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Red Talon STD Resource Manual

**STD and HIV Testing and Treatment Services for
Tribes in Idaho, Oregon, and Washington**

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The activities of Project Red Talon are funded by the Centers for Disease Control and Prevention through a three-year grant, which began in September 2004. This project is designed to provide tribes in Idaho, Oregon, and Washington with education, training, and technical assistance for the prevention and treatment of STDs and HIV/AIDS.

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Section 1:

Northwest Portland Area Indian Health Board

The Northwest Portland Area Indian Health Board was formed in 1972 to provide the Northwest Tribes with health advocacy and technical assistance. The Board is a tribal organization, as defined by Public Law 93-638, and is a 501 (C)(3) non-profit organization. The NPAIHB is represented by all 43 federally recognized tribes in Washington, Oregon, and Idaho. Each member tribe appoints a delegate via tribal resolution, and meets quarterly to direct and oversee all activities of the Board.

NPAIHB has a 33-year history of providing support to the Northwest tribes, particularly in health promotion, disease prevention, and health research. The Board currently administers programs that address STD/HIV Prevention, Cancer Control, Commercial Tobacco Prevention, Women's Health, Diabetes, and research activities through the Northwest Tribal Epidemiology Center (EpiCenter). Many of these projects have National reach, serving Tribes throughout the US.



Mission & Values

The mission of the Board is to assist Northwest tribes to improve the health status and quality of life of member tribes and Indian people in their delivery of culturally appropriate and holistic health care.

Formation of NPAIHB

The Northwest tribes have long recognized the need to exercise control over the design and development of healthcare delivery systems within their local communities. To this end, in 1972 they formed the Northwest Portland Area Indian Health Board (NPAIHB). The NPAIHB is a nonprofit tribal advisory organization which represents the 43 tribes of Washington, Oregon, and Idaho on health-related matters.

The Board of Directors meets quarterly to review Indian Health Service (IHS) policies and activities, advise programs from the perspective of tribal governments, provide direction to Board staff, and develop legislative positions.

NPAIHB Contracts and Grants

When directed through a resolution of the Board, NPAIHB staff pursue contracts and grants of regional benefit to Northwest tribal health programs. Strategic planning sessions allow Tribes to set funding priorities.

Strategic Plan

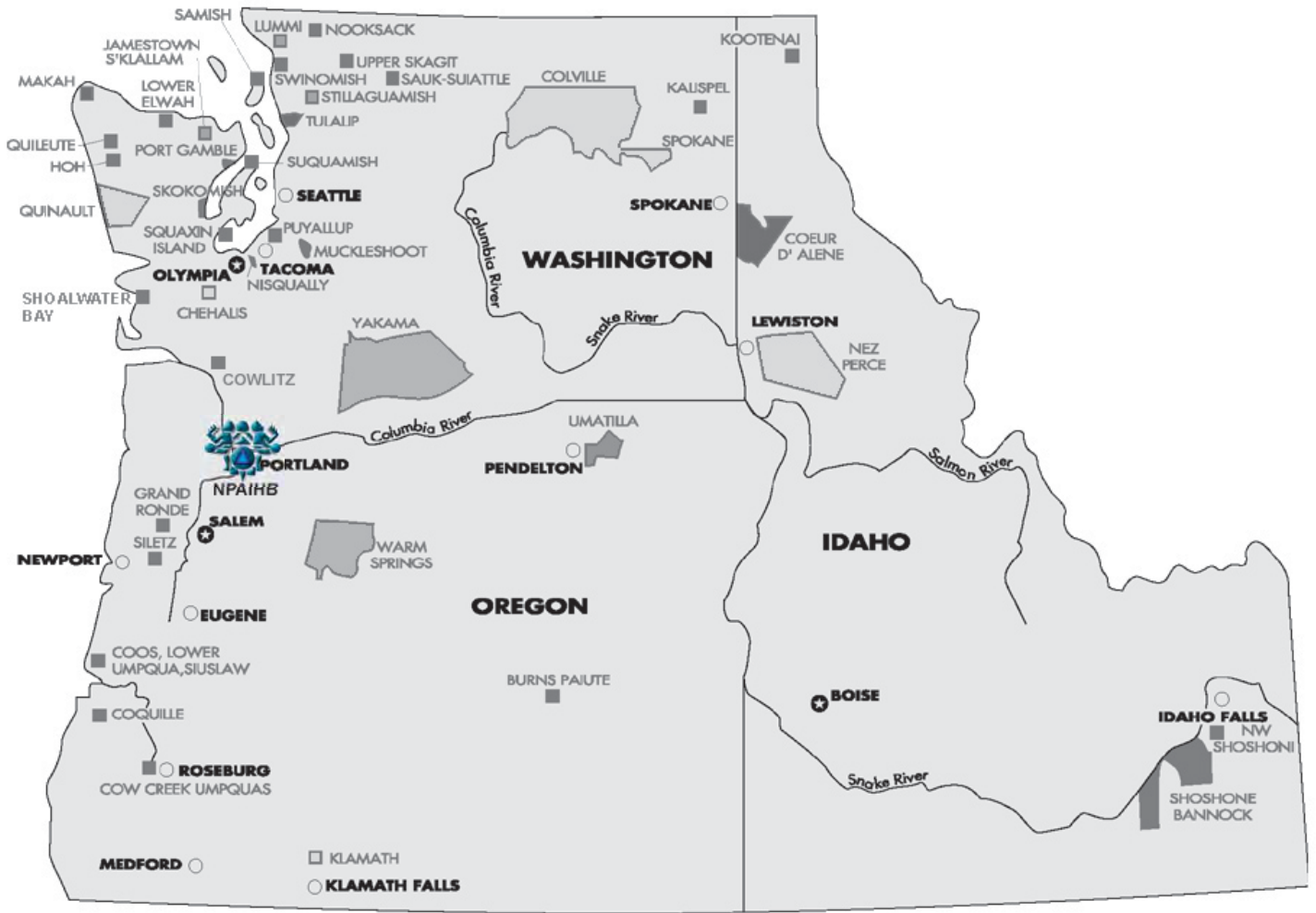
The activities of the Northwest Portland Area Indian Health Board are guided by its strategic plan, which is regularly reviewed and updated. The Plan provides guidance to delegates and staff, and is designed to document the fundamental values and purpose of the Board in order to inform future decisions about programs and activities.

Program Operations

Core funding for the NPAIHB is provided through a Public Law 93-638 contract with the Indian Health Service.

Vision for Healthy Tribal Communities

- The seventh generation will have balanced physical, mental, emotional, and spiritual lifestyles. They will have healthy diets, be fit, active, and happy.
- The seventh generation will live in sovereign communities that are politically effective, economically independent, and run by American Indian and Alaska Native people.
- The seventh generation will live in a unified and poverty-free community made up of stable, loving families living in adequate housing.
- Children born to the seventh generation will be healthy and free of chemical substances. They will experience strong parenting, mentorship and positive role models as youth and will become involved and empowered leaders.
- The seventh generation will live in accordance with their traditional values by knowing their native languages and practicing spiritual and cultural traditions.



NPAIHB Member Tribes:

Idaho

Coeur d'Alene Tribe
 Kootenai Tribe
 Nez Perce Tribe
 NW Band of Shoshoni Tribe
 Shoshone-Bannock Tribe

Oregon

Burns-Paiute Tribe
 Coos, Siuslaw and Lower Umpqua Tribe
 Coquille Tribe
 Cow Creek Band of Umpqua
 Grand Ronde Tribe
 Klamath Tribe
 Siletz Tribe

Umatilla Tribe
 Confederated Tribes of Warm Springs

Washington

Chehalis Tribe
 Colville Tribe
 Cowlitz Tribe
 Hoh Tribe
 Jamestown S'Klallam Tribe
 Kalispel Tribe
 Lower Elwha Tribe
 Lummi Tribe
 Makah Tribe
 Muckleshoot Tribe
 Nisqually Tribe
 Nooksack Tribe

Port Gamble S'Klallam Tribe
 Puyallup Tribe
 Quileute Tribe
 Quinault Tribe
 Samish Indian Nation
 Sauk-Suiattle Tribe
 Shoalwater Bay Tribe
 Skokomish Tribe
 Snoqualmie Tribe
 Spokane Tribe
 Squaxin Island Tribe
 Stillaguamish Tribe
 Suquamish Tribe
 Swinomish Tribe
 Tulalip Tribe
 Upper Skagit Tribe
 Yakama Nation



Section 2:

Sexually Transmitted Diseases

Sexually transmitted diseases (STDs) include more than 30 infectious organisms that are transmitted primarily through sexual activity.

Despite the fact that STDs are extremely widespread and cost the nation billions of dollars each year, most people in the United States remain unaware of the risks and consequences of all but the most prominent STD — HIV, the virus that causes AIDS. STDs cause many harmful, often irreversible complications, including reproductive health problems, fetal and perinatal health problems, cancer, and death.

This resource manual will provide you with information about a few of the most common STD's, and where you can obtain information about testing and treatment.

Information for this chapter was obtained from the Centers for Disease Control and Prevention, Division of Sexually Transmitted Diseases Prevention:
www.cdc.gov/std

Chlamydia

What is Chlamydia?

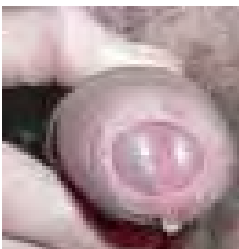
Chlamydia is a common STD caused by the bacterium, *Chlamydia trachomatis*. Even though symptoms of chlamydia are usually mild or absent, serious complications can occur that cause irreversible damage, including infertility.

What are the symptoms?

Chlamydia is known as a “silent” disease because about three quarters of infected women and about half of infected men have no symptoms. If symptoms do occur, they usually appear within 1 to 3 weeks after exposure.

In women, the bacteria initially infects the cervix and the urethra (urine canal). Women who have symptoms might have an abnormal vaginal discharge or a burning sensation when urinating. When the infection spreads from the cervix to the fallopian tubes (tubes that carry eggs from the ovaries to the uterus), some women still have no signs or symptoms; others have lower abdominal pain, low back pain, nausea, fever, pain during intercourse, or bleeding between menstrual periods. Chlamydial infection of the cervix can spread to the rectum.

Men with signs or symptoms might have a discharge from their penis or a burning sensation when urinating. Men might also have burning and itching around the opening of the penis. Pain and swelling in the testicles are uncommon.



Is there a test?

There are laboratory tests to diagnose chlamydia. Some can be performed on urine; other tests require that a specimen be collected from a site such as the penis or cervix.

What is the Treatment?

Chlamydia can be easily treated and cured with antibiotics. All sex partners should be evaluated, tested, and treated. Persons with chlamydia should abstain from sexual intercourse until they and their sex partners have completed treatment, otherwise re-infection is possible. Women whose sex partners have not been appropriately treated are at high risk for re-infection. Having multiple infections increases a woman's risk of serious reproductive health complications, including infertility.

How can Chlamydia be prevented?

The surest way to avoid transmission of sexually transmitted diseases is to abstain from sexual contact, or to be in a long-term mutually monogamous relationship with a partner who has been tested and is known to be uninfected. Latex male condoms, when used consistently and correctly, can reduce the risk of transmission of chlamydia. Chlamydia screening is recommended annually for all sexually active women 25 years of age and younger. An annual screening test also is recommended for older women with risk factors for chlamydia (a new sex partner or multiple sex partners). All pregnant women should have a screening test for chlamydia.

Gonorrhea

What is Gonorrhea?

Gonorrhea is a sexually transmitted disease caused by *Neisseria gonorrhoeae*, a bacterium that can grow and multiply easily in the warm, moist areas of the reproductive tract, including the cervix (opening to the womb), uterus (womb), and fallopian tubes (egg canals) in women, and in the urethra (urine canal) in women and men. The bacterium can also grow in the mouth, throat, eyes, and anus.

What are the symptoms?

Although many men with gonorrhea may have no symptoms at all, some men have signs or symptoms that appear two to five days after infection; symptoms can take as long as 30 days to appear. Symptoms and signs include a burning sensation when urinating, or a white, yellow, or green discharge from the penis. Sometimes men with gonorrhea get painful or swollen testicles.



In women, the symptoms of gonorrhea are often mild, but most women who are infected have no symptoms. Even when a woman has symptoms, they can be so non-specific as to be mistaken for a bladder or vaginal infection. The initial symptoms in women include a painful or burning sensation when urinating, increased vaginal discharge, or vaginal bleeding between periods. Women with gonorrhea are at risk of developing serious complications from the infection, regardless of the presence or severity of symptoms.

Is there a test?

Several laboratory tests are available to diagnose gonorrhea. A doctor or nurse can obtain a sample for testing from the parts of the body likely to be infected (cervix, urethra, rectum, or throat) and send the sample to a laboratory for analysis. A quick laboratory test for gonorrhea can be done in some clinics or doctor's offices.

What is the Treatment?

Several antibiotics can successfully cure gonorrhea. Because many people with gonorrhea also have chlamydia, another sexually transmitted disease, antibiotics for both infections are usually given together. Persons with gonorrhea should be tested for other STDs. It is important to take all of the medication prescribed to cure gonorrhea. Although medication will stop the infection, it will not repair any permanent damage done by the disease. A person who has had gonorrhea and has been treated can get the disease again if they have sexual contact with someone infected with gonorrhea. If a person's symptoms continue even after receiving treatment, he or she should return to a doctor to be reevaluated.

How can Gonorrhea be prevented?

The surest way to avoid transmission of sexually transmitted diseases is to abstain from sexual intercourse, or to be in a long-term mutually monogamous relationship with a partner who has been tested and is known to be uninfected. Latex condoms, when used consistently and correctly, can reduce the risk of transmitting of gonorrhea.

Syphilis

What is Syphilis?

Syphilis is a sexually transmitted disease caused by the bacterium *Treponema pallidum*. It has often been called “the great imitator” because so many of the signs and symptoms are indistinguishable from those of other diseases.

What are the symptoms?

Many people infected with syphilis do not have any symptoms for years; yet remain at risk for complications if they are not treated. Although transmission appears to occur only while sores are present during the primary or secondary stage of infection, many of these sores are unrecognized. Thus, most infections are transmitted by individuals who are unaware of their infection.

Syphilis presents itself in three stages:

1. Primary Stage
2. Secondary Stage
3. Late Stage or “Latent Stage”

Primary Stage

The primary stage of syphilis is usually marked by the appearance of a single sore (called a chancre), but there may be multiple sores. The time between infection with syphilis and the start of the first symptom can range from 10 to 90 days (average 21 days).



The chancre is usually firm, round, small, and painless. It appears at the spot where syphilis entered the body. The chancre lasts 3 to 6 weeks, and it heals without treatment. However, if adequate treatment is not administered, the infection progresses to the secondary stage.

Secondary Stage

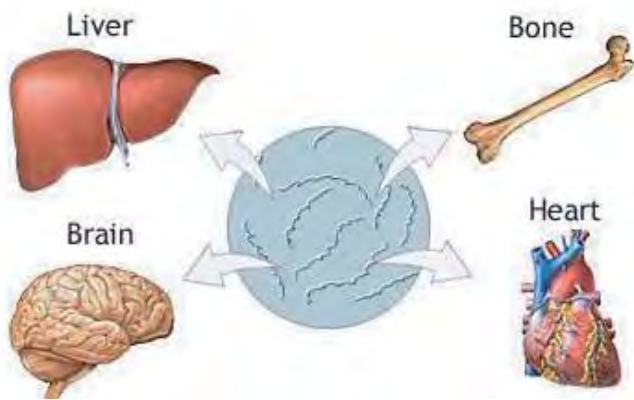
Skin rash and mucous membrane lesions characterize the secondary stage. This stage typically



starts with the development of a rash on one or more areas of the body. The rash usually does not cause itching.

Rashes associated with secondary syphilis can appear as the chancre is healing or several weeks later. The characteristic rash of secondary syphilis may appear as rough, red, or reddish brown spots on both the palms of the hands and the bottoms of the feet. However, rashes with a different appearance may occur on other parts of the body. Sometimes rashes are so faint that they are not noticed.

In addition to rashes, symptoms of secondary syphilis may include fever, swollen lymph glands, sore throat, patchy hair loss, headaches, weight loss, muscle aches, and fatigue. The signs and symptoms of secondary syphilis will resolve with or without treatment, but without treatment, the infection will progress to the late stages of disease.



Late Stage

The latent (hidden) stage of syphilis begins when secondary symptoms disappear. Without treatment, the infected person will continue to have syphilis even though there are no signs or symptoms. The late stage of syphilis can damage internal organs, including the brain, nerves, eyes, heart, blood vessels, liver, bones, and joints. This internal damage may show up many years later.

Signs and symptoms of the late stage of syphilis include difficulty coordinating muscle movements, paralysis, numbness, gradual blindness, and dementia. This damage may be serious enough to cause death.

Is there a test?

Some health care providers can diagnose syphilis by examining material from a chancre (infectious sore) using a special microscope. If syphilis bacteria are present in the sore, they will show up when observed through the microscope. A blood test can also determine whether someone has syphilis. Shortly after infection occurs,

the body produces syphilis antibodies that can be detected by an accurate, safe, and inexpensive blood test. Because untreated syphilis in a pregnant woman can infect and possibly kill her developing baby, every pregnant woman should be tested for syphilis.

What is the Treatment?

Syphilis is easy to cure in its early stages. A single injection of an antibiotic will cure a person who has had syphilis for less than a year. Additional doses are needed to treat someone who has had syphilis for a longer period. Because effective treatments are available, it is important for people to be screened for syphilis if their sexual behaviors put them at risk. People receiving syphilis treatment must abstain from sexual contact until the syphilis sores are completely healed. Persons with syphilis must notify their sex partners so that they also can be tested and receive treatment if necessary.

How can Syphilis be Prevented?

The surest way to avoid sexually transmitted diseases, including syphilis, is to abstain from sexual contact or to be in a long-term mutually monogamous relationship with a partner who has been tested and is known to be uninfected. Genital ulcer diseases, like syphilis, can occur in both male and female genital areas that are covered or protected by a latex condom, as well as in areas that are not covered. Correct and consistent use of latex condoms can reduce the risk of syphilis only when the infected area or site of potential exposure is covered.

Genital Herpes

What is Genital Herpes?

Genital herpes is a sexually transmitted disease (STD) caused by the *herpes simplex viruses' type 1* (HSV-1) and *type 2* (HSV-2). Most cases of genital herpes are caused by HSV-2. Although the infection can stay in the body indefinitely, the number of outbreaks tends to decrease over time.

What are the symptoms?

Most people infected with HSV-2 are not aware of their infection. However, if signs and symptoms occur during the first outbreak, they can be quite pronounced. The first outbreak usually occurs within two weeks after the virus is transmitted, and the sores typically heal within two to four weeks. Other signs and symptoms during the primary episode may include a second crop of sores, and flu-like symptoms, including fever and swollen glands. However, most individuals with HSV-2 infection never have sores, or have very mild signs that they do not even notice. Most people diagnosed with a first episode of genital herpes can expect to have several (typically four or five) outbreaks within a year. Over time these outbreaks usually decrease in frequency.



