

The National Academies of Sciences Engineering and Medicine

PANEL – OPPORTUNITIES AND BARRIERS AT THE STATE AND LOCAL LEVELS

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Outline

- ▶ Current status of STD programs at jurisdictional levels
- ▶ Opportunities for improvement
 - ▶ Funding
 - ▶ Biomedical
 - ▶ Informatics
 - ▶ Primary prevention
- ▶ Coordination and moving ahead

State of STD Prevention Programs

- ▶ Housed at the state or local level within governmental agencies
 - ▶ 50 states, D.C., Puerto Rico, U.S. Virgin Islands, Baltimore, Chicago, Los Angeles, Philadelphia, New York City, San Francisco
 - ▶ Primary (or all) support from the Centers for Disease Control and Prevention – Division of STD Prevention
- ▶ No net increase in available funding in over 15 years
 - ▶ 40% loss of purchasing power
- ▶ Contributors to underfunding and insufficient resources
 - ▶ Low public awareness, few champions, limited advocacy, high stigma with sexuality and STIs in particular

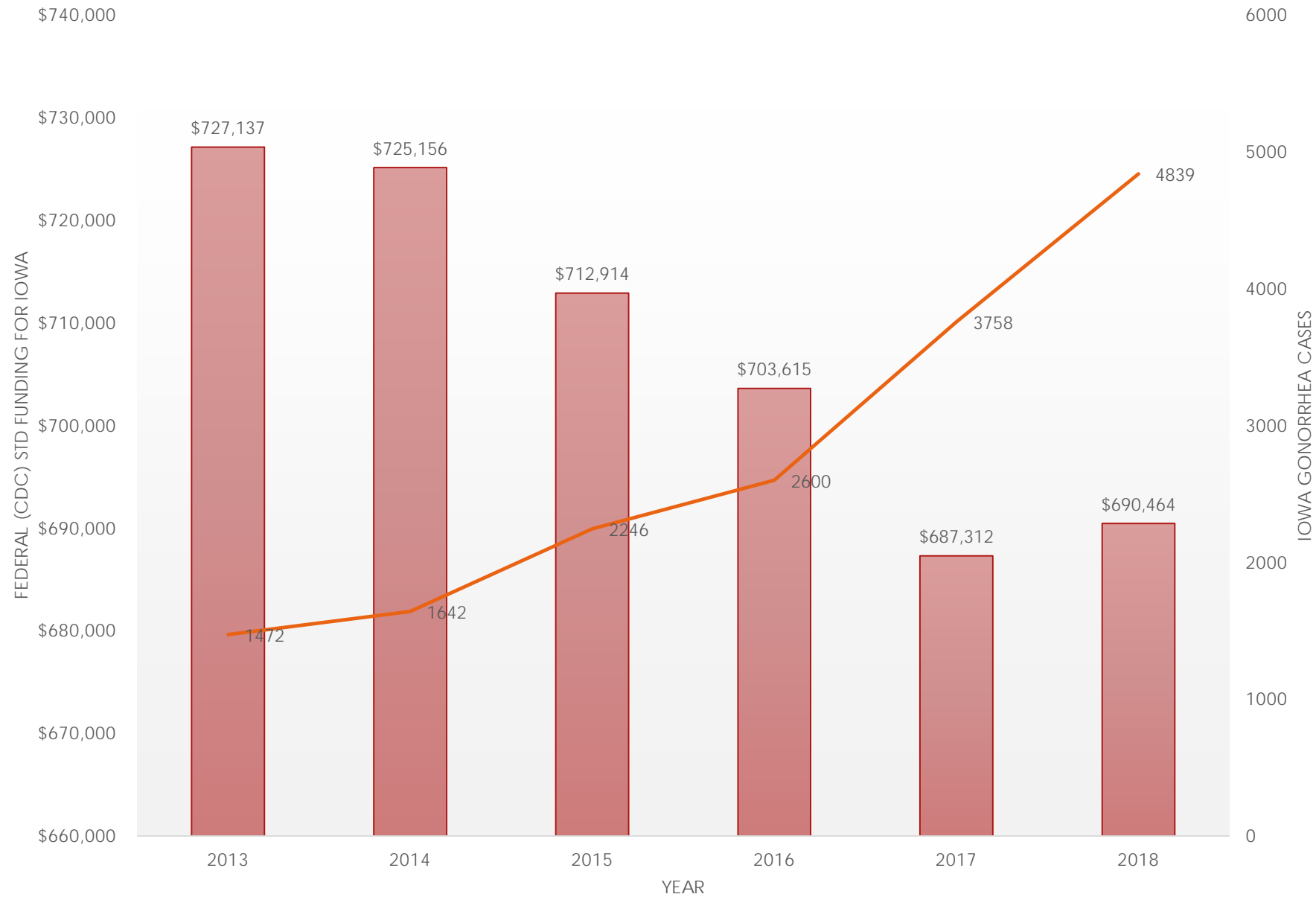
Opportunities for improvement -- *Funding*

