

STI Prevention and Control: Opportunities and Barriers at the State and Local Level

The Local Health Department Perspective

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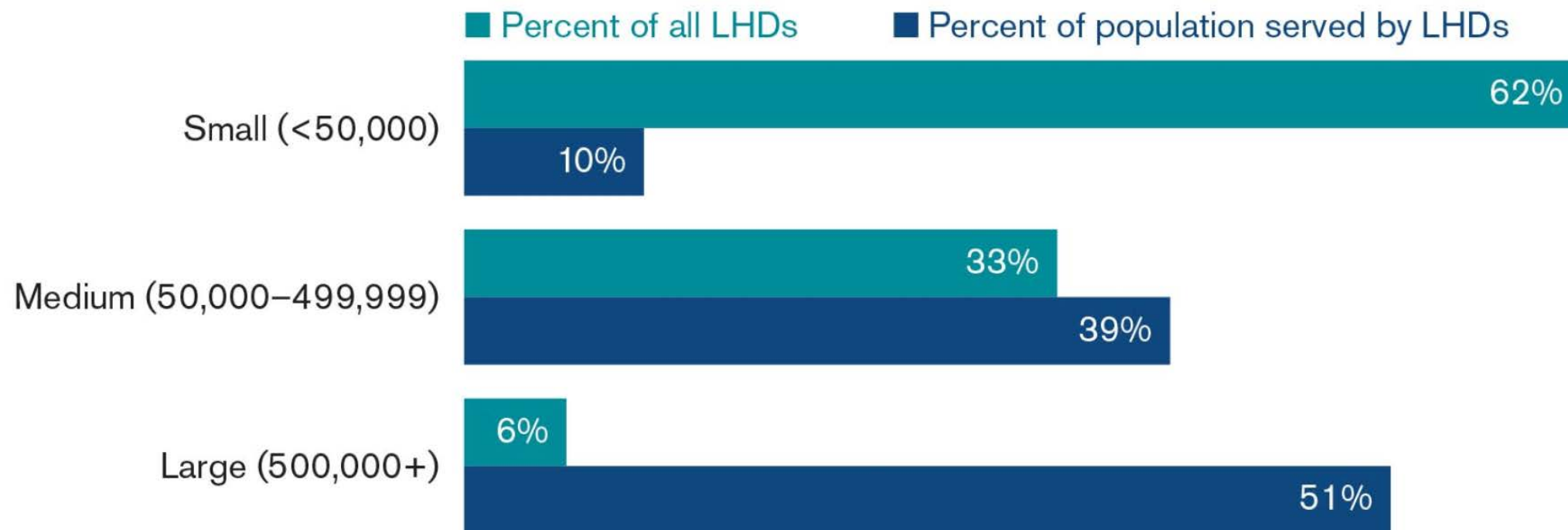


About NACCHO

- The National Association of County and City Health Officials' (NACCHO) mission is to improve the health of communities by strengthening and advocating for the nation's nearly 3,000 local health departments (LHDs).
- Our vision is to improve the public health system at the local level to create the conditions for optimal health, equity, and security for all people.

