

Reproductive and Sexual Health

Reproductive and sexual health includes the factors that affect physical, emotional, mental, and social well-being related to reproduction and sexual health across the life span.¹ Unintended pregnancies, sexually transmitted diseases (STDs), and HIV result in significant health and economic consequences for individuals and society. A woman with an unintended pregnancy is less likely to seek early prenatal care and is more likely to expose the fetus to harmful substances, such as tobacco or alcohol. STDs and HIV may result in serious outcomes including cancers, infertility, ectopic pregnancy, miscarriages, stillbirth, low birth weight, neurologic damage, and death.

Unintended Pregnancies

According to the Wisconsin Pregnancy Risk Assessment Monitoring System (PRAMS), 38% of new mothers did not intend pregnancy.² Of those with an unintended pregnancy, 46% reported doing nothing to prevent pregnancy. In the 2009-2010 PRAMS, 78% of pregnancies among those under the age of 20 were unintended.³

Teen Births

Approximately five percent of all live births in Wisconsin in 2014 were to teen mothers (mother less than 20 years), or 3,414 live births. The teen rate, 18.1 births per 1,000 females age 15-19, was slightly below the national rate, 24.2 per 1,000 females. Teen birth rates have decreased among American Indian/Alaska Native, Asian, and white populations; the Black/African American and Hispanics/Latinos teen birth rates were unchanged from 2013.

Adolescents

In Wisconsin, just over one in three high school students has ever had sexual intercourse.^{4, 5} The national average is just under one in two. Among those who have had sexual intercourse in Wisconsin, approximately one in ten had sexual intercourse before age thirteen. Approximately one in four are currently sexually active; among those currently sexually active, 37.5% did not use a condom; 65.1% did not use a female form of birth control (birth control pill, a patch, implant, IUD, shot, etc.); 86% did not use both a condom and birth control; and 10.7% did not use any method to prevent pregnancy. Additionally, 13% of Wisconsin students report never being taught in school about AIDS or HIV.^{6,7}

Sexually Transmitted Infections in Wisconsin

The Wisconsin Department of Health Services works with local and tribal health departments to provide disease intervention consultation with patients, disease surveillance, monitoring of statistical trends, and implementation and maintenance of prevention programs. There are currently five reportable sexually transmitted diseases (STDs) in Wisconsin: Chlamydia, Gonorrhea, Syphilis, Chancroid, and Pelvic Inflammatory Disease. The Department of Health Services issues annual profile and surveillance reports with statewide, regional, and county-level data for both adults and youth (ages 15-19). The most frequently reported of all communicable diseases are Chlamydia and Gonorrhea. In 2014, Wisconsin ranked 28th nationally for rates of Chlamydia and 29th for Gonorrhea.⁸ In the same year, 84% of reported STDs were Chlamydia. Both chlamydia and gonorrhea are usually spread by genital sexual contact, but can also infect the throat, rectum and eyes. Babies can get both chlamydia and gonorrhea during birth if the mother has the infection.

What's Being Done

- ✓ Sexually Transmitted Disease Surveillance
- ✓ Wisconsin HIV/AIDS Strategy (WHAS)

What Can Be Done

- Continue to improve early identification of individuals with HIV/AIDS and linkage to care
- Continue to target resources to persons disproportionately affected by HIV

HIV/AIDS in Wisconsin

Wisconsin produces the HIV/AIDS Surveillance Annual Review, which highlights new diagnoses, prevalence, and deaths. According to the 2015 review, over the last several years the average number of new cases has remained relatively stable – approximately 250 new cases each year. Wisconsin has the 11th lowest diagnosis rate in the U.S. While 26 of 72 counties in Wisconsin had an HIV diagnosis in 2014, 58% of new diagnoses are in Milwaukee County. Between 25-30 percent of cases first diagnosed as HIV in Wisconsin during 2011-2014 had already progressed to AIDS by time of diagnosis; 4-8% diagnosed during 2011-2013 had progressed to AIDS within 12 months of HIV diagnosis. As of December 2014, 6,899 individuals reported with HIV or AIDS presumed to be alive and living in Wisconsin. The CDC estimates CDC estimates 14% of people living with HIV (PLHIV) are unaware of their status, which equates to an estimated 1,125 additional residents in Wisconsin living with HIV, but unaware of their HIV status.

