

A Syndemic Approach to Disease Investigation in Clark County, NV

A Whole-Person Approach in Responding to Syndemics

Office of Disease Surveillance staff are central to the syndemic approach. Disease investigators (DIIS) undergo extensive training in syndemic-informed practice, enabling them to assess, address, and provide guidance on multiple health concerns during one interaction with a community member. Staff are phlebotomy trained, safeTALK certified, and trained on recognizing signs of human trafficking, domestic violence, and substance use. This cross-training equips them to perform screenings, refer patients to treatment, and educate on a range of health issues from overdose prevention to sexual health to housing.

SNHD's community-based interventions are grounded in epidemiological principles that integrate clinical surveillance and the assessment of social and structural determinants of health. In leveraging partnerships with local organizations, ODS ensures that individuals not only receive care related to their disease condition (e.g., HIV care) but are also connected to housing, mental health services, and social support networks. For example, SNHD's overdose prevention initiatives incorporate suicide risk screenings as part of routine programmatic activities, reflecting a syndemic framework that recognizes the co-occurrence and interaction of substance use, mental health conditions, and social vulnerability. Other jurisdictions or organizations can also apply this whole-person approach by considering the following recommendations:

1

Build in opportunities for identifying comorbidities into standard investigatory workflows

2

Establish feedback loops to ensure that those comorbidities are addressed by the appropriate team(s) or partner organizations

3

Crosstrain disease investigation staff to be aware of and recognize common comorbidities associated with reportable conditions (such as STIs and substance use) and how to link clients to the services they need

Spotlight: Identifying Substance Use through Routine STI Investigations

While substance use may occur on its own, it is often comorbid with other conditions, such as sexually transmitted infections. As shown in **Figure 1**, on average 64.9% of routine STI investigations conducted during August 2024–August 2025 documented substance use across several reportable conditions (chlamydia, gonorrhea, HIV, and syphilis). This finding reflects a high level of co-occurrence between substance use and STI morbidity. Condition-specific analyses indicate that the mean proportion of investigations identifying substance use were

61.9% for chlamydia, 70.0% for gonorrhea, 63.2% for HIV, and 64.4% for syphilis. All STI investigations used a standard risk factors assessment form, which allows for uniformity in data collection across conditions, and subsequently allows for linkage to care or services for comorbidities or other needs identified (e.g., a client responding to an HIV investigation may indicate a need for substance use treatment, social services, and health insurance in addition to treatment for HIV).

Figure 1. Proportion of clients indicating substance use during routine STI investigations, 08/2024–08/2025



For more information or collaboration opportunities, contact the Office of Epidemiology at EpiQuestions@snhd.org.