Is there a test?

Healthcare providers can diagnose genital herpes by visual inspection if the outbreak is typical, and by taking a sample from the sore(s) and testing it in a laboratory. HSV infections can be difficult to diagnose

between outbreaks. Blood tests, which detect HSV-1 or HSV-2 infection, may be helpful.

What is the Treatment?

There is no treatment that can cure herpes, but antiviral medications can shorten and prevent outbreaks during the period of time the person takes the medication. In addition, daily suppressive therapy for symptomatic herpes can reduce transmission to partners.

How can Herpes be prevented?

The surest way to avoid transmission of sexually transmitted diseases, including genital herpes, is to abstain from sexual contact or to be in a long-term mutually monogamous relationship with a partner who is known to be uninfected. Genital ulcer diseases can occur in both male and female genital areas that are covered or protected by a latex condom, as well as in areas that are not covered. Correct and consistent use of latex condoms can reduce the risk of genital herpes only when the infected area or site of potential exposure is protected. Since a condom may not cover all infected areas, even correct and consistent use of latex condoms cannot guarantee protection from genital herpes.

Persons with herpes should abstain from sexual activity with uninfected partners when lesions or other symptoms of herpes are present. It is important to know that even if a person does not have any symptoms he or she can still infect sex partners. Sex partners of infected persons should be advised that they might become infected.

HPV and Genital Warts

What are Genital Warts and HPV?

Genital HPV infection is a sexually transmitted disease (STD) that is caused by *human papillomavirus* (HPV). Human papillomavirus is the name of a group of viruses that includes more than 100 different strains. More than 30 of these viruses are sexually transmitted, and can infect the genital area of men and women. Most people with HPV will not have any symptoms and will clear the infection without treatment.

Some human papillomaviruses are called “high-risk” types, and may lead to cancer of the cervix, vulva, vagina, anus, or penis. Others are called “low-risk” types, and they may cause mild Pap test abnormalities or genital warts.

What are the symptoms?

Most people who have an HPV infection do not know they are infected. The virus lives in the skin or mucous membranes and usually causes no symptoms. Some people get visible genital warts or have pre-cancerous changes. Genital warts usually appear as soft, moist, pink, or flesh-colored swellings. They can be raised or flat, small or large, and sometimes cauliflower shaped. They can appear on the vulva, in or around the vagina or anus, on the cervix, and on the penis, scrotum, groin, or thigh. After sexual contact with an infected person, warts may appear within weeks or months, or not at all. Genital warts are diagnosed by visual inspection.



Is there a test?

Most women are diagnosed with HPV on the basis of abnormal Pap tests. A Pap test is the primary cancer-screening tool for cervical cancer or pre-cancerous changes in the cervix, many of which are related to HPV. Also, a specific test is available to detect HPV DNA in women. The test may be used in women with mild Pap test abnormalities, or in women >30 years of age at the time of Pap testing. No tests are available for men.

What is the Treatment?

There is “no cure” for HPV infection, although in most people the infection goes away on its own. Genital warts can be removed by a medical provider.

How can HPV be prevented?

In 2006, an HPV vaccine was licensed for use in females, ages 9-26 years. This vaccine is 100% effective in preventing four types of HPV, including two that cause most (70%) cervical cancers (types 16, 18), and two that cause most (90%) genital warts (types 6, 11).

The surest way to eliminate risk for genital HPV infection is to abstain from sexual contact. For those choosing to be sexually active, reducing the number of sexual partners and choosing a partner less likely to be infected may reduce the risk of HPV. HPV infection can occur in both male and female genital areas that are covered or protected by a latex condom, as well as in areas that are not covered.

HIV/AIDS

What is HIV?

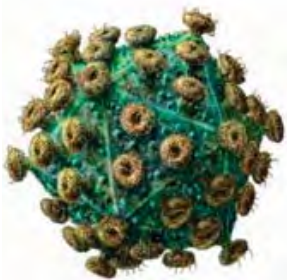
HIV (*human immunodeficiency virus*) is the virus that causes AIDS. This virus may be passed from one person to another when infected blood, semen, or vaginal secretions come into contact with someone's mucous membrane or broken skin. A mucous membrane is any wet, thin tissue found in openings to the human body. These can include the mouth, eyes, nose, vagina, rectum, and opening of the penis.

In addition, infected pregnant women can pass HIV to their baby during pregnancy or delivery, as well as through breast-feeding.

What is AIDS?

AIDS is a diagnosis that is given by a doctor when there is laboratory or clinical evidence that the immune system is severely weakened by HIV (i.e. CD4 cell count <200 cells/mm³ or an opportunistic infection such as Kaposi's sarcoma, Pneumocystis carinii pneumonia, Mycobacterium avium complex, or Cytomegalovirus infection).

How does HIV cause AIDS?



HIV destroys a certain kind of blood cell (CD4+ T cells) that is crucial to the normal function of the human immune system.

Studies of thousands of people have revealed that most people infected with HIV carry the virus for years before enough damage is done to the immune system for AIDS to develop. However, sensitive tests

have shown a strong connection between the amount of HIV in the blood and the decline in CD4+ T cells and the development of AIDS. Reducing the amount of virus in the body with anti-retroviral therapies can dramatically slow the destruction of the immune system.

What are the symptoms?

The only way to know if you are infected is to be tested for HIV infection. You cannot rely on symptoms to know whether or not you are infected with HIV. Many people who are infected with HIV do not have any symptoms for many years.

The following may be warning signs of infection with HIV:

- Rapid weight loss
- Dry cough
- Recurring fever or profuse night sweats
- Profound and unexplained fatigue
- Swollen lymph glands in the armpits, groin, or neck
- Diarrhea that lasts for more than a week
- White spots or unusual blemishes on the tongue, in the mouth, or in the throat
- Pneumonia
- Red, brown, pink, or purplish blotches on or inside the mouth, nose, or eyelids
- Memory loss, depression, and other neurological disorders

However, no one should assume they are infected if they have any of these symptoms. Each of these symptoms can be related to other illnesses. The only way to determine whether you are infected is to be tested for HIV infection.

Where can I get tested for HIV?

Many places provide testing for HIV infection. Common testing locations include local health departments, clinics, offices of private doctors, hospitals, and sites specifically set up to provide HIV testing. To find a testing site near you, visit the National HIV Testing Resources website at:

<http://www.hivtest.org>

It is important to seek testing at a place that also provides counseling about HIV prevention and AIDS. Counselors can answer any questions you might have about risky behaviors and ways you can protect yourself and others in the future. In addition, they can help you understand the meaning of the test results and describe what HIV/AIDS-related resources are available in the local area.

I'm HIV positive. Where can I get information about treatment?

CDC recommends that you be in the care of a licensed healthcare provider, preferably one with experience treating people living with HIV. Your tribal healthcare provider can assist you with treatment information and guidance. Detailed information on specific treatments is available from AIDSinfo, at:

1-800-448-0440 or 1-888-480-3739 (TTY).

Acquired Immune Deficiency Syndrome

Acquired – means that the disease is not hereditary, but develops after birth from contact with a disease-causing agent (in this case HIV).

Immune Deficiency – means that the disease is characterized by a weakening of the immune system.

Syndrome – refers to a group of symptoms that collectively indicate or characterize a disease. In the case of AIDS, this can include the development of certain infections and/or cancers, as well as a decrease in the number of certain cells in a person's immune system. A physician makes a diagnosis of AIDS using specific clinical or laboratory standards.

If you would like more information or have personal concerns, please contact the National HIV/AIDS Hotline at 1-800-CDC-INFO (1-800-232-4636) or the National Indian AIDS Line at 1-800-283-2437.



Condoms

How Condoms Work.

Condoms are sheaths of thin latex or plastic worn on the penis during intercourse. They reduce the risk of sexually transmitted infections, and are also an effective over-the-counter method of birth control. Condoms collect semen before, during, and after a man ejaculates (“comes”). This can keep sperm from entering the vagina.

Don’t let embarrassment become a health risk.

Nearly as many women buy and carry condoms as men. And many people use them every time they have sex. If you are embarrassed to talk with your partner about using condoms, practice before you are in a sexual situation. Then, choose the right time to talk — don’t wait until passion takes over. It may overwhelm your good intentions. Don’t be shy — be direct. Being honest about your feelings and needs can help create a relaxed mood and make sex more enjoyable. Talking is easier if you are in a respectful relationship that makes you feel happy and good about yourself and your partner. In any case, don’t let embarrassment become a health risk.

Putting on a Condom.

Detailed instructions for correct use are included in the packaging for the condom. Be sure to read and understand them before you use it. For pleasure, ease, and effectiveness, both partners should know how to put on and use a condom.

To learn without feeling pressured or embarrassed, practice on your penis or a penis-shaped object like a banana.

HOW TO USE A CONDOM



1. Open the packet carefully so that you don't damage the condom. Don't test the condom by unrolling, inflating or stretching it.



2. Pinch the teat or the last 1cm length at the tip of the condom to expel any air.



3. Hold the condom over the tip of the penis and with the other hand unroll it down to the base of the penis.

4. After ejaculation, hold the condom firmly around the penis whilst withdrawing, to prevent spilling of the semen.

- Put a drop or two of lubricant inside the condom. Pull back the foreskin (unless circumcised), before rolling on the condom.
- Place the rolled condom over the tip of the hard penis. Leave a half-inch space at the tip to collect semen.
- Pinch the air out of the tip with one hand while placing it on the penis.
- Unroll the condom over the penis with the other hand. Roll it all the way down to the base of the penis.
- Smooth out any air bubbles. (Friction against air bubbles can cause condom breaks.) Lubricate the outside of the condom.

Remember, practice makes perfect.

Put the condom on before the penis touches the vulva. Men leak fluids from their penis before and after ejaculation. Pre-ejaculate (“pre-cum”) can carry enough sperm to cause pregnancy. It can also carry enough germs to pass sexually transmitted infections.

Use a condom only once. Use a fresh one for each erection (“hard-on”). Have a good supply on hand.

Taking off a Condom.

- Pull out before the penis softens.
- Don’t spill the semen — hold the condom against the base of the penis while you pull out.
- Throw the condom away.
- Wash the penis with soap and water before embracing again.

How to get Condoms and What they Cost

Condoms are available at Tribal Clinics, in drug stores, family planning clinics, some supermarkets, and from vending machines.

- Male condoms cost about \$0.50, or less.
- Female condoms cost about \$2.50.

Many tribal clinics give them away for free.



If a Condom breaks... during intercourse pull out quickly and replace it. Men should be able to tell if a condom breaks. To learn what it feels like, men can break condoms on purpose while masturbating. If semen leaks out, wash the semen away with soap and water. If semen leaks into the vagina during a woman’s fertile period, ask a clinician for information about starting emergency contraception within 120 hours.

Section 3:

STDs in Indian Country

It has been recognized for some time that American Indians and Alaska Natives (AI/AN) are disproportionately impacted by high rates of sexually transmitted diseases (STDs). In 2004, American Indians were nearly five times more likely than whites to have chlamydia, four times more likely to have gonorrhea, and twice as likely to have syphilis.

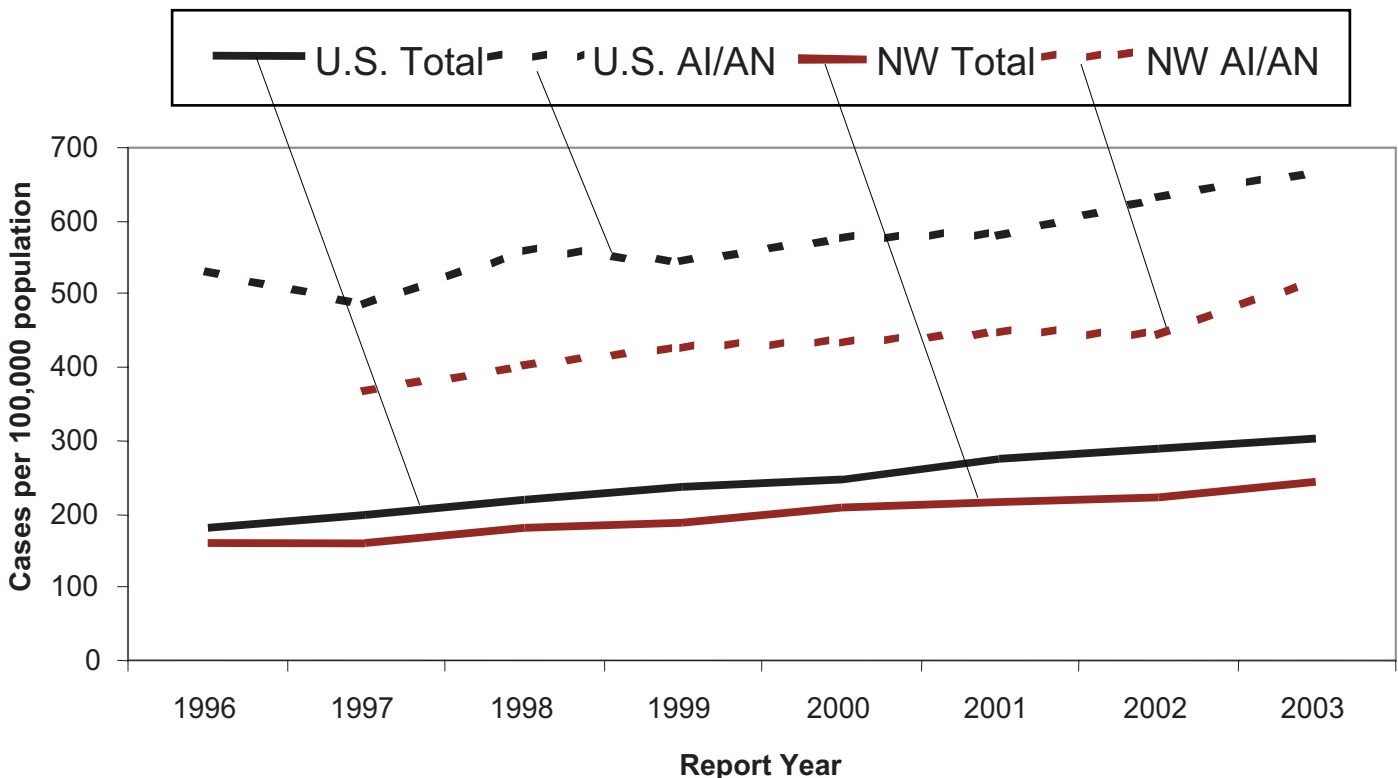
As is true among other populations, chlamydia and gonorrhea rates in Indian Country are typically highest among those age 15-29. Given the “young” demographic distribution in many Native communities, this disparity is particularly troubling to those concerned about the prevention of HIV/AIDS. Research now shows that those infected with STDs are 2 - 5 times more likely to acquire HIV when exposed through sexual contact. Consequently, elevated STD rates among American Indian and Alaska Native youth put them at heightened risk for the transmission of HIV.

The following statistics were obtained from STD Surveillance 2004 [www.cdc.gov/std/stats] and HIV/AIDS Surveillance Report [CDC 2004, Volume 16].

Chlamydia

- In the U.S., AI/ANs make up approximately 1.5% of the total population and account for approximately 2% of all reported Chlamydia cases.
- From 2000-2004, the chlamydia rate among American Indian and Alaska Native women was nearly 5 times higher than the rate reported among white women. Among Native men, the chlamydia rate was 4.75 times higher than the rate reported among white men.
- In the U.S. as a whole, AI/AN chlamydia rates are about 2.5 times higher than the rates reported among all persons, with a 2004 rate of 706 cases per 100,000 population.
- In 2003, 11% of sexually active 15- to 30-year-old women screened at clinics in two IHS service areas tested positive for chlamydia (i.e. the chlamydia positivity rate was 11%).
- In Idaho, Oregon, and Washington, American Indians and Alaska Natives make up 2.1%, 2.5%, and 2.7% of the total population (respectively), and accounted for approximately 3% of all reported chlamydia cases in 2003. Thus, both nationally and regionally, AI/ANs are disproportionately impacted by chlamydia infection. AI/AN chlamydia cases and rates have increased since 1997 at a rate similar to those reported for the rest of the U.S.

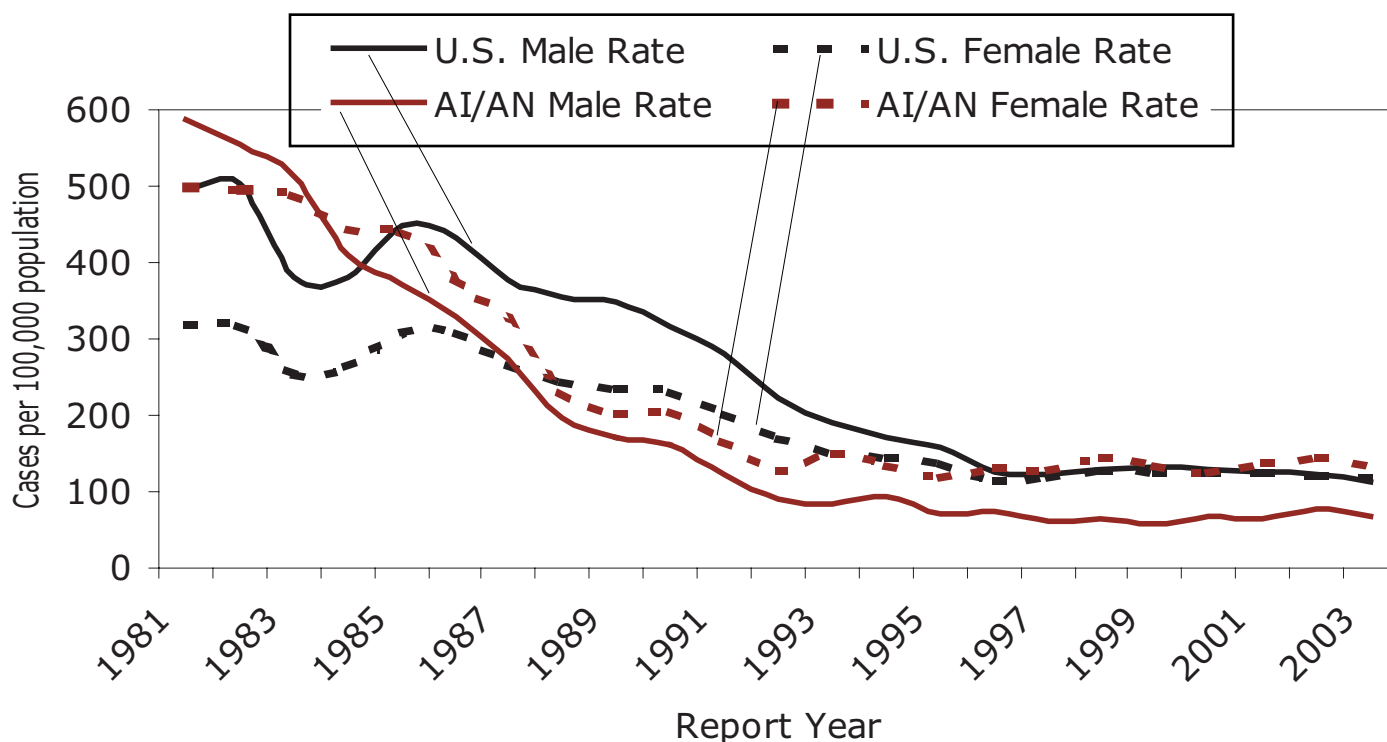
**Total and AI/AN Chlamydia Rates, 1996-2003
United States and NW States (ID, OR, WA)**



Gonorrhea

- In 2004, American Indians and Alaska Natives had the second-highest gonorrhea rate (with 117.7 cases per 100,000, representing an increase of 14.8% since 2003), followed by Hispanics (71.3 cases per 100,000, up 2.3% from 2003), whites (33.3 cases per 100,000, up 2.1% from 2003), and Asians/Pacific Islanders (21.4 cases per 100,000, down 3.2% from 2003).
- Ethnic minorities in the United States have traditionally had higher rates of reported gonorrhea and other STDs, in part a reflection of limited access to quality health care, poverty, and a higher background prevalence of disease in these populations.
- In 2004, the rate of gonorrhea among American Indians and Alaska Natives was 4 times higher than the rate among whites.
- From 2000 to 2004, gonorrhea rates increased 19.4% among American Indians and Alaska Natives.
- While gonorrhea rates among AI/ANs nationally are slightly lower than rates reported for “All Races” combined, this favorable trend is not present in the Northwest, where AI/AN gonorrhea rates have been higher than total Northwest population rates since 1981. This trend is particularly true among AI/AN women, where gonorrhea rates doubled those found among women of “All Races”.

