



Fact Sheet: STD Program Capacity and Preparedness in the United States: Results of a National Survey, 2009

The National Coalition of STD Directors (NCS D) conducted a survey of the nation's public health departments in September 2009 to assess the current state of public health program infrastructure for the prevention and control of sexually transmitted diseases (STD). Program directors from 64 of 75 public health departments representing 48 states and the nation's largest metropolitan regions took the survey (Response rate: 85%). The purposes of the survey were:

- To examine the impact of the current economic recession on sexually transmitted diseases (STD) control programs;
- To describe STD program contributions to public health preparedness and program contributions to the H1N1 influenza response.

Key Findings

Funding Cuts to Public Health STD Programs: The majority (69%) of STD programs experienced funding cuts in 2008-2009, including half receiving cuts in state and local support (50%) and federal (56%) funding. Federal funding cuts included Infertility Prevention Project, Comprehensive STD Prevention Systems, and Syphilis Elimination funds through the federal Centers for Disease Control and Prevention.

Reductions to the Nation's STD Program Capacity: State and local governments enacted the following actions in 2008-09 that reduce the capacity and workforce of STD programs:

- Salary freezes or reductions occurred in 69% of STD programs;
- Furlough and government shutdown days occurred in 50% of STD programs;
- Layoffs occurred in 27% of STD programs nationwide.

Reductions in STD Program Workforce: Workforce reductions in STD programs nationwide have occurred over the last decade including:

- A reduction in the size of the STD program workforce by 12% from 1999 to 2009;
- The number of Disease Intervention Specialists (DIS) in STD Programs declined by 20% from 1999 to 2009. DIS are highly trained public health professionals and the frontline public health workforce who deliver vital disease prevention services to the community.
- Staff vacancies were reported in 63% of STD programs across the nation.

Clinic Closures Reduce STD Services in Many Communities Due to Funding Cuts

- Between 2008-2009, 39 clinics in the United States closed their doors for essential STD services. These clinics include: categorical STD clinics, family planning clinics, community health centers, and school-based clinics supported by state and local health departments.
- The number of categorical STD clinics declined in the last decade by more than 10%. STD clinics are supported only through state and local funds, receiving no federal resources.

Services Reduced in Response to Dwindling Resources: STD programs had to enact drastic service reductions in response to declining resources in 2008-2009.

- Disease Intervention Services were reduced in 38% of health departments;
- Laboratory testing for STDs were cut in 33% of jurisdictions;
- Clinical services for STD care was reduced in 31% of health departments; and
- STD testing that is used to find and treat disease in the community were reduced in 31% of health departments.

STD Programs Contribute to the Nation's Public Health Readiness: More than two-thirds (69%) of STD programs directly participated in H1N1 influenza outbreak activities in Spring 2009, and 73% of STD programs anticipate participation in H1N1 response during the 2009-10 influenza season.

Conclusions: The successful prevention and control of sexually transmitted diseases (STD) requires a stable, well-funded state and local public health infrastructure. State and local STD program capacity and infrastructure has severely eroded. Capacity reductions come at a time of increased demand for public health response.

Policy and Public Health Implications: Without additional support for state and local programs, STDs and HIV will increase and local capacity for emergency response will diminish. Funding to support STD control and public health infrastructure is urgently needed.

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The National Coalition of STD Directors is a nonprofit, nonpartisan association of public health sexually transmitted disease (STD) program directors in the 65 CDC directly funded project areas, which includes all 50 states, 7 cities, and 8 U.S. territories. As the only national organization with a constituency that provides frontline STD services, NCSA is the leading national voice for strengthening STD prevention, research and treatment. These efforts include advocating for effective policies, strategies, and sufficient resources, as well as increasing awareness of the medical and social impact of STDs.

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