INVESTING IN STD PREVENTION:

GUIDE FOR USING THE CUSTOMIZABLE FACTSHEET

The factsheet, "Investing in STD Prevention," was developed jointly by the Association of State and Territorial Health Officials (ASTHO) and the National Coalition of STD Directors (NCSD) to help jurisdictions communicate the impact of STD program funding on disease burden and associated medical costs. The factsheet is customizable, allowing jurisdictions to adapt it to reflect specific data outputs calculated through the STD Prevention Allocation Consequences Estimator (SPACE Monkey). The factsheet can be shared on jurisdictions' social media channels, on websites, and printed as handouts to distribute at meetings and events.

Instructions:

1. Use the SPACE Monkey tool to estimate the effects of a STD program budget increase or decrease in your jurisdiction. The outputs from this tool will be used to populate your customizable factsheet.
2. Choose the version of the customizable factsheet you would like to use.
   - There are two sets of customizable factsheets. The first set includes messages about disease intervention specialist (DIS), and the second set excludes these messages. Depending on whether you input DIS data into the SPACE Monkey tool, you might want to choose one or the other.
   - Each set of customizable factsheets includes a full color option, and a low-ink option. The full color option may be preferable if printing professionally, uploading to a website as a PDF, etc. The low-ink option may be preferable if printer/paper quality and ink usage are concerns.
3. Save the customizable factsheet to your computer. The factsheet will save as a PowerPoint file.
4. Open the PowerPoint file from your desktop. Keep these instructions visible in another window if possible.
5. All editable areas are denoted with brackets (e.g., [insert your jurisdiction]). In the instructional images below, editable areas are also highlighted in yellow, for reference. On the customizable factsheet, these fields are not actually highlighted in yellow.
6. Update content in brackets as indicated with your jurisdiction's name and data.
7. Once all the content is updated, save the factsheet from PowerPoint format to an image or PDF file for use on communication channels. From the toolbar:
   - Click "File"
   - Click "Save As"
   - Name your new file
   - Select "PDF," "PNG," or "JPEG" depending on your needs
   - Click "Save"
   - Print or share online.

Note: If more space is required to highlight messages specific to your jurisdiction, columns from the table displaying one, five, and ten-year outcomes can be removed, as can the image on the second page of the factsheet.

INVESTING IN STD PREVENTION

MAKING THE CASE FOR [INSERT YOUR JURISDICTION]

Sexually transmitted diseases (STDs) in the United States are at a record high—and treating them is expensive.[1] Preventing infections could save much of the approximately $16 billion spent each year on direct medical costs for 8 major STDs.[2] STDs aren't just costly—left untreated, they have serious health consequences, such as infertility, pregnancy complications, and even infant death.[3] Strong STD programs are our best line of defense, but dwindling budgets limit the ability to combat rising STD rates. ***Now is the time to invest in these critical public health programs.***

Version 1: full color, includes DIS messages

STD PREVENTION IS EFFECTIVE

In the past 15 years CDC-funded programs prevented an esti… **6 1** ca… …is, and chlamydia, …D-attributable HIV … — saving an estimated $2.8 billion … lifetime medical costs.[4, 5]

…unding has a direct impact on STD rates and medical spending in [insert your jurisdiction]

An STD program budget [increase/decrease] of [insert dollar amount] would result in[5]:

1 year

Over the first year, an estimated [increase/decrease] in cases of:

- [#] syphilis
- [#] gonorrhea
- [#] chlamydia
- [#] STD-attributable HIV

5 years

Over 5 years, an estimated [increase/decrease] in cases of:

- [#] syphilis
- [#] gonorrhea
- [#] chlamydia
- [#] STD-attributable HIV

10 years

Over 10 years, an estimated [increase/decrease] in cases of:

- [#] syphilis
- [#] gonorrhea
- [#] chlamydia
- [#] STD-attributable HIV

$

Over 10 years, the estimated cumulative direct medical costs in [insert your jurisdiction] would [increase/decrease] by **$[#].**

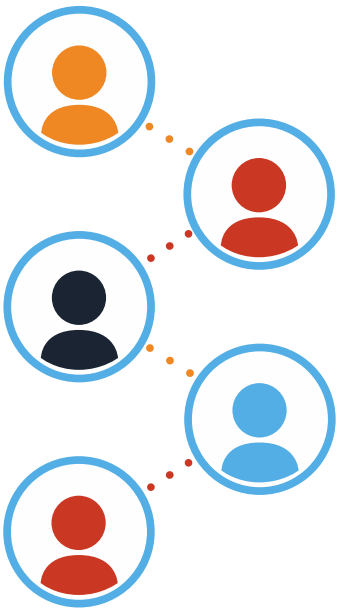
STD program funding in [insert your jurisdiction] supports disease intervention specialists (DIS), or the "on-the-ground" investigators who work to track and interrupt disease transmission.