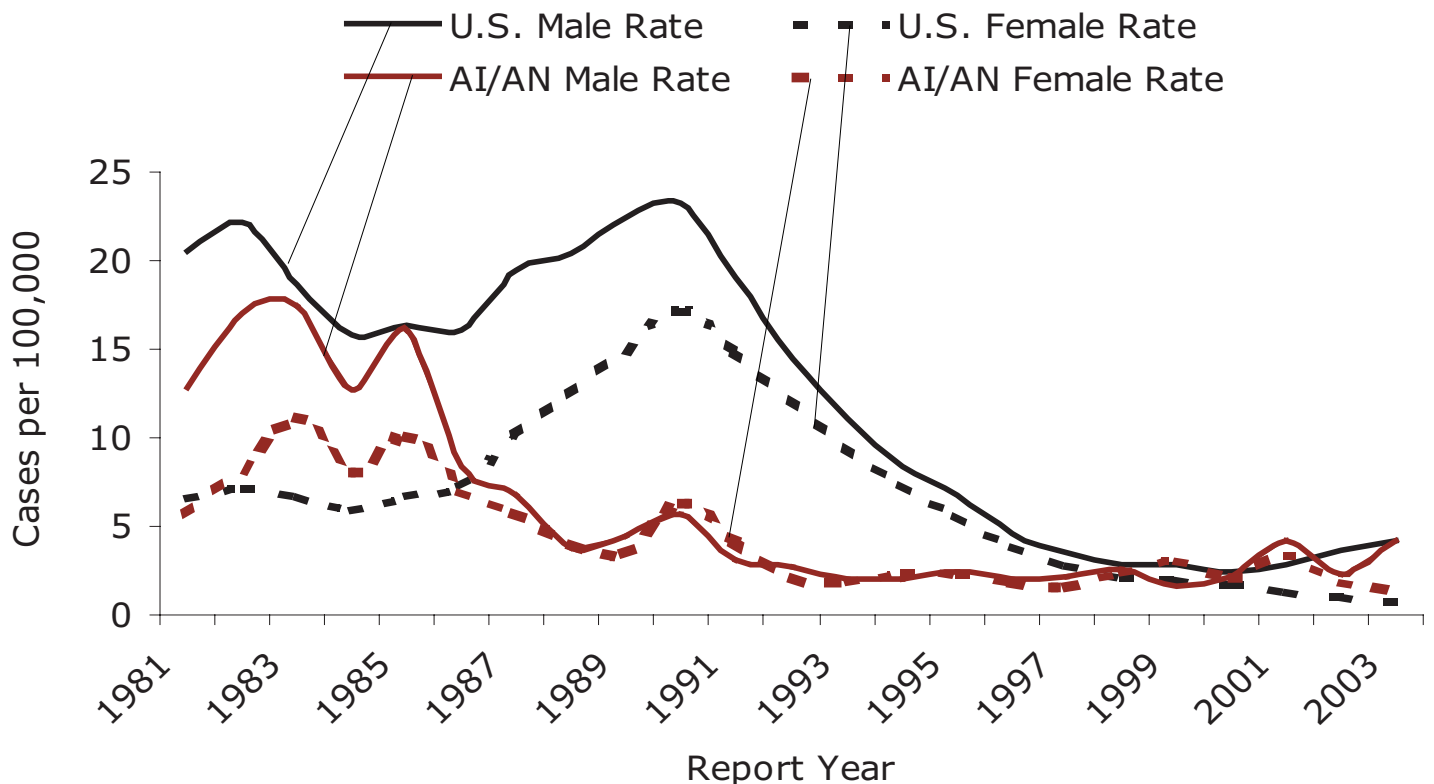
Total and AI/AN Gonorrhea Rates by Sex, 1981-2003
United States



Syphilis

- The syphilis epidemic in the late 1980s occurred primarily among heterosexual, minority populations. During the 1990s, the rate of primary and secondary (P&S) syphilis declined among all racial and ethnic groups.
- From 2000-2004, the rate began to increase again among minority populations. Between 2003 and 2004, the rates of primary and secondary syphilis continued to increase among Hispanics, Asian/Pacific Islanders, and American Indian/Alaska Natives.
- In 2004, syphilis rates increased for men and women in almost all racial and ethnic groups. The rate among American Indians and Alaska Natives increased 14.3%.
- In 2004, the number of reported syphilis cases decreased among AI/AN men (from 50 to 42), but increased among AI/AN women (from 19 to 35).
- Consequently, between 2003 and 2004, the male-to-female rate ratio for P&S syphilis decreased among American Indians/Alaska Natives (from 2.8 to 1.2).

Total and AI/AN P&S Syphilis Rates by Sex, 1981-2003
United States

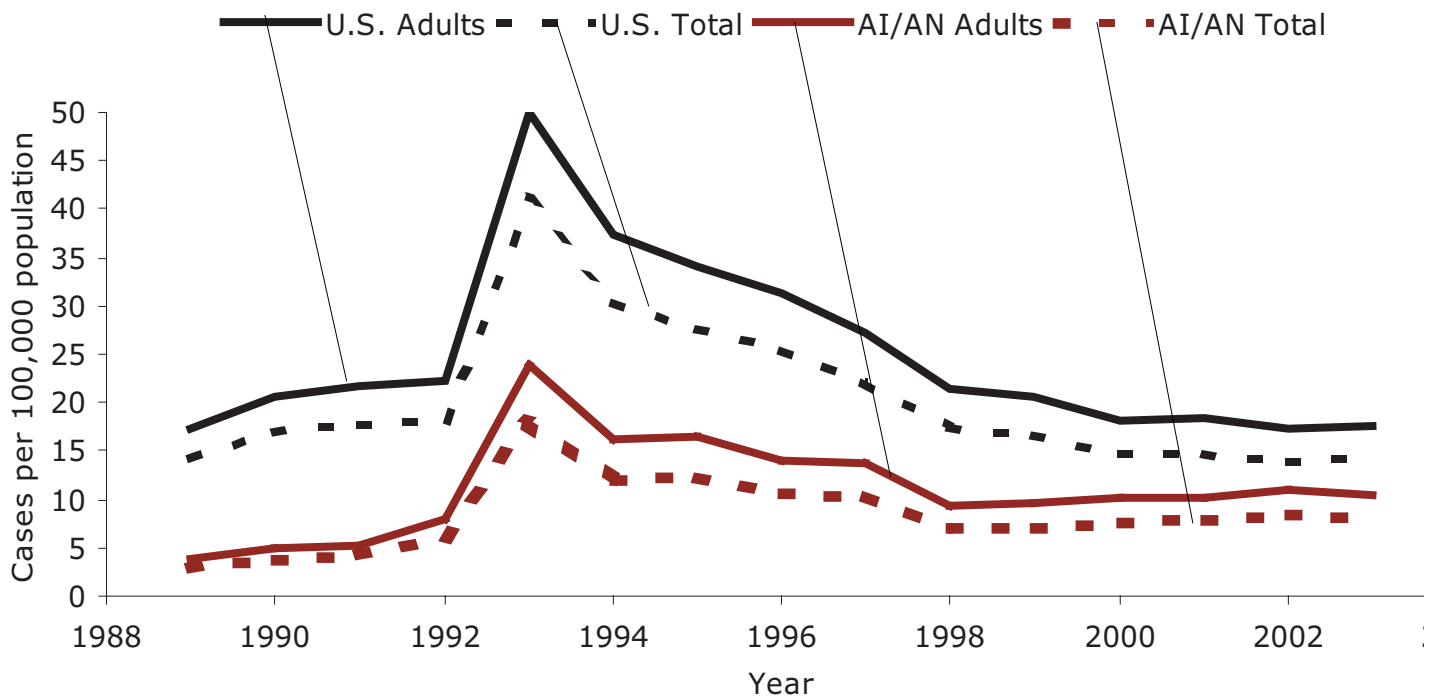


HIV/AIDS

- AIDS has steadily increased in recent years, becoming the ninth leading killer of Native people between the ages of 15 and 44.
- In 2004, the rate of HIV/AIDS diagnosis for Native men (20.8 per 100,000) was 1.1 times higher than that for whites, 6.3 times less than that for blacks, 2.9 times less than that for Hispanics, and 1.5 times higher than that for A/PIs. When compared by ethnicity, AI/AN men had the third highest HIV/AIDS rate in 2004.
- In 2004, the rate of HIV/AIDS diagnosis for Native women (7.7 per 100,000) was 2.4 times higher than that for whites, 8.7 times less than that for blacks, 2.1 times less than that for Hispanics, and 1.8 times higher than that for A/PIs. When compared by ethnicity, AI/AN women had the third highest HIV/AIDS rate in 2004.
- Among AI/AN males, the HIV/AIDS case rate increased 2.4% from 2001 to 2004, the most significant increase observed among any reported racial/ethnic group.
- Among AI/AN females, the HIV/AIDS case rate increased 4.8% from 2001 to 2004, an increase that was second only behind Asians/Pacific Islanders (A/PIs).
- In 2004, HIV was diagnosed for an estimated 206 American Indians and Alaska Natives, and approximately 3,084 AI/ANs have been diagnosed with AIDS since 1980.

Total and AI/AN AIDS Rates, 1989-2003 United States

("Adults" = Rate for adults/adolescents only. "Total" = Rate for all ages)



Section 4:

Native Prevention Resources

STD and HIV prevention programs often fail to recognize and reflect the traditions, images, cultural values, healthcare systems, and social and political climates that are unique to Native communities. Without acknowledging and embracing these dynamics, mainstream programs hold little chance of achieving lasting, positive change.

The following programs provide culturally relevant STD and HIV Prevention services to tribes in the Pacific Northwest.

Project Red Talon



Project Red Talon,
Northwest Portland
Area Indian Health
Board (NPAIHB)

Project Red Talon has provided training, technical support, research, and capacity building assistance to the NW Tribes for over 15 years to support the prevention and treatment of STDs and HIV/AIDS.

Project Red Talon is currently funded by a three-year grant from the Centers for Disease Control and Prevention.

The goals of the project are to:

- Provide STD training to tribal medical providers, health professionals, and community health advocates.
- Provide on- and off-site technical assistance to tribal medical providers, health professionals, and community health advocates.
- Facilitate the adoption of new STD screening and treatment guidelines at tribal health clinics.
- Support activities that increase tribal knowledge about effective STD prevention, screening, and treatment strategies. Activities include the development of native-specific media materials, brochures, and condoms.

To achieve these objectives, the project works closely with the Red Talon STD/HIV Coalition. The Coalition is comprised of tribes from Oregon, Washington, and Idaho, the Indian Health Service, state and county STD/HIV Programs, regional tribal planning groups, and local community-based organizations.

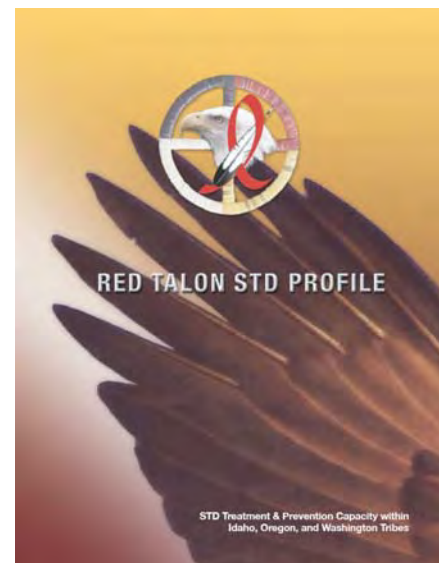
Mission - Red Talon STD/HIV Coalition:

Our goal is to reduce the prevalence of STDs among American Indians and Alaska Natives in the Pacific Northwest by uniting to share wisdom, data, and resources, identify and address common priorities, and develop strategies to eliminate STD-related disparities.

Red Talon STD Profile

To identify STD testing, treatment, and prevention services currently provided by the NW tribes, Project Red Talon developed a comprehensive Capacity Assessment that was administered to over 90 tribal clinic and health program personnel in 2005.

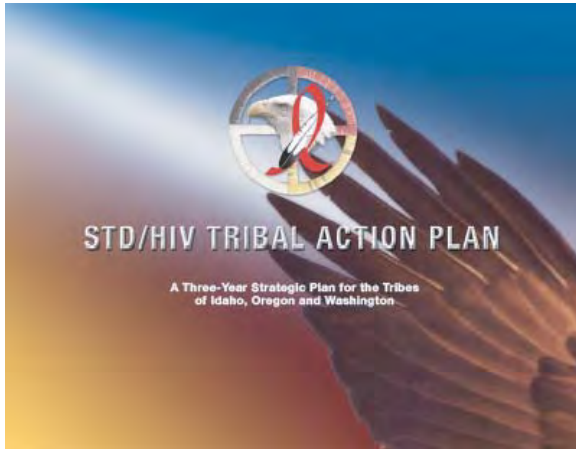
The Red Talon STD Profile documents the findings of this investigation, as well as STD rates and trends for American Indians living in the Pacific Northwest.



Project Red Talon

STD/HIV Tribal Action Plan 2006-2009

The STD/HIV Tribal Action Plan is the product of a collaborative, year-long planning process, initiated by members of the Red Talon STD/HIV Coalition.



The goal of the three-year Action Plan is to reduce the prevalence of STDs among American Indians and Alaska Natives in the Pacific Northwest. It is our hope that the Plan will be actively used by the 43 members of the Northwest Portland Area Indian Health Board to guide program planning, serve as a catalyst for community outreach, and foster a coordinated response to STDs and HIV in our tribal communities.

The Action Plan was approved by the delegates of the Northwest Portland Area Indian Health Board in January 2006, and spans 2006, 2007 and 2008.

STD/HIV Prevention Media Campaign

Additionally, the Red Talon Coalition has sought external funding to support activities in their three-year STD Tribal Action Plan, and received a grant from the Library of Medicine to develop a comprehensive HIV/AIDS Media Campaign targeting high-risk tribal members in the Pacific Northwest. This Campaign will work in tandem with Project Red Talon's outreach activities to increase community awareness about Sexually Transmitted Diseases.

Other Resources:

- Training and community outreach
- Brochures
- Fact Sheets and Fliers
- Materials to support Clinic-Based Policy Change
- Monthly STD Newsletters
- Resource Directory
- Grant writing support

For more information, please contact:

Stephanie Craig Rushing, MPH
Project Director, Project Red Talon
sccraig@npaihb.org

Lisa Griggs
Administrative Assistant
lgriggs@npaihb.org

**Northwest Portland Area
Indian Health Board**
Phone (503) 228-4185
Toll Free (877) 955-5519

www.npaihb.org

South Puget Intertribal Planning Agency (SPIPA) HIV/AIDS Projects

Special Projects of National Significance (SPNS)



Enhancing the Circle of Care Project

SPIPA was awarded one of five HRSA funded American Indian/Alaska Native SPNS grants in 1992. This five year grant worked with the Squaxin Island, Nisqually and Shoalwater Bay Tribes to develop and deliver culturally competent and relevant HIV/AIDS outreach material in order to meet the goals and objectives of this project:

- Increase awareness of HIV/AIDS risk factors
- Decrease stigma associated with HIV/AIDS
- Decrease HIV transmission risk behaviors
- Increase HIV testing frequency among higher risk populations

The project also has a research component supported by the Institutional Review Board of the University of Washington (Dr. Karina Uldall, Evaluator). The research outcomes are based on:

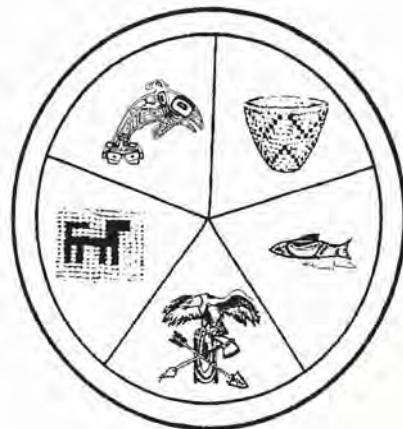
- Evaluating project activities annually using community surveys and focus groups

- Monitoring individual and group outreach efforts to determine necessary components resulting in HIV testing and entry into primary care services
- Using data to shape education and outreach efforts

The two Tribes remaining in the Project, Nisqually and Shoalwater Bay, have developed and tested a number of culturally relevant outreach programs using local beliefs, customs, and crafts to enhance the understanding of HIV/AIDS and the need for prevention, care, and treatment.

SPIPA is honored to share information about the project, its outreach efforts, and its research outcomes with other American Indian/Alaska Native Tribes to “enhance the circle of care” beyond our member Tribes.

For more information please contact:
South Puget Intertribal Planning Agency
HIV/AIDS Project Coordinator
Jutta Riediger
(360) 462-3224



The Tribal B.E.A.R. Program

Building Effective AIDS Response



The Tribal BEAR Project

The Tribal BEAR Project is a program of the Northwest AIDS Education and Training Center, funded through the Minority AIDS Initiative of the Ryan White Care Act. The Project provides a broad spectrum of HIV/AIDS training to Tribal health clinics in Washington, Oregon, Montana, Idaho, and Alaska.

The mission of the Project is to create an expanded circle of care for Natives living with HIV/AIDS and those at risk for contracting HIV by:

- Providing on-site training at Tribal Clinics
- Encouraging the development of an HIV/AIDS Care Team
- Building bridges between Tribal and non-Tribal agencies
- Increasing community awareness of the needs of HIV infected Natives

Partnering with the Salish Kootenai College School of Nursing on the Flathead Reservation in Montana and the South Puget Intertribal Planning Agency in Washington State, BEAR Project brings culturally

sensitive training directly to busy tribal clinic staff members.

