Syphilis Elimination Effort
Audience Profile – Policy Makers/Opinion Leaders

The policy makers and opinion leaders audience segment includes community activists and national, city, county, and state elected officials (e.g., elected State and Local Health Officers).

General Segment Overview

• Non-elected officials

Community activists intimately know and can speak in-depth on the issues and perspectives shared by constituents of a particular group in their community. They know how to mobilize support for an issue, and they rely heavily on grassroots efforts and public relations to get their messages heard and read by government officials, corporations and other key influencers. Community activists can be public figures in their communities and are often well respected by their constituency groups. They can heavily influence the decisions of other leaders in their community.

Community activists who focus on HIV/AIDS and sexually transmitted diseases (STDs) tend to be well respected by their peers and constituents. As a group, they can be well organized and can collaborate to get shared messages and perspectives disseminated to the broader public, corporate America, and government.

• Elected officials

Elected officials are chosen to become community representatives based on their platforms and willingness and track record of actively addressing key issues that arise in their communities. Elected officials tend to represent and support the health issues brought to their attention that affect the health and welfare of their constituents. They usually depend upon staff and advisors to keep them apprised of different issues affecting their communities.

Note: The above descriptions are assumptions reflecting our general understanding of policy makers. While no one specific source is referenced, these assumptions were based on our interviews with policy makers and general literature reviews.

Knowledge, Attitudes and Beliefs Regarding Syphilis

Our formative research found that non-elected opinion leaders already involved with syphilis elimination perceive syphilis as an important problem. They are familiar with the consequences of syphilis, and they acknowledge it as being on the rise and more prevalent in their communities. Those who view syphilis as less important believe that other public health issues are more of a priority in their community.

While our research indicates only select officials are familiar with the prevalence of STDs, a study conducted by the Joint Center for Political and Economic Studies and the Henry J. Kaiser Family Foundation indicates the majority of black officials are familiar with the issues and concerns surrounding STDs (e.g., funding sources, policies, insurance, and access to care).
Our research findings also revealed that elected officials are split on acknowledging syphilis as an important public health issue. Many perceive other public health and social issues, such as drug abuse, homelessness, HIV/AIDS and asthma to be more urgent than syphilis, while a comparable number consider it to be important because of its consequences and perceived incidence. It also is important to note that elected officials often focus their attention on issues when concern is raised from their constituents or when there is a crisis. While many think syphilis is an important health issue, they may not necessarily view it as a crisis in their community.

Barriers

Our research found that stigmas and social taboos attached to syphilis partially explain why a number of policy makers and opinion leaders do not address the disease in their communities – many view it as “somebody else’s problem.” For the most part, elected officials are unable to freely discuss sex and sexual behaviors unless their constituents are vocal about the need to focus energies on it. This contributes to a lack of awareness about syphilis. Consequently, a lack of awareness among elected officials and the general public prevents syphilis from being viewed as a public health issue, thus complicating the ability to garner public support for and interest in syphilis elimination efforts.

Community activists who do not solely focus on STDs often are challenged by limited resources (i.e., staff and funding) to conduct outreach related to issues of importance to their constituents’ well-being. Note: Those involved with HIV/AIDS community issues know the importance of syphilis education and are more accepting of working it into their messages.

Other barriers sited for garnering support for a syphilis elimination effort by elected officials included a general lack of awareness by the broad public and elected officials of the seriousness and numbers of reported syphilis cases in their communities and lack of advocacy organization efforts to raise their attention.

Opinion leaders also sited the lack of church involvement as a barrier as well as a general lack of awareness of syphilis as a serious health problem in their communities.

Framing the Syphilis Elimination Message

Our formative research found that policy makers and opinion leaders need facts that emphasize local syphilis rates and the consequences of syphilis. Elected officials also prefer serious and factual messages and often rely on community-based organizations and health advocates, including health policy makers, to create a groundswell of public interest in syphilis before becoming involved.

Linking syphilis elimination outreach to HIV/AIDS efforts and framing it as a child health issue through emphasis on congenital syphilis may help garner much needed support.

Local community leaders who are capable of generating grassroots support around an issue are viewed as most successful at getting the attention of elected officials. Community leaders often have strong networks, thus an ability to mobilize key community groups around an issue with minimal effort.
Methods of Communication and Media Channels

Our formative research found that policy makers and opinion leaders prefer mass media and the Internet as sources of information. They would like to receive information on syphilis both in hard copy format and in electronic format.

On a local level, elected officials gather a majority of health information from the mass media (e.g., community newspapers and local television news), community entities (e.g., activists, hospitals), the Internet, and authoritative sources, such as state and local health departments to make a case for increased funding and support of major community health issues. In fact, political leaders typically have working relationships with CBOs. They rely on them for support and information about community concerns, and get ready for action, based on CBO community mobilization efforts.

To get a national perspective of health issues affecting Americans, elected officials turn to national newspapers (e.g., The Washington Post, New York Times, Wall Street Journal, USA Today), national political publications, such as Roll Call, Congressional Digest, Congressional Quarterly, The Hill, and Cook Political Report, and magazines, such as Economist and US News and World Report. Elected officials also tune into broadcast television station, such as CSPAN, political news programs like McLaughlin Group, and radio stations, such as National Public Radio.