Wisconsin Integrated HIV Prevention & Care Plan 2022 - 2026

>>> Overview

The Wisconsin Integrated HIV Prevention and Care Plan is a living document covering the period of 2022-2026. It is focused on integrating and prioritizing prevention and care services for people in Wisconsin who are disproportionately impacted by or living with HIV. Here you will find an overview of the plan that outlines goals, objectives, and suggested activities.



Goal 1: Prevent new infections

- **Objective 1.1:** By the end of 2026, reduce the number of new HIV diagnoses by at least 50%.
- Objective 1.2: By the end of 2026, increase the percent of people living with HIV who know their status to at least 95%.
- **Objective 1.3:** By the end of 2026, increase PrEP coverage to at least 50% of all people who could benefit from the medication.

Strategy 1: Expand Comprehensive HIV, STI, and HCV Testing

- Increase outreach testing in bars, clubs, mobile units, and other non-clinical community gathering sites
- Develop new or implement existing effective, evidence-based or evidence-informed models for HIV testing that improve convenience and access, including:
 - Expanding availability of free at-home HIV and STI testing to all Wisconsin residents
 - ▶ Implementing a dual-rapid HIV testing algorithm at all publicly funded HIV testing site efficiency and linkage to care
- Increase the availability of comprehensive HIV, STI, and HCV testing in both clinical and non-clinical settings
 - Increase capacity of HIV testing providers to screen for HCV and STIs, including three-site extragenital testing for gonorrhea and chlamydia
 - Increase testing for STIs among people living with HIV
- Expand routine HIV testing following CDC recommendation that everyone aged 13-64 years get tested for HIV at least once as part of routine health care, and that people with special risk factors be tested annually
 - Expand routine testing in emergency rooms and urgent care settings
 - Increase awareness of the benefits of routine testing among primary care clinicians

Strategy 2: Raise awareness of HIV and dispel misinformation in the general public and communities most impacted by HIV

Activities

- Promote ongoing, age-appropriate, LGBTQ-inclusive, comprehensive sex education in schools and community-based settings for adolescents and young adults
- Create and disseminate community-appropriate awareness campaigns that promote HIV facts, proven HIV prevention methods like pre-exposure prophylaxis (PrEP), post-exposure prophylaxis (PEP), and HIV treatment (Undetectable = Untransmittable or U=U)
- Integrate HIV messaging into existing campaigns and other activities pertaining to STIs, HCV, behavioral/mental health, and drug user health
- Work with the Midwest AIDS Training and Education Center (MATEC) and other partners to educate
 and increase capacity of primary care clinicians to provide education, testing, counseling, and
 linkage to prevention and treatment for HIV and STIs

Strategy 3: Expand Disease Interventions

- ► Partner Services
- ► Data to Care
- Linkage to Care

- Expand and promote awareness of partner services in community-based settings and among healthcare providers in clinical settings
- Incorporate the use of HIV and STI Disease Intervention specialists in Data to Care response activities
- Incorporate Data to Care into Wisconsin's existing Linkage to Care model, including the use of peer navigators to perform Data to Care activities
- Develop and diversify the workforce of Partner Services providers and Disease Intervention specialists







Strategy 4: Expand and improve the implementation of proven HIV prevention interventions, including:

Pre-exposure prophylaxis (PrEP)

- Post-exposure prophylaxis (PEP)
- Treatment as Prevention (TasP, U=U)
- Condom Distribution
- Syringe Services and Harm Reduction Programs

- Expand awareness of PrEP among primary care clinicians, including proper billing and coding procedures to ensure that no patients are charged for clinical services, labs, or medication
- Increase implementation of alternative PrEP options, such as cabotegravir (long-acting injectable PrEP), "on-demand" PrEP dosing, and other options that are currently being researched and developed
- Expand availability and accessibility of PEP
- Support low- or no-barrier condom education and distribution in both clinical and non-clinical, community-based settings, including in schools and mobile units
- Expand evidence-based harm reduction services for people who use drugs, including syringe services programs (SSPs) and integrate them with HIV prevention services
- Increase awareness of the role that medication adherence and viral suppression plays in preventing the spread of HIV in both the general public and among medical providers



Goal 2: Improve HIV-related health outcomes of people with HIV

- Objective 2.1: By the end of 2026, increase the percentage of newly diagnosed people linked to HIV medical care within one month of their diagnosis to 95% and provide low-barrier access to HIV treatment.
- Objective 2.2: By the end of 2026, increase the percentage of people living with HIV in care to 85% by identifying, engaging, or re-engaging people who are not in care.
- Objective 2.3: Increase retention in care and adherence to HIV treatment in order to achieve and maintain long-term viral suppression of 90%.
- Objective 2.4: By the end of 2026, increase the capacity of the public health, health care delivery systems, and health care workforce to help increase retention in care to 75%.

