



# Spotlight on CDC's STD Prevention Work

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Service, Support, Success.

# At a Glance

CDC's Division of STD Prevention (DSTDP) provides national leadership; conducts research, policy analyses, and development; and disseminates scientific information to prevent STDs (sexually transmitted diseases) and their complications.

## **Our Vision**

A society where people are empowered to protect themselves and others from STDs, and achieve sexual health.

## **Our Mission**

To maximize the impact of STD prevention through program, science, and policy.

## **Our Approach**

We believe that everyone has a part to play in preventing STDs and keeping people healthy. We work with:

- Health departments and other governmental organizations
- The health care sector, including clinical providers and third-party payers
- Academic institutions and biomedical scientists
- Non-governmental organizations and community groups
- Policy makers

Our approach sits within the broader frameworks of health equity, sexual health, health promotion, and primary prevention.





## **We Serve Communities**

Our flagship program, Improving Sexually Transmitted Disease Programs through Assessment, Assurance, Policy Development, and Prevention Strategies (STD AAPPS), provides funding to 50 states, 7 cities, and 2 territories.

The Community Approaches to Reducing Sexually Transmitted Diseases (CARS) initiative focuses on reducing STD disparities and promoting health equity.



## **We Support the STD Prevention Workforce**

The National Network of STD/HIV Prevention Training Centers (NNPTC) arms clinicians with the knowledge and skills they need to effectively serve at-risk patients.

The STD/HIV Disease Intervention Services Training Centers (DISTC) initiative supports front-line disease detectives crucial to STD prevention and control.



## **We Turn Research into Prevention**

DSTDTP uses a program science framework to address gaps in research, translate evidence into practice, and work with partners to effect change on the community level.



## **We Take the Pulse**

The STD Surveillance Network (SSuN) is modernizing how we collect STD surveillance data.

DSTDTP plays a critical role in monitoring antibiotic-resistant gonorrhea trends to ensure we have viable treatment options.



## **We Bring People Together**

DSTDTP and partners host the biannual STD Prevention Conference. This conference brings together a diverse group of STD prevention professionals to share the latest research—and take that information back to their work.



## **Where We're Going Next**

We're supporting the development of new technologies, like more rapid point-of-care diagnostic STD tests and new vaccines.

We're actively working to grow the STD prevention workforce through training programs.

We're adapting to the increasingly electronic nature of health care with new surveillance methods and digital interventions.

We're proud of these accomplishments—and how we've stretched our resources for maximum impact. This work would not be possible without innovative thinkers, dedicated partners, and continued support. We know that even with these successes, there is much more to be done.

## **Who We Are**

5

## **Our Roadmap for Success — DSTDP Strategic Plan**

Goals, Objectives, Priority Areas

6

## **Who We Work With**

We Serve Communities; We Take the Pulse

8

## **How We Bring Prevention to You**

We Support the STD Prevention Workforce; We Bring People Together;  
We Turn Research into Prevention

12

## **Our Funding**

16

## **Where We're Going Next**

17

## **CDC STD Resources**

18

# Who We Are

At DSTDP, we wear a lot of hats. Our work ranges from behind-the-scenes coordination to rolling up our sleeves in the field.



## **Crunching Numbers and Detecting Disease**

The following branches study epidemics and work to understand how STDs are spread:

- Epidemiology and Statistics Branch
- Laboratory Reference and Research Branch
- Surveillance and Data Management Branch
- Health Services Research and Evaluation Branch



## **Planning, Coordinating, Communicating**

These offices coordinate with partners, manage internal and external communication, provide policy and science leadership, and lead budget development and execution:

- Office of the Director
- Office of Policy, Planning, and External Relations
- Office of Science
- Office of Program and Management Operations



## **Putting Boots on the Ground**

These branches implement or manage high-impact prevention programs in the field:

- Field Services Branch
- Program Development and Quality Improvement Branch



## **Tackling Disparities**

This office and branch work on programs serving vulnerable and marginalized groups:

- Office of Health Equity
- Social and Behavioral Research and Evaluation Branch

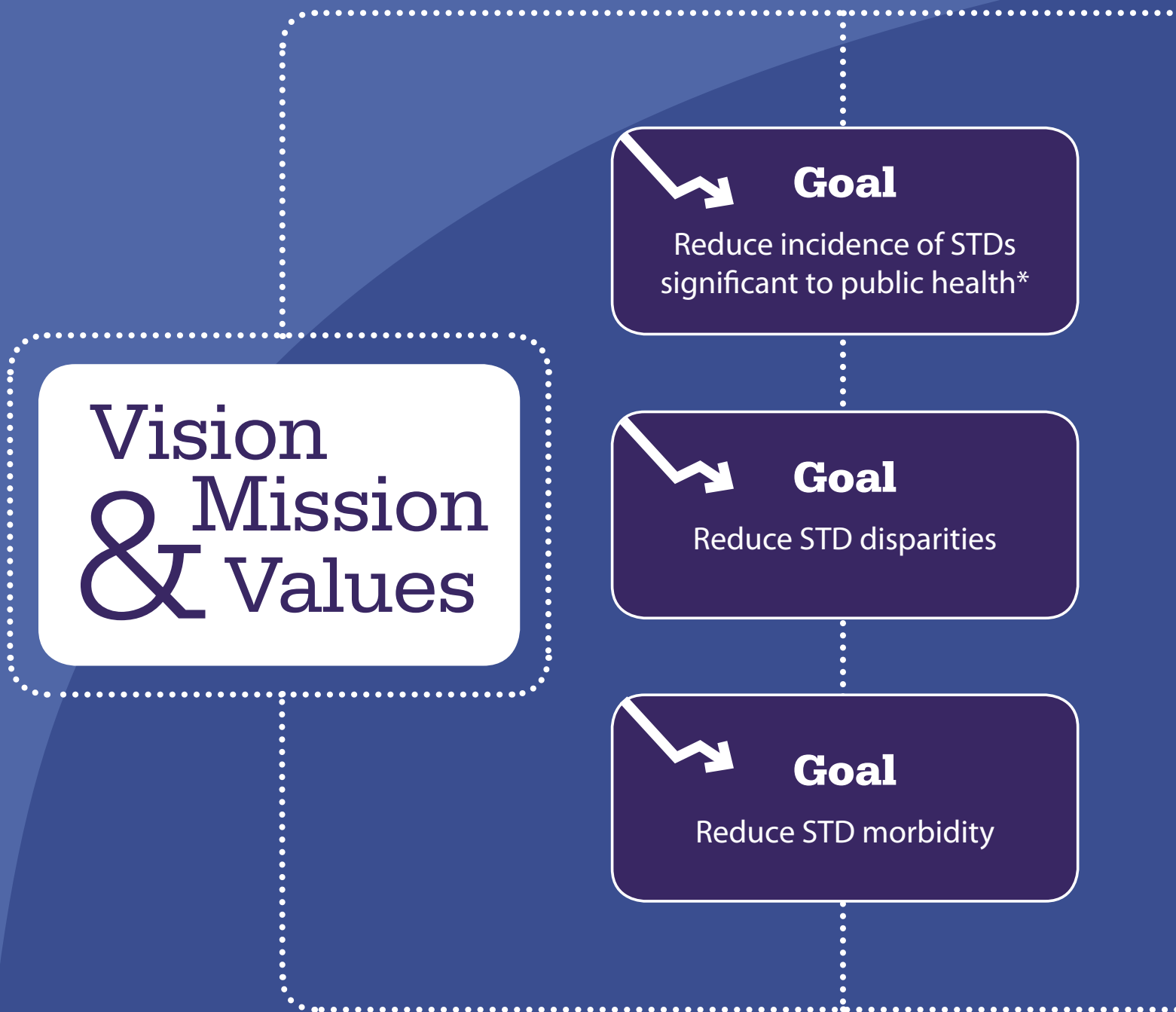


## **Going Global**

The Office of Global Activities collaborates with and provides support to global organizations and foreign governments.

# Our Roadmap for Success — DSTDP Strategic Plan

In 2016, DSTDP completed a strategic planning process. The objectives and priority areas identified below will guide our work for the next 5 years.



