

WISCONSIN AIDS/HIV PROGRAM NOTES

July 2014

Update: Activities in Milwaukee that Address HIV Infection in Young Black Men Who Have Sex with Men

Mari Gasirowicz, MA, Epidemiologist, AIDS/HIV Program, Wisconsin Department of Health Services

In 2009, high and increasing rates of HIV infection were observed in young Black men who have sex with men (YBMSM) under age 30 in the City of Milwaukee. In response to these findings, the Wisconsin AIDS/HIV Program and City of Milwaukee Health Department invited the Centers for Disease Control and Prevention (CDC) to conduct an epidemiologic investigation.^{1,2}

Since the investigation, the Wisconsin Department of Health Services (DHS), local agencies, and federal and private funders have directed substantial HIV prevention and care resources to address the HIV epidemic among YBMSM in Milwaukee. This article reviews epidemiologic data and recent public health and community efforts responding to this epidemic.

Epidemiology of HIV in YBMSM in Milwaukee

HIV surveillance data for 2013 indicate that HIV infection in YBMSM in Wisconsin³ and Milwaukee County⁴ remains a critical public health issue, which is true nationally as well. YBMSM had the largest increase in new diagnoses, the largest decline in median age of diagnosis, and the highest HIV prevalence of any demographic group, both in the City of Milwaukee and statewide.

- New HIV diagnoses in Black MSM under age 30 in the City of Milwaukee quadrupled between 2004 and 2010, then declined modestly between 2010 and 2013.
- Half of Black MSM diagnosed in Wisconsin in 2013 had not reached their 24th birthday at time of diagnosis. The median age at diagnosis for Hispanic and White MSM was 33 and 37 years, respectively.
- Nearly one-in-three (32%) Black MSM ages 15-59 in Wisconsin is estimated to be HIV-positive, compared to 8% of Hispanic MSM and 3% of White MSM. Less than 1% of females and non-MSM males of all racial/ethnic groups are HIV-positive.
- Nine of the 18 transgender people diagnosed with HIV in the City of Milwaukee between 2004 and 2013 were Black and under age 30.

¹ Increase in newly diagnosed HIV infections among young Black men who have sex with men – Milwaukee County, Wisconsin, 1999-2008. Morbidity and Mortality Weekly Report (MMWR), February 4, 2011 / 60(04);99-102. <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6004a3.htm>

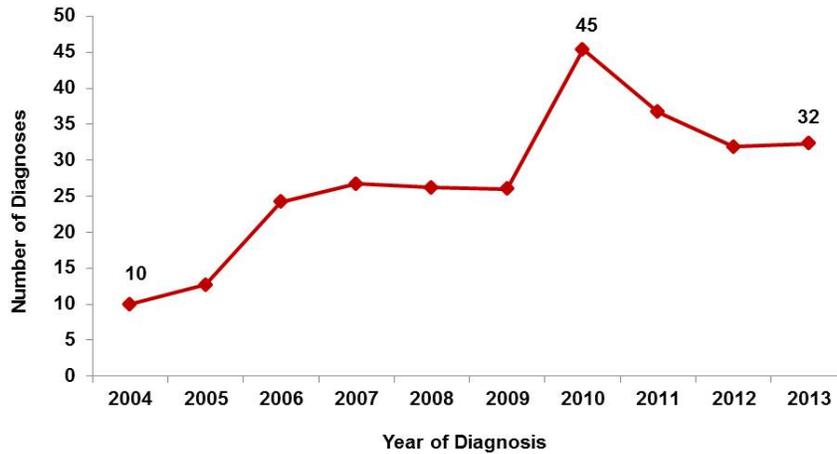
² Investigation of increased cases of HIV infection in young Black men who have sex with men in Milwaukee, Wisconsin AIDS/HIV Program Notes, April 2010. <http://www.dhs.wisconsin.gov/aids-hiv/ProgramNotes/April2010ProgramNotes.pdf>