Strategy 1: Promote Linkage to Care

Activities

- Increase capacity of Linkage To Care specialists across Wisconsin
- Develop and share Linkage To Care resources
- Connect Linkage To Care specialists with pharmacies and pharmacists across Wisconsin

Strategy 2: Expand capacity of Partner Services to promote linkage, retention, and re-engagement in medical care

- Facilitate cross-training opportunities for Partner Services providers
- Increase the number of Disease Intervention Specialists across Wisconsin
- Explore at-home testing engagement strategies for Partner Service providers

Strategy 3: Implement status-neutral approaches

Activities

- Increase access to substance use disorder and mental health treatment options
- Promote wellness and development opportunities for populations disproportionately impacted by HIV, including youth and people of Trans experience
- Explore creative ways to increase condom use

Strategy 4: Promote community-led and community-based initiatives

Activities

- Support and strengthen peer programs
- Explore community engagement strategies led by the Wisconsin Statewide HIV Action Planning Group (SAPG), an appointed advisory group that assists in the development, implementation and prioritization of HIV prevention and care services in Wisconsin
- Prioritize collaboration with community partners outside of HIV systems to provide holistic and comprehensive care

Strategy 5: Promote already available resources

Activities

- Increase social media presence
- Provide consumer-facing transparency and education about medication access
- Foster partnership and collaboration with other programs and staff within the Wisconsin Department of Health Services

Strategy 6: Develop and implement initiatives to identify PLWH who are out of care

- Advance and improve data sharing practices with partners
- Increase outreach capacity across Wisconsin
- Support routine opt-out HIV testing in emergency departments and urgent cares throughout
 Wisconsin

Strategy 7: Promote participation in the AIDS/HIV Drug Assistance Program (ADAP)

Activities

- Develop and implement an online portal
- Establish an ADAP Advisory Committee
- Improve ADAP webpages to include additional resources for people using ADAP

Strategy 8: Increase access to core and support services

Activities

- · Expand opportunities for telehealth
- Increase access to and awareness of housing resources
- · Address barriers to accessing care for older adults living with HIV

Strategy 9: Facilitate activities that reduce stigma

Activities

- Coordinate trainings for providers on the impacts of stigma
- Explore alternative methods of treatment and harm reduction strategies
- Promote the development of support groups of people living with HIV and those in their support systems

Strategy 10: Expand partnership and development between Counseling, Testing and Referral (CTR), Partner Services, and HIV Workforce

- Provide hybrid networking/collaboration opportunities
- Integrate HIV, STI, and Harm Reduction Units
- Explore mentorship programs and systems to support staff

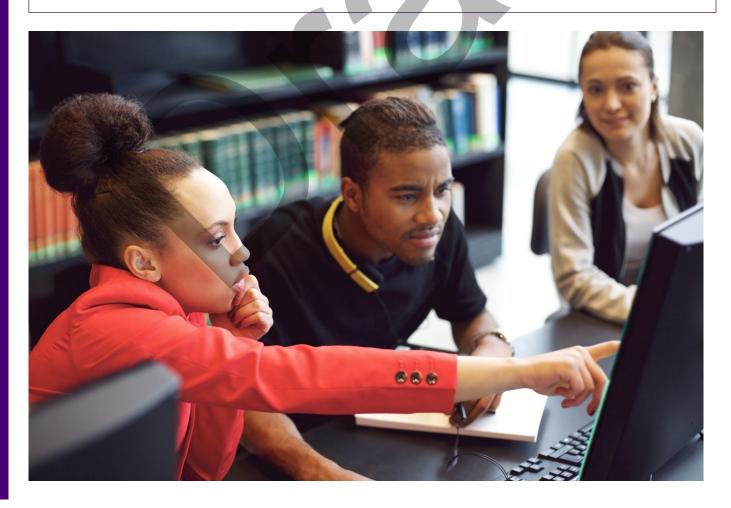
Strategy 11: Expand provider training opportunities

Activities

- Hold a statewide HIV, STI, Harm Reduction summit
- Organize a series of trainings for HIV providers on various topics that are outside of HIV
- Facilitate HIV-specific trainings and education for students in medical and/or health professional schools and non-HIV care providers

Strategy 12: Encourage trauma-informed approaches that retain and sustain the HIV workforce

- Explore innovative strategies to reduce burnout
- Create agency-specific plans to implement trauma-informed approaches
- Offer routine trainings on trauma-informed approaches, trauma-informed care, and harm reduction



Goal 3: Reduce HIV-related disparities and health inequities

- **Objective 3.1:** Reduce disparities in new HIV infections, in knowledge of status, and along the HIV care continuum.
- Objective 3.2: Address social and structural determinants of health and cooccurring conditions that impede access to HIV services and exacerbate HIV-related disparities