\* While there are dozens of STDs, and the number continues to grow with Ebola in 2014 and more recently Zika, resources are insufficient to address them all. DSTDP's Strategic Plan prioritizes STDs based on frequency, severity, associated disparities, costs, preventability, communicability, and public interest. For this reason, the strategic plan focuses on chlamydia, gonorrhea and syphilis.

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**Objective 1**

Refine current surveillance methodologies and develop new strategies in order to maximize use of surveillance data

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**Objective 2**

Assure uptake of effective STD prevention interventions (testing and treatment, partner services, and linkage to care)

3

**Objective 3**

Enhance and support an effective workforce (internal and external)

4

**Objective 4**

Develop and leverage partnerships for STD prevention

5

**Objective 5**

Implement an innovative and flexible population-specific research agenda

**Priority Areas**

Focus on STD prevention science, programs, and policy in:

- Adolescents & young adults
- Men who have sex with men (MSM)
- Pregnant women
- STD prevention systems

# Who We Work With

STD prevention is inherently collaborative. Our field needs researchers, planners, clinicians, communicators, administrators, disease intervention specialists, and community advocates. We support a variety of partners through our funding initiatives—and each brings something valuable to the table.

## **We Serve Communities**

### [Improving Sexually Transmitted Disease Programs through Assessment, Assurance, Policy Development, and Prevention Strategies \(STD AAPPS\)](#)

STD AAPPS is DSTDP's flagship program, with a strong emphasis on program science. This framework bridges scientific research and public health program management, and focuses on STD prevention services that are high impact, scalable, cost effective, and sustainable.

We've shifted our approach to align with the changing health care environment created by the Affordable Care Act. STD AAPPS allows greater flexibility for programs to make decisions about how to allocate resources based on local data.

Specifically, STD AAPPS seeks to:

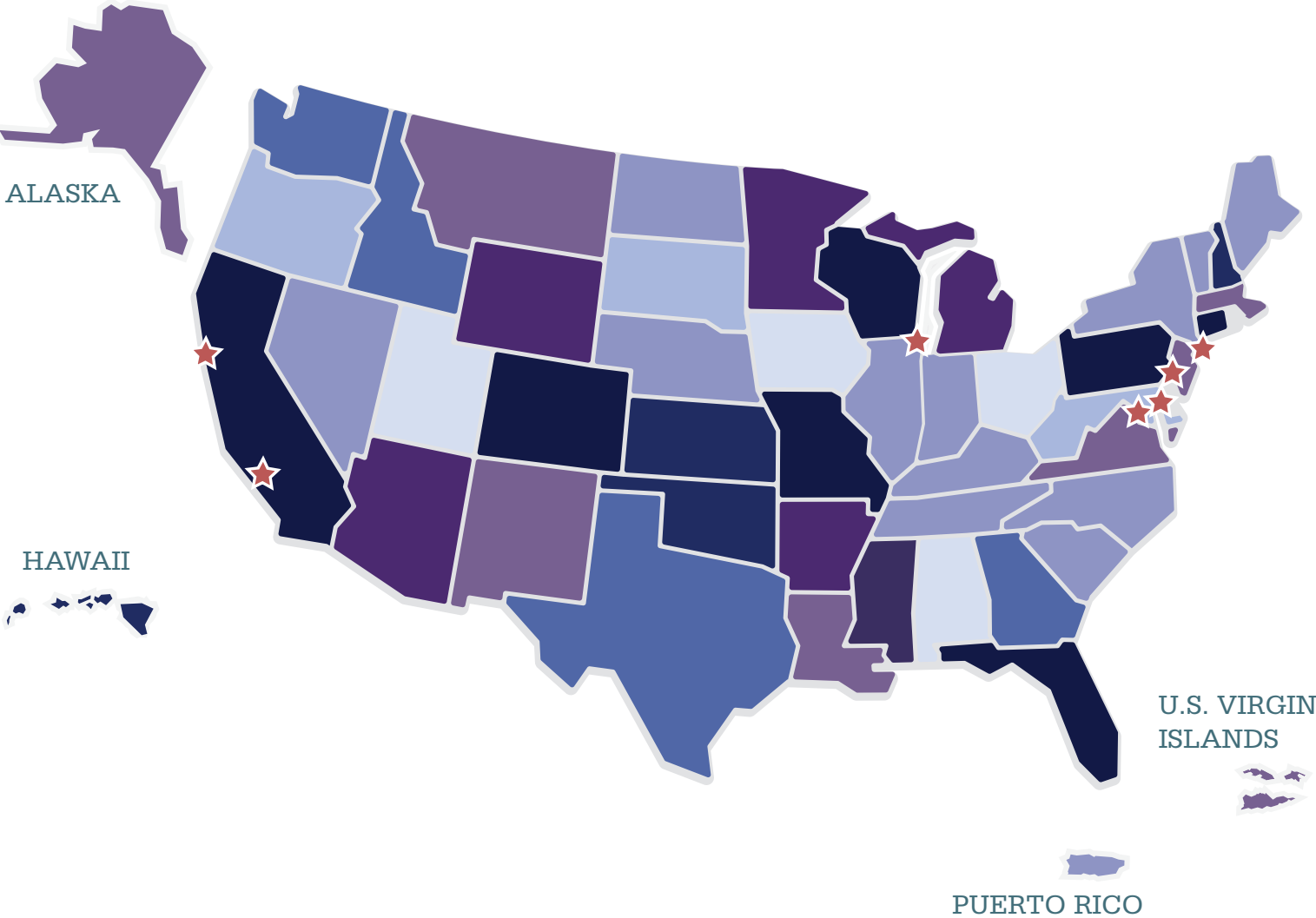
- Improve STD surveillance, electronic laboratory reporting, electronic health record case reporting, and integrated data systems
- Expand and enhance how public health data is used to direct resources to areas with the greatest need
- Build collaborative relationships between public health practitioners and primary care providers
- Support collaboration with state Medicaid programs and health insurance exchanges and other federally funded programs