³ Wisconsin Department of Health Services HIV/AIDS surveillance annual review: New diagnoses, prevalent cases, and deaths through December 31, 2013: Wisconsin. <http://www.dhs.wisconsin.gov/publications/P0/P00484.pdf>

⁴ Wisconsin Department of Health Services HIV/AIDS surveillance annual review: City of Milwaukee Addendum. <http://www.dhs.wisconsin.gov/aids-hiv/Stats/MilwaukeeReports/2013CityMKESurvSum.pdf>

July 2014

Figure 1: HIV diagnoses in Black men who have sex with men (MSM)* ages 15-29, City of Milwaukee, 2004-2013



*Data have been statistically adjusted to account for unknown risk. MSM includes those who have also injected drugs.

A cluster of HIV and syphilis cases in YBMSM in late 2011 and early 2012 indicated that risky behaviors and unfavorable conditions persist in this population. Staff from the City of Milwaukee Health Department and the DHS AIDS/HIV and STD Programs investigated a cluster of 59 newly diagnosed individuals in Milwaukee who had syphilis, HIV, or were co-infected with HIV and syphilis. Nearly all of those with demographic data available were YBMSM. The median age of diagnosis was 19 years for HIV cases and 20 years for syphilis cases.

Expanded interventions and funding following the 2009 epidemiologic investigations

Largely as a result of findings from the 2009 investigation, several agencies successfully competed for federal and private funds to address increasing rates of HIV and gaps in accessing HIV care among YBMSM. Summarized below are the federal, state, and privately funded interventions directed at reducing HIV infections in YBMSM as well as other young MSM in Wisconsin.

Interventions to reduce HIV infection in young MSM in Wisconsin, beginning in 2010	
Agency and funding	Description
<p>Wisconsin Department of Health Services, AIDS/HIV Program</p> <p><i>Funding:</i> Centers for Disease Control and Prevention (CDC) HIV Prevention, Category C \$514,000/year, 2012-15</p>	<p>Grantees:</p> <ul style="list-style-type: none"> Black Health Coalition: African American MSM peer intervention at Alliance School and community capacity-building. City of Milwaukee Health Department: Partner Services. Diverse & Resilient, Inc.: Coordination of HIV community engagement, statewide youth MSM capacity-building, <i>Imagine More</i> campaign, and a group for trans women. Pathfinders: Housing for homeless lesbian, gay, bisexual and transgender (LGBT) youth.
<p>Wisconsin Department of Health Services, AIDS/HIV Program</p> <p><i>Funding:</i></p>	<p>The AIDS/HIV Program funds the following agencies in Milwaukee to conduct the services listed below to reach young MSM:</p> <ul style="list-style-type: none"> AIDS Resource Center of Wisconsin: Condom distribution, marketing and outreach focused on MSM; and Counseling, Testing

