Wisconsin Integrated HIV Prevention and Care Plan 2017-2021

The Wisconsin Department of Health Services (DHS) has released the Wisconsin Integrated HIV Prevention and Care Plan 2017-2021. This important five-year strategic plan describes how program activities and resources coordinated by the Wisconsin AIDS/HIV Program and others are allocated to the populations and geographic areas of Wisconsin bearing the greatest burden of HIV disease. The Integrated HIV Plan meets the federal funding requirements of the Centers for Disease Control and Prevention (CDC) and the Health Resources and Services Administration (HRSA).

The development of the Integrated HIV Plan was a collaborative effort of the Wisconsin AIDS/HIV Program, the Statewide Action Planning Group (Wisconsin’s HIV community planning body), consumers and affected community members, key partners, HIV services providers, and a variety of other stakeholders.

The Integrated Plan identifies the objectives, strategies, and actions that are directed at achieving the major 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.
- Reduce HIV-related disparities and health inequities.
- Achieve a more coordinated response to the HIV epidemic.

The Integrated HIV Plan is a forward-looking document that envisions an end to the HIV epidemic by committing resources and taking bold action. The Integrated HIV Plan calls on stakeholders and affected community members across Wisconsin to commit and jointly engage in putting the Integrated HIV Plan into action.

Intensified Efforts in Key Areas

The Integrated HIV Plan calls for intensified efforts in 10 key areas:

1. HIV resources targeted to the right people, in the right places, and with the right action.

Resources will be directed at:

- Addressing disparities and inequities in new HIV infections and HIV outcomes.
- Timely diagnosis of HIV.
- Prompt engagement, re-engagement, and retention of persons living with HIV (PLWH) in medical care.
- Targeting HIV prevention resources to people and areas with the greatest burden of disease.
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- Inclusive engagement and active involvement of community members in decision making and development of public policy.
- Continuing development of a committed and competent workforce.
- Focusing leadership development and capacity building in communities most affected by HIV.

2. Scaled up access to pre-exposure prophylaxis (PrEP).
There is a need to scale up access to PrEP and related support services by increasing the number of service providers who can offer people who are at very high risk of HIV infection the option of taking a daily medication that can reduce the risk of HIV infection by over 90%.

3. Integrated testing, prevention, and treatment services for sexually transmitted infections (STI), viral hepatitis, and HIV.
There is a need for HIV, sexually transmitted infections, and viral hepatitis testing and related services to be integrated, seamless, and tailored to each person’s risks and their prevention and treatment needs. Routine HIV testing needs to be expanded within community clinics and emergency departments.

4. Health promotion of gay and bisexual men.
Gay and bisexual men of all races continue to be the group most severely affected by HIV. There is a need for community-based comprehensive health services (not only HIV-related services) that are culturally and linguistically appropriate for gay and bisexual men, that promote positive sexual health, that focus on screening and preventing the disproportionate health issues faced by gay and bisexual men, and that promote general physical and mental well-being.

5. Promote harm reduction and other health services for persons who inject drugs (PWID).
PWID continue to be at increased risk for HIV and other infections, as well as being at risk of death due to accidental overdose. There is a need for a wide range of drug user health and harm reduction services that increase an individual’s engagement with health services and reduces secondary negative health impacts (transmission of HIV and other communicable diseases) in the community.

6. Develop comprehensive HIV/STI/HCV partner services.
HIV partner services assist persons with HIV infection in notifying their sexual and/or needle-sharing partners of the partner’s possible exposure to HIV. HIV partner services can be strengthened by reconfiguring it to provide comprehensive and expanded partner services in the areas of HIV, sexually transmitted infections, and hepatitis C infection, and through a statewide network of full-time, dedicated staff.

7. Enhance HIV prevention and client health outcomes by supporting comprehensive, patient-centered care that addresses patients’ basic needs, such as housing.
Prompt and continuing engagement in health care is critically important for PLWH but the lack of food, shelter, and having emotional support competes with the priorities for health and self-care. There is a need for intensified efforts to increase access to resources that assist PLWH in meeting their basic human needs and independence.
8. **Ensure access to high-quality health care by educating communities about their health insurance options and assisting underserved populations in enrolling in health care coverage.** Although there are new options for health insurance under the Affordable Care Act and expanded access to Medicaid, many individuals remain uninsured or underinsured. Access to high-quality health care is important for everyone but is especially important for persons needing medical treatment. Continuing outreach efforts are needed to keep people aware and better informed about health care coverage options. Underserved populations need special assistance in understanding and enrolling in health care coverage programs.

9. **Increase use and integration of data to improve HIV health outcomes.** The use of data is critical in monitoring population health and improving health outcomes. Multiple data systems and data resources are needed to conduct surveillance, program planning and evaluation, quality improvement, clinical management, and research. There is a need to integrate these data systems in ways that make them compatible, interchangeable, and useful to enhance the quality of clinical care, public health, and overall decision making.

10. **Promote policies and practices that reduce discrimination.** Discrimination experienced by people living with HIV, LGBT (lesbian, gay, bisexual and transgender) communities, and people of color become barriers to effective HIV prevention, care, and support services. There is a need for state and local government, service providers, policy makers, and community leaders to actively support policies and practices that eliminate all forms of discrimination. Prevention, care, and support services need to be client-centered, culturally responsive, and linguistically appropriate for everyone. These services must address the unique needs of marginalized and disenfranchised populations.

**Core Content of the Integrated HIV Plan**

The *Integrated HIV Plan* is a comprehensive planning document that addresses the federal requirements and provides detailed, in-depth analyses in the following areas:

**Section I: Statewide Coordinated Statement of Need/Needs Assessment**
   A. Epidemiologic Overview
   B. HIV Care Continuum
   C. Financial and Human Resources Inventory
   D. Assessing Needs, Gaps, and Barriers
   E. Data Access, Sources, and Systems

**Section II: Integrated HIV Prevention and Care Plan**
   A. Integrated HIV Prevention and Care Plan
      Goal 1: Reduce New Infections
      Goal 2: Increase Access to Care and Improve Health Outcomes for People Living with HIV
      Goal 3: Reduce HIV-Related Disparities and Health Inequities
      Goal 4: Achieve a More Coordinated Response to the HIV Epidemic
   B. Collaborations, Partnerships, and Stakeholder Involvement
   C. People Living with HIV and Community Engagement

**Section III: Monitoring and Improvement**
Summary
The Integrated HIV Plan details the principles, priorities, and actions to guide Wisconsin’s response to the HIV epidemic for the next five years. It identifies priorities and strategic action steps tied to measurable outcomes for moving Wisconsin forward in addressing the HIV epidemic, consistent with the goals and priorities of the National HIV/AIDS Strategy.

The Integrated HIV Plan is an important resource for consumers, policy makers, state and local planning groups, public and private service providers, researchers, and others who are involved in:
- Identifying HIV-related prevention and care priorities and needs.
- Implementing HIV-related clinical and support services.
- Developing public policy.
- Evaluating the health outcomes of PLWH and those at risk for HIV.

The Integrated HIV Plan is a living document that will be updated to address priorities and needs that emerge in the coming years. The AIDS/HIV Program will soon be releasing additional resource materials that provide an overview of the Integrated HIV Plan in a variety of formats, including infographics and slides.