DSTDP also funds STD programs in the U.S. Pacific Islands.





# STD AAPPS provides funding to 50 states, 7 cities, and 2 territories





## Community Approaches to Reducing Sexually Transmitted Diseases (CARS)

CARS gets local communities involved in STD prevention and sexual health promotion. By leveraging partnerships and community resources, CARS extends the reach of existing STD prevention services—and ultimately reduces STD disparities and promotes health equity. For example, CARS grantees train clinicians on how to best serve vulnerable groups, hold town hall meetings to build lasting local partnerships, and use social media to disseminate STD prevention messages.

The second cycle of CARS 5-year funding began in September 2014.

## **We Take the Pulse**

### STD Surveillance Network (SSuN)

SSuN is a sentinel surveillance program. This means that a special network of STD program sites collects additional information to better—and more quickly—shed light on STD trends. SSuN aims to modernize STD surveillance so that public health professionals can access and use STD data in near-real time.

SSuN is helping us learn more about:

- Risk behaviors
- Screening and treatment trends
- Partner characteristics
- STD incidence and prevalence on the population level
- Effectiveness of prevention programs

The most recent 5-year SSuN funding cycle began in September 2014.

Part A awardees include STD, family planning, reproductive health, and primary health care clinics. These clinics often

## We Think Ahead — Expedited Partner Therapy

Expedited Partner Therapy (EPT) allows clinicians to give patients diagnosed with chlamydia or gonorrhea a prescription for themselves and another to give to their sex partners. In other words, the doctor can provide treatment without seeing the partner first. This allows partners to receive treatment quickly and prevents reinfection.

To increase the use of EPT, the Chicago Department of Public Health supplied its clinics with kits containing information, condoms, and medications for EPT use.

Supervising Physician Ramona Bhatia routinely witnesses the benefits of EPT. “The populations we deal with are vulnerable,” she explains. “Partners may not be able to come to a clinic to get the meds they need.”