DIS find STD cases and link people to care, which also halts health and economic consequences.

*Only include this bullet if inputting a **budget decrease** into the SPACE Monkey tool.*

An STD program budget [increase/decrease] of [insert dollar amount] would [add/eliminate] DIS positions, resulting in[5]:

- **[Additional/No] DIS interviews** with those reported to have, or to have been exposed to, an STD **[and/or] behavioral counseling** for an estimated **[####] patients with STDs**.
- **An estimated [#] people with syphilis, gonorrhea, or chlamydia** would be unaware of their infection and be more likely to spread STDs in their communities.



DIS also respond to other disease outbreaks, such as the flu, measles, food-borne illnesses, Zika, and even Ebola. [With additional/Without these] DIS, [insert your jurisdiction] could be [better prepared/underprepared] for a public health emergency.

Invest in STD prevention programs to protect [insert your jurisdiction] from the consequences of untreated STDs.

[Use this space to highlight particular prevention programs in your jurisdiction that require support.]

For more information:

Check out SPACE Monkey (STD Prevention Allocation Consequences Estimator), a tool created to help state and local STD programs to estimate the impact of changes in their budgets: **www.cdc.gov/std/program/spacemonkey**

References:

1. CDC. "Sexually Transmitted Disease Surveillance 2017." Available at https://www.cdc.gov/std/stats17/. Accessed 10-31-2018.
2. Owusu-Edusei K, Chesson HW, Gift TL, et al. "The Estimated Direct Medical Cost of Selected Sexually Transmitted Infections in the United States, 2008." Sexually Transmitted Diseases. 2013. 40(3):197-201. Available at https://www.ncbi.nlm.nih.gov/pubmed/23403600. Accessed 3-9-2018.
3. CDC. "Reported STDs in the United States, 2016." Available at https://www.cdc.gov/nchhstp/newsroom/docs/factsheets/std-trends-508.pdf. Accessed 3-9-2018.
4. Chesson HW, Ludovic JA, Berruti AA, et al. "Methods for Sexually Transmitted Disease Prevention Programs to Estimate the Health and Medical Cost Impact Changes in Their Budget." Sexually Transmitted Diseases. 2018. 45(1):2-7. Available at https://www.ncbi.nlm.nih.gov/pubmed/29240632. Accessed 3-9-2018.
5. CDC. Data estimated using "S.P.A.C.E. Monkey 1.0." Available at https://www.cdc.gov/std/program/spacemonkey/default.htm. Accessed 3-9-2018.

INVESTING IN STD PREVENTION

MAKING THE CASE FOR [INSERT YOUR JURISDICTION]

Sexually transmitted diseases (STDs) in the United States are at a record high—and treating them is expensive.[1] Preventing infections could save much of the approximately $16 billion spent each year on direct medical costs for 8 major STDs.[2] STDs aren't just costly—left untreated, they have serious health consequences, such as infertility, pregnancy complications, and even infant death.[3] Strong STD programs are our best line of defense, but dwindling budgets limit the ability to combat rising STD rates. ***Now is the time to invest in these critical public health programs.***

Version 2: low-ink, includes DIS messages

STD PREVENTION IS EFFECTIVE

In the past 15 years CDC-funded programs prevented an esti… 6.1 … ca… …is, and chlamydia, …D-attributable HIV …s — saving an estimated $2.8 billion … lifetime medical costs.[4, 5]

…unding has a direct impact on STD rates and medical spending in [insert your jurisdiction]

An STD program budget [increase/decrease] of [insert dollar amount] would result in[5]:

1 year

Over the first year, an estimated [increase/ decrease] in cases of:

- **[#]** syphilis
- **[#]** gonorrhea
- **[#]** chlamydia
- **[#]** STD-attributable HIV

5 years

Over 5 years, an estimated [increase/ decrease] in cases of:

- **[#]** syphilis
- **[#]** gonorrhea
- **[#]** chlamydia
- **[#]** STD-attributable HIV

10 years

Over 10 years, an estimated [increase/ decrease] in cases of:

- **[#]** syphilis
- **[#]** gonorrhea
- **[#]** chlamydia
- **[#]** STD-attributable HIV

$

Over 10 years, the estimated cumulative direct medical costs in [insert your jurisdiction] would [increase/ decrease] by **$[#].**

astho™
ASTHO.ORG/STD

National Coalition of STD Directors
NCSDDC.ORG

[YOUR LOGO HERE]
[YOUR URL]

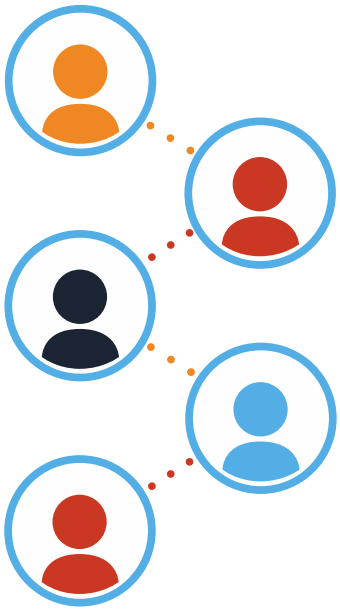
STD program funding in [insert your jurisdiction] supports disease intervention specialists (DIS), or the "on-the-ground" investigators who work to track and interrupt disease transmission.

DIS find STD cases and link people to care, which also halts health and economic consequences.

*Only include this bullet if inputting a **budget decrease** into the SPACE Monkey tool.*

An STD program budget [increase/decrease] of [insert dollar amount] would [add/eliminate] DIS positions, resulting in[5]:

- **[Additional/No] DIS interviews** with those reported to have, or to have been exposed to, an STD **[and/or] behavioral counseling** for an estimated **[####] patients with STDs**.
- **An estimated [#] people with syphilis, gonorrhea, or chlamydia** would be unaware of their infection and be more likely to spread STDs in their communities.



DIS also respond to other disease outbreaks, such as the flu, measles, food-borne illnesses, Zika, and even Ebola. [With additional/Without these] DIS, [insert your jurisdiction] could be [better prepared/underprepared] for a public health emergency.

Invest in STD prevention programs to protect [insert your jurisdiction] from the consequences of untreated STDs.

[Use this space to highlight particular prevention programs in your jurisdiction that require support.]

For more information:

Check out SPACE Monkey (STD Prevention Allocation Consequences Estimator), a tool created to help state and local STD programs to estimate the impact of changes in their budgets: **www.cdc.gov/std/program/spacemonkey**

References:

1. CDC. "Sexually Transmitted Disease Surveillance 2017." Available at https://www.cdc.gov/std/stats17/. Accessed 10-31-2018.
2. Owusu-Edusei K, Chesson HW, Gift TL, et al. "The Estimated Direct Medical Cost of Selected Sexually Transmitted Infections in the United States, 2008." Sexually Transmitted Diseases. 2013. 40(3):197-201. Available at https://www.ncbi.nlm.nih.gov/pubmed/23403600. Accessed 3-9-2018.
3. CDC. "Reported STDs in the United States, 2016." Available at https://www.cdc.gov/nchhstp/newsroom/docs/factsheets/std-trends-508.pdf. Accessed 3-9-2018.
4. Chesson HW, Ludovic JA, Berruti AA, et al. "Methods for Sexually Transmitted Disease Prevention Programs to Estimate the Health and Medical Cost Impact Changes in Their Budget." Sexually Transmitted Diseases. 2018. 45(1):2-7. Available at https://www.ncbi.nlm.nih.gov/pubmed/29240632. Accessed 3-9-2018.
5. CDC. Data estimated using "S.P.A.C.E. Monkey 1.0." Available at https://www.cdc.gov/std/program/spacemonkey/default.htm. Accessed 3-9-2018.