July 2014

Interventions to reduce HIV infection in young MSM in Wisconsin, beginning in 2010	
Agency and funding	Description
Centers for Disease Control and Prevention (CDC) HIV Prevention, Category A \$1,236,500/year, 2013 statewide (about 55% of which is dedicated to Milwaukee)	and Referral (CTR), including Social Networks (SN) testing, Internet outreach to MSM. <ul style="list-style-type: none"> • Black Health Coalition: CTR-SN. • BeSTD Clinic: CTR. • Diverse and Resilient, Inc.: Intervention for transgender women of color. • City of Milwaukee Health Department: Partner services, targeted testing. • Pathfinders: Condom distribution. • STD Specialties: CTR. • Sixteenth Street Community Health Center: CTR-SN, intervention for Latina trans* women, prevention with positives. • UMOS: CTR-SN, condom distribution and outreach.
AIDS Resource Center of Wisconsin (ARCW) <i>Funding:</i> Substance Abuse and Mental Health Services Administration (SAMHSA) \$335,000/year, 2010-15	<i>MANY MEN, MANY VOICES (3MV):</i> HIV, STD and substance use prevention group-level intervention for African American MSM ages 13-29 who are HIV negative or whose HIV status is unknown. <i>Partner:</i> Black Health Coalition
Center for AIDS Intervention Research, Medical College of Wisconsin <i>Funding:</i> National Institute of Mental Health (NIMH) \$800,000/year 2010-15 divided among three sites (Milwaukee, Miami, and Cleveland)	<i>C3: CONNECTIONS CREATING CHANGE</i> Research study investigating the effectiveness of using social networks to increase safer sex norms and to decrease risky sexual behaviors for 18-29-year-old HIV-negative and HIV-positive African American MSM who are members of social networks and engaged in risky sexual behavior.
Diverse and Resilient, Inc.: <i>Funding:</i> Centers for Disease Control and Prevention (CDC) PS10-1003: \$308,000/yr., 2010-15 PS11-1013: \$315,000/yr., 2011-16	<i>BE ABLE (Many Men, Many Voices - 3MV):</i> Group-level intervention for HIV-negative African American gay and bisexual men, ages 21-35, to discuss issues in the community with the purpose of reducing HIV transmission. <i>Be Y.O.U. (mPOWERMENT):</i> Community-level intervention for young gay and bisexual men of various races, ages 14-21, to shape a healthy community for themselves, build positive social connections, and support their friends to have safer sex. <i>Partner:</i> Milwaukee LGBT Community Center's Project Q COUNSELING AND TESTING: MSM of color, ages 13 and over. <i>Partner:</i> Sixteenth Street Community Health Center PERSONALIZED COGNITIVE COUNSELING (PCC): An individual-level, single session counseling intervention for young MSM of color who are repeat testers for HIV. <i>Partner:</i> Sixteenth Street Community Health Center <i>It's About Us (COMMUNITY PROMISE):</i> Role model stories created based on interviews with young gay and bisexual men of color, ages 13-29, that have made positive behavior change. Trained peer advocates recruited from the target population distribute stories to social networks. <i>Partner:</i> Sixteenth Street Community Health Center

July 2014

Interventions to reduce HIV infection in young MSM in Wisconsin, beginning in 2010	
Agency and funding	Description
	<p><i>CRCS and CLEAR:</i> CRCS (Comprehensive Risk Counseling and Services) will be implemented with <i>CLEAR (Choosing Life: Empowerment! Action! Results!)</i>, a client-centered, individual-level intervention for HIV-positive MSM of color, ages 13-29 years, using cognitive behavioral techniques to change behavior.</p> <p><i>Partners:</i> ARCW and Sixteenth Street Community Health Center</p>
<p>Diverse and Resilient, Inc., and UW-Madison School of Journalism and Mass Communication</p> <p><i>Funding sources:</i> MAC AIDS Fund, Baldwin Fund</p>	<p><i>ACCEPTANCE JOURNEYS:</i> Social marketing campaign to reduce anti-gay stigma through billboards and story cards showing an ally's acceptance of his or her LGBT family member or friend. UW-Madison evaluates the campaign using a longitudinal design with comparison cities. An upcoming community readiness assessment currently underway will compare attitudes of heterosexual adults, primarily in communities of color, to those assessed in 2010.</p> <p>http://www.diverseandresilient.org/work/acceptance/acceptance-journeys/</p> <p><i>Partners:</i> Milwaukee Health Department, United Way of Greater Milwaukee, area nonprofits, corporations and churches</p> <p><i>IMAGINE MORE:</i> Social marketing campaign aimed at LGBT people to encourage them to expect greater acceptance from their family members, friends and coworkers.</p> <p>http://www.diverseandresilient.org/work/acceptance/imagine-more/</p>
<p>Wisconsin Department of Public Instruction</p> <p><i>Funding:</i> Centers for Disease Control and Prevention (CDC), \$3.5 million/year, 2011-2015</p>	<p><i>Safe and Supportive Schools:</i> Funding and training for 19 school districts in Wisconsin to reduce bullying and provide greater safety and support to all students, with a focus on lesbian, gay, bisexual and transgender youth. Grant ends in 2014.</p> <p>http://sspwi.wisconsin.gov/sspwi_safeschool</p> <p><i>School Based HIV/STD/Teen Pregnancy Prevention And Safe And Supportive Environments (Wellness Improves Learning for Youth- WILY)</i> Funding and training for 15 focus school districts, but can utilize training and resources for other school districts as well. Key areas include exemplary sexual health education (Human Growth and Development instruction), access to sexual health services, and creating safe and supportive environments for all students, with a special focus on sexual minority youth. Funding for five years, August 2014- July 2019).</p> <p><i>Partners:</i> Wisconsin school districts, GSAFE, Wisconsin Alliance for Women's Health, Diverse and Resilient, DHS HIV/AIDS and mental health programs, Department of Justice</p> <p>http://sspwi.wisconsin.gov/sspwi_aidshiv</p>
<p>Wisconsin Department of Health Services, AIDS/HIV Program</p> <p><i>Funding:</i> Health Resources Services Administration (HRSA)</p>	<p><i>LINKAGE TO CARE:</i> Linkage to care services for HIV-positive individuals who are not in care or are at risk of dropping out of care. Acute HIV testing for MSM and other high-risk individuals.</p> <p><i>Partners:</i></p> <ul style="list-style-type: none"> • AIDS Network

