

Communicable Disease Disparity Programs

Wisconsin Tuberculosis Program. The primary goal of the Wisconsin Tuberculosis (TB) Program is to assure identification and proper treatment of all individuals with tuberculosis to eliminate its subsequent spread to others.

From 2000 to 2006, 56% of Wisconsin's TB cases were in racial and ethnic minorities. Asian Americans accounted for 30% and African Americans 23% of the total number of cases, even though these populations make up less than 8% of Wisconsin's total population. In addition, 55% of persons with active TB disease were foreign-born individuals from countries where TB is endemic.

Nationally, tuberculosis disproportionately affects people of racial and ethnic minorities. In order to address the needs of these groups, the Wisconsin TB Program has developed the following services to ensure quality of care and completion of therapy for all individuals with latent tuberculosis infection and active tuberculosis disease:

- The Milwaukee City TB Control Clinic and 20 health departments in the state are certified tuberculosis medication dispensaries.

In 2006, 77% of the clients served by the Milwaukee TB Control Clinic were racial and ethnic minorities.

Dispensaries serve people with latent TB infection, suspected TB or confirmed TB who do not have insurance coverage or who are underinsured (i.e., have high deductibles and/or co-payments).

- Incentives and enablers are available for persons with tuberculosis and those at high risk for contracting active tuberculosis.

Through the American Lung Association, the Wisconsin Tuberculosis Program offers incentives and enablers such as bus tokens, rent, food, gas cards, etc. These items enable patients to continue their course of treatment with the material support they need.

- The Anti-Tuberculosis Medication Program provides TB medications for all individuals with active tuberculosis and latent TB infection. This medication is distributed to the patients by public health nurses who work with the patients to ensure they complete their full course of treatment.
- Wisconsin's TB-related Medicaid Benefit enables low-income individuals with TB infection or active TB disease to qualify for medical assistance.

Because of the correlation between foreign birth and tuberculosis disease, the Wisconsin TB Program established the Wisconsin Refugee Health Program in 2004.

Wisconsin Refugee Health Program. The primary goal of the Wisconsin Refugee Health Program is to ensure that all newly arrived refugees in Wisconsin receive a health screening within 90 days of their arrival to the United States.

In addition, the Refugee Health Program:

- Provides local screening providers with current, accurate cultural and health-related information on the new population(s) coming to their community.
- Advocates for cultural and linguistically appropriate care by distributing appropriate medical and cultural information on specific health concerns and refugee populations resettling in Wisconsin.
- Communicates with providers on the need to provide qualified medical interpreters for refugees and links them with resources for ensuring the provision of this service.
- Works with screening providers to ensure that refugees are connected to a medical home for their ongoing health care needs.

Since 2004, the Wisconsin Refugee Health Program has served 3,766 refugees from 26 countries.

Minority Health HIV/AIDS Initiatives. To address the disproportionate impact of HIV infection on communities of color in Wisconsin, the Wisconsin Minority Health Program, in collaboration with the Wisconsin AIDS/HIV Program, has focused resources on developing leadership and the organizational capacity of minority community-based organizations (CBOs) to provide HIV-related services. This has resulted in expanded funding and technical assistance to minority CBOs to develop and implement effective HIV prevention interventions.

Collaborative efforts promoting effective HIV prevention and treatment services in minority communities have resulted in:

- Intense HIV-related capacity building, training, and technical assistance provided to minority CBOs by the Black Health Coalition and United Migrant Opportunity Services.
- Increased representation and active participation of members of minority communities in HIV-related state and regional planning bodies, needs assessment activities, public hearings, leadership summits, and task forces.
- HIV prevention efforts tailored by and for hard-to-reach minority community members such as men of color who have sex with men.
- Development of a cadre of more than 18 minority CBOs providing culturally and linguistically appropriate HIV prevention and treatment services.

- Increased service provider recognition of culture as an important element in HIV prevention and treatment services.
- Active involvement of community-based stakeholders and faith communities in preventing further progression of the HIV epidemic in Wisconsin's minority communities.
- Expanded support for HIV psychosocial case management, nurse case management, and mental health and substance abuse services for HIV-positive clients from minority communities.

Continuing efforts will focus on enhancing the skills of minority CBOs in the areas of organization and infrastructure development; implementation and evaluation of effective interventions; community mobilization; and active participation of minority community members in HIV-related community planning and advisory bodies.

Wisconsin Sexually Transmitted Disease (STD) Program. The STD Program in the Division of Public Health supports prevention strategies to:

- Assure availability of field-delivered therapy and other field-delivered services for STDs by trained disease intervention specialists, particularly for those STDs that are frequently asymptomatic but associated with significant morbidity;
- Ensure greater access to free STD-related testing and treatment services in areas of high STD morbidity; and
- Provide and disseminate STD education on healthy choices.

