

Impact of Cuts to Federal STD Prevention Funding

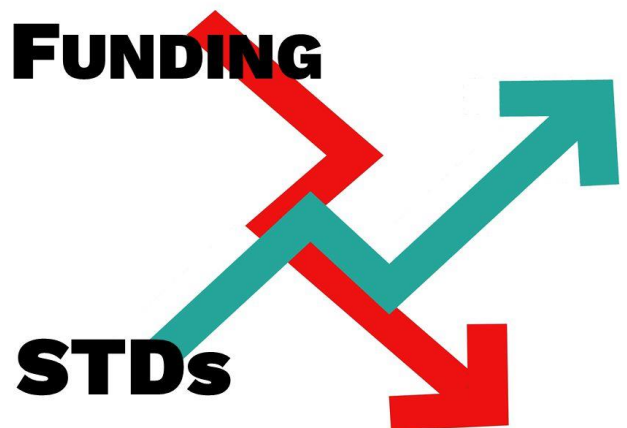
The Division of STD Prevention at CDC funds all 50 state health departments and seven large local health departments to engage in STD prevention and control. This includes: STD monitoring; contact tracing and connection to health care for HIV and other STDs; outbreak response; assurance of appropriate screening and treatment by health care providers; training for medical professionals; and providing STD information to the public.

Cuts to the federal STD funding would mean more disease, additional costs to our health care system, and less educated clinicians. Cuts like those in the President's FY18 Budget would result in:

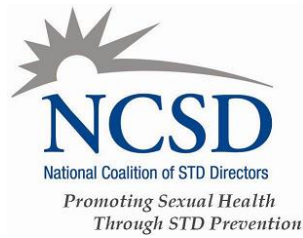
- The total elimination of a number of states' STD prevention and control programs
- 30,000 people infected with STDs would not know they are infected, would not be treated, and would likely spread STDs in their communities.
- The elimination of funding to academic institutions for clinical training and the CDC's National STD Treatment Guidelines would not be updated, leaving clinicians without trusted resources in the changing field of STD treatment.
- The 10 year cost of a sustained 17 percent cut to federal STD prevention is approximately \$500 million dollars— *costing two times more* than the value of the budget cut.

STDs are currently at a 20 year high and federal investments have not increased since 2003. Federal STD prevention funding has seen a \$21 million reduction in annual funding since 2003. This is a **reduction of 40% in buying power for CDC and its state, local and territorial grantees. And since 2003:**

- Cases of syphilis have increased 230%
- Cases of chlamydia have increased 75%
- Only one drug is now recommended for gonorrhea treatment due to emergence of drug resistance; in 2003, CDC recommended 5 different drug treatments for gonorrhea



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Annual CDC STD Prevention Budget, FY 2003– President’s Proposed Budget (PB) FY 2018

50% drop in purchasing power since 2003†

