

WISCONSIN AIDS/HIV PROGRAM NOTES

May 2015

2013-2014 HIV Partner Services Outcomes in Wisconsin

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This article provides an update on the HIV Partner Services (PS) regionalization process and describes recent outcomes from the PS Program in Wisconsin. HIV PS support and assist persons who are recently diagnosed with HIV infection and their sexual and drug-injection partners. These services, provided by staff in local health departments, are voluntary and confidential, and include:

- HIV prevention education and counseling.
- Assistance with notifying sexual and drug-injection partners of their risk exposures.
- HIV testing of sexual and drug-injection partners.
- Assessment, referral, and service linkage for health and other related services.

The two primary objectives of PS are:

1. To provide counseling, testing, and access to treatment for partners who are unaware they are infected with HIV.
2. To provide testing and prevention counseling to HIV-negative partners who have been exposed to HIV, in an effort to reduce HIV-associated risk behaviors.

The Wisconsin Department of Health Services (DHS) AIDS/HIV Program [website](#) describes PS¹ in more detail and provides PS fact sheets and a list of PS providers.² A previous *Wisconsin AIDS/HIV Program Notes* [article](#), published in March 2012, provides a summary of earlier PS outcomes and innovations to the Program.³

Regionalization

Early in the HIV epidemic, nearly all Wisconsin county health departments provided PS. However, because some counties had relatively few cases of HIV, keeping PS providers' skills current was resource intensive. As a result, in 2008, the AIDS/HIV Program began implementing a regionalization initiative to reduce the number of local health departments (LHDs) that provide PS from 59. Currently, 19 LHDs provide regional HIV PS to cover the state's 72 counties.

Partner Services Outcomes

Summary data regarding PS outcomes for index cases and partners for the period 2013-2014 include the following:

¹ <https://www.dhs.wisconsin.gov/aids-hiv/ps.htm>

² <https://www.dhs.wisconsin.gov/aids-hiv/psprovidersnov2014.pdf>

³ <https://www.dhs.wisconsin.gov/publications/p0/p00792-12-march.pdf>

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Index cases (2013-2014)

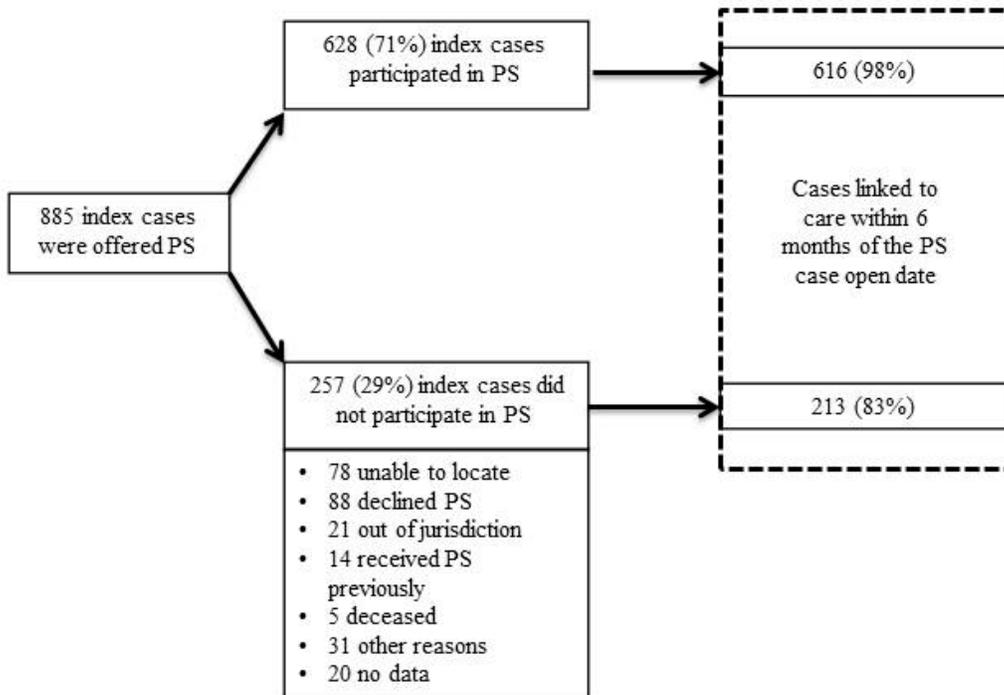
- Of 885 index cases assigned to PS, 628 (71%) had completed interviews.
- Of 628 completed interviews, 330 (53%) named one or more partners.
- 330 index cases named a total of 690 partners (average = 2.1 partners per index case).
- Of 628 cases that completed interviews, 616 (98%) were linked to medical care before or within six months of being contacted by the PS provider.
- Of the 257 cases that did not participate in PS, 213 (83%) were in care within six months of the case open date (care data found using HIV surveillance system).

Partners (2013-2014)

- Of 690 partners named, 476 (69%) were notified.
- Of the 476 partners notified, 307 (64%) were interviewed and 169 (36%) were previously identified as HIV-positive.
- Of 307 partners interviewed, 187 (61%) were tested.
- Of 187 partners tested, 15 (8% in 2013-2014, 6% in 2014, and 10% in 2014) were newly diagnosed with HIV.