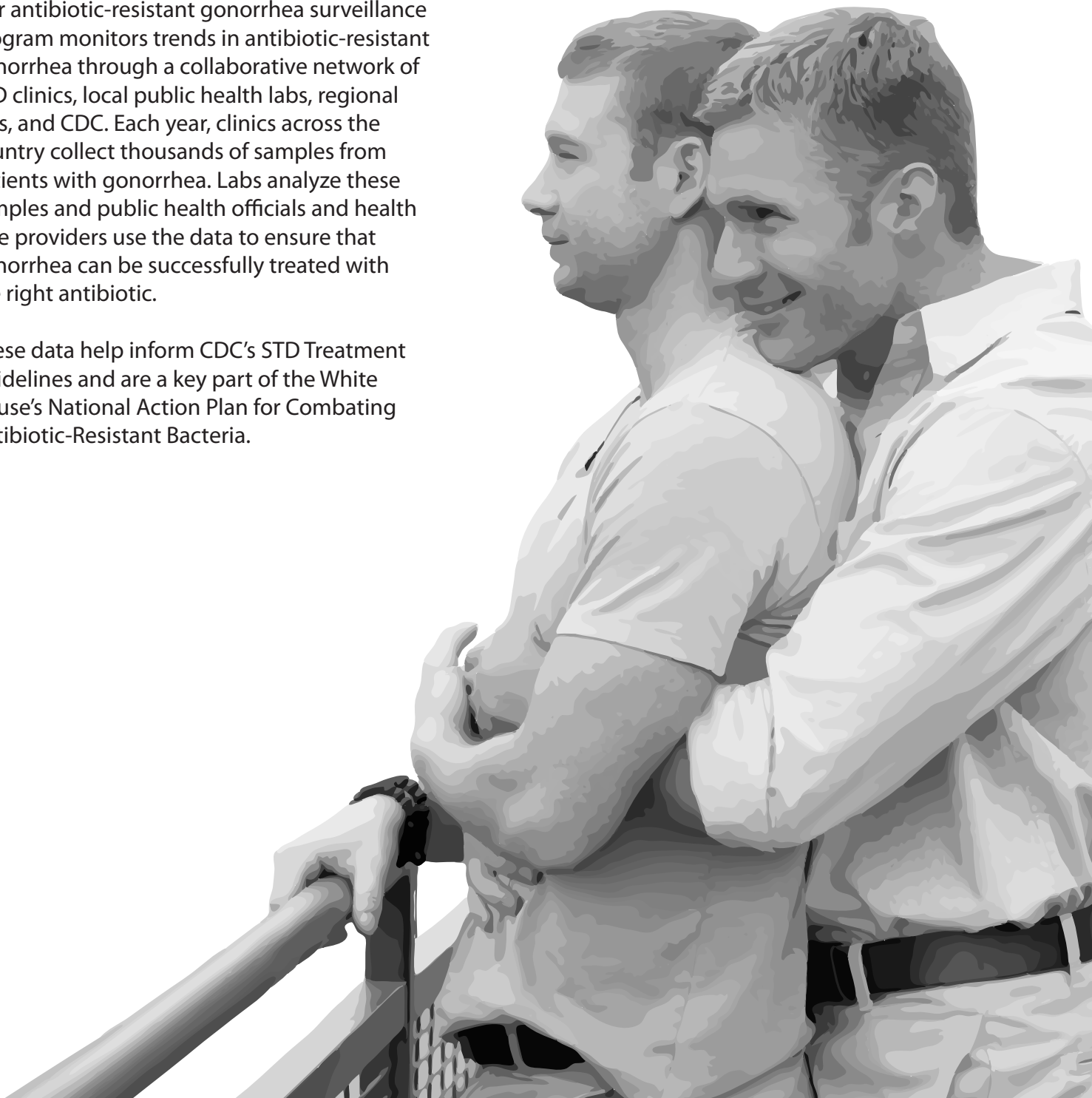
serve people at the highest risk for STDs—including young women and MSM. These SSuN sites focus on chlamydia screening and gonorrhea case surveillance.

Part B awardees work to enhance and improve STD surveillance systems. These sites build electronic health data collaborations between health departments and health care organizations. The end result: STD trend data that's not available from any other source.

### **Gonococcal Isolate Surveillance Project (GISP)**

Our antibiotic-resistant gonorrhea surveillance program monitors trends in antibiotic-resistant gonorrhea through a collaborative network of STD clinics, local public health labs, regional labs, and CDC. Each year, clinics across the country collect thousands of samples from patients with gonorrhea. Labs analyze these samples and public health officials and health care providers use the data to ensure that gonorrhea can be successfully treated with the right antibiotic.