- ▶ Greater flexibility = more adaptability to local needs and resources
 - ▶ Across programs – co-occurring conditions
- ▶ Screening, diagnosis, and treatment
 - ▶ No jurisdiction has sufficient resources to test and treat all individuals in need
 - ▶ Relying on state and local governments to fill gap will not be successful
 - ▶ Provide incentives
 - ▶ Even if “everyone” is covered by insurance, still not enough to sufficiently drive screening rates up
 - ▶ Need for confidential services and specialty STI care persists

Opportunities for improvement -- *Funding*

- ▶ Complete and honest cost estimates
 - ▶ We have no idea how much funding is needed and from where to stop the increases in these epidemics
 - ▶ Need hard numbers – easily explain to policymakers, legislators, other stakeholders and decision-makers

Federal (CDC) STD Funding for Iowa and Trend of Gonorrhea Cases



Opportunities for improvement -- *Biomedical*

- ▶ Biomedical advances can lead to revolutionary changes (e.g., rapid testing and HIV medications; Long Acting Reversible Contraceptives)
 - ▶ Need this as a goal for STIs
- ▶ Incentives for industry
 - ▶ Consumer-based tests & treatment
 - ▶ Innovations in treatment – *N. gonorrhoeae*, syphilis, PrEP for STIs
 - ▶ Vaccine research & development – gonorrhea, chlamydia, syphilis, herpes

Opportunities for improvement -- *Informatics*

- ▶ STI surveillance – State based
 - ▶ Financial and technical support
 - ▶ Nationwide, coordinated, consistent efforts to collect and evaluate data
- ▶ Expansion of electronic laboratory reporting; innovations in electronic case reporting
- ▶ Data sharing between programs and jurisdictions
- ▶ Powerful and dynamic data systems needed
 - ▶ Struggles in local jurisdictions to develop/acquire/adapt on their own
 - ▶ Less consistency when varied data systems used

Opportunities for improvement --

Primary Prevention

- ▶ Support expansive and innovative condom availability/distribution
- ▶ Shifting to a sex-positive narrative
 - ▶ Dispel stigma, shame, fear
 - ▶ National efforts to normalize STI testing & treatment; sexual history discussions with providers
 - ▶ Media campaigns
 - ▶ Incentivize health systems and payers
 - ▶ Comprehensive and consistent sexuality education for youth

Moving ahead

- ▶ Coordination and consistency at all levels is key
 - ▶ Federal, state, local
 - ▶ Related initiatives and plans -- Federal STI Plan, NAPA study, jurisdictional STD programs, etc.
 - ▶ Chief STI Prevention Strategists
- ▶ Get to know your STD Program – current systems, ways to build capacity
- ▶ If we have any hope of stemming the tide of these epidemics, all sectors of our society must step up and do more.