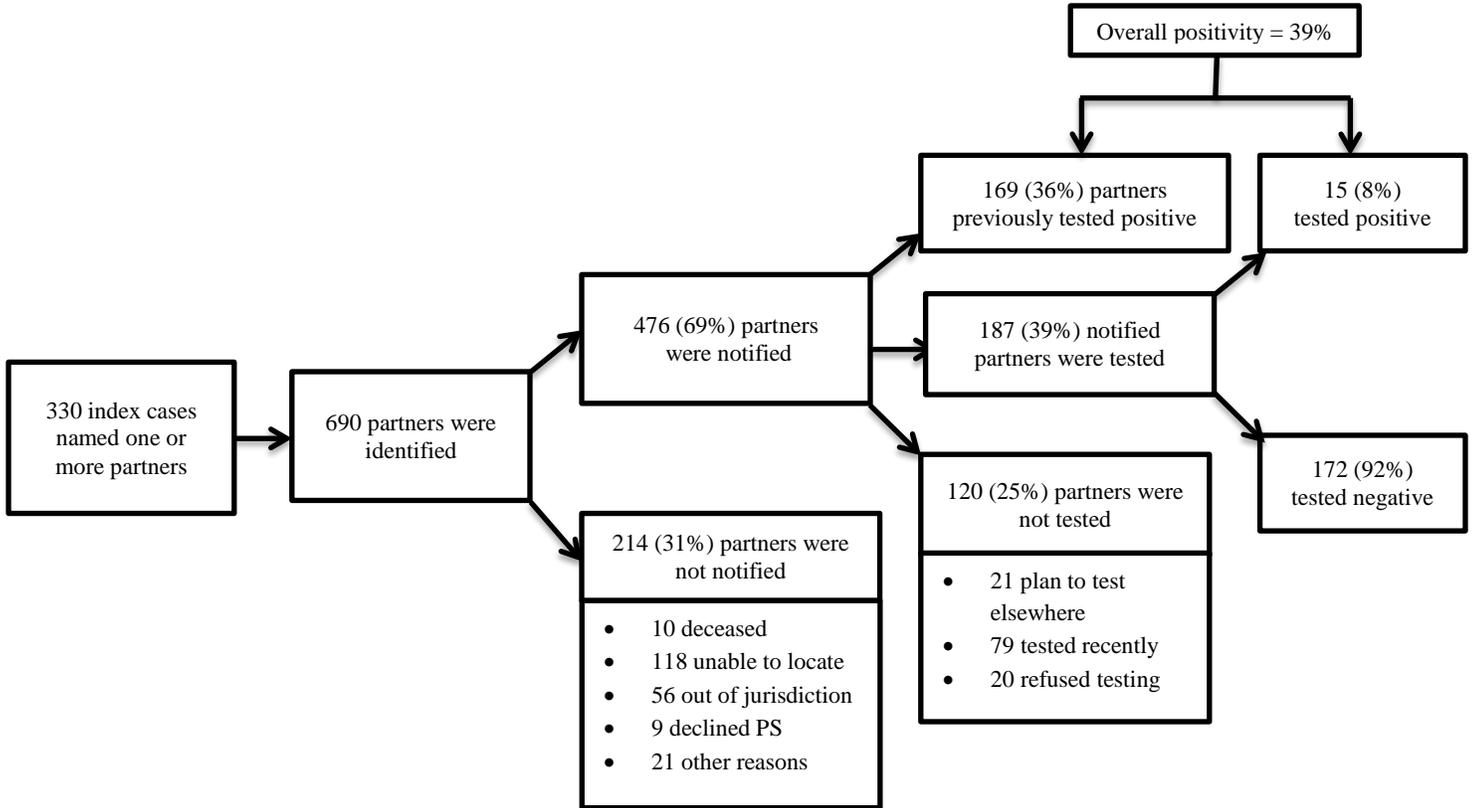
The following figures show additional detailed PS outcomes for HIV-positive index cases (Figure 1) and partners (Figure 2) for the period 2013-2014.

Figure 1: PS outcomes for HIV-positive index cases, Wisconsin, 2013-2014



Source: Wisconsin AIDS/HIV Program, Partner Services, PSWeb

Figure 2: PS outcomes for partners of HIV index cases, Wisconsin, 2013-2014



Source: Wisconsin AIDS/HIV Program, Partner Services, PSWeb

Improvements in PS from previous years

After review of 2012 PS data, Program staff stressed to PS providers the importance of interviewing both index cases and partners in person rather than by phone, where feasible, in order to increase the likelihood that index cases will name partners. Improvements in 2013-2014 outcomes compared to 2011-2012 include:

- A greater percentage of index case interviews occurred in person versus by telephone (69% in 2013-2014 versus 62% in 2011-2012; the difference is not statistically significant).
- A greater percentage of index cases named partners (53% in 2013-2014 versus 46% in 2011-2012; the difference is statistically significant).

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Current priorities for improving Partner Services

Current priorities for improving PS include:

- Expediting PS for those unaware of their HIV test results, those with acute infection, and those at high risk.
- Shortening the time between assignment and first contact with index cases.
- Ensuring linkage to care.

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