WISCONSIN AIDS/HIV PROGRAM NOTES

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Update on HIV Partner Services in Wisconsin

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Introduction

HIV Partner Services (PS) is an established, time-tested, cost effective and critically important public health intervention. In this issue of Program Notes, we provide a brief overview of HIV PS and highlight several initiatives the Wisconsin AIDS/HIV Program has undertaken in collaboration with local service providers to enhance the delivery of HIV PS.

What is PS?

While the name of HIV PS has evolved over many years, changing from "Partner Notification" to "Partner Counseling and Referral Services" to "Partner Services," the primary purpose and core services have not changed. HIV PS support and assist persons who are recently diagnosed with HIV infection and their sexual and drug-injection partners. PS are voluntary, confidential and provided by staff in local health departments. Services 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; and
- assessment, referral, and service linkage for health and other related services.

The two primary objectives for notification of sexual and drug-injection partners of HIV-infected persons are:

- 1. to provide counseling, testing, and treatment for partners who are unaware that they are infected with HIV, and
- 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.

For persons who have been engaged in sex or drug-injection use without knowing their partners' HIV status, notification of a possible HIV exposure can be a major behavior changing event. Individuals who are notified of their possible exposure are more likely to decide to undergo HIV testing and modify their sexual or drug-injection use behaviors. This change in risk behaviors can protect an individual from being infected or prevent transmission to others if an individual is already infected. This benefits not only individuals but also promotes the overall health of communities by reducing the spread of HIV.

- The anticipated positive outcomes of HIV PS include:
- positive behavior changes and reduced infectiousness;
- decreased HIV transmission; and
- reduced HIV incidence and improved public health

Because PS are provided to individuals and groups at highest risk -- individuals who are infected with HIV and their sexual and drug-injection partners -- PS activities are aligned with the three primary goals of the National HIV/AIDS Strategy, which are to:

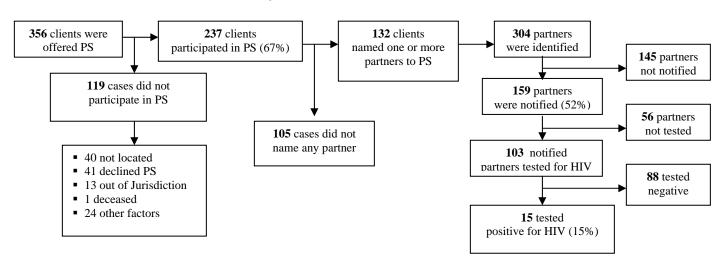
- reduce new infections,
- increase access to care and improve health outcomes for people living with HIV, and
- reduce HIV-related health disparities.

PS activities also strategically support HIV-related goals in other national and state level strategic health plans, including the *Healthy People 2020*, *Healthiest Wisconsin 2020*, and the *Wisconsin Comprehensive HIV Plan*.

Brief Overview of 2010 Wisconsin HIV PS Data

A total of 356 individuals reported with HIV infection to the Wisconsin AIDS/HIV Program in 2010 were offered HIV PS. Of these, 237 (67%) participated in PS. Because HIV PS are voluntary, individuals have the option of electing to participate and individuals may decline for a variety of reasons.

Of 237 individuals who participated in PS, 132 individuals named one or more partners. In 2010, 304 persons were identified as sexual or drug-injection partners of individuals who were reported with HIV infection. Of the 304 identified partners, 52% were notified of their possible exposure to HIV and were offered HIV prevention and counseling. The remainder were not notified because of a variety of factors, including the accuracy of locating and personal identifying information, changes in residence, lack of client response to requests from PS providers to initiate contact, and individual decision to decline services.



Summary of 2010 Wisconsin HIV PS Activities

Partners who reported not having undergone HIV testing or who previously tested negative were offered HIV testing. Of partners who were offered testing, 65% elected to have an HIV test. Of those tested, 15% tested HIV positive and were therefore considered newly identified cases of HIV infection. HIV PS is one of the most effective ways to identify new cases of HIV infection and to assist those newly diagnosed in accessing HIV-related health and other services.

Initiatives Enhancing HIV PS in Wisconsin

Regionalization

The Wisconsin AIDS/HIV Program and local health departments have successfully implemented regionalized HIV PS. When HIV PS was first initiated in Wisconsin in 1988 (then known as Partner Notification), PS was available in almost all counties through local health departments. The regionalization initiative was launched because HIV cases have not been evenly distributed throughout Wisconsin, resulting in some local health department staff not having opportunities to conduct HIV PS and maintain current HIV PS skills. In 2008, the Wisconsin AIDS/HIV Program collaborated with several local health departments in piloting multi-jurisdictional PS, where select local health departments assumed lead responsibility for providing regional HIV PS within their own and other county jurisdictions. Regionalized HIV PS services have now become the standard of care in Wisconsin. Currently, 26 local health departments assume responsibility for providing statewide coverage for PS. A listing of health departments providing PS in Wisconsin is located on the web (http://www.dhs.wisconsin.gov/aids-hiv/PDFdocuments/PSAgencyListing.pdf).

