



# As STD Rates Soar, Prevention Spending Cuts Loom Large

Syphilis cases spiked 333% since 2003, but a U.S. Senate bill wants to cut \$5M from STD prevention.

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communicable diseases, but by and large, policy makers and the public have a disconcerting tendency to only pay attention to public health in times of crisis. In the midst of an outbreak, we are prone to take swift and demonstrative action to address whatever problems face us. However, as soon as that outbreak subsides, our reaction is too often to take our foot off the gas and refocus our energy on issues that suddenly seem more pressing.

For over a decade, funding to combat sexually transmitted diseases (STD) has been given the short shrift by Congress and state legislatures that is all too common with regards to health issues. Since 2003, [Congress has not provided a single funding increase for STD programs](#), while, simultaneously, more than half of all state and local STD programs have undergone large budget cuts.

The result of this institutionalized neglect of STD prevention and treatment has been a startling, but not altogether surprising, resurgence in STD rates, with the recent release of a Centers for Disease Control and Prevention's (CDC) [report](#) showing the highest number of combined cases of chlamydia, gonorrhea, and syphilis ever recorded in the United States. Between 2014 and 2015, the number of cases of primary and secondary syphilis, congenital syphilis, gonorrhea, and chlamydia rose by 19 percent, 6 percent, 13 percent, and 6 percent respectively, but those numbers only tell part of the story.

This sharp spike in STD rates over the past year is just the most recent and most pronounced manifestation of a disturbing epidemiological trend that shows no signs of stopping any time soon. Between 2003—the last year that Congress provided a funding increase for STD programs—and 2015, the recorded number of cases of primary and secondary syphilis [increased by a staggering 333 percent](#). During the same period, the number of reported cases of chlamydia rose by 174 percent. The number of reported cases of gonorrhea have gone up by a comparatively low 18 percent, but this modest increase is countered by the severity of antibiotic resistant strains that are becoming increasingly prevalent.

It is not a coincidence that this surge in STD cases has come at a time when the budgets of state

and local STD programs are being slashed. Much like our aging roads and bridges, America's public health infrastructure is woefully underfunded and is being pushed to its breaking point. As Bill Smith, the former executive director of the National Coalition of STD Directors, put it at [a congressional briefing on STD prevention](#) back in April, "Our mantra has been to 'do more with less,' but now we're doing less with less. The public's health is in danger."

At that same congressional briefing, Dr. Gail Bolan, the CDC's director of STD Prevention, gave a dour diagnosis for the trajectory of STD infection in the United States if state and local STD programs continue to be underfunded or abandoned. "For those of you who are not clinicians, in most people's assessment, congenital syphilis is a sentinel event." Bolan said. "It is a failure of the health care system and it is a failure of the public health system. And in a society that invests as much as we do in our health care and in our public health we should not be seeing this number of congenital syphilis cases in the United States."

One would think that Congress would immediately react to such a dire warning and would circle the wagons and work to nip this burgeoning STD crisis in the bud. Unfortunately, with the lame duck session quickly approaching, Congress may decide to double down on its neglect of the nation's sexual health. In the Senate's current Labor, Health and Human Services and Education Appropriations bill for FY2017, there is [a proposed \\$5 million cut](#) to the CDC's Division of STD Prevention, while the House version merely continues the flat funding that has led to a [40% reduction in the Division of STD Prevention's buying power](#) since 2003.

Out of sight, out of mind, is not an acceptable approach for Congress or state and local governments to take regarding any public health issue, much less one with the destructive personal and financial implications of sexually transmitted disease. For the millions of Americans who contract STDs each year, and [particularly for populations like men who have sex with men](#) who bear a disproportionate brunt of this burden, what do these proposed cuts in funding say about the government's opinion of them and their wellbeing? It is hard to interpret a call to slash STD program funding in the wake of this recently released CDC data as anything other than a disregard by elected officials for the health of their constituents and it cannot be allowed to stand. As Congress completes its funding of federal programs for the fiscal year that began Oct. 1, AIDS United will join other advocates in demanding increased funding for STD prevention. The latest surveillance data call for no less from us.