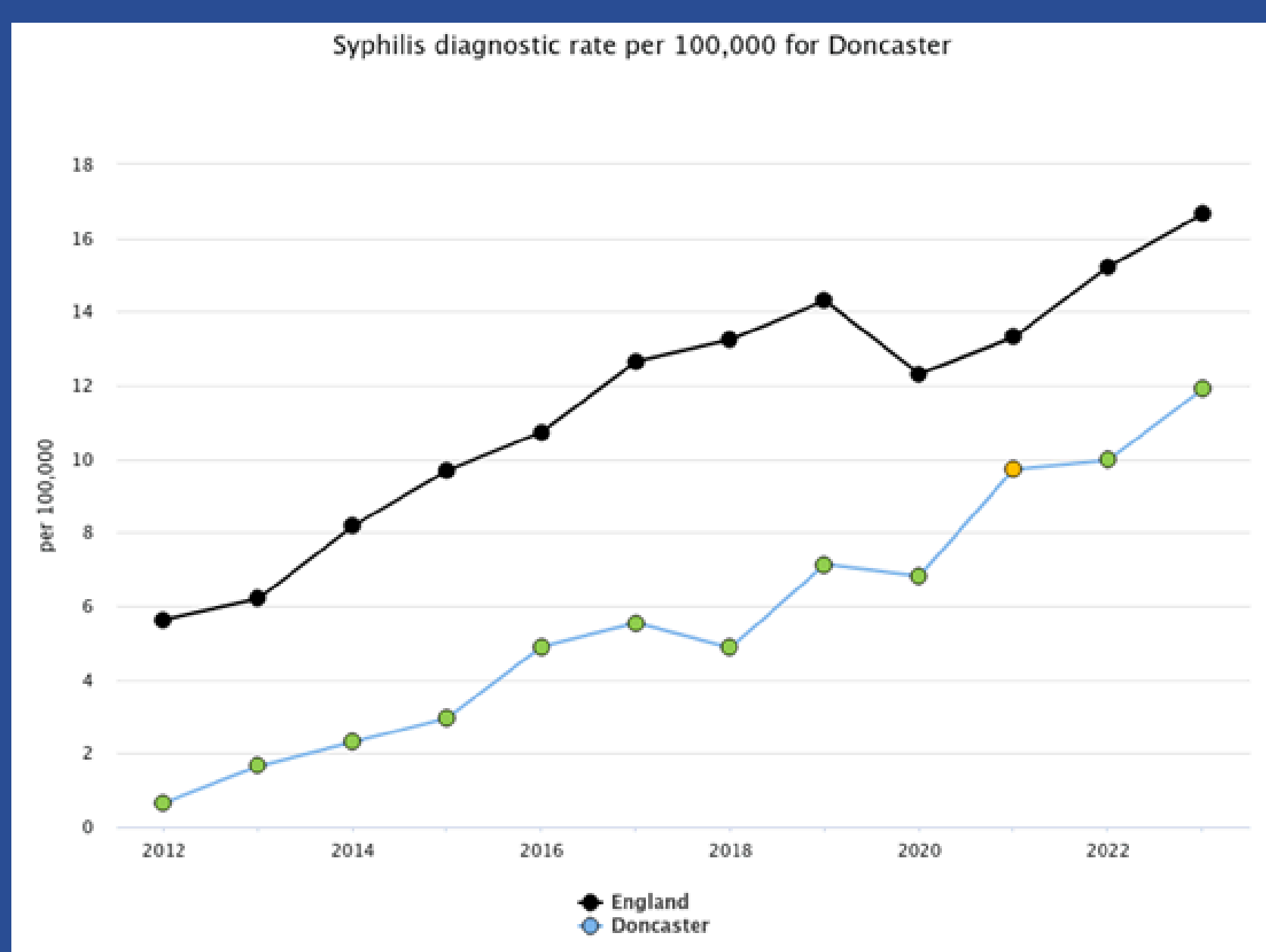
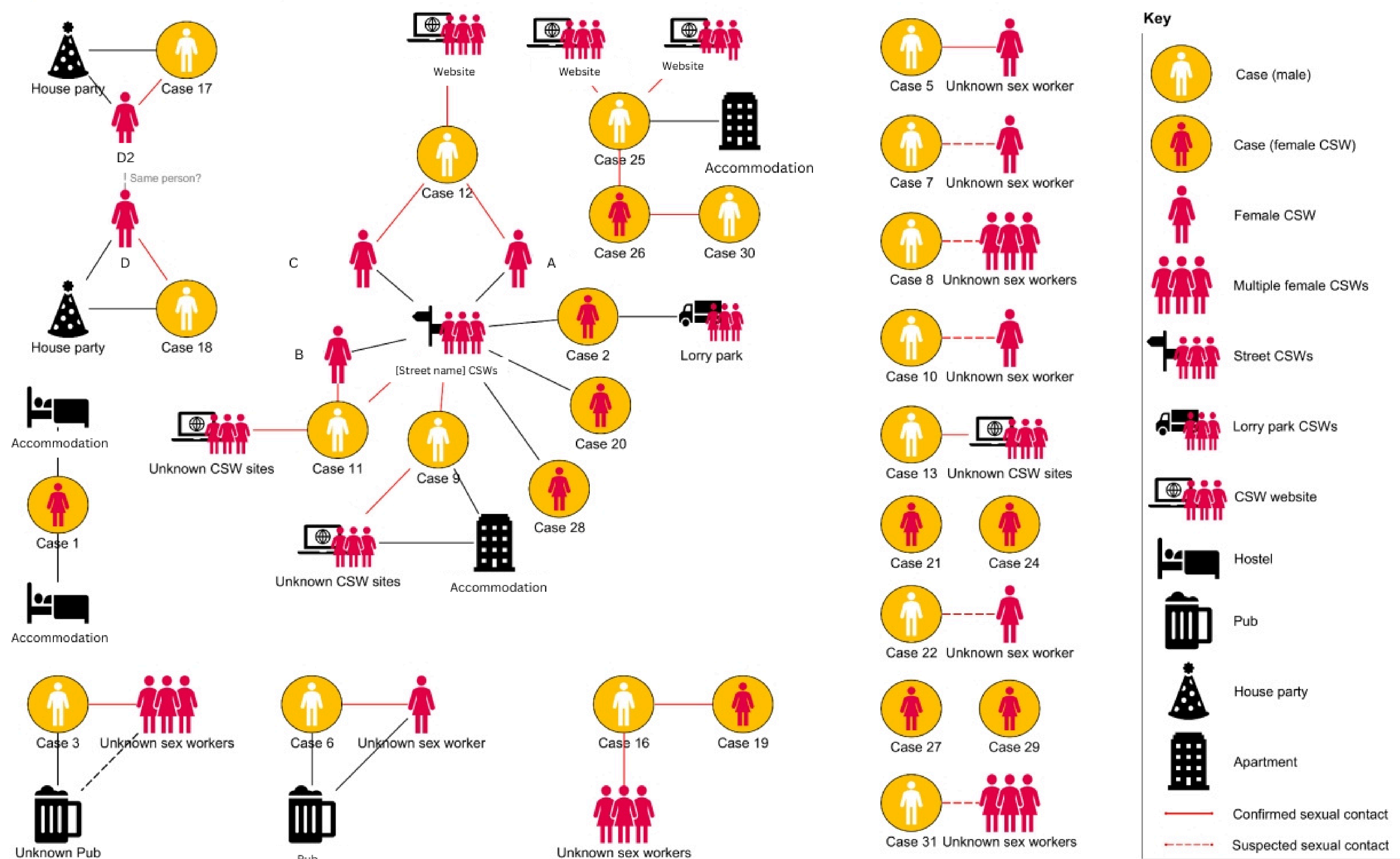
It is often referred to as the great pretender as symptoms are often mistaken for other health conditions.