These data help inform CDC's STD Treatment Guidelines and are a key part of the White House's National Action Plan for Combating Antibiotic-Resistant Bacteria.



# How We Bring Prevention to You

The field of STD prevention is constantly evolving. We make sure our staff have the latest evidence-based guidelines, resources, and tools to support their work—and we're committed to providing regular opportunities for training and continuing education.

## **We Support the STD Prevention Workforce**

### National Network of STD Clinical Prevention Training Centers (NNPTC)

DSTDP supports a network of regional and national centers of excellence—all focused on training clinicians and other clinic staff on STD prevention and care. NNPTC aims to supply clinicians with the knowledge and skills to effectively screen, diagnose, treat, and counsel people with STDs—especially in STD specialty and primary care clinics.

NNPTC also includes the STD Clinical Fellows Program, an initiative to train and support the next generation of STD clinical experts. Fellows gain first-hand experience in STD patient care—and advance the science of STD prevention through special projects.

### STD/HIV Disease Intervention Services Training Centers (DISTC) and DIS Certification Program

The DISTC grant helps set up STD program staff for success by providing funding for training—specifically for Disease Intervention Specialists (DIS) and other partner services staff. DISTC emphasizes cross training, use of surveillance data, outbreak response, and making improved connections between public health and primary care.

DSTDP is working with public health practitioners to establish a professional certification program for DIS. This will ensure that DIS receive the training they need to succeed in their jobs while lending credibility to the field.



## STD Prevention and Treatment Guidelines

DSTDP develops, publishes, and disseminates STD prevention and treatment guidelines, including:

- [STD Treatment Guidelines](#) — the official source for treatment and clinical management of STDs
- Quality STD Clinical Services Recommendations — expert recommendations outlining services for providers who offer basic or specialized STD care
- [Expedited Partner Therapy guidance](#) — information for clinicians on how to provide EPT services to patients
- [Introducing Technology into Partner Services: A Toolkit for Programs](#) — a resource for incorporating digital technologies into partner services programs

## We Bring People Together

### [STD Prevention Conference](#)

The STD Prevention Conference brings together program managers, researchers, public health authorities, clinicians, and community activists for an interdisciplinary dialogue on STD prevention. Sponsored by DSTDP and partners, the biennial conference is key to sharing and advancing the science of STD prevention—and connecting it to STD programs for maximum impact.

### Partnerships

Collaboration with a range of partners at both the national and global level is paramount to the work we do at DSTDP. We are proud of our ability to bring together other federal agencies, academic institutions, professional societies, and community-based organizations to advance the field of STD prevention. At DSTDP, we know that effective STD interventions require collective efforts from multidisciplinary teams of health professionals.

DSTDP is particularly proud of a recent collaboration with the Association of State and Territorial Health Officials (ASTHO), the National Association of County and City Health Officials, the National Coalition of STD Directors, and the National Association of Community Health Centers to examine the integration of public health and primary



## We Listen — Community Health Promotion

Health promotion is empowering people to take control over their health—and it starts by listening to the target audience. Tom Bertrand of the Rhode Island Department of Health describes the process of developing a syphilis prevention campaign: “We did formative research by actually getting input from gay men.”

Feedback from focus groups helped the team identify messages and imagery that were likely to resonate with MSM. Bertrand and his team developed ads that directed users to a webpage they created featuring sexual health topics like how to find gay-friendly doctors. “For me, this campaign was more than just a marketing blitz. It was an effort to refer people to resources,” says Bertrand.

care services to improve the prevention and treatment of STDs for patients. ASTHO has released the culmination of this partnership, *A Practical Look at Using Integration to Better Prevent and Treat Sexually Transmitted Diseases*, to help pave the way for better integration in STD care.

## **We Turn Research into Prevention**

DSTDP uses a program science approach to inform our research activities and translate that research into practical improvements for STD prevention programs. Program science is an interactive process that brings together scientists, clinicians, policy leaders, and program practitioners with the common goal of turning science into practice.

Below are some examples of how DSTDP uses program science to bridge scientific research and public health program management.