Strategy 1: Engage in stigma reduction practices

Activities

- Engage community members to reframe structures, policies and messaging related to HIV, HCV and STI services
- Ensure images and language used in communications show diverse and accurate depictions of communities that do not reinforce stereotypes and biases
- Expand the use of social media to promote stigma-reduction and reach communities most impacted by HIV, HCV, STIs and people who use drugs

Strategy 2: Promote cultural competency and cultural humility

Activities

Implement capacity building and training opportunities for all HIV, HCV, and STI service providers to
ensure that services are responsive to diverse cultural health beliefs and practices, preferred
languages, and health literacy of those being served

Strategy 3: Expand popular opinion leaders and peer programs

- Expand and support opinion leader and other peer models within communities disproportionately impacted by HIV
- Utilize community leaders and other models for paid peer engagement by people from communities
 most impacted to educate, support, advocate, and link people who have been mistreated by public
 health and health care systems to care

Strategy 4: Promote healthcare access for all

Activities

- Coordinate trainings for staff at community-based organizations to support testing and referral efforts
- Increase visibility and access to care throughout the state by using telemedicine, mobile healthcare, and at-home testing programs
- Collect, analyze, and publicly share data that show trends, needs, and outcomes of HIV, HCV, and STIs for communities that are disproportionately impacted

Strategy 5: Build community engagement

Activities

- Support and enhance collaborative efforts among community partners in addressing social determinants of health and factors that contribute to HIV-related disparities
- Meaningfully and consistently involve people living with HIV, HCV and/or STIs in local and statewide planning, decision-making and service delivery
- Collaborate and engage with faith-based organizations and initiatives to address disparities within communities of color

Strategy 6: Promote economic justice

Activities

- Create pathways to employment for people from communities most impacted by HIV, HCV and STIs, including but not limited to offering paid internships, reducing barriers like unnecessary educational requirements, and entry-level positions with clear opportunities for professional advancement
- Prioritize funding for programs that employ people with lived experience in the communities served, programs that demonstrate frontline staff are paid a living wage, and/or programs that have Black, Brown, Indigenous, and People of Color serving in meaningful leadership positions
- Examine state and local health jurisdiction hiring practices to promote equity and inclusion, to remove barriers such as advanced degree requirements, to offer extra pay to people who speak languages other than English, have lived experience with HIV, HCV, STIs, substance use, mental health challenges, and/or houselessness



The following populations should be prioritized in all programming and interventions:

- ▶ Black and Brown people of Trans experience or Gender Non-Conforming (GNC)
- People living in the Southeastern region of Wisconsin

Black women

Same-Gender Loving (SGL) Men of Color

Goal 4: Achieve integrated and coordinated efforts that address the HIV epidemic among all partners and interested parties

- Objective 4.1: Build upon the progress and momentum of the Wisconsin SAPG, ensuring the voices of lived experience guide system improvement through the elevation of diverse leadership and representation of communities that are disproportionately affected by HIV over the course of the next five years
- Objective 4.2: Improve coordination of HIV services through cross-public health sector collaboration, elevate the HIV workforce through professional development and capacity-building strategies, and increase partner accountability through data collection and analysis over the course of the next five years

Strategy 1: Promote community engagement and planning

Activities

- Continue momentum and engagement practices of the Wisconsin SAPG
- Coordinate and integrate SAPG-related planning with other public health planning processes
- Equip SAPG members with advocacy tools and communication channels that elevate the vision and mission within and outside of SAPG spaces

Strategy 2: Support community leadership and capacity building

- Recruit, retain, and support current and emerging leaders of disproportionately affected communities to apply for and serve as SAPG members, while simultaneously building public awareness of SAPG
- Participate in external partnerships to bolster the professional development of SAPG members and other community leaders

Strategy 3: Promote workforce development

Activities

- Recruit and retain front-line and management-level staff across the HIV prevention and care continuum that represent the communities they serve
- Train and mentor staff to excel in current roles and advance into leadership and decision-making roles
- Expand trauma-informed care learning collaboratives and trauma-informed supervision training across the HIV prevention care continuum

Strategy 4: Support program integration and coordination

Activities

- Ensure coordinated service delivery through macro-system program and policy improvement
- Foster public and private/non-profit/community partnerships across the HIV prevention and care continuum
- Streamline the HIV prevention and care community member experience through accessible and clear processes, language, and triages

Strategy 5: Engage in research

Activities

- Conduct frequent needs assessments to guide and update HIV prevention and care research priorities
- Expand cross-state collaboration in research designs and findings
- Maximize the system-change recommendations of research findings by integrating larger public health and social determinants of health data

Strategy 6: Ensure accountability

- Explore opportunities to implement a centralized data system
- Make program data accessible and individualized to influence positive change and quality assurance efforts
- Report-out the progress of goals, objectives, and strategies and activities of the Wisconsin HIV
 Integrated Plan, in conjunction with course corrective recommendations