Internet Partner Services (IPS)

The Internet and new media have become efficient and effective ways to expand social networks beyond that of simply meeting friends and re-establishing contact with former acquaintances. For some, the Internet and new media are venues for easily contacting and connecting with new sex partners. Recognizing these developments in communication and social networking, the Wisconsin AIDS/HIV Program, in collaboration with local health departments, has implemented Internet Partner Services (IPS).

PS staff now routinely ask PS clients if they used the Internet or social media to communicate with their sex or drug-injection partners. In cases where the only contact information for locating a partner is through the use of the Internet or social media, PS staff forward this contact information to the contracted Internet Partner Services (IPS) provider at Public Health Madison and Dane County. The IPS provider follows a strict confidentiality protocol and contacts partners, through the Internet or other social media, in order to establish an appointment for a face-to-face interview. If it is not possible to obtain a physical address to forward to a PS provider where the partner resides, the IPS provider assumes responsibility for delivering PS and offering HIV testing to the partner during a face-to-face interview.

PS Web Database

In an effort to expedite the timely delivery of PS, the Wisconsin AIDS/HIV Program has implemented a confidential, secure, web-based data reporting and collection system to replace the former paperbased client record. This new data management system was developed collaboratively by the vendor Luther Consulting, LLC of Indianapolis, IN and the AIDS/HIV Program. Launched in 2010, *PS Web* allows the AIDS/HIV Program to promptly assign cases to local PS providers shortly after cases of HIV infection are reported. *PS Web* has increased the efficiency of service delivery and has enhanced the flow of communication between local service providers and the AIDS/HIV Program. The AIDS/HIV Program is continuing to collaborate closely with local health department staff in refining and enhancing *PS Web* to ensure that this management and service delivery tool best meets the needs of state and local staff in the delivery of efficient and effective PS.

PS as an Adjunct to Surveillance and Community HIV Interventions

In addition to providing direct services to individuals, an important part of PS is acquiring and analyzing epidemiologic data in order to identify patterns, networks, and trends associated with the transmission of HIV in local communities. This surveillance activity provides critical information that assists in delivering PS and developing community interventions that are tailored to individuals and populations at greatest risk.

In May 2009, PS staff noted an increase in HIV cases assigned to City of Appleton Health Department. In response, state, local health department, AIDS Resource Center of Wisconsin staff, and local community collaborated on an investigation in order to better understand the epidemiology of the outbreak and to assist in developing more effective prevention strategies to reduce HIV transmission.

Collaborative efforts between state and local public health and community organizations in the Fox Valley enabled a rapid investigative and community response directed at averting further transmission. The outbreak and investigation highlighted the need for:

- developing strategies to increase routine testing through social networks and venue-based testing;
- providing messages to continue informing testing site staff and educating the community about CDC's recommendations of annual testing for MSM;
- expanding prevention messages in universities and colleges by strengthening collaborations with student health care services and LGBT student organizations; and
- educating communities about the HIV prevention function that local health departments perform, particularly via HIV partner services.

Since the Fox Valley cluster investigations, local health department PS staff have played a central role in cluster investigations of HIV and hepatitis C virus infections in other areas of the state.

Summary

Over the past two decades, major advances have been made in the development of effective HIV prevention interventions and drug therapies. Despite progress, the HIV epidemic continues to grow, both nationally and in Wisconsin. The Centers for Disease Control and Prevention estimate that approximately 21% of persons infected with HIV are unaware of their infection. Almost 40% of persons infected are not diagnosed with HIV until they have already developed AIDS. PS serves a primary role in the prevention and control of HIV infection -- by identifying persons with previously undiagnosed infection and by providing critical and timely counseling, testing, prevention and service linkages. These critical services benefit the health needs of individuals and support the public health of communities. The Wisconsin AIDS/HIV Program is committed to the continuing development and quality improvement of HIV PS in Wisconsin.

For further information about HIV PS, contact Dhana Shrestha, PS Coordinator, at 608-267-5288 or email <u>dhana.shrestha@wi.gov</u>

National Resources

Centers for Disease Control and Prevention. Partner services FAQs for the public and consumers of partner services activities. Available from <u>http://www.cdc.gov/nchhstp/partners/faq-public.html</u>.

Centers for Disease Control and Prevention. Recommendations for partner services programs for HIV infection, syphilis, gonorrhea, and chlamydial infection. Morbidity and Mortality Weekly Report. Early Release 2008;57; October 30, 2008. Available from http://www.cdc.gov/nchhstp/partners/Recommendations.html.

Hogben M, McNally T, McPheeters M, Hutchinson A. The effectiveness of HIV partner counseling and referral services in increasing identification of HIV-positive individuals. A systematic review. American Journal of Preventive Medicine 2007; 32(supplement 2):S89-S100.

Task Force on Community Preventive Services. Recommendations to increase testing and identification of HIV-positive individuals through partner counseling and referral services. American Journal of Preventive Medicine 2007; 33(Supplement 2):S88.

