



September 19, 2014

Dear Colleagues,

I hope this letter finds you well and that you have enjoyed your summer. As the season transitions from vacation days into early fall, I'd like to share some new initiatives and refreshed projects.

### ***Executive Order Issued On One of the Most Urgent Health Concerns Facing Us Today***

For some time now, the Division of STD Prevention (DSTDP) has been sounding the alarm on the emerging threat of drug resistant gonorrhea. We have been encouraging decision makers, researchers, pharmaceutical companies, health departments, and labs to take action to prevent untreatable gonorrhea from becoming a reality. We are excited about yesterday's Presidential announcement of a [new Executive Order](#) and [National Strategy for Combating Antibiotic-Resistant Bacteria](#) (National Strategy) to address recommendations identified by the [President's Council of Advisors on Science and Technology](#) (PCAST) to address antibiotic resistance. As a leader in monitoring and preventing the spread of resistant infections, CDC will leverage its expertise and build on core strengths to:

- Slow the development of resistant bacteria and prevent the spread of resistant infections.
- Strengthen National One-Health surveillance efforts to combat resistance.
- Advance development and use of rapid and innovative diagnostic tests for identification and characterization of resistant bacteria.
- Improve international collaboration and capacities for antibiotic resistance prevention, surveillance, control, and antibiotic research and development.

### ***Three Things to Know***

- This year alone, at least two million Americans will become sickened by antibiotic resistant infections, and 23,000 Americans will die.
- Antibiotic resistance costs the U.S. over \$20 billion in healthcare expenses each year.
- These important plans are part of a request for \$30 million for CDC's [Detect and Protect Initiative](#) and \$14 million of the [National Healthcare Safety Network](#) to ramp up this fight. These strategies and the funds needed to implement them are a down-payment to improve the nation's ability to tackle the biggest drug-resistant threats.

To find out more about CDC and antibiotic resistance, read a [new blog post from CDC's Director](#), and visit [www.cdc.gov/drugresistance](http://www.cdc.gov/drugresistance).

### ***DSTDP and the City of Detroit Work Together to Decrease Syphilis Rates***

The city of Detroit is currently experiencing an increase in syphilis cases. This public health issue is concentrated among young African American men who have sex with men (MSM) and is exacerbated by a municipal bankruptcy, loss of funding for many public health services, and closure of the primary municipal public health facility. In response, this past April the Michigan Department of Community Health, the City of Detroit Department of Health and Wellness Promotion, local hospitals and clinics, local federally qualified health centers (FQHCs), and national partners including the CDC, and the National Association of Community Health Centers (NACHC), came

together at Wayne State University in Detroit to develop a plan and discuss strategies to improve the availability of STD services in Detroit.

The participants discussed the issues and proposed priorities and approaches including:

- Defined the essential STD services that a public health system should provide to achieve comprehensive STD care;
- HIV testing of all persons with bacterial STDs and their sex partners as a critical approach to identifying persons with HIV;
- Opportunities for academic centers to provide high-level clinical services to supplement the existing efforts of local health departments and community health providers;
- Include STD prevention in enhanced, integrated HIV planning; and
- Provide opportunities for medical and public health students to collaborate with public health agencies, and gain experience working in the community.

Participants identified an emerging opportunity to integrate and streamline services as the state's HIV prevention program is being integrated with the STD prevention program at both the program and planning levels. They also identified that the Detroit public health system redesign should involve the state and county public health communities as well as academic institutions to support a mixed model for STD care in Detroit with at least one specialized STD clinic.

For more information please contact [Dr. Jill Huppert](#), Chief of the Division's Program Development and Quality Improvement Branch.

### ***DSTDP Announces New Community Approaches to Reducing Sexually Transmitted Diseases Awardees***

DSTDP's Community Approaches to Reducing Sexually Transmitted Diseases (CARS) initiative funds recipients to extend the reach of STD prevention services. Grantees use community engagement methods and partnerships to enhance STD prevention and control capacity by identifying and implementing activities that promote sexual health and reduces the burden of STDs in communities with the highest disparities. The program is designed to increase and sustain partnerships that improve the quality of local STD services and thereby promote health equity.

The four newly awarded CARS grantees are the AIDS Foundation of Chicago (Chicago, IL); the Baltimore City Health Department (Baltimore, MD); the Public Health Management Corporation (Philadelphia, PA); and the University of Michigan (Ann Arbor, MI). This second cycle of CARS will begin on September 30, 2014 and has a total award value of \$3.6 million.