The Tribal BEAR Project can:

- Assess HIV training needs
- Develop and coordinate clinic specific HIV/AIDS training
- Provide expert HIV trainers, clinical consultation, and technical assistance
- Develop Native-specific training material
- Offer CME and/or CEU credits
- Provide a framework for the development of an HIV/AIDS Care Team
- Assist Clinics and treatment centers to develop or revise policies and procedures related to HIV/AIDS.

The Project also offers preceptorships (mini-residencies) at HIV Specialty Clinics for: Physicians, Physician Assistants, and Nurse Practitioners, Pharmacists, Nurses, Dieticians, Case Managers

Tribal BEAR Contacts:

Salish Kootenai College
Jacque Dolberry - Director, Nursing Dept.
(406) 675-4921

South Puget Intertribal Planning Agency
www.spipa.org
Jutta Riediger - HIV/AIDS Project Coordinator
(360) 462-3224

Northwest AIDS Education and Training Center (NWAETC) Central Office
Fransing Daisy - AI Program Coordinator
(206) 543-3671

Native Capacity Building Assistance (CBA)

The following Native agencies are funded through 2009 to provide capacity building assistance (CBA) in four focus areas selected by the CDC. The CBA program provides one-on-one technical assistance and tailored training to community based organizations and health departments on the following topic areas: effective organizational management techniques, policies and protocols needed for HIV prevention programs (confidentiality, universal precautions, safety for off-site outreach activities, and counseling and testing protocols), effective fund development, standards for reporting, and cultural competency.



The National Native American AIDS Prevention Center

436-14th Street, Suite 1020
Oakland, CA 94612
510-444.2051
510-444.1593 (fax)
www.nnaapc.org
information@nnaapc.org

Mission

The mission of National Native American AIDS Prevention Center is to stop the spread of HIV/AIDS and related diseases among American Indians, Alaska Natives and Native Hawaiians, and to improve the quality of life for members of these communities who are infected or affected by HIV/AIDS.

Organizational History

NNAAPC was founded in 1987 by American Indian and Alaska Native activists, social workers, and public health professionals. The Centers for Disease Control and Prevention has provided funding to NNAAPC since 1988 to conduct HIV/AIDS prevention and intervention activities with Native populations. During the last 16 years, NNAAPC has developed training manuals and resource guides for HIV providers serving Native peoples, produced multi-day regional trainings for Native-specific

programs, conducted grant-writing workshops, and championed the visibility and viability of Native communities.

Capacity Building Assistance Provided under Focus Area 1: Strengthening Organizational Infrastructure for HIV Prevention. Training materials development, organizational assessment, fiscal management, proposal development, grant writing, human resources management, information management, program policy development, volunteer recruitment and management, Board development, cross-cultural communications development, program marketing and public relations, organizational quality assurance and monitoring, strategic planning, resource development.

Capacity Building Assistance Provided under Focus Area 2: Strengthening Interventions for HIV Prevention. Service integration, effective health communication message development, intervention adaptation and tailoring, priority setting for interventions and target populations, population-based needs assessment, collaboration with researchers, development of community-based research methods, development of effective staff training plans.





Center for Applied Studies in American Ethnicity

Colorado State University
Clark C127
Fort Collins, CO 80523
970.491.2418
Fax: 970.491.2717
www.colostate.edu/Depts/CASAE/happ

Organizational History

The Center is located within Colorado State University in Ft. Collins, Colorado. The Center is funded by CDC to provide capacity building assistance (CBA) to Native communities, Tribal Health Departments, State Health Departments, other CDC funded CBAs and organizations serving Native Americans. Their goal is to assist communities who are providing HIV/AIDS related services to increase their capacity for HIV/AIDS prevention. Center staff have been working with Native groups throughout the United States since the Center's inception.

One of the major contributions of the Center has been the Community Readiness Model. It is an innovative model for assessing the level of readiness of a community to develop and implement successful prevention efforts. The model increases community capacity to effectively build successful and cost effective prevention programs.

Capacity Building Assistance Provided under Focus Area 3: Strengthening Community Access to and Utilization of HIV Prevention Services. Training materials focused on use of the Community Readiness Model; Readiness Assessment, Scoring

and Readiness Action Plan Development; Organizational Readiness Assessment and Action Planning; Resource Information; Assistance with Service System Descriptions; Evaluation/Sustainability Training; Social Marketing for HIV/AIDS Prevention and Early Testing Specific to Native Communities; and Program Marketing and Public Relations.



Inter Tribal Council of Arizona, Inc.

2214 North Central Avenue,
Suite 100
Phoenix, AZ 85004
602-258.4822
602-258.4825
www.itcaonline.com/program_hiv.html

Capacity Building Assistance Provided under Focus Area 4: Strengthening Community Planning for HIV Prevention.

One branch of ITCA is the Regional STD/HIV/AIDS Prevention Program (RSHAPP). The ITCA RSHAPP will provide capacity building assistance to American Indian/Alaskan Natives to increase parity, inclusion, and representation in community planning. This will be achieved through coalition development in nine states. Coalition members of new or existing coalitions will be engaged in training that will increase knowledge of community planning, build leadership, foster consensus of AI/AN issues, and strengthen public speaking skills of members who participate in the community planning process. Technical consultation and training will be given to Health Departments and CPG's on cultural competency and strategies to recruit and retain AI/AN membership on CPG's.



Section 5:

NW Tribal Health Facilities

According to the Indian Health Service (IHS), there are 15 Tribal health centers in Idaho, Oregon, and Washington, 8 of which are tribally-operated and 7 of which are federally-operated. Health centers provide a wide range of clinical services and are open 40 hours each week. In addition to the health centers, there are 22 tribally-operated health stations and 1 federally-operated health station. Health stations provide a limited range of clinical services and usually operate less than 40 hours per week. The Pacific Northwest also maintains 10 tribally operated Prevention programs, and three urban health clinics that are operated by tribal organizations. Preventive programs typically offer counselor and referral services.

Portland Area Indian Health Service



The Portland Area Indian Health Service provides access to healthcare for an estimated 158,000 Indian residents of 43 Tribes located in

Idaho, Oregon and Washington. A mix of health centers, health stations, preventive health programs, and urban programs provides health delivery services. Contact information for each of these clinics appears in the remainder of this chapter.

Some of the services offered by these clinics include:

Services

- Confidential or Anonymous HIV Antibody Testing
- Confidential HIV test-related counseling
- Distribution of Condoms / Female Condoms / Dental Dams
- Family Planning
- Counseling Referrals
- Health Education
- HIV/AIDS Prevention
- Gynecological Care
- HIV Antibody Testing Referrals
- HIV/AIDS Treatment and Therapies
- Laboratory Services
- Mental Health
- Referrals
- Peer Education
- STD Prevention
- Substance Abuse Treatment and Counseling
- Safer Sex Counseling
- STD Testing STD Treatment

Fees

Free HIV Testing, Fee, Insurance Accepted, Sliding Scale

Audiences

- **Must be Native American**
- Adolescents
- Persons with TB
- At Risk Persons
- Families
- HIV Positive Persons
- Sex Partners of HIV Positive Persons
- Low Income Persons
- Students
- Substance Abusers
- Older Adults
- Young Adults
- Persons Practicing High Risk Behaviors
- Persons with STDs
- Persons with HIV/AIDS

IHS Clinics

- Colville Service Unit
- Fort Hall Service Unit - Not-Tsoo Gah-Nea Indian Health Center
- Native American Rehabilitation Association of the Northwest, Inc.
- N.A.T.I.V.E Project / Native Health of Spokane
- Neah Bay Service Unit - The Sophie Trettevick Indian Health Center
- Seattle Indian Health Board
- Warm Springs Service Units - Warm Springs Health and Wellness Center
- Wellpinit Service Unit - David C. Wynecoop Memorial Clinic
- Western Oregon Service Unit - Chemawa Health Center

Urban Clinics - Oregon



The Native American Rehabilitation Association of the Northwest, Incorporated (NARA), and Residential Treatment Clinic is a residential drug and alcohol rehabilitation center serving Native Americans. It offers substance abuse treatment

and counseling, safer sex education, confidential HIV-antibody testing, pre- and post-test counseling, STD testing and treatment, and medical referrals.

Mission

The Mission of the Native American Rehabilitation Association of the Northwest is to provide culturally appropriate education, physical and mental health services, and substance abuse treatment that is culturally appropriate for American Indians and Alaska Natives. It is our goal to raise, to the highest possible level, the health status of our people.

Services

- Confidential HIV Antibody Testing
- Confidential HIV Test Related Counseling
- Counseling
- Counseling Referrals
- Education and Prevention
- HIV Antibody Testing Referrals
- Medical Referrals
- Mental Health Services
- Residential Substance Abuse Treatment and Counseling
- Safer Sex Counseling, Education
- STD Testing, Treatment, Prevention
- Substance Abuse Treatment and Counseling

Fees

Fee, Insurance Accepted, Medicaid Accepted, Medicare Accepted, Sliding Scale

Audiences

- At Risk Persons
- HIV Positive Persons
- Injection Drug Users
- Low Income Persons
- Native Americans
- Persons Practicing High Risk Behaviors
- Persons with HIV/AIDS
- Persons with STDs
- Sex Partners
- Sex Partners of HIV Positive Persons
- Substance Abusers
- Women

Native American Rehabilitation Association of the Northwest, INC. (NARA NW)

**17645 NW Saint Helens HWY
Portland, OR 97233-1729**

Phone: 503-623-1069

History

The Native American Rehabilitation Association of the Northwest, Inc. is an Indian owned and Indian operated private non-profit organization. The Indian Health Clinic and Outpatient programs serve the five counties of the Portland/Vancouver Metropolitan Area.

Urban Clinics - Oregon



Chemawa Health Center was founded in 1979. It is an AAAHC accredited Indian Health Service facility specializing in the

promotion of primary healthcare for eligible Native American patients. The clinic has two full time Physicians and one full time Nurse Practitioner.

Same day appointments are available for:

- Primary & well child care
- Prenatal and post delivery care
- Family planning (birth control)
- Minor surgical and orthopedic care

Audience

- Abused Women
- Adolescents
- Children with HIV/AIDS
- Community Based Organizations
- Families of Persons with HIV/AIDS
- Hispanics/Latinos
- HIV Positive Persons
- Injecting Drug Users
- Low Income Persons
- Minorities
- Native Americans
- Parents of Persons with HIV/AIDS
- Persons Practicing High Risks Behaviors
- Persons with HIV/AIDS
- Persons with STDs
- Pregnant Women
- Students
- Substance Abusers
- Women with HIV/AIDS
- Young Adults

Additional Contact Information

- Pharmacy Refill Line - 503-304-7608
- Dental - 503-304-7631
- Orthodontics - 503-304-7667
- Optometry - 503-304-7662
- Public Health Nursing - 503-304-7600
- Laboratory & Radiology - 503-304-7600
- Behavior Health Center - 503-304-7656

Western Oregon Service Unit Chemawa Health Center

**3750 Chemawa Road NE
Salem, OR 97305**

**Phone 503-3047600
Toll free in OR: 1-800-452-7823**

Urban Clinics - Washington



The Seattle Indian Health Board (SIHB) and Leschi Center Medical Clinic offers AIDS risk assessment, confidential HIV-antibody testing, pre- and post-test counseling, and STD testing and treatment. Also available are referrals, medical, dental, and counseling programs, drug and alcohol programs, community education, a speaker's bureau, AIDS counseling and prevention, crisis intervention, and case management for women and children who are HIV positive. A women, Infants, and Children (WIC) nutrition program is also available.

Mission

The mission of the Seattle Indian Health Board is to assist American Indians and Alaska Natives in the achievement of the highest possible physical, mental, emotional, social, and spiritual well-being through the provision of culturally appropriate services, and to advocate for the needs of all Indian people, especially the most vulnerable members of our community.

Services

- Audiovisual Materials
- Audiovisual Material Production
- Confidential HIV Antibody Testing
- Confidential HIV Test Related Counseling
- Counseling, Referrals for Educational and prevention
- Family Planning
- Health Education
- HIV/AIDS Prevention
- Laboratory Services
- Medical Treatments and Therapies

- Newsletter Publication/Circulation
- Safer Sex Counseling, Education
- Sexual Abuse Counseling
- Speakers Bureau
- STD Prevention, Testing, Treatment
- Substance Abuse Treatment and Counseling

Fees

Fee, Insurance Accepted, Medicaid, Medicare, Sliding Scale

History

The Seattle Indian Health Board is a non-profit, multiservice community health center chartered in 1970 to serve the healthcare needs of American Indians and Alaska Natives living in the greater Seattle/King County region of western Washington State.

Seattle Indian Health Board Leschi Center Medical Clinic

**611 12th AVE. S.
Seattle, WA 98144-2008**

Phone: 206-324-9360

Urban Clinics - Washington



N.A.T.I.V.E. Health of Spokane is a primary health care facility (FQHC) that provides comprehensive health care to people in need. We are a non-profit, minority owned and operated organization serving all people. Our area of expertise is Indian Health.

Mission

The path to health care is for all people and is not traveled alone. Our nurses, providers, and doctors will take good care of you. We specialized in Indian Health issues - we know your special needs and are dedicated to giving you and your family quality care. Our staff is professional, efficient and welcoming - we take time to get to know you. Listening to your needs is important to us.

Native Health Care Services

- Primary and preventive care for children, adolescent, adults and elders
- Sports physicals
- Child check and immunizations
- Women's health care
- Health education and chronic illness management
- Treatment of minor injuries and infectious diseases
- Behavioral Health Counseling
- Substance abuse assessment and referral for adults
- Case Management and community outreach
- Lab services
- Referrals to specialized health providers
- Diabetes management, treatment and support groups
- Registered dietitian

Payment Options

- Medical coupons
 - Medicare
 - Private Insurance
 - Sliding Fee
 - Other community resources
- * If you are uninsured, our benefits coordinator can help find medical coverage. Please call 483-7535 for an application.

Additional Contact Information

The NATIVE Project
1803 W. Maxwell
Spokane, WA 99201
Ph: (509) 325-5502
Fax: (509) 325-9839

NATIVE Health of Spokane

**E. 505 N. Foothills Dr.
Suite #300
Spokane, WA 99207**

**Ph: (509) 483-7535
Fax: (509) 483-9460**

Urban Clinics - Washington



The United Indians of all Tribes Foundation, I WA Sil Youth Program provides education, counseling, advocacy, drug and alcohol assessments, and referrals.

Additional services include safer sex counseling, condom distribution, substance abuse counseling, and recreational programs.

Mission

To create opportunities for Native Children, Youth & Families to build a positive and healthy future.

Early Childhood Development

- Birth to Five Head Start Program

Family Preservation Services

- Foster Care
- Cultural & Clinical Therapy
- Elders Services

Youth Services

- Youth Home
- Substance Abuse Prevention & Outpatient Treatment
- Outreach & Advocacy
- Middle College Education (Grades 9-12)

Community Services

- GED Testing Center
- Daybreak Star Indian Cultural Center & Arts Programming
- Indian Art Market
- Seafair Indian Days Pow Wow
- Infant Mortality Community Organizing

United Indians of All Tribes Foundation, I WA SIL YOUTH PROGRAM

**2524 16th Ave., S
Seattle, WA 98144-51044**

Phone 206-285-4425



Tribal Health Facilities: Idaho State



Kootenai Tribe

Kootenai Tribal Health Facility
PO Box 1269
Bonners, ID 83805
Phone: (208) 267-3519
Fax: 208-267-2960
Website: www.kootenai.org

Nez Perce Tribe

Nimiipuu Health Center
Lapwai Center
P.O. BOX 367
Lapwai, ID 83540
Phone: (208) 843-2271
Toll Free: 1-888-891-2920
Website: www.nezperce.org/~nimiipuu/

Kamiah Center
P.O. BOX 1108
313 Third & Hwy 12
Kamiah, ID 83536
Phone: (208) 935-0733
Toll Free: 1-888-891-2924

Northwestern Band of Shoshone

Not-tsoo Gah-nee Health Center
427 NW Main St.,
Pocatello, ID 83204
Phone: 208-478-5712 Fax: 208-478-5713
Website: www.npaihb.org

Shoshoni-Bannock Tribes

Not-tsoo Gah-nee Health Center
P.O. Box 306
Fort Hall, ID 83203
Phone: 208-238-2400
Fax: 208-478-3950
Website: www.shoshonebannocktribes.com

Coeur d'Alene Tribe

Benewah Medical Center
P.O. Box 388,
1115 B Street
Plummer, ID 83851
Phone: 208-686-1931
Toll Free: 800-325-7371
Fax: 208-686-1035
Website: www.bmcwc.com



Tribal Health Facilities: Oregon State



Burns Paiute Tribe

Wadatika Health Center
HC-71, 100 PaSiGo Street
Burns, OR 97220
Phone: 541-573-7312
Website: www.harneycounty.com/1Paiute.htm

Coos, Lower Umpqua, & Siuslaw Confederated Tribes

1245 Fulton Avenue
Coos Bay, OR 97905
Phone: 541-888-9577
Fax: 541-888-2853
Website: www.ctclusi.org

Coquille Tribe

Coquille Community Health Center
600 Miluk Drive
Coos Bay, OR 97420
Phone: 541-756-0904
Toll Free Phone: 800-344-8583
Fax: 541-888-3431
Website: www.coquilletribe.org

Cow Creek Band of Umpqua Indians

Cow Creek Health & Wellness Center
2371 NE Stephens, Suite 200,
Roseburg, OR 97470
Phone: 541-672-8533
Fax: 541-672-4993
Website: www.cowcreek.com

Tribal Health Facilities: Oregon State

Confederated Tribes of Grand Ronde

Grand Ronde Health & Wellness Center
9515 Grand Ronde Road
Grand Ronde, OR 97347
Phone: 800-775-0095
Fax: 503-879-2015
Website: www.grandronde.org

Klamath Tribe

Klamath Tribal Health & Family Services
3949 South 6th Street
Klamath Falls, OR 97603
Phone: 541-882-1487
Fax: 541-882-1670
Website: www.klamathtribes.org

Klamath Tribal Health & Wellness Center
330 Chiloquin Boulevard
Chiloquin, OR 97624
Phone: 541-783-3293
Fax: 541-783-3273

Confederated Tribes of Siletz Indians

Siletz Community Health Clinic
Corner of Hwy 229 (Gaither St.) and Swan
PO Box 320
Siletz, OR 97380
Phone: 800-648-0449
Fax: 541-444-1278
Website: www.ctsi.nsn.us

Umatilla Tribes

Yellowhawk Clinic
Old Mission Highway
PO Box 160
Pendleton, OR 97801
Phone: 541-966-9830
Fax: 541-278-0839
Website: www.umatilla.nsn.us

Confederated Tribes of Warm Springs

Warm Springs Health & Wellness Center
1270 Kot-Num Road
P.O. Box 1209
Phone: 541-553-1196
Fax: 541-553-2454
Clinic fax: 541-553-1347
Website: www.warmsprings.com



Tribal Health Facilities: Washington State



Colville Confederated Tribes

Colville Health Center
PO Box 150. Nespelam, WA 99155
Phone: 509-634-2842
Fax: 509-634-4116
Website: www.colvilletribes.com

