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Thursday, June 10, 2010

Dear Colleagues:

I am pleased to announce the publication of *Public Health Reports* July/August supplement which for the first time focuses on *Social Determinants of Health in the Prevention and Control of HIV/AIDS, Viral Hepatitis, Sexually Transmitted Infections and Tuberculosis*. This is a groundbreaking issue that exemplifies a public commitment to understand the influence of social determinants on health and to integrate these elements into our prevention work. By integrating a social-determinants-of-health (SDH) framework within the context of our focus diseases, we will be better able to address the overall health risks of those we serve and improve health outcomes.

This special supplement of *Public Health Reports* presents innovations, advances, and insights regarding the role of social determinants in the spread of our focus diseases. Research and commentary are presented on community and societal characteristics, such as the effects of incarceration and the differences in HIV transmission among foreign-born and native-born people; income and/or social status, including registered and non-registered female sex workers; stigma; and education; among other areas.

NCHHSTP Deputy Director Dr. Hazel Dean and I were invited as guest editors for this supplement, which also includes commentary and a viewpoint penned by former CDC Directors Drs. David Satcher and William Foege; and an article authored by Dr. Dean and the Division of HIV/AIDS Prevention staff members Anna Satcher Johnson, MPH, and Xiaohong Hu, MS. Links to key articles and other key information are available online at www.cdc.gov/socialdeterminants and an [NCHHSTP Leadership Blog](#) has been posted about this edition. The entire edition is available on the *Public Health Reports* web site at <http://www.publichealthreports.org>.

This edition of *Public Health Reports* underscores our steadfast commitment to accelerating the prevention and control of HIV/AIDS, viral hepatitis, STDs, and TB by addressing the social determinants of health. A new NCHHSTP white paper on SDH is slated to be released this fall. In addition, a forthcoming *Public Health Reports* Supplement in 2011 will cover social determinants of health and data systems. Both documents will help inform us on ways to work together to build a stronger foundation for promoting and achieving health equity.

Thank you for your continued commitment to the work of our Center to prevent of HIV/AIDS, viral hepatitis, STDs, and TB, your collaborative spirit, and your readiness to embrace more comprehensive, integrated efforts to prevent disease and improve health.

Sincerely,

Kevin A Fenton, MD, PhD, FFPH
Director
National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention

Thursday, June 17, 2010

Dear NCHHSTP Colleagues:

I am pleased to announce that the [HIV Surveillance Report, 2008, Vol. 20](#), was released this week. This year's report presents data for cases of HIV infection and AIDS reported to CDC from 42 areas (37 states and 5 U.S. Territories) through June 2009. Accompanying the 2008 report are two facts sheets, [HIV in the United States: An Overview](#) and [Summary of Changes to the National HIV Surveillance Report](#), which provide context for the content and explain changes in the report. We continue to build our HIV/AIDS prevention and control work using this document, as it provides critical information for program planning, addressing health disparities, promoting collaboration and integration, and achieving more equitable resource allocation.

As our ability to gather and report data continues to be enhanced, and advancements in technologies and therapies for treating this disease continue, we will gain ground to protect health and improve health outcomes from this still very serious and deadly epidemic. After almost 30 years since the first case of AIDS was reported, we know there is still much to be done.

I hope this report will be useful to you as we continue to work collaboratively to reduce the unacceptable burden of HIV/AIDS and its associated syndemics.

Thank you for your continued commitment to HIV/AIDS, viral hepatitis, STD, and TB prevention.

Sincerely,

Kevin A. Fenton, MD, PhD, FFPH

Director

National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention
Centers for Disease Control and Prevention

Friday, June 25, 2010

Below is a short summary of the June 1 health reform training by Sara Rosenbaum and Jeffrey Levi. Slides from the presentations are attached. Unfortunately, due to technical problems, the sessions were not recorded. They will repeat the training on July 12 for the Division of HIV/AIDS Prevention, which will be recorded and we will alert you to its availability later that week.

Changes made by Health Reform

- Aim to stabilize private health insurance market as principal means by which health care system is financed
- Ensures that system is accessible & affordable, has cost controls, ensures quality improvement across all payers, and increases national investment in prevention, wellness, primary care, and better management of chronic illness
- Potential opportunities for addressing STD prevention-related needs:
 - Medicaid will be expanded to include more people at risk for STDs – adolescents/young adults
 - Coverage of preventive services without cost-sharing (no co-pays), including evidence-based items or services rated A or B by USPSTF, ACIP and HRSA recommendations (effective 6 months following enactment)
 - Expansion of community health centers and National Health Service Corps, all serving low income; doubling of program by 2019

Public health provisions potentially important for STD prevention

- *National Prevention and Health Promotion Strategy* (due by March 23, 2011) Council will be chaired by Surgeon General; CDC will be one of multiple participating agencies. Strategy will provide the framework for prevention efforts.
- *Prevention and Public Health Fund* (PPHF) -- \$15 billion allocated over 10 years (\$500 million recently allocated for FY2010) including programs authorized by Public Health Service Act. Purpose of fund is for non-clinical prevention as a way to invest in modernizing the public health system and expand and sustain national investment in programs that promote health.
- *Community Transformation Grants* -- These grants support community-based prevention. This initiative will award competitive grants to state and local governmental agencies and community-based organizations to reduce chronic disease rates, address health disparities, and develop a stronger evidence-base of effective prevention programs.
- Enhancement of core capacity of local health departments, including creating a nexus between health information technology and surveillance.
- Build evidence base through authorization of Public Health Services and Systems Research (through CDC); USPSTF; the Community Guide; ACIP; and others.

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