July 2014

Interventions to reduce HIV infection in young MSM in Wisconsin, beginning in 2010	
Agency and funding	Description
\$1,000,000/year, 2011-14 Funding source, allocation, and anticipated years of funding	<ul style="list-style-type: none"> • AIDS Resource Center of Wisconsin • City of Milwaukee Health Department • Outreach Community Health Center • Milwaukee Health Services • Public Health—Madison and Dane County • Sixteenth Street Community Health Center • UMOs • University of Wisconsin Comprehensive HIV Care Program • University of Wisconsin-Madison, Infectious Disease (evaluation) • Medical College of Wisconsin, Center for AIDS Intervention Research (evaluation)

Current and future efforts

In addition to the interventions and activities listed above, several concurrent activities are key in supporting HIV prevention and access to care for YBMSM and other MSM. These include:

- HIV testing.
- Large-scale condom distribution.
- Efforts to improve the climate for LGBT people.
- HIV pre-exposure prophylaxis (PrEP).
- The HIV care continuum.
- Other innovations.

HIV testing and identification of acute HIV infection

HIV testing is one of the most important activities in controlling the spread of HIV infection since an estimated 49% of transmissions were from people living with HIV unaware of their infection.⁵ HIV testing is also a critical first step in linking those infected with HIV to medical care. Because of new and emerging testing technologies, specifically 4th-generation tests, results are available sooner and HIV infection can be detected and treated earlier. This is especially important for YBMSM and other affected communities because early diagnosis and treatment of HIV infection can improve individual health outcomes and prevent the further transmission of HIV.

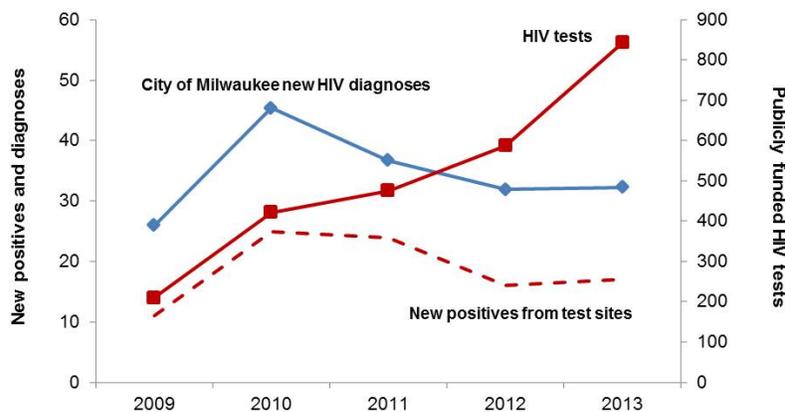
Approximately 8,000 HIV tests were conducted annually in publicly funded test sites in the City of Milwaukee between 2009 and 2013. At publicly funded HIV test sites, testing among YBMSM quadrupled from 200 tests in 2009 to 800 tests in 2013. This increase in testing is primarily the result of the expanded testing efforts by Diverse & Resilient, Inc., that were supported through CDC funding.