Nespelam Health Center
Phone: 634-2913
Dental: 634-2920
Pharmacy: 634-2914
Pharmacy Refill: 634-2948
Optometry: 634-2937

Omak Health Center
Dental 422-7416
Pharmacy: 422-7735
Pharmacy Refill: 422-7736

Sanpoil Valley Community Health Center
Clinic Phone: 634-7300

Inchelium Community Health Center
Clinic Phone : 722-7007
Dental Phone : 722-7013

Cowlitz Indian Tribe

Cowlitz Indian Tribe Health Clinic
1055 9th Avenue, Suite A
Longwood, WA 98632
Phone: (360) 575-8275
Fax: (360) 575-1948
Website: www.cowlitz.org/health/
Email: cowlitzhealth@tdn.com

Chehalis Tribe

Chehalis Community Clinic
PO Box 536, Oakville, WA 98568
Phone: 360-273-5911
Website: www.chehalis-tribe.org



Tribal Health Facilities: Washington State

Jamestown S'Klallam

Jamestown S'Klallam Tribal
Community Center
1033 Old Blyn Hwy. Sequim, WA 98382
Phone: 360-683-1109 Fax: 360-681-3402
Website: www.jamestowntribe.org

Kalispel Tribe

Kalispel Tribal Community Center
P.O. Box 39. Usk, WA 99180
Phone: 509-445-1147
Fax: 509-445-1705
Website: www.kalispeltribe.com

Lower Elwha Band of Klallam

Lower Elwha Health and Business Center
2851 Lower Elwha Rd
Port Angeles, WA 98363
Phone: 360-452-8471
Fax: 360-452-3428
Website: www.elwha.org

Lummi Tribe

Lummi Tribal Health Center
2616 Kwina Rd, Bellingham, WA 98226
Phone: 360-384-0464
Fax: 360-380-1328
Website: www.lummi-nsn.org

Makah Tribe

Sophie Trettevick PHS Indian Health Center
PO Box 115, Neah Bay, WA 98357
Phone: 360-645-2201
Fax: 360-645-2863
Website: www.makah.com

Muckleshoot Tribe

Muckleshoot Tribal Health Center
17500 SE 392nd St
Auburn, WA 98092
Phone: 253-939-6648
Fax: 253-735-6705
Website: www.muckleshoot.nsn.us

Nisqually Tribe

Nisqually Health Center
4820 She Nah Num Drive SE
Olympia, WA 98503
Phone: 360-456-5221
Fax: 360-407-0125
Website: home.att.net/%7Ep.e.s/Nisqually

Nooksack Tribe

Nooksack Community Health Center
P.O. Box 157, Demming, WA 98244
Phone: 360-592-5176 Fax: 360-592-2125
Website: www.npaihb.org

Port Gamble S'Klallam

Port Gamble Tribal Health Facility
31912 Little Boston Rd NE
Kingston, WA 98346
Phone: 360-297-6308
Fax: 360-297-7097
Website: www.pgst.nsn.us

Puyallup Tribe

Puyallup Tribal Health Authority
2209 E 32nd St, Tacoma, WA 98404
Phone: 253-593-0232
Fax: 253-272-6138
Website: www.geocities.com/puyallup_tribe_of_indians/



Quileute Tribe

Quileute Tribal Health Facility
PO Box 279
LaPush, WA 98350
Phone: 360-374-9035
Fax: 360-374-2644
Website: www2.ihs.gov/PortlandAO/about/quileute.asp

Quinault Indian Nation

Quinault Nation Tribal Health Facility
PO Box 189
Taholah, WA 98587
Phone: 360-276-8211
Fax: 360-276-4630
Website: www.quinaultindiannation.com

Samish Indian Nation

2918 Commercial Avenue
PO Box 217
Anacortes, WA 98221
Phone: 360-293-6404
Fax: 360-299-0790
Website: www.samishtribe.nsn.us

Sauk-Suiattle Tribe

Sauk-Suiattle Tribal Community Clinic
5318 Chief Brown Lane
Darrington, WA 98241
Phone: 360-436-1124
Fax: 360-436-0242
Website: www.sauk-suiattle.com

Shoalwater Bay Tribe

Shoalwater Bay Tribal Clinic
P.O. Box 130
2373 Old Tokeland Rd.
Tokeland, WA 98950
Phone: 360 267-6766
Fax: 360 267-6217
Website: www.npaihb.org

Skokomish Tribe

Skokomish Health Center
N 80 Tribal Center Rd,
Shelton, WA 98584
Phone: 360-426-4232
Fax: 360-877-5943
Website: www.skokomish.org

Spokane Tribe

David C. Wyncoop Memorial Clinic
PO Box 100
Wellpinit, WA 99040
Phone: 509-258-4517
Fax: 509-258-9243
Website: www.spokanetribe.com

Squaxin Island Tribe

Squaxin Island Health Center
90 SE Klah-Che-Min Drive
Shelton WA 98584
Phone: 360-427-9006
Fax: 360-427-1951
Website: www.squaxinland.org

Stillaguamish Tribe

Stillaguamish Tribal Clinic
P.O. Box 277
Arlington, WA 98223
Phone: 360-435-9338
Website: www.stillaguamish.nsn.us

Swinomish Tribe

Swinomish Tribal Health Center
17400 Reservation Rd.
LaConner, WA 98257
Phone: 360-466-3167
Fax: 360-466-5528
Website: www.swinomish.org





Tulalip Tribes

Tulalip Tribal Health Facility
6700 Totem Beach Rd
Marysville, WA 98271
Phone: 360-651-4042
Fax: 360-651-4520
Website: www.tulaliptribes.com

Upper Skagit Tribe

Upper Skagit Tribal Health Facility
25959 Community Plaza
Sedro, WA 98284
Phone: 360-854-7000
Fax: 360-854-7070
Website: www.npaihb.org

Yakama Indian Nation

Yakama Nation Tribal Health Facility
PO Box 151,
Toppenish, WA 98948
Phone: 509-865-5121
Fax: 509-865-8777
Website: www.npaihb.org

Section 6:

Non-Tribal STD Health Facilities: Idaho State

The Idaho Department of Health & Welfare manages a statewide STD/AIDS Program. The STD/AIDS Program receives federal funding to support testing, treatment, and prevention services for Idaho's reportable sexually transmitted infections, including Chlamydia, HIV, AIDS, Gonorrhea, and Syphilis.

Services are administered through contracts with District Health Departments and community-based organizations throughout Idaho. The Ryan White Title II AIDS Drug Assistance Program (ADAP) and coverage of other direct care services are administered directly through the STD/AIDS Program.

As independent agencies, Idaho's seven health districts are the primary outlets for public health services. These districts work closely with the Idaho Department of Health and Welfare and other state and local agencies.

Idaho State: Local Health Districts



Phone: (208) 455-5300
Fax: (208) 454-7722
<http://www.publichealthidaho.com/>

Central District Health Department

Health District 4
Director: Kathy A. Holley
707 North Armstrong Place
Boise, ID 83704-0825
Phone: (208) 375-5211
Fax: (208) 327-8500
<http://www.phd4.state.id.us/>

South Central District Health Department

Health District 5
Director: Cheryl S. Juntunen
1020 Washington Street North
Twin Falls, ID 83301-3156
Phone (208) 734-5900
Fax: (208) 734-9502
<http://www.accessidaho.org/phd5/>

Southeastern District Health Department

Health District 6
Director: Ed Marugg
1901 Alvin Ricken Drive
Pocatello, ID 83201
Phone: (208) 233-9080
Fax: (208) 234-7169
<http://www2.state.id.us/phd6/>

District 7 Health Department

Director: Richard O. Horne
254 "E" Street
Idaho Falls, ID 83402-3597
Phone: (208) 522-0310
Fax: (208) 525-7063

Panhandle Health District

Health District 1
Director: Jeanne Bock
2195 Ironwood Court
Coeur d'Alene, ID 83814
Phone: (208) 415-5100
Fax: (208) 415-5106
<http://www2.state.id.us/phd1/>

North Central Health District

Health District 2
Director: Carol M. Moehrle
215 10th Street. Lewiston, ID 83501
Phone: (208) 799-3100
Fax: (208) 799-0349
<http://www2.state.id.us/phd2/>

Southwest District Health Department

Health District 3
Director: Eugene Gunderson
920 Main Street
Caldwell, ID 83605



Section 7:

Non-Tribal STD Health Facilities: Oregon State

In Oregon State, the HIV/STD/Tuberculosis (HST) Program operates as a part of the Office of Disease Prevention and Epidemiology in the Oregon Department of Human Services. There are five sections within HST: Data and Analysis, HIV Client Services, HIV Community Prevention, Sexually Transmitted Diseases (STD), and Tuberculosis (TB).

The basic public health functions of the HST program are to:

- Analyze and report epidemiologic data on HIV, STD, and TB infections.
- Develop, implement, and evaluate evidence-driven population-based prevention programs.
- Educate Oregonians about the impact of HIV, STD, and TB infections.
- Assist in the development of local and national policies related to STD and TB prevention and care.
- Coordinate with and inform other agencies of the services available to persons affected by these diseases.

Information available at: http://egov.oregon.gov/DHS/ph/hst/about_us.shtml

Oregon State: County Health Departments

Many of the County Health Departments in Oregon State work with one or more clinics to provide free or low-cost STD testing, diagnosis and treatment for men and women. Education and counseling about sexually transmitted diseases are also available.

Baker County

3330 Pocahontas Rd
Baker City, OR 97814-0650
Phone: (541) 523-8211
Website: www.bakercounty.org

Business Hours:

Monday - Friday
8:00 a.m. - 12:00 p.m.
1:00 p.m. - 5:00 p.m.

Benton County Health Department

530 NW 27th Street
Corvallis, OR
Phone: (541)-766-6835
Fax: (541)-766-6164
Website: www.co.benton.or.us/health

Family Planning & Sexual Health Clinic

Phone: (541) 766-6835
Fax: (541) 766-6186

Business Hours:

8:00 a.m. - 5:00 p.m. Monday, Tuesday,
Thursday, and Friday
1:00 p.m. - 7:00 p.m. Wednesday

Clackamas County

Molalla Health Center
218 Center Ave
Molalla, OR 97038
Phone: (503)-723-2944
Website: www.co.clackamas.or.us/ph/

Business Hours:

12:00 p.m. - 8:00 p.m. Monday - Tuesday
8:30 a.m. - 5:00 p.m. Wednesday - Friday

Clackamas County

Oregon City Health Clinic
1425 Beavercreek Rd.
Oregon City, OR 97045
Phone: (503) 655-8471
Website: www.co.clackamas.or.us/ph/

Business Hours:

12:00 p.m. - 8:00 p.m. Monday - Tuesday
8:30 a.m. - 5:00 p.m. Wednesday - Friday

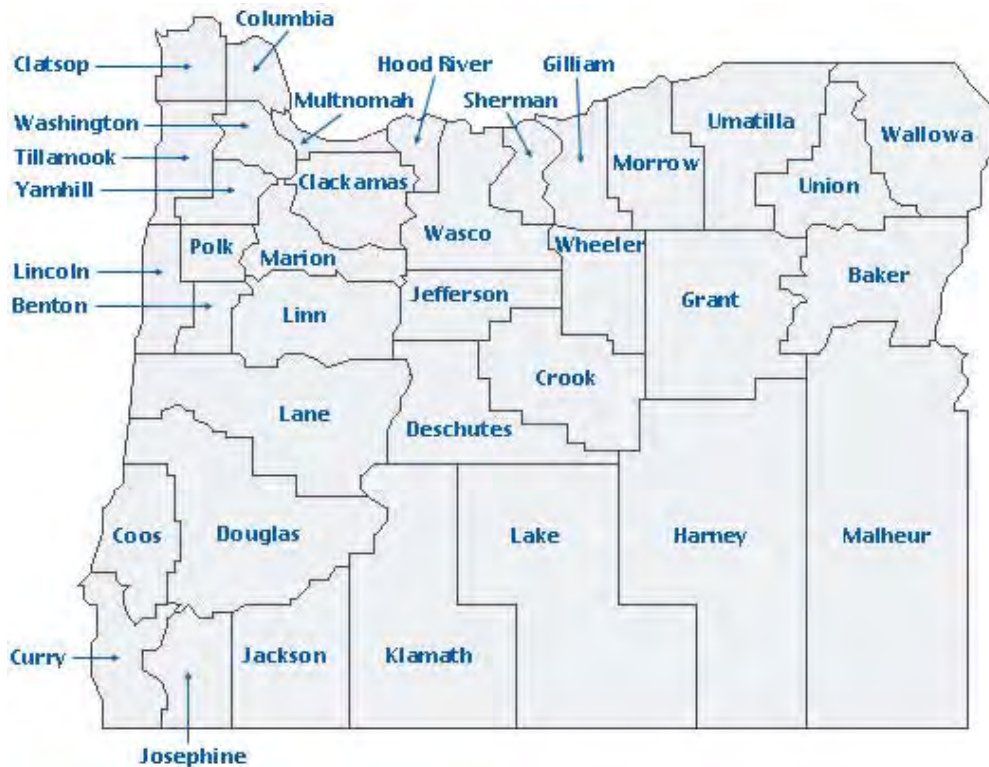
Clackamas County

Sandy Health Clinic
38872 Proctor Blvd.
Sandy, OR 97055
Phone: (503) 722-6660
Website: www.co.clackamas.or.us/ph/

Business Hours:

12:00 p.m. - 8:00 p.m. Monday - Tuesday
8:30 a.m. - 5:00 p.m. Wednesday - Friday





Clatsop County

North County:
 820 Exchange, Suite 100
 Astoria, Oregon 97103
 Phone: (503) 325-8500 for appointments
<http://www.oregon.gov/DHS/ph/lhd/lhd.shtml>

Business Hours:
 10:00 a.m. - 5:00 p.m. Monday
 8:30 a.m. - 5:00 p.m. Wednesday & Friday
 8:30 a.m. - 5:30 p.m. Tuesday & Thursday

Clatsop County

South County:
 575 S. Roosevelt Drive, Suite B
 Seaside, Oregon 97138
 Call (503) 325-8500 for appointments
<http://www.oregon.gov/DHS/ph/lhd/lhd.shtml>

Columbia County

Columbia County Courthouse
 230 Strand Street
 St. Helens, OR 97051

Phone: (503) 397-7211
 Fax: (503) 397-7242
 Website: www.chdpublichealth.com

Business Hours:
 8-4:30, Monday - Friday

Coos County Public Health

North Bend Annex
 1975 McPherson, #1
 North Bend, OR 97459
 Phone: (541) 756-2020 ext 510
 Fax: (541) 756-5466
 Website: www.co.coos.or.us/ph/

Crook County

203 NE Court St.
 Prineville, OR 97754
 Phone: (541) 447-5165
 Fax: (541) 447-3093
<http://www.oregon.gov/DHS/ph/lhd/lhd.shtml>

Business Hours:
 8:00 a.m. - 5:00 p.m. Monday - Friday



Oregon State: County Health Departments

Curry County

Brookings
425 Mill Beach Rd.
Brookings, OR 97415
Phone: (541) 469-3836
Fax: (541) 469-6537
<http://www.oregon.gov/DHS/ph/lhd/lhd.shtml>

Curry County

Gold Beach
94235 Moore St.
Gold Beach, OR 97444
Phone: (541) 247-3300
Fax: (541) 247-5601
<http://www.oregon.gov/DHS/ph/lhd/lhd.shtml>

Business Hours:
Monday - Friday
8:30 a.m. - 12:00 p.m.
1:00 p.m. - 5:00 p.m.

Curry County

Port Orford
1403 Oregon St.
Port Orford, OR 97465
Phone: (541) 332-4041
Fax: (541) 332-8044
<http://www.oregon.gov/DHS/ph/lhd/lhd.shtml>

Deschutes County

Bend
Health and Human Services Bldg.
2577 NE Courtney Drive
Bend, Oregon 97701
Phone: (541) 322-7400
Fax: (541) 322-7465
Website: www.co.deschutes.or.us/health/

Business Hours:
8:00 a.m. - 5:00 p.m. Monday - Friday

Deschutes County

Redmond
Becky Johnson Center
412 SW 8th St.
Redmond, Oregon 97756
Phone: (541) 617-4775
Fax: (541) 617-4770
Web site: www.co.deschutes.or.us/health/

Deschutes County

La Pine
LaPine Community Campus
51605 Coach Road
LaPine, Oregon 97739
Phone: (541) 322-7400
Fax: (541) 322-7465
Website: www.co.deschutes.or.us/health/

Deschutes County

COCC
Central Oregon Community College
2600 NW College Way
Phone: (541) 383-7586
Fax: (541) 318-3769
(During school year only)
Website: www.co.deschutes.or.us/health/

Deschutes County

Sisters
Phone: (541) 322-7400
(Appointment only)
Website: www.co.deschutes.or.us/health/



Douglas County

Health Center
621 W. Madrone
Roseburg, OR 97470
Phone: (541) 440-3500
Fax: (541) 440-3508
Toll Free: (800) 234-0985
Website: www.co.douglas.or.us/dch/
Business Hours:
8:00 a.m. - 5:00 p.m. Monday - Friday

Douglas County

North County
316 West A Avenue
PO Box 592
Drain, OR 97435
Phone: (541) 836-7311
Fax: (541) 836-7821
Website: www.co.douglas.or.us/dch/

Douglas County

South County
247 N. Main
PO Box 155
Canyonville, OR 97417
Phone: (541) 839-4495
Fax: (541) 839-4495
Website: www.co.douglas.or.us/dch/

Douglas County

West County
680 Fir Ave
Reedsport, OR 97467-0680
Phone: (541) 271-4835
Fax: (541) 271-5039
Website: www.co.douglas.or.us/dch/

Gilliam County

Courthouse
221 S Oregon St.,
Condon, OR 97823-0427

Phone: (541) 384-2311
<http://www.oregon.gov/DHS/ph/lhd/lhd.shtml>

Grant County

Health Department and
Family Planning Clinic
528 E. Main Street, Suite E,
John Day, OR
Phone: (541) 575-0429
Website: www.grantcounty.cc

Harney County

420 N Fairview
Burns, OR 97720
Phone: (541) 573-2271
Fax: (541) 573-8388
Website: www.co.harney.or.us

Business Hours:
Monday - Friday
8:30 a.m. - 12:00 p.m.
1:00 p.m. - 5:00 p.m.

Hood River County

Community Health:
1109 June Street
Hood River, OR 97031
(On the Heights)
Phone: (541)-386-1115
<http://www.oregon.gov/DHS/ph/lhd/lhd.shtml>



Oregon State: County Health Departments

Jackson County

1005 East Main Street
Medford, Oregon 97504
Phone: (541) 774-8200
Fax: (541) 774-7980
Website: www.co.jackson.or.us

Business Hours:
Monday - Friday
8:00 a.m. - 12:00 p.m.
1:00 p.m. - 5:00 p.m.