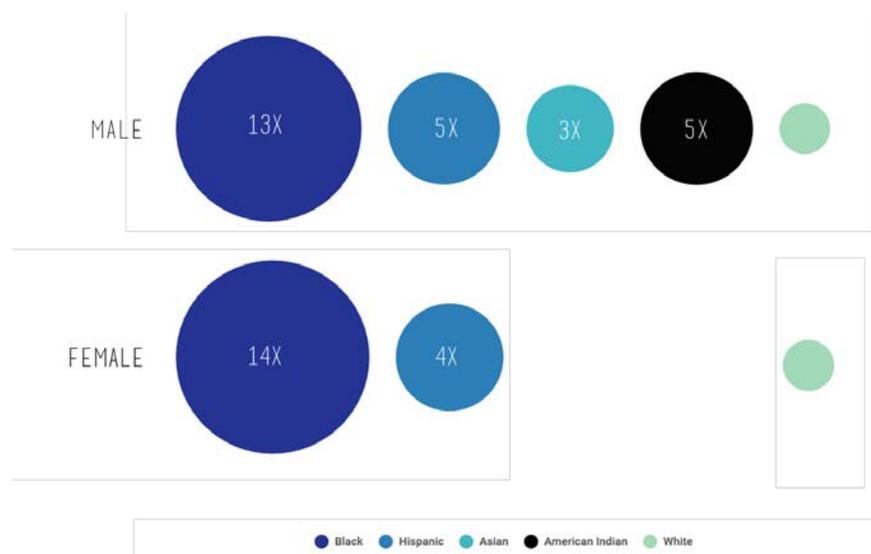
In 2015, sexual contact accounted for more than 95% of new diagnoses in Wisconsin, with the majority (83%) attributable to male-to-male contact. During 2015, the majority of individuals (62%) newly diagnosed with HIV infection were members of racial or ethnic minority groups, yet racial/ethnic minorities made up just 17% of the state’s population.

These racial/ethnic disparities are highlighted for males and females in the figure below. Racial/ethnic disparities in HIV are not due to innate biologic factors, nor increased risk behaviors. Rather, other determinants of health can disproportionately affect persons of color and put individuals at greater risk for HIV exposure.^{9,10}

Disparities in Wisconsin

There are significant disparities in reproductive and sexual health in Wisconsin. Milwaukee ranks second among large cities in the United States for rates of chlamydia and gonorrhea and sixth for the percent of births that are to teens. Rates of teen birth, STDs, and HIV are significantly higher in Milwaukee than in the rest of Wisconsin. Sexual minority youth have higher rates of sexual risk behaviors compared to sexual majority youth. In 2014 – 67 percent of new diagnoses of HIV were among racial/ethnic minorities (minorities are only 17 percent of WI population).¹¹ Males were five times more likely to be diagnosed than females. Male diagnosis rates were 16-fold higher for Blacks and 7-fold higher for Hispanics compared to whites. Female diagnosis rates were 34-fold higher among Blacks and 9-fold higher among Hispanics compared to whites.

HIV diagnosis rate by sex and race/ethnicity, Wisconsin, 2015



The size of the circle represents the size of the disparity, compared to Whites.

¹ *Healthiest Wisconsin 2020* Baseline and Health Disparities Report

² Wisconsin PRAMS – What Moms Tell Us. “Unintended Pregnancy” March 2013.

³ Wisconsin PRAMS – What Moms Tell Us. “Unintended Pregnancy” March 2013.

⁴ Centers for Disease Control and Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD and TB Prevention. Wisconsin – 2015 State Health Profile

⁵ CDC Youth Behavioral Risk Factor Survey 2013 Results

⁶ Centers for Disease Control and Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD and TB Prevention. Wisconsin – 2015 State Health Profile

⁷ CDC Youth Behavioral Risk Factor Survey 2013 Results

⁸ Wisconsin Sexually Transmitted Diseases (STDs) Case Surveillance Data, 2014.

<https://www.dhs.wisconsin.gov/std/2014datamap.htm>

⁹ Wisconsin AIDS/HIV Program (2016). Summary of the Wisconsin HIV/AIDS Surveillance Annual Review: New Diagnoses, Prevalent Cases, and Deaths Reported through December 31, 2015. Retrieved from <https://www.dhs.wisconsin.gov/aids-hiv/data.htm>

¹⁰ HIV Among African Americans, Centers for Disease Control and Prevention, <http://www.cdc.gov/hiv/group/raciaethnic/africanamericans>, accessed April 7, 2016.

¹¹ Wisconsin Department of Health Services, Wisconsin AIDS/HIV Program Notes April 2015