Despite this large increase in testing, diagnoses and new positives identified at publicly funded test sites declined between 2010 and 2013 (Figure 2). Since the number of HIV diagnoses is relatively small, caution should be used in interpreting these results. About half of new HIV diagnoses in YBMSM in the City of Milwaukee are identified at publicly funded test sites.

⁵ Hall HI, Holtgrave DR, and Maulsby C. HIV transmission rates from persons living with HIV who are aware and unaware of their infection. *AIDS* 2012;26(7):893-96.

July 2014

Figure 2. HIV tests and new positives from publicly funded counseling and testing sites, number of new HIV diagnoses, Black MSM under age 30, City of Milwaukee, 2009-2013



2009 tests and positives from test sites data are estimates.

Social Network Testing (SNT) is a strategy used to reach and test those at high risk for HIV. In this approach, recently diagnosed HIV-positive and high-risk negative individuals are invited by staff at HIV test sites to recruit “associates” – members of the recruiter’s sexual and social networks — to be tested. Both the recruiter and the associate receive an incentive if the associate is tested. SNT strategies generally yield higher positivity rates because the associates are members of networks of persons at high risk of HIV infection. SNT conducted at publicly funded sites in Wisconsin during 2008-2012 yielded a higher positivity rate (2.49%), compared to all testing at publicly funded test sites (0.91%, a statistically significant difference).⁶ In 2013, the AIDS/HIV Program continued providing guidance to SNT sites to improve program effectiveness and outcomes.

Approximately 50% of new HIV infections are transmitted from a person who is in the acute stage of infection, a time when a newly infected person is highly contagious and when the standard HIV antibody test may not detect the person’s infection.⁷ Identifying acute HIV infections can have a major impact on reducing the risk of HIV transmission. It enables a newly diagnosed person to begin early treatment and benefit from the likelihood of improved health outcomes.

Both laboratory-based and rapid testing are undergoing changes that will improve the detection of acute HIV infection. Some laboratory-based HIV tests are currently able to identify acute infection. Testing in outreach settings is usually performed using rapid tests that require further laboratory testing to confirm HIV-positive test results. The AIDS/HIV Program expects that, within the next year, newer rapid tests at publicly funded test sites will be able to detect acute infection. Individuals at high risk will continue to be encouraged to be tested frequently—at least twice a year.

⁶ Peng, M., et al. (2014), Comparative Effectiveness of Social Network Strategies Versus Standard Counseling, Testing, and Referral for HIV Screening in a Statewide Testing Program. (unpublished poster)

⁷ Brenner BG et al, High Rates of Forward Transmission Events after Acute/Early HIV-1 Infection, J Infect Dis. (2007) 195 (7): 951-959. doi:10.1086/512088.

July 2014

Condom distribution

Condoms are one of the cornerstones of HIV prevention. Consistent and correct condom use can reduce, though not totally eliminate, the risk of HIV transmission. Despite the demonstrated effectiveness of condoms, many YBMSM and other MSM elect not to use condoms for a variety of reasons. To better integrate promotion of condom use with other prevention strategies, the CDC has shifted its HIV prevention focus from primarily individual and group interventions to combining them with what are known as structural interventions, including large-scale availability and distribution of condoms.