Jefferson County

715 SW 4th Street, Suite C
Madras, OR 97741
(541) 475-4456
Fax: (541) 475-0132
<http://www.oregon.gov/DHS/ph/lhd/lhd.shtml>

Josephine County

Public Health Department
715 NW Dimmick Street
Grants Pass, OR 97526
Phone: (541) 474-5325
Fax: (541) 474-5353
Website: www.co.josephine.or.us

Business Hours:
Monday - Friday
8:00 a.m. - 12:00 p.m. and
1:00 p.m. - 5:00 p.m.

Klamath County

Public Health Department
403 Pine Street
Klamath Falls, OR 97601
Phone: 541-882-8846
Toll Free: 800-378-4127
Fax: 541-885-3638
Website: www.co.klamath.or.us

Business Hours:

8:00 a.m. - 5:00 p.m. Monday - Friday
10:00 a.m. - 4:00 p.m. Saturday
(Teen Clinic) 2nd Saturday of month

Lake County

513 Center Street
Lakeview, OR 97630
Phone: (541) 947-6045
Fax: (541) 947-6015
<http://www.oregon.gov/DHS/ph/lhd/lhd.shtml>

Lane County

Lane County Public Health
County Annex Building
135 E. 6th Avenue
Eugene, OR 97401
Phone: (541) 682-4013
Fax: (541) 682-4041
Website: www.lanecounty.org

Business Hours:

Monday - Friday 8:00 a.m. - 5:00 p.m.

Lincoln County

36 SW Nye Street
Newport, OR 97365
Phone: (541) 265-4179
<http://www.oregon.gov/DHS/ph/lhd/lhd.shtml>

Linn County

Albany
315 4th Avenue SW
Albany, OR 97321
Phone: (541) 926-2102
Fax: (541) 926-2102
Website: www.co.linn.or.us

Business Hours:

Monday - Friday
8:30 a.m. - 5:00 p.m.



Linn County

Lebanon
1600 S Main
Lebanon, OR 97355
Phone: (541) 451-5932
Fax: (541) 258-5704
Website: www.co.linn.or.us

Linn County

Sweet Home
799 Long Street
Sweet Home, OR 97386
Phone: (541) 367-3888
Fax: (541) 367-2407
Website: www.co.linn.or.us

Business Hours:
Tue., Wed., Thur. - 8:30 a.m. - 5:00 p.m.

Malheur County

1108 SW 4th St.
Ontario, OR 97914
Phone: (541) 889-7279
Fax: (541) 889-8468
Website: www.malheurco.org

Business Hours: Monday - Friday
8:30 a.m. - 12:00 p.m.
1:00 p.m. - 5:00 p.m. Mountain Time

Marion County

Main Health & Services Clinic
3180 Center Street NE
Salem, OR 97301
Phone: (503) 588-5357
<http://www.oregon.gov/DHS/ph/lhd/lhd.shtml>

Marion County

Woodburn Office
302 W Hayes
Woodburn, OR 97071

Phone: (503) 981-5851
<http://www.oregon.gov/DHS/ph/lhd/lhd.shtml>

Morrow County

Public Health
Family Service Center
120 S Main
P.O. Box 799
Heppner, OR 97836
Phone: (541) 676-5421
<http://www.oregon.gov/DHS/ph/lhd/lhd.shtml>

Morrow County

Boardman Annex
101 NW Boardman Ave.
Boardman, OR 97818
Phone: (541) 481-4200
<http://www.oregon.gov/DHS/ph/lhd/lhd.shtml>

Multnomah County

Multnomah County Health Department
Healthy People in Healthy Communities
426 SW Stark, 8th Floor
Portland, OR 97204
Health Information and Referrals:
(503) 988-3816
TDD: 1-877-735-7525
Clinic Appointments: (503) 988-3333
Website: www.mchealth.org

Polk County

Public Health Department
182 SW Academy St.
Dallas, OR 97338
Phone: (503)-623-8175
Website: www.co.polk.or.us

Business Hours:
Monday - Friday
8:00 a.m. - 12:00 p.m.
1:00 p.m. - 5:00 p.m.



Oregon State: County Health Departments

Sherman County

Wasco-Sherman Health Department
419 E. 7th Street
The Dalles, Oregon 97058
Phone: (541) 506-2600
Fax: (541) 506-2601
Website: www.wshd.org

Business Hours:

8:30 a.m. - 5:00 p.m. Monday - Friday
8:30 a.m. - 6:30 p.m. Last Thursday of every month

Tillamook County

801 Pacific Avenue
(cross street is 8th)
Tillamook, OR 97141
Phone: (503)-842-3900
1-800-528-2938
Website: www.co.tillamook.or.us

Business Hours:

Monday and Thursday 8:00 a.m. - 7:00 p.m.
Tuesday 8:00 a.m. - 6 p.m.
Wednesday 9:00 a.m. - 5:00 p.m.
Friday 8:00 a.m. - 5:00 p.m.

Tillamook County

Rockaway Beach Clinic
PO Box 66 1-800-528-2938
111 South Miller
Rockaway Beach, OR 97136
Phone: (503) 355-2702
Fax: (503) 355-2702

Business Hours:

Monday - Friday
8:00 a.m. - 5:00 p.m.

Umatilla County

Pendleton
200 SE. Third St.
Phone: (541)-278-5432
<http://www.oregon.gov/DHS/ph/lhd/lhd.shtml>

Umatilla County

Hermiston
435 E. Newport St.
Phone: (541) 567-3113
<http://www.oregon.gov/DHS/ph/lhd/lhd.shtml>

Umatilla County

Milton-Freewater
707 E. Broadway
Phone: (541) 938-5598
<http://www.oregon.gov/DHS/ph/lhd/lhd.shtml>

Union County

1108 K Avenue
La Grande, OR 97850
Phone: (541) 963-1034
Fax: (541) 963-1037
Website: www.chdinc.org

Business Hours:

8:00 a.m. - 6:00 p.m. Monday - Thursday
8:00 a.m. - 5:30 p.m. Friday

Wallowa County

758 NW 1st
Enterprise, OR 97828-1527
Phone: (541) 426-4848
Fax: (541) 426-3627
<http://www.oregon.gov/DHS/ph/lhd/lhd.shtml>

Business Hours:

Monday - Friday
8:30 a.m. - 5:00 p.m.



Wasco County

Wasco-Sherman Health Department
419 E. 7th Street
The Dalles, Oregon 97058
Phone: (541) 506-2600
Fax: (541) 506-2601
<http://www.oregon.gov/DHS/ph/lhd/lhd.shtml>

Washington County

Health & Human Services
155 N. First Avenue, Suite 170
Hillsboro, OR 97124
Phone: (503) 846-8881
Fax: (503) 846-4522
<http://www.oregon.gov/DHS/ph/lhd/lhd.shtml>

Wheeler County

Asher Community Health Center
712 Jay Street
PO Box 307
Fossil, OR 97830
Phone: (541) 763-2725
Fax: (541) 763-2850
<http://www.oregon.gov/DHS/ph/lhd/lhd.shtml>

Business Hours:

Monday - Thursday
9:00 a.m. - 12:00 p.m.
1:00 p.m. - 5:00 p.m.
9:00 a.m. - 12:00 p.m. Friday

Yamhill County

412 NE Ford Street
McMinnville, OR 97128
Phone: (503) 434-7525
Fax: (503) 472-9731
Website: www.co.yamhill.or.us/ph/index.asp

Business Hours:

Monday - Friday 8:30 a.m. - 5:00 p.m.



Oregon State: Portland Area

Multnomah County Health Department

Healthy People in Healthy Communities

426 SW Stark, 8th Floor
Portland, OR 97204

Clinic Appointments (503) 988-3333

STD Prevention and Treatment

Program: All services are confidential, friendly, and non-judgmental. No one is denied services if unable to pay.

Fees: sliding scale based on income. \$20 charge for HIV & hepatitis C testing. No charge for syphilis testing.

Services offered:

STD Clinic - 503-988-3700

STD evaluation and treatment, Hepatitis A & B vaccination for persons at highest risk (adolescents, men who have had sex with men, injection drug users, and persons living with Hepatitis C). Services are available by appointment and on a walk-in basis.

Community Test Site - 503-988-3775

- HIV Counseling, Testing and Referral for non-travel and non-occupational testing
- Hepatitis C testing for persons at risk (persons with a history of injection drug use)
- Syphilis testing for persons at risk (men who have had sex with men).

Men's Wellness Program

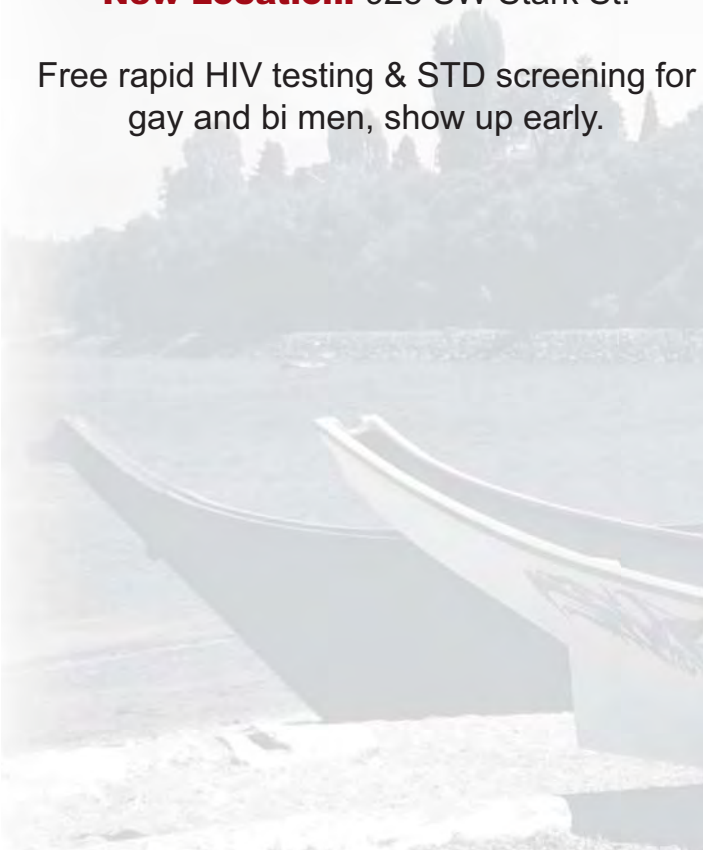
620 SW 5th Ave, 3rd floor
Portland, OR 97204

Phone: (503) 223-6339 (x501)

Hours: Tues. 5:30-8PM

New Location: 928 SW Stark St.

Free rapid HIV testing & STD screening for gay and bi men, show up early.



Outside In

1219 SW Main Street
Portland, OR 97205

Phone: (503) 535-3890

Hours: Schedule varies monthly, call for appointment.

Fees: Sliding scale based on income. Insurance, Care Oregon and OpenCard.

HIV Testing: Confidential only in clinic. Anonymous & confidential during needle exchange.

STD Testing: Yes

HIV Health Services Center

Multnomah County Health Department
426 SW Stark Street, 4th Floor,
Portland, Oregon 97204
Phone: 503-988-5020
Fax: 503-988-5022

www.mchealth.org/hivserv/

Located in downtown Portland in the McCoy Building between 4th and 5th on Southwest Stark, the HIV Health Services Center has been specializing in HIV care since 1990.

As a clinic within the Integrated Clinical Services Division of the Multnomah County Health Department, our program operates in coordination with the Sexually Transmitted Disease Clinic, HIV and Hepatitis C Prevention Services, and seven Primary Care Health Department Clinics.

Our mission is to serve people living with HIV by providing comprehensive and compassionate medical treatment, nursing care, and social services.

The Advice nurse is available by telephone at (503) 988-5020, Monday through Friday from 8:30 A.M. to 4:30 P.M. and can give you general HIV information, answer questions about medications, laboratory tests, or symptoms, or coordinate an urgent clinic visit.

Section 8:

Non-Tribal STD Health Facilities: Washington State

The Washington State Department of Health's STD Program is responsible for the control and prevention of sexually transmitted diseases (STD) within the state of Washington. The program assists state, local, and community efforts to reduce the transmission of chlamydia, gonorrhea, syphilis, hepatitis B and other STDs. The major components of the program include:

- Surveillance
- Partner Notification
- Laboratory Screening
- Risk Reduction
- Patient Management
- Professional Development

Additional information can be obtained from their website at:
<http://www.doh.wa.gov/cfh/STD/>.

Benton Franklin County Health District

1218 N Fourth
Pasco, WA
Phone: (509) 547-9737
<http://www.bfhd.wa.gov/base/index.php>

Benton Franklin County Health District

310 7th Ave. E.
Prosser, WA
Phone: (509) 786-1633
<http://www.bfhd.wa.gov/base/index.php>

Chelan-Douglas Health Department

200 Valley Mall Pkwy
East Wenatchee, Washington 98802
Phone: (509) 886-6400
<http://www.cdhd.wa.gov/index.asp>

Clallam County Health and Human Services

223 East Fourth Street, Suite 14
Port Angeles, WA 98362-3015
Phone: (360) 565-2612
<http://www.clallam.net/HealthServices/>

Clark County Health Department

2000 Fort Vancouver Way,
Vancouver, WA 98663
Mailing Address:
P.O. Box 9825
Vancouver, WA 98666-8825
Phone: (360) 397-8215
<http://www.co.clark.wa.us/health/index.html>

Columbia County Health Department

1012 South 3rd (physical)
1010 South 3rd (mailing)
Dayton, WA 99328
Phone: (509) 382-2181

Fax: (509) 382-2942
www.doh.wa.gov/LHJMap/No_web.htm#Columbia

Cowlitz County Health Department

1952 9th Avenue
Longview, WA 98632
Phone: (360) 414-5599
Fax: (360) 425-7531
<http://www.co.cowlitz.wa.us/health/>

Ferry County

Colville Community Health Office
Serving the people of
Ferry, Pend Oreille and Stevens Counties
240 East Dominion / P.O. Box 270
Colville, WA 99114

Community Health/Clinic: (509) 684-5048
Family Planning: (509) 684-6209
Fax: (509) 684-1002
<http://homepage.plix.com/tricohealth/>

Garfield County Health District

121 South 10th, PO Box 130
Pomeroy, WA 99347
Phone: (509) 843.4312
Fax: (509): 509-843-1935
www.doh.wa.gov/LHJMap/No_web.htm#Garfield

Grant Public Health

Ephrata Office
PO Box 37
First and "C" Street, NW
Ephrata, WA 98823
Phone: (509) 754-6060
(800) 708-6646
Fax: (509) 754-0941
<http://www.granthealth.org/>



Washington State: County Health Departments

Grant Public Health

Moses Lake Office
1038 West Ivy Street
Moses Lake, WA 98837
Phone: (509) 766-7960
Fax: (509) 6519
(800) 708-6651
<http://www.granthealth.org/>

Grays Harbor County

Public Health and Social Services
Department
2109 Sumner Avenue
Aberdeen, WA 98520
Phone: (360) 532-8631
<http://www.ghphss.org/>

Island County

6th and Main Streets
PO Box 5000
Coupeville, WA 98239
Phone: (360) 679-7350
Fax: (360) 679-7390
<http://www.islandcounty.net/health/>

Jefferson County

615 Sheridan Street
Port Townsend, WA 98368
Phone: (360) 385-9400
Fax: (360) 385-9401
<http://www.co.jefferson.wa.us/health/default.htm>

Kitsap County

Bremerton – Main Office
345 6th Street, Suite 300
Bremerton, Washington 98337-1866
Phone: (360) 337-5235
<http://www.kitsapcountyhealth.com/index.htm>

Kitsap County

Port Orchard
1026 Sidney Avenue
Port Orchard, WA
Phone: (360) 337-5720
In the Givens Community Center
<http://www.kitsapcountyhealth.com/index.htm>

Kittitas County Public Health

Main Office
507 N Nanum Street, Suite 102
Ellensburg, WA 98926
Phone: (509) 962-7515
Fax: (509) 962-7581
<http://www.co.kittitas.wa.us/health/>

Klickitat County

Goldendale Office
228 W Main St, MS-CH-14
Goldendale, WA 98620
Phone: 509 773-4565
or 1-888-291-3521
Fax: 509 773-5991
<http://www.klickitatcounty.org/health/>

Klickitat County

White Salmon Office
170 NW Lincoln, POB 159
White Salmon, WA 98672
Phone: 509 493-1558
or 1-888-267-1199
Fax: 509 493-4025
<http://www.klickitatcounty.org/health/>

Lewis County Public Health

360 NW North Street
Chehalis, WA 98532
Phone: 360-740-1223
<https://fortress.wa.gov/lewisco/home/>



Lincoln County Public Health

90 Nicholls Street
Davenport, WA 99122
Phone: (509) 725-1001
[http://www.co.lincoln.wa.us/
Public%20Health/index.htm](http://www.co.lincoln.wa.us/Public%20Health/index.htm)

Mason County

Health Services
Mail: P O Box 1666,
Shelton, WA 98584
Physical: 303 N Fourth St,
Shelton, WA 98584
Phone: (360) 427-9670 ext 400
<http://www.co.mason.wa.us/>

Northeast Tri County Health District

Colville Community Health Office
Ferry, Pend Oreille and Stevens Counties
240 East Dominion / P.O. Box 270
Colville, WA 99114
Community Health/Clinic: (509) 684-5048
Family Planning: (509) 684-6209
Fax: (509) 684-1002
<http://homepage.plix.com/tricohealth/>

Okanogan County Public Health

Located at: 1234 South Second Avenue
Okanogan, Washington. 98840
Mailing Address: PO Box 231,
Okanogan, WA 98840
Phone: (509)-422-7140
Fax: (509)-422-7142
<http://okanogancounty.org/ochd/index.htm>

Pacific County Public Health

South Bend
PO Box 26
1216 W. Robert Bush Drive
South Bend, WA 98586

Phone: (360) 875-9343
<http://www.co.pacific.wa.us/health/index.htm>

Pacific County Public Health

Long Beach
605 S. Oregon Street
Long Beach, WA 98631
Phone: (360) 642-9349
[http://www.co.pacific.wa.us/health/index.
htm#CLINIC%20HOURS](http://www.co.pacific.wa.us/health/index.htm#CLINIC%20HOURS)

San Juan County

Health & Community Services
Courthouse Annex
145 Rhone St.
Friday Harbor, WA 98250
Phone: (360) 378-4478
Fax: (360) 378-7036
<http://www.co.san-juan.wa.us/default.asp>

Skagit County Public Health Department

Administration Building, 3rd Floor
700 South 2nd Street
Mount Vernon, WA
Phone: (360) 336-9477
<http://www.skagitcounty.net>

Skagit County Public Health Department

Anacortes Teen Clinic
1020 26th Street,
Anacortes, WA
Phone: (360) 293-6973
<http://www.skagitcounty.net>



Washington State: County Health Departments

Skagit County Public Health Department

Concrete Teen Clinic
45942 Main Street,
Concrete, WA
Phone: (360) 853-7009
<http://www.skagitcounty.net>

Skagit County Public Health Department

Sedro Woolley Teen Clinic
1916 Hospital Dr, Suite B-2,
Sedro Woolley, WA
Phone: (360) 856-7319
<http://www.skagitcounty.net>

Snohomish Health District

Everett
3020 Rucker Ave., Suite 108
Everett, WA
Phone: (425) 339-5220
Fax: (425) 339-5222
<http://www.snohd.org/clinic2/index.htm>

Snohomish Health District

Lynnwood
6101 200th SW, Suite 100
Lynnwood, WA
Phone: (425) 775-3522
Fax: (425) 778-5324
<http://www.snohd.org/clinic2/index.htm>

Spokane Regional Health District

1101 W. College Ave.
Spokane, WA 99201
Phone: (509) 324-1500
<http://www.srhd.org/>

Pierce County Health Department

3629 South D Street
Tacoma, WA 98418-6813
Phone: (253) 798-6500
<http://www.tpchd.org/>

Thurston County Public Health

412 Lilly Rd. NE
Olympia, WA 98506-5132
Phone: (360) 786-5581
Fax: (360) 786-5594
<http://www.co.thurston.wa.us/health/welcome.html>

Wahkiakum County

64 Main Street; PO Box 696
Cathlamet, WA 98612
Phone: (360) 795-6207
Fax: (360) 795-6163
<http://www.doh.wa.gov>

Walla Walla Health Department

Public Service Building
1st Floor, 310 W. Poplar Street
PO Box 1753
Walla Walla, WA 99362
Phone: (509) 527-3290
Fax: (509) 527-3264
<http://www.co.walla-walla.wa.us/Departments/health/health.htm>

Whatcom County

Whatcom County Health Department
509 Girard Street
Bellingham, WA 98225
Phone: (360) 676-6724
<http://www.co.whatcom.wa.us/health/index.jsp>



Whitman County Health Department

Colfax Office
310 N. Main
Colfax, WA 99111
Phone: (509) 397-6280
Fax: (509) 397-6239
<http://www.whitmancounty.org/PubHealth/>

Whitman County Health Department

Pullman Office
1205 S. E. Pro Mall Blvd. Suite 203
Pullman, WA 99163
Phone: (509) 332-6752
Fax: (509) 334-4517
<http://www.whitmancounty.org/PubHealth/>

Yakima Health District

104 N 1st Street, Suite 204
Yakima, WA 98901
Phone: (509) 575-4040
<http://www.co.yakima.wa.us/health/>

Seattle & King County HIV/AIDS Program

400 Yesler Way, 3rd Floor,
Seattle, WA 98104.
(206) 296-4649.
<http://www.metrokc.gov>

Vision Statement: The HIV/AIDS Program serves all of King County from its downtown Seattle offices.