About Local Health Departments

Percent of U.S. population served by LHDs

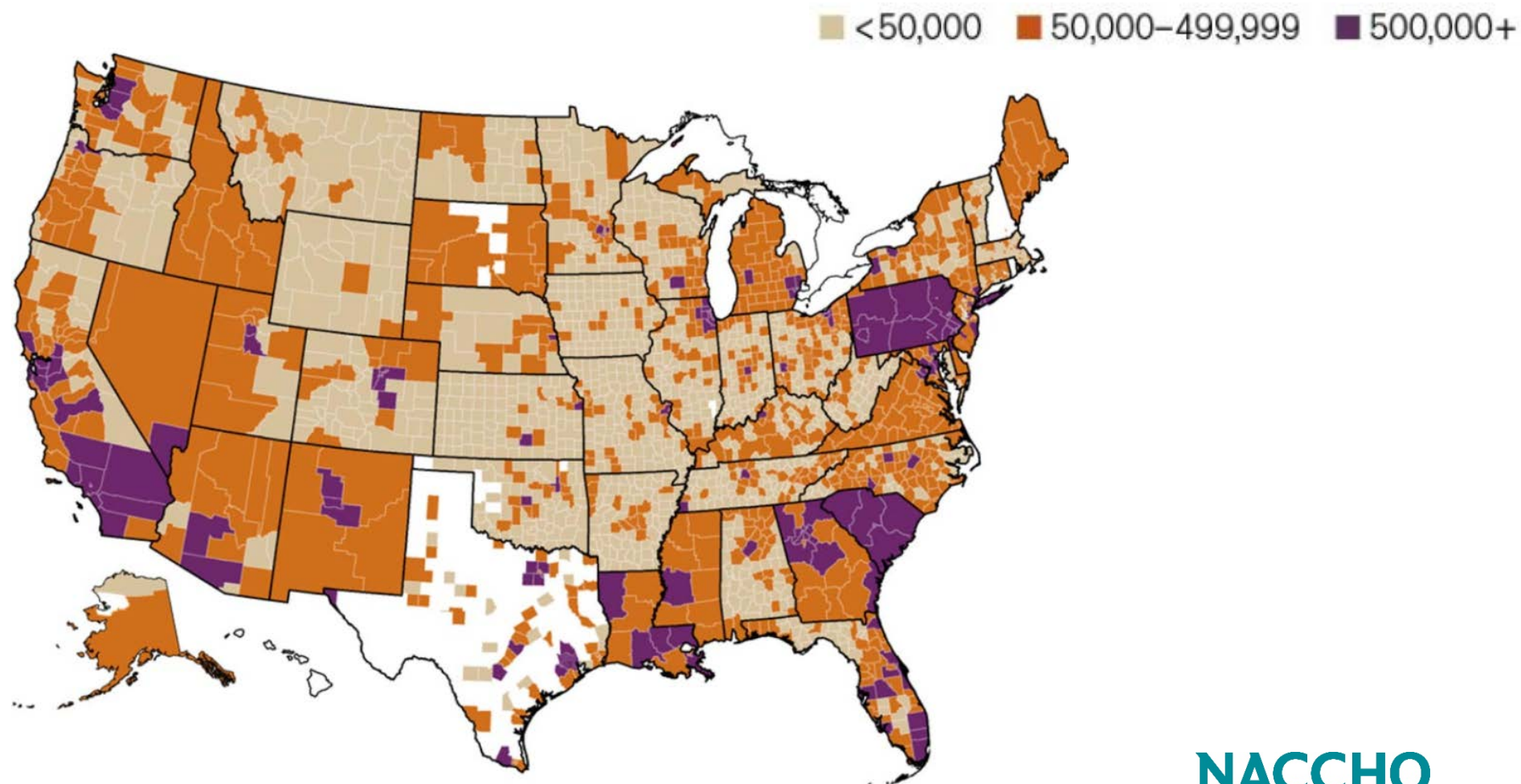


N=2,533

Source: National Association of County and City Health Officials (NACCHO) 2016 National Profile of Local Health Departments

About Local Health Departments

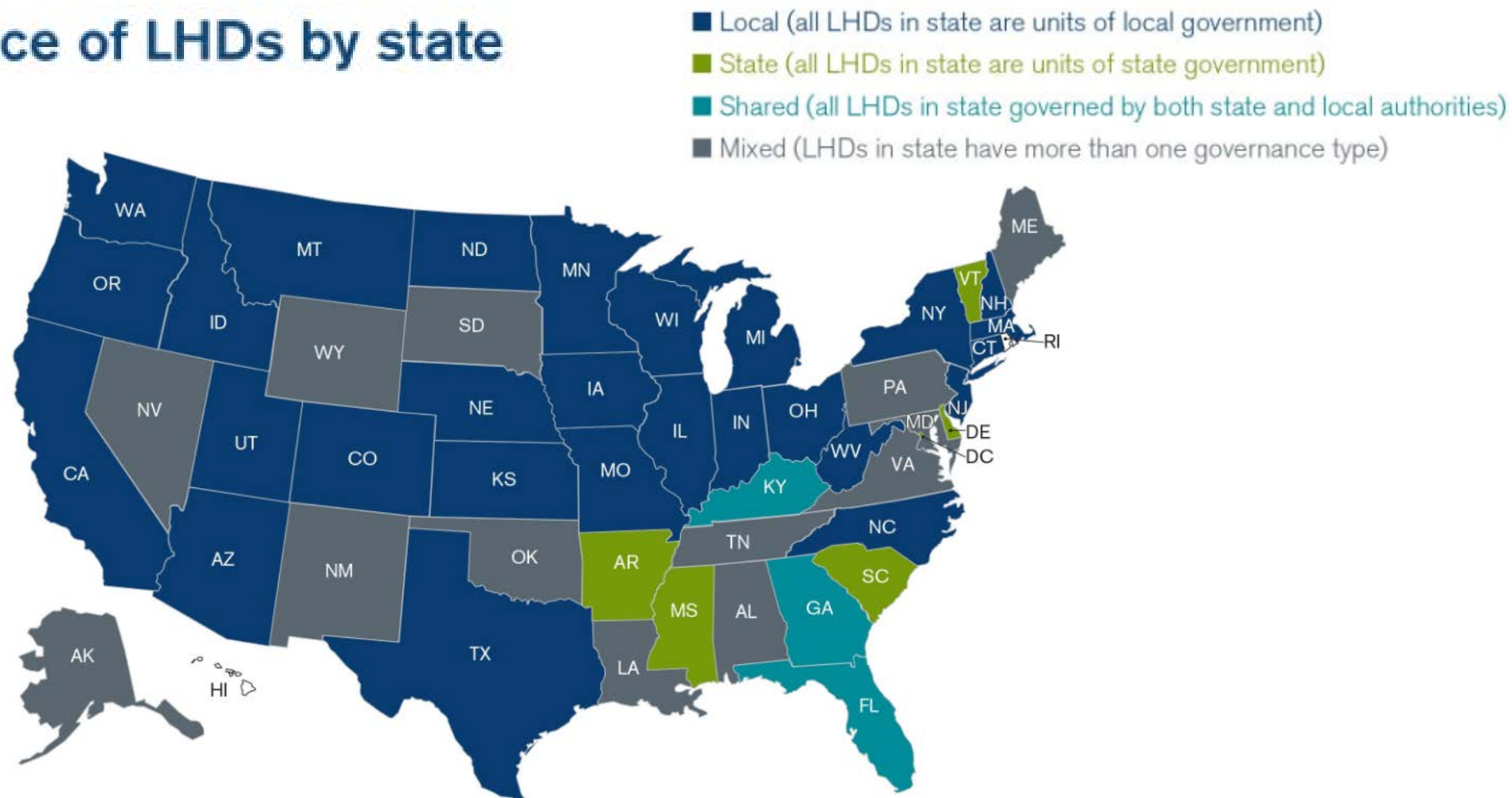
Size of population served by LHD jurisdiction