INVESTING IN STD PREVENTION

MAKING THE CASE FOR

[INSERT YOUR JURISDICTION]

Sexually transmitted diseases (STDs) in the United States are at a record high—and t
them is expensive.[1] Preventing infections could save much of the approxi
spent each year on direct medical costs for 8 major STDs.[2] ST
untreated, they have serious health conseque gnancy
complications, and even infant death.[3] t line of defense, but
dwindling bud bat rising STD rates.

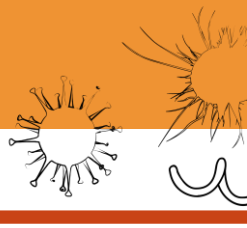
Now is the t se critical public health programs.

Version 3: full color, excludes DIS messages

STD PREVENTION IS EFFECTIVE

In the past 15 years CDC-funded programs prevented an estimated **6.1 MILLION** **cases of gonorrhea, syphilis, and chlamydia,** as well as 3,540 STD-attributable HIV infections — saving an estimated $2.8 billion in lifetime medical costs.[4, 5]

STD program funding has a direct impact on STD rates and medical spending in [insert your jurisdiction]



astho™
ASTHO.ORG/STD

National Coalition of STD Directors
NCSDDC.ORG

[YOUR LOGO HERE]
[YOUR URL]

An STD program budget [increase/decrease] of [insert dollar amount] would result in[5]:

1 year

Over the first year,
an estimated [increase/decrease] in cases of:

- [#] syphilis
- [#] gonorrhea
- [#] chlamydia
- [#] STD-attributable HIV

5 years

Over 5 years,
an estimated [increase/decrease] in cases of:

- [#] syphilis
- [#] gonorrhea
- [#] chlamydia
- [#] STD-attributable HIV

10 years

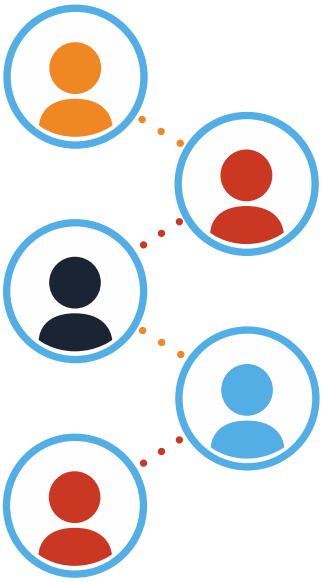
Over 10 years,
an estimated [increase/decrease] in cases of:

- [#] syphilis
- [#] gonorrhea
- [#] chlamydia
- [#] STD-attributable HIV

$

Over 10 years, the estimated cumulative direct medical costs in [insert your jurisdiction] would [increase/decrease] by

$[#].



Invest in STD prevention programs to protect [insert your jurisdiction] from the consequences of untreated STDs.

[Use this space to highlight particular prevention programs in your jurisdiction that require support.]

For more information:

Check out SPACE Monkey (STD Prevention Allocation Consequences Estimator), a tool created to help state and local STD programs to estimate the impact of changes in their budgets: **www.cdc.gov/std/program/spacemonkey**

References:

1. CDC. "Sexually Transmitted Disease Surveillance 2017." Available at https://www.cdc.gov/std/stats17/. Accessed 10-31-2018.
2. Owusu-Edusei K, Chesson HW, Gift TL, et al. "The Estimated Direct Medical Cost of Selected Sexually Transmitted Infections in the United States, 2008." Sexually Transmitted Diseases. 2013. 40(3):197-201. Available at https://www.ncbi.nlm.nih.gov/pubmed/23403600. Accessed 3-9-2018.
3. CDC. "Reported STDs in the United States, 2016." Available at https://www.cdc.gov/nchhstp/newsroom/docs/factsheets/std-trends-508.pdf. Accessed 3-9-2018.
4. Chesson HW, Ludovic JA, Berruti AA, et al. "Methods for Sexually Transmitted Disease Prevention Programs to Estimate the Health and Medical Cost Impact Changes in Their Budget." Sexually Transmitted Diseases. 2018. 45(1):2-7. Available at https://www.ncbi.nlm.nih.gov/pubmed/29240632. Accessed 3-9-2018.
5. CDC. Data estimated using "S.P.A.C.E. Monkey 1.0." Available at https://www.cdc.gov/std/program/spacemonkey/default.htm. Accessed 3-9-2018.