Community Clinics - Call to make an appointment.

- 45th Street Clinic, (206) 633-3350
- Federal Way Community Health Center, (253) 874-7634
- Country Doctor Community Clinic, (206) 461-4503
- Enumclaw Medical Center, (360) 825-6511
- Fall City Family Clinic, (425) 888-5511
- Federal Way Medical Center, (253) 839-2030
- Holly Park Medical and Dental Clinic, (206) 461-4948
- Odessa Brown Children's Clinic (Teens only) (206) 329-7870
- Pike Market Medical Clinic, (206) 728-4143
- Rainier Beach Medical Clinic, (206) 722-8444
- Sea Mar Community Health Center, (206) 762-3730
- Planned Parenthood
www.plannedparenthood.org
Call 1-800-230-7526 for an appointment at the clinic nearest you.

Washington State: Seattle Area

Since 1985, Harborview Medical Center has been committed to providing medical care and social services to men and women with STDs and HIV.

The mission of Harborview's program is to provide optimal medical care, nursing care and social work services to patients with HIV/STD, train healthcare providers in the diagnosis and treatment of HIV infection, and facilitate clinical research. The UW Medicine Center for AIDS and STD housed at Harborview is a nationally recognized research and training program that provides exemplary patient care and enhances Harborview's HIV/STD center of emphasis.

Mission

Part of the University of Washington, UW Medicine works to improve the health of the public by advancing medical knowledge, providing outstanding primary and specialty medical care to people of the region, and preparing tomorrow's physicians, scientists and other health professionals.

UW Medicine owns or operates:

- The Madison Clinic
- Northwest Family Center
- AIDS Clinical Trials Unit
- The Northwest AIDS Education and Training Center (AETC)
- Harborview Patient and Family Resource Center
- The Remington Clinic
- The Virology Clinic

Harborview Madison Clinic

2 West Clinic, Box 359930
325 Ninth Avenue
Seattle, WA 98104-2499
Phone: 206-731-5100
Fax: 206-531-5109
Patient Coordinator:
206-731-5155

Website: <http://depts.washington.edu/madclin/about.html>

Provides medical care and social services for persons living with HIV/AIDS regardless of sexual orientation, race, or ability to pay. Harborview Medical Center is affiliated with the University of Washington and is recognized nationally for its patient care, teaching, and research in HIV-related diseases. Each patient is a partner in the management of HIV/AIDS. They are encouraged to ask questions, understand the reasons for tests and procedures, and let us know how we can help.

Each patient has a primary care provider who organizes the services required. Other members of the care team include nurses, pharmacists, nutritionists, social workers and specialists (acupuncture, dermatology, neurology, obstetrics, oncology, and psychiatry). Extensive case management is the hallmark of HIV/AIDS care at Harborview, and everything is done to coordinate care and reassure patients that this complex illness is being addressed comprehensively. Patients will be seen regardless of their ability to pay.



Harborview Medical Center

Patient and Family Resource Center

Room GEH-76
325 9th Avenue, Box 359710
Seattle, WA 98104-2499
Phone: 206-731-2000
Fax: 206-731-2023

<http://www.uwmedicine.org/Facilities/Harborview/CentersOfEmphasis/PFRC/>

Harborview Medical Center offers free health care information and classes. All Harborview Medical Center patients and their families can ask questions about illnesses, injury, treatment, community resources, and health information.

At the Patient and Family Resource Center you have access to:

- Information about specific illnesses and injuries.
- Group health education classes and support groups (scheduled as well as open drop in sessions).
- Information about Harborview clinical services and providers.
- “Harborview On The Move” program to support patients and staff who walk toward fitness using pedometers for step counting.
- General wellness and safety information.
- Computers for patients and families to use to view online health information.
- Information sources and tools, including books, brochures and handbooks, videotapes, internet searches, and materials in a variety of languages.

Harborview Medical Center

Northwest Family Care

Office at: 1 East Clinic
Box 359726, 325 Ninth Avenue
Seattle WA 98104-2499
Phone: 206-731-3066 (office)
or 206-731-5100 (clinic)
Appointments: (206) 731-2271
or 731-3590.
Fax: 206-731-3051

<http://www.uwmedicine.org/PatientCare/MedicalSpecialties/SpecialtyCare/HARBORVIEW/NWFfamily/>

The Northwest Family Center provides comprehensive, family-centered, and culturally sensitive service for pregnancy, women’s health care, and HIV-infected women, children, adolescents, and their families. The goal of the Center is to assist families to function at the healthiest levels possible by providing coordinated medical care, case management, and support services in a setting that assists with advocacy, financial issues, housing, drug and alcohol treatment, transportation, child welfare issues, and personal support. Charges are based on a sliding fee scale.

Walk-in clinic for STD evaluation:

(Patients are advised to come to the clinic before 5:30 PM for walk-in appointments)

Monday-Friday, 7:45 AM - 6:30 PM

Tuesday, 9:00 AM - 6:30 PM

HIV testing: Monday-Friday, 7:45AM - 6:30PM

For information on STDs, call the STD Hotline at (206) 205-7837.

Washington State: Seattle Area

Harborview Medical Center

AIDS CLINICAL TRIALS UNIT

2 West Clinics, Box 359929

325 Ninth Avenue

Seattle WA 98104-2499

For appointments or more information about our research studies, call 206-731-3184

<http://www.uwmedicine.org/PatientCare/MedicalSpecialties/SpecialtyCare/HARBORVIEW/Aids/>

The University of Washington AIDS Clinical Trials Unit (ACTU) is a research center located at Harborview Medical Center on First Hill in Seattle. The center conducts research studies (clinical trials) of HIV and AIDS to study treatments, which fight HIV infection and treat or prevent opportunistic infections associated with the HIV virus. The center also conducts studies that look into the natural history of HIV and its relationship to other infectious diseases, such as hepatitis, herpes, and HPV. Our studies are open to HIV-positive men and women at different stages of HIV infection. We also welcome the participation of HIV-negative males and females.

Appointments and Referrals

- Monday through Friday from 7:30 a.m. to 4 p.m.
- Clinic hours are from 8 a.m. to 5 p.m.
- Appointments are scheduled as early as 7 a.m. and as late as 5 p.m.
- For appointments or more information about our research studies,
- Call 206-731-3184 (English)

The Remington Clinic

600 Broadway, Suite 400

Phone 206-720-4340

Fax 206-720-4371

<http://depts.washington.edu/herpes/>

This is a specialty Clinic for people with HSV (herpes simplex virus) and their partners. The Remington Clinic was established in 1997 by The University of Washington, Virology Research Clinic is a world-renowned leader in herpes research. The health care providers for The Remington Clinic also conduct research studies for the Virology Research Clinic. Because of our involvement in herpes-related research, we are able to offer the most current information and state-of-the-art diagnosis and treatment for HSV.



Virology Clinic
UW MEDICAL CENTER AT
ROOSEVELT FAMILY
MEDICAL CENTER

4245 Roosevelt Way NE
Seattle, WA 98105
Fax 206-598-4939
Monday, 1 to 5 pm
Wednesday, 9 am to Noon

The Virology Clinic provides medical care to people living with HIV/AIDS. Our clinic cares for people at every stage of their illness, from those who do not have symptoms to those who are very ill. We will work with our patient's primary care provider to ensure that our patients receive the very best care.

Our doctors are recognized internationally for their outstanding patient care, teaching, and research involving the human immunodeficiency virus (HIV), acquired immune deficiency syndrome (AIDS) and related diseases.



Section 9:

STD/HIV Hotlines and Medical Advice

Some community members may feel more comfortable having their questions answered anonymously over the phone. The following state and national hotlines are available to community members and clinicians seeking more information about sexually transmitted diseases, HIV/AIDS, and other reproductive health issues.

STD/HIV Hotlines

CDC National STD Hotline

Provides anonymous, confidential information on sexually transmitted diseases (STDs) and how to prevent them. Also, provides referrals to clinical and other services.

English - 800-227-8922 - Available 24 hours a day, 7 days a week

TTY for hearing impaired - 800-243-7889 - Available Mon-Fri, 10am - 10pm EST

E-mail - DSTD@cdc.gov

National HIV/AIDS Hotline

Provides anonymous, confidential information on HIV infection and AIDS. They also provide referrals to appropriate services, including clinics, hospitals, local hotlines, counseling and testing sites, legal services, health departments, support groups, educational organizations, and service agencies throughout the United States.

1-800-CDC-INFO (800-232-4636)

TTY: 1-888-232-6348

AIDS Clinical Trials Information Service
1-800-TRIALS-A

Alcohol, Drug & Pregnancy Hotline
1-800-638-BABY

Backline (Pregnancy Options)
1-877-230-1955

Boystown National Hotline
1-800-448-3000

CDC Labor Responds to AIDS Resource Service - 1-800-458-5231

CDC National Prevention Information Network - 1-800-458-5231

Emergency Contraception Hotline
1-888-NOT2LATE

Hepatitis Information - 1-800-223-0179

HIV/AIDS Treatment Information Service
1-800-HIV-0440

National Drug & Alcohol Treatment Routing Service - 1-800-662-HELP

National Gay & Lesbian Youth Hotline
1-800-676-TEEN

National Herpes Hotline
1-919-361-8488

National Indian AIDS Line
1-800-283-2437

National Pediatric HIV Resource Center
1-800-362-0071

National Pregnancy Helpline
1-800-672-2296

Oregon AIDS Hotline - 1-503-223-AIDS

Planned Parenthood - To locate the health center nearest you call 1-800-230-7526

Project Inform - HIV Treatment Hotline
1-800-822-7422

Rape Abuse and Incest National Network
1-800-656-HOPE

Sexual Assault Helpline
1-800-656-HOPE

Suicide Hotline - 1-800-784-2433

Washington AIDS Hotline
1-800-272-AIDS



STD/HIV Support for Clinicians

Warmline - The National HIV Telephone Consultation Service

Phone: 1-800-933-3413

Hours: 6am-5pm (PST), M-F

The National HIV Telephone Consultation Service (Warmline) offers physicians and other health care providers up-to-the-minute HIV clinical information, and individualized expert case consultation across the broad range of clinical HIV/AIDS problems. The Warmline is staffed by clinicians experienced in HIV care who can help you provide the best possible care to your HIV-positive patients.

This service is offered free of charge to:

- Physicians
- Physician Assistants
- Nurses
- Nurse Practitioners
- Pharmacists
- Dentists
- Other clinicians involved in HIV care

PEPline - The National Clinicians' Post-Exposure Prophylaxis Hotline

Phone: 1-888-448-4911

Hours: 24 hours / 7 days a week

The National Clinicians' Post-Exposure Prophylaxis Hotline (PEPline) offers treating clinicians up-to-the-minute advice on managing occupational exposures (i.e., needlesticks, splashes, etc.) to HIV, hepatitis, and other blood-borne pathogens.

PEPline clinicians will respond to your call 24 hours a day, 7 days a week. Emergency calls made during evening, weekend, and holiday hours are forwarded to on-call clinicians. Non-emergency calls will be returned during business hours.

Clinicians will help assess the risk of the exposure, discuss the most recent post-exposure prophylaxis protocols, and review specific treatment and follow-up options. Written materials supporting the telephone discussion are sent by mail or fax whenever needed.

Perinatal - National Perinatal HIV Consultation and Referral Service

Phone: 1-888-448-8675

Hours: 24 hours / 7 days a week

The new National Perinatal HIV Consultation and Referral Service, provides free 24-hour clinical consultation and advice on treating HIV-infected pregnant women and their infants as well as indications and interpretations of rapid and standard HIV testing in pregnancy.

**Sexually Transmitted
Diseases Treatment
Guidelines 2002 and 2006**

www.cdc.gov/std/treatment

Section 10:

Resources on the Internet

A number of internet resources can provide information, outreach tools, and prevention materials addressing sexually transmitted diseases, HIV/AIDS, sexuality, and other reproductive health issues.

STD/HIV Websites

Federal Websites:

Census Bureau
www.census.gov

Centers for Disease Control and Prevention (CDC)
www.cdc.gov

CDC - National Center for HIV, STD, and TB Prevention (NCHSTP)
www.cdc.gov/nchstp/od/nchstp.html

CDC-National Prevention Information Network
www.cdcnpin.org

CDC Division of STD Prevention (DSTDP)
www.cdc.gov/std/

Department of Health and Human Services (DHHS)
www.hhs.gov

DHHS Pages for Kids
www.hhs.gov/kids/

Food and Drug Administration (FDA)
www.fda.gov

HIV/AIDS Bureau - (HAB/HRSA/DHHS)
<http://hab.hrsa.gov/>

National Institutes of Health (NIH)
www.nih.gov

NIH - National Institute of Allergy & Infectious Diseases (NIAID)
www.niaid.nih.gov

NIH - Guide to HIV/AIDS Information Services
<http://sis.nlm.nih.gov/HIV/HIVMain.html>

Program Tools
www.cdc.gov/std/program/

Program Operations Guidelines for STD Prevention

These guidelines for STD prevention program operations are divided into chapters that follow the eight major components of a comprehensive program.

- Leadership & Program Management
- Program Evaluation
- Surveillance & Data Management
- Training and Professional Development
- Medical and Laboratory Services
- Partner Services
- Community & Individual Behavior
- Change Interventions
- Outbreak Response Plan
- Areas of Special Emphasis

The purpose of these guidelines is to further STD prevention by providing a resource to assist in the design, implementation, and evaluation of STD prevention and control programs. These guidelines are designed for public health personnel and other persons involved in managing STD prevention programs.

STD/HIV Websites

Other Relevant Websites:

Adolescent Health Online

www.ama-assn.org

Advocates for Youth

www.advocatesforyouth.org

AIDS Educational and Training Centers National Resource Center

www.aidsetc.org

AIDS.ORG

www.aids.org

Alan Guttmacher Institute

www.agi-usa.org

American Academy of Family Physicians

www.aafp.org

American College of Obstetricians and Gynecologists

www.acog.org

American Sexually Transmitted Disease Association (ASTDA)

<http://depts.washington.edu/astda/>

American Social Health Association

www.ashastd.org

Association of Reproductive Health Professionals

www.arhp.org

Association of State and Territorial Health Officials (ASTHO)

www.astho.org

Free Medical Journals.com

www.freemedicaljournals.com

Freevibe

www.freevibe.com

HIV InSite

<http://hivinsite.ucsf.edu/>

HIV/AIDS Anti-Stigma Initiative

www.hivaidsstigma.org

HIV Vaccine Trials Network

www.hvtn.org

Infectious Diseases Society of America

www.idsociety.org

International AIDS Society - USA

www.iasusa.org

Johns Hopkins University STD Research Group

www.hopkins-aids.edu/isstdr/isstdr.html

Kaiser Daily HIV/AIDS Report

www.kaisernetwork.org/daily_reports/rep_hiv.cfm

Kaiser Family Foundation

www.kaisernetwork.org

Making Schools Safe

www.aclu.org/safeschool

Minority Health Resource Center

www.omhrc.gov

National AIDS Hotline

www.ashastd.org/nah



STD/HIV Websites

National Alliance of State and Territorial AIDS Directors

www.nastad.org

National Association of People with AIDS

www.napwa.org

National Coalition of STD Directors

www.ncsddc.org

National Education Association Health Information Network

www.neahealthinfo.org

National Family Planning and Reproductive Health Association

www.nfprha.org

National Herpes Resource Center

www.ashastd.org/hrc

National Medical Association

www.nmanet.org

National Mental Health Association

www.nmha.org

National Tuberculosis Center

www.nationaltbcenter.edu

National Sexual Violence Resource Center

www.nsvrc.org

OutProud

www.outproud.org

PBS/NOVA Online - Surviving AIDS

www.pbs.org/wgbh/nova/aids/

Planned Parenthood National Homepage

www.plannedparenthood.org

Positive.org

www.positive.org

Privacy and Security of Public Health Information (HIV/AIDS)

www.critpath.org/msphpa/privacy.htm

Rape, Abuse & Incest National Network

www.rainn.org

Sexuality Information and Education Council of the US (SIECUS)

www.siecus.org

Journal - Sexually Transmitted Infections

<http://sti.bmjournals.com/>

STD Hotline

www.ashastd.org

STD Programs by State

www.ncsddc.org/programsites.htm

STD Services

www.stdservices.on.net/

Teenwire

www.teenwire.com

The American College of Preventive Medicine

www.acpm.org



STD/HIV Websites

**The Council of State and Territorial
Epidemiologists**

www.cste.org

The Gay and Lesbian National Hotline

www.glnh.org

**UNAIDS (Joint United Nations Program
on HIV/AIDS)**

www.unaids.org

**University of Washington Center for
AIDS and STD**

<http://depts.washington.edu/cfas/>

World Health Organization (WHO)

www.who.int



Section 11:

STD/HIV Videos

Project Red Talon has a library of videos that may be borrowed by Tribes free of charge.