The Wisconsin AIDS/HIV Program actively supports condom distribution. AIDS Network and the AIDS Resource Center of Wisconsin (ARCW) serve as regional hubs for distributing condoms to local agencies funded by the AIDS/HIV Program to serve populations at risk.

Diverse & Resilient, Inc., coordinates the City of Milwaukee's [414All](#) condom campaign, supported by the United Way, which makes free condoms available through 15 clinics and 11 community-based organizations.

Improving the social climate for LGBT people

The social determinants of health are increasingly recognized as critical factors that must be addressed in promoting the health of individuals and communities. This is particularly important for populations such as YBMSM and other affected communities that are experiencing health disparities and health inequities.

The Wisconsin Department of Public Instruction (DPI) and Diverse & Resilient, Inc., support multiple structural interventions to improve the social climate and support for LGBT youth and adults in Wisconsin. These interventions, listed in the funding table above, are directed at LGBT people and the broader population.

For sexual minority youth, particularly young MSM, reducing stigma and increasing a sense of connection to school can be life-saving. The Safe and Supportive Schools project in Wisconsin conducted an assessment of physical and emotional safety of the school environment. DPI selected a small number of schools with low scores to assess school community members' readiness to address safety, including bullying and anti-LGBT climate. DPI provided results of the assessment and guidance to the schools to enable the administration to conduct appropriate actions to improve school safety and climate.

Pre-exposure prophylaxis (PrEP)

For YBMSM and others at high risk of HIV infection, pre-exposure prophylaxis, or PrEP, is a way for people who do not have HIV but who are at substantial risk to prevent HIV infection by taking a pill every day. The pill (brand name Truvada) contains two medicines (tenofovir and emtricitabine) that are used in combination with other medicines to treat HIV. When someone is exposed to HIV through sex or injection drug use, these medicines can work to keep the virus from establishing a permanent infection.

When taken consistently, PrEP has been shown to reduce the risk of HIV infection in people who are at high risk by up to 92%. PrEP is much less effective if it is not taken consistently. PrEP is a powerful HIV prevention tool and can be combined with condoms and other prevention methods to provide even greater protection than when used alone. But people who use PrEP must commit

July 2014

to taking the drug every day and seeing their health care provider for follow-up every three months.⁸

PrEP has been prescribed in Wisconsin on a limited basis. In the coming months, the Wisconsin AIDS/HIV Program and medical providers and researchers will explore the feasibility of expanding the use of PrEP in Wisconsin among people at substantial risk for HIV, including YBMSM in Milwaukee.

Social media

HIV prevention and care service providers are increasingly using social media to reach target populations. [Monroe, Inc.](#), a new Milwaukee-based organization created and led by LGBT young people of color, uses a collaborative framework to improve the quality of life for LGBT youth of color and their families. Primarily by using Facebook and other social media, Monroe, Inc., has expanded its HIV prevention efforts including launching the “Know More HIV”⁹ prevention and testing campaign in 2013.

The AIDS Resource Center of Wisconsin utilizes social media in its [IMSexEd](#) outreach efforts by using the Internet to reach gay and bisexual men with important information on HIV prevention. Prevention specialists engage in discussion with chat room participants on popular social network websites frequented by YBMSM and other MSM. Prevention specialists answer HIV questions from chat room participants and engage them in dialogue on HIV risk reduction, HIV testing, and the importance of knowing one’s HIV status.

Conclusion

Community, government, and private partners have provided extensive efforts and funding to address high rates of HIV in YBMSM in Wisconsin. As social norms in the LGBT and broader communities change, and as HIV testing technologies, medical interventions, and social media evolve, it is important for the HIV community to implement HIV prevention and care services that are personally and culturally relevant to YBMSM and other populations at risk for HIV infection.



Wisconsin
Department of Health Services

⁸ <http://www.cdc.gov/hiv/prevention/research/prep/>

⁹ <http://www.facebook.com/media/set/?set=a.673521272659520.1073741829.145158728829113&type=3>