INVESTING IN STD PREVENTION

MAKING THE CASE FOR

[INSERT YOUR JURISDICTION]

Sexually transmitted diseases (STDs) in the United States are at a record high—and t
them is expensive.[1] Preventing infections could save much of the approxi
spent each year on direct medical costs for 8 major STDs.[2] ST
untreated, they have serious health conseque gnancy
complications, and even infant death.[3] t line of defense, but
dwindling bud bat rising STD rates.

Now is the ... se critical public health programs.

Version 4: low-ink, excludes DIS messages

STD PREVENTION IS EFFECTIVE

In the past 15 years CDC-funded programs prevented an estimated **6.1 MILLION** **cases of gonorrhea, syphilis, and chlamydia,** as well as 3,540 STD-attributable HIV infections — saving an estimated $2.8 billion in lifetime medical costs.[4, 5]

STD program funding has a direct impact on STD rates and medical spending in [insert your jurisdiction]

astho™
ASTHO.ORG/STD

National Coalition of STD Directors
NCSDDC.ORG

[YOUR LOGO HERE]
[YOUR URL]

An STD program budget [increase/decrease] of [insert dollar amount] would result in[5]:

1 year

Over the first year,
an estimated [increase/decrease] in cases of:

[#] syphilis

[#] gonorrhea

[#] chlamydia

[#] STD-attributable HIV

5 years

Over 5 years,
an estimated [increase/decrease] in cases of:

[#] syphilis

[#] gonorrhea

[#] chlamydia

[#] STD-attributable HIV

10 years

Over 10 years,
an estimated [increase/decrease] in cases of:

[#] syphilis

[#] gonorrhea

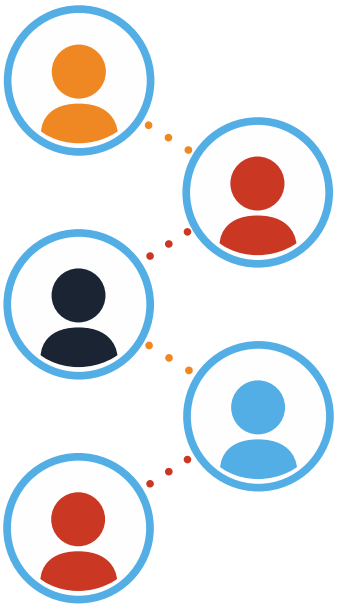
[#] chlamydia

[#] STD-attributable HIV

$

Over 10 years, the estimated cumulative direct medical costs in [insert your jurisdiction] would [increase/decrease] by

$[#].



Invest in STD prevention programs to protect [insert your jurisdiction] from the consequences of untreated STDs.

[Use this space to highlight particular prevention programs in your jurisdiction that require support.]

For more information:

Check out SPACE Monkey (STD Prevention Allocation Consequences Estimator), a tool created to help state and local STD programs to estimate the impact of changes in their budgets: **www.cdc.gov/std/program/spacemonkey**

References:

1. CDC. "Sexually Transmitted Disease Surveillance 2017." Available at https://www.cdc.gov/std/stats17/. Accessed 10-31-2018.
2. Owusu-Edusei K, Chesson HW, Gift TL, et al. "The Estimated Direct Medical Cost of Selected Sexually Transmitted Infections in the United States, 2008." Sexually Transmitted Diseases. 2013. 40(3):197-201. Available at https://www.ncbi.nlm.nih.gov/pubmed/23403600. Accessed 3-9-2018.
3. CDC. "Reported STDs in the United States, 2016." Available at https://www.cdc.gov/nchhstp/newsroom/docs/factsheets/std-trends-508.pdf. Accessed 3-9-2018.
4. Chesson HW, Ludovic JA, Berruti AA, et al. "Methods for Sexually Transmitted Disease Prevention Programs to Estimate the Health and Medical Cost Impact Changes in Their Budget." Sexually Transmitted Diseases. 2018. 45(1):2-7. Available at https://www.ncbi.nlm.nih.gov/pubmed/29240632. Accessed 3-9-2018.
5. CDC. Data estimated using "S.P.A.C.E. Monkey 1.0." Available at https://www.cdc.gov/std/program/spacemonkey/default.htm. Accessed 3-9-2018.