Native-Specific Videos

Title	Description
A Balance of Cultures	This video is about cultural communications and access to healthcare for the First Nations of Canada. 27 minutes
A Father's Love	(HIV/AIDS) John Wilson, a Navajo man discusses the effect of his HIV positive status on his family. 22 minutes
Circle Of Warriors	(HIV/AIDS) Nine Indian people discuss what it is like to be diagnosed positive for HIV. 28 minutes
Healing Of Nations	Traditional teachings, Cultural revival, and Youth empowerment. 49 minutes
Her Giveaway: A Spiritual Journey with AIDS	(HIV/AIDS) Carol LaFavor, an Objiva woman, tells her story about living with AIDS utilizing traditional methods of healing. 20 minutes
I'm Not Afraid of Me	(HIV/AIDS) AIDS education video relevant to many audiences including youth, minorities, women and family members living with people living with AIDS. A young mother and daughter of American Indian descent are both positive for HIV. 28 minutes
The Healing Journey: Hope for Children of Alcoholics	John Bird narrates coming to terms with childhood issues related to growing up in homes where alcohol use created chaotic family dynamics. 27 minutes
The Spirit of the Mask	Focuses on the journey to self-discovery through the Mask Ceremonies of the Northwest Coast Canadian Indians. 51 minutes
Chlamydia: STD/Sex Education	Four native youth discuss the signs, symptoms, and treatment of Chlamydia. 13 minutes
Sharing Innovations that work Part I	Alkali Lake Indian Band
Sharing Innovations that Work Part II	Alkali Lake Indian Band
Sharing Innovations That Work Part III	Alkali Lake Indian Band. 25 minutes
Strengthen the Web of Life	24 minutes
The Right Choice	The healthy choices for grade level children. 30 minutes
Voices of the Quilt	The Names Project – 12 minutes



STD/HIV Videos

Title	Description
Alcohol: The Substance, the Addiction, the Solution	Learning about the symptoms of alcoholism, such as loss of control and denial, as well as the effects of alcohol on the brain and body. 40 minutes
Cocaine & Crack: Back From the Abyss	Learning about the physical, psychological, and societal effects of cocaine. Learning to get through cravings, identify triggers, seek help, and make changes. 46 minutes
HIV: Coming To Life	HIV and the African American Community. 20 minutes
Cross-Addiction: The Back Door to Relapse	Dispelling the myth that there are “safe” substances for people in recovery. 40 minutes
Condoms If You Care: Safe sex practices	Learning to speak with your partner. 15 minutes
Heroin: What Am I Going To Do?	Addicts in recovery talk about the need for honesty and surrender to begin recovery, their struggles to stay clean and rewards of a life without drugs. 30 minutes
House on Fire	HIV and the African American Community. 20 minutes

These videos may be borrowed from **Project Red Talon. Please contact the project to access our video library.**



STD/HIV Videos

Title	Description
Marijuana: The Escape to Nowhere	Uncover the devastating effects of long-term marijuana use on the body, mind, and spirit. Addicts share their accomplishments and dreams fulfilled since breaking the chain of marijuana addiction. 41 minutes
Methamphetamine: Deciding to Live	Reveals the devastating consequences of methamphetamine addiction and the struggles and rewards of recovery. 38 minutes
Postponing Sexual Involvement of Preteens	Parent leaders discuss in age appropriate language for preteens to protect themselves in today's complicated times. 40 minutes
Postponing Sexual Involvement for Young Teens	Parent leaders teach teens about how to negotiate their environment in today's complicated times. 36 minutes
Prescription Drugs: Recovery From the Hidden Addiction	Health professionals share their perspectives on an addiction that is often underreported and overlooked, especially among older adults. 33 minutes
Safe for Life	Demonstration of the importance of practicing safe sex. 10 minutes
Saying No... A Few Words to Teens	Teens and young adults give their reasons for choosing to say no. 18 minutes
Sex Education and AIDS: Focus on Health	Sex education and AIDS. 30 minutes
Sexual Abstinence: Making the Right Choice	Teens talk about recognizing and dealing with peer pressure, their own self doubts, the value of cherishing yourself and sticking by your own rules. 23 minutes



STD/HIV Videos

Title	Description
Sexually Transmitted Diseases and AIDS	Sexually Transmitted Diseases and AIDS. 30 minutes
Sister's Keeper	Women living with HIV
STD Female Pelvic Exam	Seattle STD/HIV Prevention Training Center. 30 minutes. University of Washington.
The Mind, Body and Spirit Connection	Exploration of the body's immune system. 27 minutes
Things My Mother Never Told Me	Animated program discusses women's reproductive systems, conception and birth, and the menstrual cycle. 13 minutes
Training for Cultural Competence in the HIV Epidemic	Culture and Communication. 60 minutes
What Begins With AIDS	Fear & Isolation by Teens. 25 minutes

These videos may be borrowed from **Project Red Talon. Please contact the project to access our video library.**



Section 12:

STD/HIV Publications and Brochures

Project Red Talon does not maintain a media clearinghouse. The following materials may be downloaded from our website and duplicated, or may be ordered from their respective publishing companies.

Project Red Talon STD/HIV Brochures

Sexually Transmitted Diseases

Chlamydia
The "Silent" STD




PROJECT RED TALON
"Respecting Our Bodies and Relationships"

Northwest Portland Area
Indian Health Board

Sexually Transmitted Diseases

Gonorrhea
"The Clap" or "The Drip"



PROJECT RED TALON
"Respecting Our Bodies and Relationships"

Northwest Portland Area
Indian Health Board

Sexually Transmitted Diseases

Syphilis



PROJECT RED TALON
"Respecting Our Bodies and Relationships"

Northwest Portland Area
Indian Health Board

Sexually Transmitted Diseases

HIV/AIDS




PROJECT RED TALON
"Respecting Our Bodies and Relationships"

Northwest Portland Area
Indian Health Board

Sexually Transmitted Diseases

Genital Warts
Human Papillomavirus (HPV)



PROJECT RED TALON
"Respecting Our Bodies and Relationships"

Northwest Portland Area
Indian Health Board

Sexually Transmitted Diseases

Condoms



PROJECT RED TALON
"Respecting Our Bodies and Relationships"

Northwest Portland Area
Indian Health Board

Sexually Transmitted Diseases

**Thinking about Sex?
Know your Score!**



PROJECT RED TALON
"Respecting Our Bodies and Relationships"

Northwest Portland Area
Indian Health Board

Project Red Talon Brochures:

Project Red Talon developed a number of STD-related brochures specifically for the NW Tribes. The Project was able to print the brochures in limited quantity, and distributed all of the pamphlets to the NW Tribes upon completion.

To access these materials, please download the images from our website at:

www.npaihb.org/std-aids/prt.html

You may print the brochures yourself or send the .pdf document to a professional printer.



STD/HIV Brochures

Brochure Vendors

Channing L Bete Co

www.channing-bete.com

Phone 1-800-628-7733

Fax 1-800-499-6464

ETR Associates

www.etr.org

Phone 1-800-321-4407

Journeyworks Publishing

www.journeyworks.com

Phone 1-800-775-1998

Giving Your Child The Facts About HIV & AIDS

Channing L Bete Co

HIV & AIDS Information You Need

Channing L Bete Co

HIV and AIDS—Facts for Young People

Channing L Bete Co

HIV, AIDS & Shooting Up

Channing L Bete Co

HIV, AIDS and Young People: Protect Your Health and Future

Channing L Bete Co

If You Are A Woman: STD-Get Checked

ETR Associates

Let's say "Not yet" To Sex - Information & Activities Book

Channing L Bete Co

Sex and STDs—How to Stay Safe

Channing L Bete Co

STDs and Young People—Get the Facts

Channing L Bete Co

STD Facts

ETR Associates

Stopping the Spread of Herpes

Channing L Bete Co

Talking with your Partner about Condoms

Channing L Bete Co

**50 Things You Need
To Know About STD's**
Journeyworks Publishing

Abstinence-The ABC's
ETR Associates

Chlamydia—A Hidden Danger
Channing L Bete Co

Could You Get HIV
Channing L Bete Co

Drinking & STD's
ETR Associates

Drugs & HIV Think About It
ETR Associates

Genital Warts & HPV
ETR Associates



Teens and HIV & Other STD's

Channing L Bete Co

Teens and Drinking, Drugging, Sex & Sickness

Channing L Bete Co

Teens At Risk Get Tested

Channing L Bete Co

Teens: Let's Talk About Building A Better Relationship

Channing L Bete Co

Teens: Protect Yourself - Be Careful & Stay Safe

Channing L Bete Co

Teens Talk About Taking the HIV Test

Channing L Bete Co

Women & HIV: Could I Have HIV

Channing L Bete Co

Women & HIV: Getting Him to Use a Condom

Channing L Bete Co

Young People and HIV—Learn the Facts

Channing L Bete

SIECUS—the Sexuality Information and Education Council of the United States

SIECUS publishes and distributes information about sexuality for professionals, parents, and the public. www.siecus.org

You can download at no cost all SIECUS publications that are linked to their Website.



STD Facts			
STD	What to Watch For	How Do You Get This STD?	What Happens if You Don't Get Treated?
Chlamydia or NGU	Warning: Chlamydia is the most common bacterial STD. It often has no symptoms. If you have symptoms, they may include: discharge from the penis or vagina, burning or itching when peeing or pooping, pain in the testicles or pelvic region, and bleeding during sex. Signs: Discharge from the penis or vagina, burning or itching when peeing or pooping, pain in the testicles or pelvic region, and bleeding during sex.	Sexual contact with an infected person. It can be passed through vaginal, anal, or oral sex.	Chlamydia can lead to serious complications, including: pelvic inflammatory disease (PID), infertility, and ectopic pregnancy.
Genital Warts	Warning: Genital warts are a common STD. They are caused by the HPV virus. They often have no symptoms. If you have symptoms, they may include: small, fleshy bumps on the penis or vagina, and itching or discomfort. Signs: Small, fleshy bumps on the penis or vagina, and itching or discomfort.	Sexual contact with an infected person. They can be passed through vaginal, anal, or oral sex.	Genital warts can be uncomfortable and embarrassing. They can also be a sign of HPV, which can lead to cancer.
Gonorrhea	Warning: Gonorrhea is a common bacterial STD. It often has no symptoms. If you have symptoms, they may include: discharge from the penis or vagina, burning or itching when peeing or pooping, and pain in the testicles or pelvic region. Signs: Discharge from the penis or vagina, burning or itching when peeing or pooping, and pain in the testicles or pelvic region.	Sexual contact with an infected person. It can be passed through vaginal, anal, or oral sex.	Gonorrhea can lead to serious complications, including: pelvic inflammatory disease (PID), infertility, and ectopic pregnancy.
Hepatitis B	Warning: Hepatitis B is a viral infection that affects the liver. It can be passed through sexual contact, sharing needles, or from mother to child. Signs: Fatigue, loss of appetite, nausea, and jaundice (yellowing of the skin and eyes).	Sexual contact with an infected person, sharing needles, or from mother to child.	Hepatitis B can lead to liver damage, liver failure, and liver cancer.
Herpes	Warning: Herpes is a viral infection that causes sores on the skin. It can be passed through sexual contact. Signs: Small, painful blisters on the skin.	Sexual contact with an infected person.	Herpes can be uncomfortable and embarrassing. It can also be a sign of a more serious infection.
HIV/AIDS	Warning: HIV is a viral infection that can lead to AIDS. It can be passed through sexual contact, sharing needles, or from mother to child. Signs: Weight loss, fever, and swollen lymph nodes.	Sexual contact with an infected person, sharing needles, or from mother to child.	HIV/AIDS can lead to serious complications, including: opportunistic infections, cancer, and death.
Syphilis	Warning: Syphilis is a bacterial infection that can be passed through sexual contact. It often has no symptoms. If you have symptoms, they may include: a painless sore on the penis or vagina, and a rash on the skin. Signs: Painless sore on the penis or vagina, and a rash on the skin.	Sexual contact with an infected person.	Syphilis can lead to serious complications, including: blindness, deafness, and dementia.
Trichomonas ("Trich") or NGU	Warning: Trichomonas is a common parasitic STD. It often has no symptoms. If you have symptoms, they may include: discharge from the penis or vagina, and itching or discomfort. Signs: Discharge from the penis or vagina, and itching or discomfort.	Sexual contact with an infected person.	Trichomonas can be uncomfortable and embarrassing. It can also be a sign of a more serious infection.

Section 13:

Condom Vendors

Worldwide, more than 40 million people are living with HIV or AIDS, almost half of whom are women and one-third of whom are young people age 15 to 24. The vast majority of HIV infections are sexually transmitted and therefore, preventable. Male and female condoms are essential components of prevention efforts, and expanding and improving condom promotion and distribution is key to fighting the spread of AIDS.

Population Action <http://www.populationaction.org>

Condom Vendors

Global Protection Corp

12 Channel Street
Boston, MA 02210
Phone: 617-946-2800
Fax: 617-946-3246
info@globalprotection.com

www.globalprotection.com
www.ONECondoms.com

Condom Depot

PO Box 215
Plainville, CT 06062
Phone: (860) 747-1338
Toll Free: 1-877-246-1286
Fax: (860) 747-5189

www.condomdepot.com

Paradise Marketing Services

1420 Decision Street
Vista, California 92081
Phone: (800) 993-3664
Fax: (888) 810-3888

E-mail: info@paradisemarketing.com

Durex

3585 Engineering Drive, Suite 200
Norcorss, Georgia 30092-2802
Phone: (770) 582-2222
Fax: (770) 582-2233

www.durex.com

Safety Works Inc

540 West Boston Post Rd.
Mamaroneck, NY 10543
Phone: 1-800-SAFETY2 or 914-698-3631
Fax: 914-381-1341

www.1800safety2.com

Undercover Condoms

4265 Diplomacy Dr
Columbus, Ohio 43228
Toll-Free Phone:
1-800-893-9105 (M-F 10:00am - 6:00pm)
Fax: 614-921-9866
Customer Service:
service@undercovercondoms.com
Sales and Questions:
websales@undercovercondoms.com

www.undercovercondoms.com

Condom Mania

1009 North Orange Drive
Los Angeles, CA 90038
Phone: 323-969-0102
Mail Order: 1-800-9-CONDOM (926-6366)
Fax: 323-969-0119

www.condomania.com

Condom Hall

626 9th Ave E,
Superior, WI 54880

Phone: (218) 348-0323

www.condomhall-condoms.org





Ask if special pricing is available for bulk orders or non-profits!

Section 14:

STD/HIV Training Resources

A variety of programs provide training on STD prevention, transmission, and treatment.

Possible audiences include Tribal Health Departments, clinicians, treatment programs, A&D personnel, health educators, teens, community members, parents, and Tribal Council members.

Please contact Project Red Talon for training assistance targeting any of these groups.

STD/HIV Training Resources

In addition to the Native Prevention Resources discussed in Section 4, the following agencies and organizations have speakers that provide STD/HIV training in the Pacific Northwest.

The Native Wellness Institute



The mission of the Native Wellness Institute is to foster the well-being of Native people through programs and training that embrace the teachings of our ancestors.

The Goal: To serve as a resource for Native specific training programs and technical assistance services to Native people, communities and organizations.

NWI accomplishes this goal by:

- Bringing together highly skilled Native trainers and consultants across the United States and Canada for conferences, workshops and other projects.
- Implementing a leadership training initiative that will strengthen the circle and prepare Native people for leadership opportunities.
- Developing programs and services to meet other areas of need that impact the physical, spiritual, emotional, and mental well-being of Native people.

www.nativewellness.com

Turtle Island Storytellers Network

Turtle Island Storytellers Network is the American Indian speaker's bureau that promotes talented American Indian storytellers, tribal historians, and song carriers from the Pacific Northwest and Northern Plains.

www.turtleislandstorytellers.net

Seattle STD/HIV Prevention Training Center

University of Washington Center for Health Education & Research
901 Boren Avenue, Suite 1100
Seattle, WA 98104
p: 206-685-9850
f: 206-221-4945
seaptc@u.washington.edu

The Seattle STD/HIV Prevention Training Center (PTC) is one of ten regional training sites in the National Network of STD/HIV Prevention Training Centers and is funded by the Centers for Disease Control and Prevention.

The PTC offers training to health care providers and educators in Alaska, Idaho, Oregon and Washington on the prevention, diagnosis, management and treatment of sexually transmitted diseases.

<http://depts.washington.edu/seaptc/>

HIV/AIDS Regional Resource Network Project (RRN)

The mission of the HIV/AIDS Regional Resource Network Project (RRN) is to build and strengthen networks and relationships between community-based organizations and the regional offices of the U.S. Department of Health and Human Services. The focus of the project is to eliminate health disparities associated with HIV/AIDS.



www.cicatelli.org/rrn/

**Northwest AIDS Education
and Training Center**

901 Boren Avenue,
Suite 1100
Seattle, WA 98104
(206) 685-6844
Fax: (206) 221-4945



<http://depts.washington.edu/nwaetc>

The Northwest AIDS Education and Training Center (AETC), located at the University of Washington, offers HIV treatment education, clinical consultation, capacity building and technical assistance to health care professionals and agencies in Washington, Alaska, Montana, Idaho, and Oregon.

The purpose of the Northwest AETC is to increase providers' capacity to provide high quality HIV/AIDS care within the region's health care systems.

Idaho State Office:

Judy Thorne
Idaho State University-Boise Center
(208) 685-6795
thorjudy@isu.edu

Oregon State Office:

The Research & Education Group
Steven Pierson
Portland, OR
(503) 229-8428
steven@reg.org

Washington State Office:

Northwest AETC
Robert Carroll
Seattle, WA
(206) 685-0226
carrollr@u.washington.edu

**Planned Parenthood Education
Programs**

Nationwide:

1-800-230-7526

Bend/Central Oregon: (541) 317.9388

Portland: (503) 775.4931 x3

Salem: (503) 363.8159

Western Washington: (206) 328-7734

Bellingham: (360)734-9095

Mount Vernon: (360)848-1744

Friday Harbor: (360)378-6010

Inland Northwest Washington: 509-326-6292

North Idaho: 208-762-8099

Idaho: 208.376.2277 ext. 14

**Idaho Department of Health and
Welfare**

STD/AIDS PROGRAM

450 W. State Street P.O. Box 83720

Boise, ID 83720-0036

Phone: 208-334-6527

FAX: 208-332-7346

Oregon Department of Human Services

HIV/STD/TB Program

800 NE Oregon, Suite 1105

Portland, OR 97232

Phone: 971-673-0153

Fax: 971-673-0178

TTY: 971-673-0372

Washington State Department of Health

Sexually Transmitted Disease

Main Line: 360-236-3460

Fax: 360-236-3470

STD Education Coordinator: 360-236-3498

HIV/AIDS Prevention and Education Services

PO Box 47840

Olympia, Washington, 98504-7840





**“The work we do now
will be seen by those
ancestors yet to be.”**