THE SITUATION IN DONCASTER

- 2021/22 saw a national rise in syphilis cases following the COVID pandemic lockdown restrictions ending – this was reflected in Doncaster.
- In August 2023 SHS4D alerted us to a potential syphilis outbreak in commercial sex workers (CSWs) in Doncaster.
- Most areas have elements of sex work, but Doncaster has a very prominent street sex work scene.
- Incident Management Team (IMT) procedures were instated in response to investigate cases, case definitions were established and detective work began. IMT partners include; UK Health Security Agency (UKHSA), SHS4D, Public Health, colleagues from the hospital trust and the Amber Project.
- The Amber Project works with women and men with experience of sex work, survival sex and/or sexual exploitation and are a vital partner in this work.
- Sexual Health advisors were vital to help with contact tracing and have worked in partnership with UKHSA to produce epidemiological summaries which include:
 - Checking diagnoses against case definitions
 - Noting characteristics of suspected cases
 - Tracking cases over time
 - Updating social network information – see below for an example of our social network diagram

Figure 4: Social network diagram showing reported interactions between cases and sex workers in Doncaster



OUTBREAK RESPONSE

- Established a Tuesday afternoon drop-in clinic for vulnerable women. Refreshments are provided for the women, along with a safe and private waiting space at the clinic and voucher incentives are used to encourage testing and treatment completion.

- Friday night outreach – SHS4D attend the 'health bus' with colleagues from the Amber Project and the Hepatitis C nurses. They encourage screening and condom use and have general health and wellbeing conversations with the CSWs.
- Working with Doncaster's drugs and alcohol service to promote the distribution of free condoms via their needle exchange service.
- The production of a syphilis briefing paper aimed at voluntary and community sector staff to alert them on the current situation, explain symptoms to be aware of and signpost to the sexual health services for further information and support.
- SHS4D have attended GP Target sessions and provided the GPs with follow-up comms messages.
- Letters have been sent round to all departments within Doncaster's hospital trust to alert them on the current situation and encourage an increase in syphilis screening, especially amongst potentially vulnerable patients.

CHALLENGES

- A very hard to reach population group, leading extremely complex lives. The Tuesday afternoon drop-in clinic has been instrumental in working to overcome this challenge and build vital relationships with the women.
- The complex nature of syphilis and it's symptoms. The drop-in has given the opportunity for women to access cytology screening and contraception.
- Cross-overs with a variety of medical areas leading to potential confusion about testing and treatment responsibilities.
- Medically trained staff are sometimes unsure or reluctant of how to have potentially sensitive conversations around syphilis with patients.
- There have been cases of syphilis in pregnant ladies, and babies born with congenital syphilis which can lead to catastrophic effects to mother and baby.

NEXT STEPS INCLUDE

- Working on getting point-of-care test kits for outreach staff and the Amber Project to make testing quicker and easier.
- Linking to wider work around promoting condom use, not only ensuring vulnerable groups have easy and free access to condoms, but promoting condom use across the whole population.
- Looking to implement repeat syphilis screening during pregnancy.
- General comms work, encouraging everyone to look after their sexual health.
- Continue to build positive relationships with our vulnerable groups to ensure they feel empowered and able to access help and support they need.