Source: National Association of County and City Health Officials (NACCHO) 2016 National Profile of Local Health Departments

About Local Health Departments

Governance of LHDs by state



RI and HI non-participants.

N=2,533

Source: National Association of County and City Health Officials (NACCHO) 2016 National Profile of Local Health Departments

About Local Health Departments

Mean and median number of employees and Full-Time Equivalents (FTEs) by size of population served

Size of population served	Number of employees		Number of FTEs	
	Mean	Median	Mean	Median
All LHDs	57	18	50	15
< 10,000	8	6	6	4
10,000–24,999	14	10	11	8
25,000–49,999	22	17	19	14
50,000–99,999	41	32	36	27
100,000–249,999	71	63	64	58
250,000–499,999	164	134	159	124
500,000–999,999	294	261	259	230
1,000,000+	736	478	694	486
	n(employees)=1,828		n(FTEs)=1,743	

- Approximately 147,000 LHD employees and 133,000 FTEs
- 2016 enumeration of DIS workforce identified 1,661 DIS and 402 DIS supervisors

Source: National Association of County and City Health Officials (NACCHO)
2016 National Profile of Local Health Departments

Screening and Treatment Provided by LHDs

		Size of population served			Degree of urbanization		
		Small (<50,000)	Medium (50,000– 499,999)	Large (500,000+)	Urban	Suburban	Rural
All LHDs							
Screening for diseases/conditions							
Tuberculosis	84%	81%	89%	94%	76%	90%	86%
Other STDs	65%	57%	75%	92%	59%	71%	64%
HIV/AIDS	62%	53%	74%	93%	58%	69%	57%
Blood lead	61%	60%	63%	56%	49%	66%	72%
High blood pressure	54%	56%	51%	51%	51%	53%	62%
Body Mass Index (BMI)	53%	53%	53%	57%	43%	57%	65%
Diabetes	34%	33%	35%	43%	32%	34%	37%
Cancer	32%	28%	38%	41%	30%	35%	29%
Cardiovascular disease	25%	23%	28%	34%	26%	23%	28%
Treatment for communicable diseases							
Tuberculosis	79%	75%	85%	87%	72%	86%	79%
Other STDs	63%	56%	73%	89%	57%	70%	63%
HIV/AIDS	35%	32%	39%	48%	30%	40%	34%