CARS will function through the implementation of community advisory boards, establishment of partnerships, and leveraging of community resources and expertise. Awardees will identify social determinants of sexual health, implement interventions to reduce STDs, and improve health equity. Proposed interventions include enhancing STD and sexual health services for adolescent minorities and young adults, including teens and young minority MSM. All grantees will incorporate strategies and activities addressing structural changes for reducing barriers influencing STD disparities.

For more information about these projects contact [Norman A. Hayes](#), Public Health Analyst, in the Division's Office of Health Equity.

### ***DSTDP Announces New National Network of STD Prevention Training Centers Project***

The number of clinicians who need formal guidance and training to provide effective STD care has greatly expanded. This is primarily because of growing STD clinical preventive service gaps in the United States and recent changes in the health care system.

The new CDC National Network of STD Prevention Training Centers (NNPTC) project will improve STD clinical care training at multiple levels: the individual health care clinician; providers who care for persons with, or at risk for STDs; as well as clinical organization and health care systems. The NNPTC project will achieve this by developing, disseminating, and evaluating training programs, as well as offering training assistance.

The NNPTC project comprises a national network of regional (Component A) and national (Component B) centers of excellence. NNPTC grantees are Apex (Albuquerque, NM); the University of Alabama (Birmingham, AL); Johns Hopkins University (Baltimore, MD); the Massachusetts Department of Public Health (Boston, MA); the University of California, San Francisco (San Francisco, CA); Denver Health and Hospitals (Denver, CO); Public Health Solutions (New York, NY); the University of Washington (Seattle, WA); and Washington University (St. Louis, MO). Awards for the five year project were finalized on September 1, 2014 with total project funding of \$16.5 million. Expected long-term outcomes of a strong NNPTC include increased integration of STD services into primary care, decreased transmission of STDs in the community, and decreased morbidity and mortality from STDs and related health outcomes.

For additional information about the NNPTC project contact [Dr. Jami Frazee Risley](#), in DSTDP's Program Development and Quality Improvement Branch.

### ***Now Available: Short Guides for the Practical Use of Program Evaluation among STD Programs***

DSTDP now offers short guides to supplement the existing [Practical Use for Program Evaluation Among STD Programs](#) manual. The short guides update key references and examples and provide brief, concise guidance on specific topics within The Manual. The guides will help STD programs to monitor their program activities, understand what is working, and what elements need to be improved.

The short guides were developed based on technical assistance needs that state and local STD programs identified in collaboration with CDC. The short guides can help build the evaluation capacity of state and local health departments conducting evaluation of STD programs, and will also be useful for CDC staff working with those programs.

### ***DSTDP is on Facebook!***

Social media is an ever-growing part of our communication efforts, and we continue to engage with our colleagues and partners in new ways. In June, DSTDP launched the [CDC STD Facebook page](#). It is our goal that this project will drive clinicians, health departments, and CBO/NGO audiences to engage around Division priorities. DSTDP will also share content and encourage support of other CDC priorities and campaigns of interest to our page subscribers. Please visit and 'like' the DSTDP Facebook page and join the conversation!

***Now Available: 2014 STD Prevention Conference Recordings and CE Credits***

Our colleagues who were not able to attend the Conference can now view recorded Conference sessions on the [Conference website](#).

The 2014 STD Prevention Conference was hosted in early June by CDC and several partners, including: the American Sexual Health Association, the American Sexually Transmitted Diseases Association, the International Union Against Sexually Transmitted Infections, the National Coalition of STD Directors, the Pan American Health Organization, and the Public Health Agency of Canada. The Conference was held in collaboration with the 15th IUSTI World Congress and 2nd Latin American IUSTI-ALACITS Congress, and was a great success.

More than 1,400 domestic and international STD/HIV and sexual health researchers and program planners attended the Conference and discussed issues of importance for the prevention of STDs and HIV. More than 500 presentations and posters were presented during the Conference, with several social media and news media outlets publishing information to our partners. Several studies presented during the meeting showed the heavy burden of [STDs among youth](#) in the United States as well as a study on the positive impact of CDC's new treatment guidelines for [drug-resistant gonorrhea](#) on slowing widespread resistance.

Those who attended the Conference or view recordings of the plenaries, mini-plenaries, symposia, and debates are eligible to earn [continuing education \(CE\) credits](#). I encourage you to seek out the recorded sessions and take advantage of the CE opportunities. These recordings are valuable resources to us and to our partners and they extend the life and reach of the Conference.

Enjoy the last of the summer sun and the first falling leaves!

Best Regards,  
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