Milwaukee Community Action Team. The Milwaukee STD Program, with input from the Milwaukee community, developed a mobile response team referred to as a Community Action Team to respond immediately to any indication of increasing STD morbidity. With the development of the Community Action Team and support from community-based organizations, the STD Program is able, in a timely manner, to locate, identify, examine, and treat individuals who may be infected with a sexually transmitted disease. STD education information is being distributed by the Community Action Team in five Milwaukee zip codes that accounted for 51% of Milwaukee early syphilis morbidity for calendar year 2002.

Milwaukee Alliance for Sexual Health (MASH). The Healthier Wisconsin Partnership Program (HWPP), part of the Blue Cross / Blue Shield endowment fund at the Medical College of Wisconsin, awarded the Wisconsin Department of Health and Family Services (DHFS) a \$50,000 strategic planning and community mobilization grant to address the disproportionate impact of STDs and unintended pregnancies on African American youth and young people in Milwaukee. Under this grant, the DHFS is partnering with the City of Milwaukee Health Department (MHD), Health Care Education and Training (HCET), and faculty at the Medical College of Wisconsin (MCW). The goal of the project is to develop specific recommendations

to decrease STDs and unplanned pregnancy in Milwaukee zip codes with the highest STD morbidity and teen pregnancy rates.

The first year, 12-month development grant from the MCW involved several key activities, including a demographic and epidemiologic assessment of STDs in Milwaukee's most highly affected zip codes, development of issue papers on best practices in clinical and service venues, and a community assessment of sexual health norms and behaviors. Findings from these efforts are guiding the development of the MASH strategic plan which will address key sexual health issues of African American adolescents residing in an 8-zip code area of Milwaukee.

The strategic plan was targeted for completion by July 2007, when first year funding expired. In March 2007, MASH was awarded a 12-month development grant (\$50,000) by the HWPP to fund Phase Two of the project. This second phase expands MASH to create an alliance that increases coordination of STD prevention and treatment efforts, serves as a forum for integration of STD and teen pregnancy prevention efforts, and enables broader stakeholder participation. Lead partners in phase two include the City of Milwaukee Health Department, New Concept Self Development Center, the Medical College of Wisconsin, and the Wisconsin Division of Public Health. Project partners will expand MASH by drawing from existing networks, community-based organizations and the school system, and through broader representation from the public and private sectors. MASH members will then begin to implement the strategic plan.

Syphilis Elimination Project. The Syphilis Elimination Project began in Milwaukee County in 1998 with a grant from the Centers for Disease Control and Prevention. The project involves a multi-faceted approach that includes increased surveillance, screening, and community awareness through focused media campaigns and education. During 1998-2000, five zip code areas of Milwaukee, whose residents are primarily Hispanic and African American, comprised the majority (approximately 80%) of the reported statewide syphilis morbidity. However, the number of cases of primary and secondary syphilis reported in Milwaukee decreased from 64 cases in 1998 to 43 cases in 2000. Also, early syphilis infections in Milwaukee's African American population for calendar year 2002 decreased compared to calendar year 2001.

Wisconsin Strategic Plan to Reduce Hepatitis-related Disparities

- Enforce Administrative Rule HFS 144, which requires hepatitis B vaccine for students in day care centers and grades K through 12.
- Provide follow-up to pregnant women with chronic hepatitis B virus infection and their infants to assure appropriate and timely preventive treatment with hepatitis B immune globulin and hepatitis B vaccine.
- Identify sources of vaccine for adult high-risk vaccination initiatives in public sector sites (e.g., sexually transmitted disease clinics, HIV counseling, referral and testing sites, local health departments, correctional health programs, family planning agencies, and community health centers) and develop procedures and provide training on integrating hepatitis vaccination into services offered by these sites.

- Increase the proportion of health care providers who identify high-risk patients and provide those patients with hepatitis A and B vaccine and hepatitis C testing.

Improve Vaccination Coverage. To reduce immunization-related disparities:

- Reduce misconceptions and dispel myths about receiving vaccines;
- Increase access to services;
- Increase the use of standing orders, chart reminders and the use of reminder/recall systems.

Racial/Ethnic and Adult Disparities in Immunization Initiative (READII). The Milwaukee READII (“ready”) project is a federally funded demonstration project focusing on reducing racial and ethnic disparities for influenza and pneumococcal vaccination among African American adults aged 65 and older. This project will employ multiple programs targeting providers and consumers. The City of Milwaukee Health Department along with a variety of minority community-based organizations have developed and will implement a community-based outreach and education plan to increase influenza and pneumococcal immunization coverage in the African American, Asian American, and Hispanic/Latino communities.