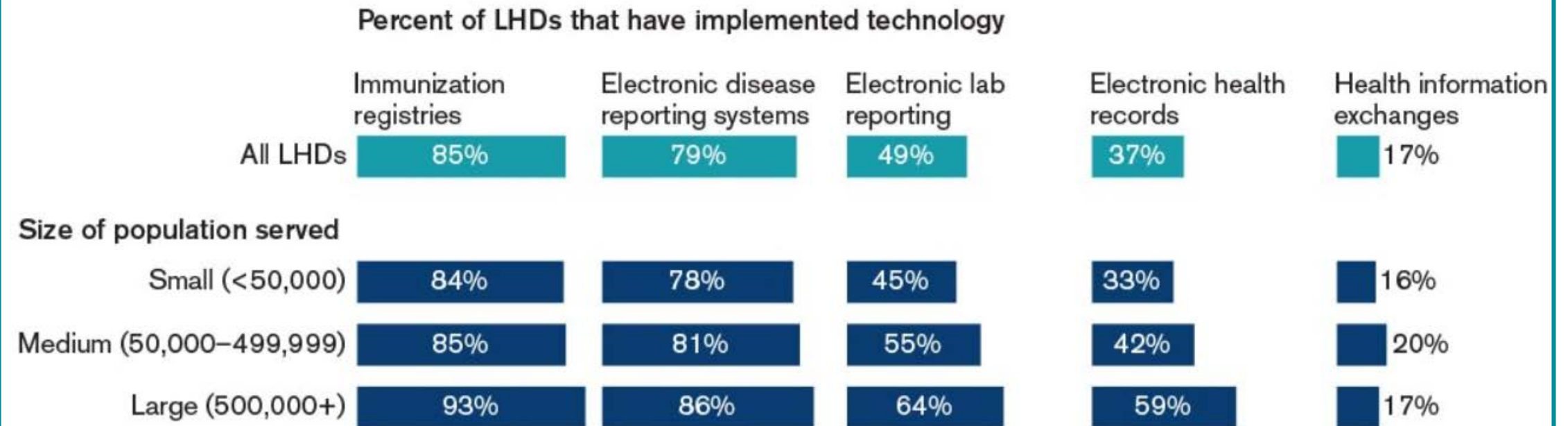
n=1,777–1,898

Source: National Association of County and City Health Officials (NACCHO) 2016 National Profile of Local Health Departments

Surveillance and Informatics Capacity

- 93% of LHDs conduct epidemiology and surveillance for infectious diseases
- 26% of LHDs employ epidemiologists/statisticians
- 18% of LHDs employ information systems specialists

Current implementation in information technology systems by size of population served



n=459

Source: National Association of County and City Health Officials (NACCHO) 2016 National Profile of Local Health Departments

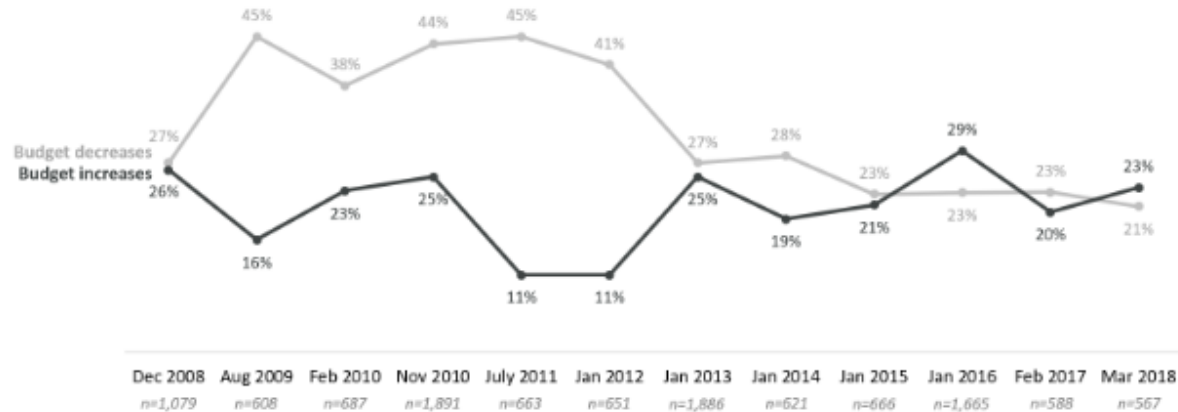
Budget Cuts and Job Losses

- Since 2008, LHDs have eliminated a cumulative total of 56,360 jobs.

More LHDs reported budget increases over the past year, but one in five LHDs continued to experience budget decreases.