## **We Build Evidence**

DSTDP addresses important research and knowledge gaps for the prevention and treatment of STDs. CDC is the only federal agency that supports health departments to prevent and control STDs.

Examples of this work include using economic modeling to study sexual networks and understand transmission dynamics, disease trends, and the impact of new technologies.



## **We Reach Individuals — Disease Intervention Specialists**

Disease Intervention Specialists (DIS) work to find new STD cases—and to prevent new ones from happening. It's a hard job, but a rewarding one.

Laurie Tucker is the Lead Public Health DIS Supervisor in the Chattanooga-Hamilton County Health Department in Tennessee. Laurie and her team of four DIS work with many underserved populations, but she doesn't like to think of it that way. "Our clinic serves whoever needs to be served—humans."

## **We Look Under the Microscope**

At DSTDP, we are committed to:

- Advancing the development of new point-of-care diagnostic testing for STDs. DSTDP maintains the largest specimen bank of STD-causing microorganisms in the country, allowing us to test technologies, evaluate testing algorithms, and develop new tests.
- Advancing the development of vaccines that prevent STDs. Though CDC is not directly responsible for creating vaccines to prevent STDs, we are an active partner in furthering their development.

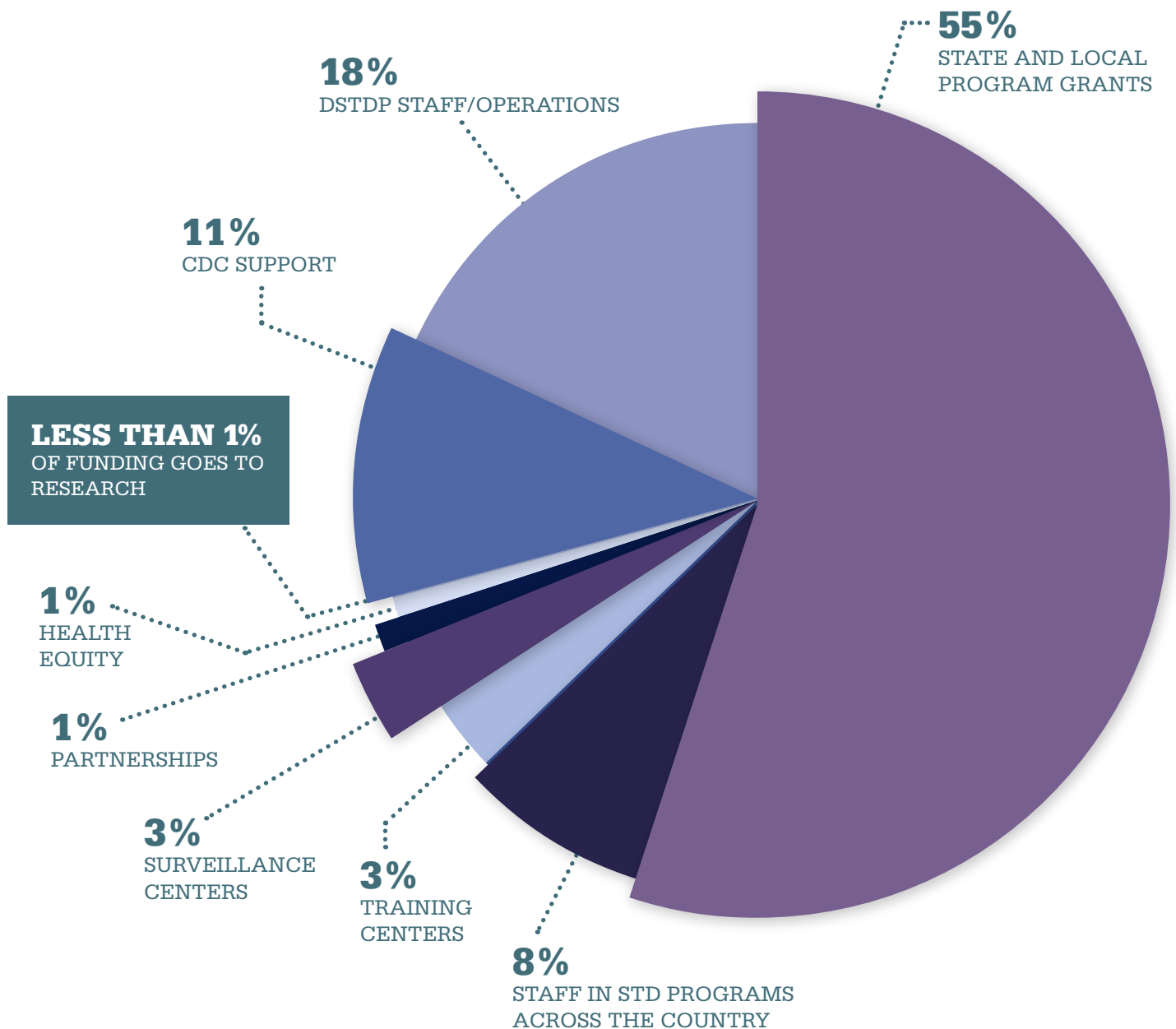
## **We Connect the Dots**

CDC works with national partners to better integrate STD prevention and control programs into the health care delivery system at the community level. We share best practices, evaluate new service delivery models, and monitor how changes in the health system affect STD-related health outcomes.



# Our Funding

Accountability is one of DSTDP's core values. The majority of CDC's fiscal year 2015 STD prevention budget went directly to state and local programs that prevent, treat, and monitor STDs. Each year, DSTDP allocates more than half of our budget to funded partners.



Does not include \$10.1M HIV funding provided to state and local STD programs. "CDC Support" includes Working Capital Fund, PHS, and other support.



# Where We're Going Next – A Letter from the DSTDP Director

As the field of STD prevention continues to evolve, there are endless opportunities for us to innovate, ideate, and get inspired. Here are a few examples of where we're going next—and the science that will take us there:

- DSTDP economists are hard at work developing economic modeling studies to highlight the business case for public health and prevention.
- We're leveraging our collective experience—in the field and online—to develop smarter surveillance methodologies and links to electronic health records.
- CDC scientists are using advanced molecular detection to understand how infected people are connected so that outbreaks can be stopped.
- As I write this, scientists are conducting research on vaccines for STDs—including both existing HPV vaccines and new vaccines for infections like chlamydia.
- Lab scientists are developing more rapid point-of-care diagnostic STD tests. One day, people who go to a clinic to get tested may be able to leave with their results—and a personalized prescription if they've tested positive for an infection.

The outstanding work of our partners is critical to achieving our mission and realizing our vision. Together, we have made great strides toward our goal of helping people live safer, healthier lives by preventing STDs.

## But there's more work to be done.

On the horizon, we see opportunities for advancing cutting-edge research, increasing program efficiency and effectiveness, and supporting our prevention workforce. Most importantly, we will continue to provide high-quality STD preventive services with care and compassion.

I'm grateful for the opportunity to celebrate how far we've come—and to help guide us to where we're going next.

With gratitude,



Gail Bolan, MD



**Gail Bolan, MD**

.....  
Director, Division of  
STD Prevention

National Center for HIV/  
AIDS, Viral Hepatitis,  
STD, and TB Prevention

# CDC STD Resources

## **STD Fact Sheets**

Disease and audience-specific fact sheets in multiple formats and languages

[www.cdc.gov/std/healthcomm/fact\\_sheets.htm](http://www.cdc.gov/std/healthcomm/fact_sheets.htm)

## **STD Treatment Guidelines**

CDC's science-based recommendations for treating people who have or are at risk for STDs

[www.cdc.gov/std/tg2015](http://www.cdc.gov/std/tg2015)

## **NCHHSTP Atlas**

CDC's data visualization tool for HIV, STD, hepatitis, and TB data—create and share maps, charts, and detailed reports

[www.cdc.gov/nchhstp/atlas](http://www.cdc.gov/nchhstp/atlas)

## **STD Prevention Training**

Continuing education information for clinicians and public health practitioners

[www.cdc.gov/std/training/default.htm](http://www.cdc.gov/std/training/default.htm)

### **Connect with DSTDP**



[www.cdc.gov/std](http://www.cdc.gov/std)



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