

# Strategic Summary

The Division of STD Prevention (DSTDP) in the National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP) provides national leadership in the areas of program, science, and policy to promote and support the prevention and control of sexually transmitted diseases (STDs) and their complications. Our work is guided by a set of central values: (a) accountability, (b) adaptability, (c) collaboration, (d) diversity, (e) excellence and innovation, (f) staff development, and (g) ethics. We accomplish our work by providing technical support and science-based information to health departments, health care providers, and non-governmental organizations (NGOs). At a time when STD public health programs face numerous challenges (e.g., limited federal resources, decreased state and local investments in public health infrastructure, and increasing rates of STDs), it is imperative that DSTDP employ strategies that maximize long-term public health impact by reducing incidence of STDs and their adverse health outcomes.

As part of the process, we reviewed our current direction as an organization and identified actionable steps to achieve new and future organizational priorities. We also used environmental scanning as well as internal assessments of current DSTDP activities and resources to inform the planning effort. Our vision for this new strategic plan is twofold: first, reduce the burden of STDs in the United States and thereby improve the health status of millions of Americans; and second, create a management tool that enables us to set future directions for the division, guide the prioritization of activities and use of resources, define performance standards, and establish elements of accountability. After completing the plan, all the branches and offices contributed in the development of an implementation plan. The implementation plan will serve as a management tool to monitor progress in achieving the objectives and goals of the 2017 plan.

As the nation's leading STD prevention agency, DSTDP's efforts primarily focus on assessment, assurance, policy development, and prevention strategies. DSTDP staff strive to apply the best scientific evidence and program and policy practices. Incorporating science and policy and program methods, the DSTDP *2017 Strategic Plan* addresses three priority areas: (1) the reduction of STDs in adolescents and young adults, (2) the reduction of STDs in both men who have sex with men (MSM) and transgender women, and (3) the reduction of STDs in pregnant women. A fourth cross-cutting strategic priority area addresses STD prevention systems' capacity nationwide by seeking to leverage resources and increase collaboration with other health care delivery partners. There are three goals in the *2017 Strategic Plan*: (1) decrease STD morbidity, (2) decrease health disparities from STDs, and (3) decrease the incidence of STDs.

Although there are numerous sexually transmitted infections (STIs) (e.g., genital herpes, trichomoniasis), and the number continues to grow with Ebola in 2014 and, more recently, Zika, currently there are insufficient resources to effectively address all of these infections. DSTDP, therefore, concentrates its efforts on the three STIs of greatest public health importance as determined by frequency, severity, associated disparities, costs, preventability, communicability, and public interest. The three diseases are syphilis, *Neisseria gonorrhoeae* (GC), and *Chlamydia trachomatis* (CT).

Aligning with the *NCHHSTP Strategic Plan through 2020*, the DSTDP *2017 Strategic Plan* provides a foundation for decreasing STD morbidity, decreasing health disparities from STDs, and decreasing the incidence of STDs. The strategic plan framework will guide our prevention activities in surveillance, prevention interventions, internal and external workforce development, partnerships,

and research for three priority populations: adolescents and young adults, MSM and transgender women, and pregnant women. Because infectious disease epidemics are dynamic, affecting different populations in different ways at different times, this plan is intended to be a living document that facilitates enhanced responsiveness to constantly changing environments.

To be successful in STD prevention requires the skilled efforts of scientists, planners, clinicians, communicators, disease investigators, administrators, program managers, and front-line staff and the collaboration of our partners. Each of us, regardless of professional discipline or academic training, brings something valuable and vital to the table. The *DSTDP 2017 Strategic Plan* incorporates all of our talents and expertise and will allow all of our efforts to flourish.