Change in LHD Budget Capacity

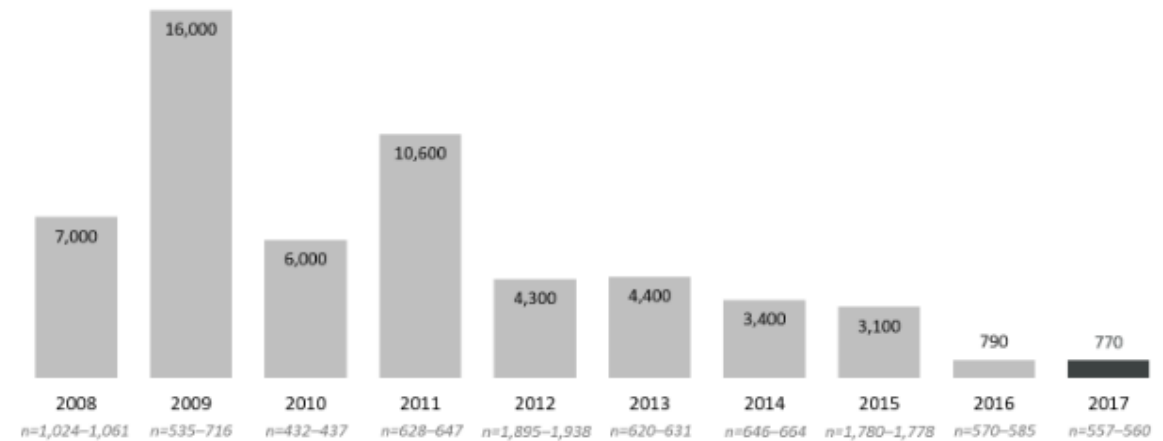
Percent of LHDs reporting budget decreases or budget increases



LHDs reported the fewest number of jobs lost to date since 2008.

Total Jobs Lost Across LHDs Nationwide

Number of jobs lost



Source: National Association of County and City Health Officials (NACCHO) 2018 Forces of Change Survey

Impact of Budget Cuts on STI Programs

- In a national survey of LHDs, 62% reported cuts to their budget in FY '11- FY '12¹
 - Cuts resulted in reduced clinical services, including hours of operation and an increase in patient copayments
 - Cuts had a negative impact on the provision of partner services
- In a 2017 survey of NACCHO's HIV, STI, and Viral Hepatitis Sentinel Network, 81% of LHDs reported stagnant or decreased funding levels over the past year²
 - Of those that experienced budget cuts, 43% reported reductions in staffing levels and one-third reported reducing or eliminating services
 - Reductions were most likely to affect public health nurses, disease surveillance, STI partner services, and HIV testing

1. Leichter, J.S. et al., US Public STD Clinical Services in an Era of Declining Public Health Funding: 2013-2014. *Sex Transm Dis*. 2017 Aug; 44(8):505-509

2. National Association of County and City Health Officials. Impact of Budget Cuts on Local Health Department HIV, STI, and Viral Hepatitis Programs. <https://www.naccho.org/programs/community-health/infectious-disease/hiv-sti>. Published 2017.



NACCHO's Activities and Local Opportunities

- Provide capacity building assistance, facilitate peer learning, and identify best practices for STI prevention and control
 - Developing an implementation guide for CDC's Recommendations for Quality STD Clinical Services
 - STI Express Visits Initiative
 - Demonstration projects (addressing high-risk substance use through STI clinics, rapid syphilis testing, implementing sexual health campaigns)
 - Supporting the DIS workforce
- Communications to ensure LHDs have the latest information on developments and innovations in the STI field
- Maintaining situational awareness of what is happening on the ground and facilitating information sharing among stakeholders at all levels
- Informing policymakers about the role of LHDs in STI prevention

Local Opportunities via PrEP Implementation

- In a 2015 national survey, 29% of LHDs reported engagement in PrEP implementation
 - **Making referrals for PrEP (74%)** was the activity most frequently reported by LHDs engaged in PrEP implementation
 - Only 9% of LHDs reported delivery of PrEP from a health department clinic, yet 27% reported it as an optimal role for LHDs
 - 45% of LHDs engaged in implementation anticipated expanding their level of engagement
 - Among LHDs not engaged in PrEP implementation, 13% expected to become engaged over the next four years, 46% were undecided, and 41% reported it was unlikely

LHDs as Community Health Strategists

- Collaborate with a broad array of allies to build healthier and more vital communities
- Build a more integrated, effective health system through collaboration between clinical care and public health
- Adopt and adapt strategies to combat the evolving leading causes of illness, injury, and premature death
- Develop strategies for promoting health and well-being that work most effectively for communities of today and tomorrow
- Identify, analyze, and distribute information from new, big, and real time data sources
- Replace outdated organizational practices with state of the art business, accountability, and financing systems
- Work with corresponding federal partners to effectively meet community needs



Thank you

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For more information, visit www.naccho.org.