

# WISCONSIN AIDS/HIV PROGRAM NOTES

---

September 2016

## Wisconsin Minority Health HIV Partnership Initiative

*Hester Simons, MPH, HIV Minority Health Partnership Grant Coordinator, AIDS/HIV Program, Wisconsin Division of Public Health*

In 2015, the Wisconsin Division of Public Health received a five-year, \$1 million grant to fund the Wisconsin Minority Health HIV Partnership Initiative. The initiative, a partnership between the Wisconsin AIDS/HIV Program and the Wisconsin Minority Health Program, is funded by the federal Office of Minority Health through its *State Partnership Initiative to Address Health Disparities*. The Minority Health HIV Partnership Initiative is focused on the Healthy People 2020 Leading Health Indicator: *Knowledge of serostatus among HIV-positive persons* (HIV-13). The initiative aims to reduce the disparity in HIV/AIDS cases among Black, Latino, and American Indian communities in Milwaukee by increasing knowledge of serostatus among HIV-positive persons in these communities.

### Overview of the Wisconsin Minority Health HIV Partnership Initiative

The initiative has three objectives to reach its goal of reducing HIV disparities among Black, Latino, and American Indian populations in Milwaukee.

**Objective 1:** Increase the number of currently HIV-positive Black, Latino, and American Indian individuals who are aware of their HIV status and/or are actively participating in adequate medical care.

**Objective 2:** Increase the number of people among target populations (Black, Latino, and Native American) reached through awareness events around HIV and related topics during the project period.

**Objective 3:** Increase the availability of culturally and linguistically appropriate services (CLAS) for minority populations at risk for HIV, provided by local clinical, community health, and support organizations during the project period.

### Epidemiology of HIV in Black, Latino, and American Indian Communities

A brief overview of HIV among Black and Latino individuals in Milwaukee is presented below as well as epidemiologic data on HIV among American Indians in Wisconsin. Data on American Indians are provided at the state level given the small number of HIV cases in this population. Data are drawn from disparities profiles, created for the initiative, using data from 2014. The links listed at the end of this document provide additional information on HIV in Wisconsin.

*HIV in Black Men and Women in the City of Milwaukee*<sup>1</sup>

- Four in 10 Milwaukee city residents are Black.
- Six in 10 recent HIV diagnoses were among Black men and women in Milwaukee.

---

<sup>1</sup> <https://www.dhs.wisconsin.gov/publications/p01207.pdf>

September 2016

- The HIV diagnosis rate was more than three times higher in Blacks than in Whites in Milwaukee.
- Nine in 10 new HIV diagnoses among Black men were attributed to male-to-male sexual contact.
- Four in 10 Black men who have sex with men (MSM) living in Milwaukee were living with HIV.

*HIV in Hispanic/Latino Men and Women in the City of Milwaukee<sup>2</sup>*

- Some 17% of Milwaukee city residents are Hispanic.
- In two of Milwaukee's 28 zip codes, more than six in 10 residents are Hispanic.
- The HIV diagnosis rate was more than two times higher in Hispanics than in Whites in Milwaukee.
- Eight in 10 new HIV diagnoses among Hispanic men were attributed to male-to-male sexual contact.
- One in 7 Hispanic MSM living in Milwaukee were living with HIV.

*HIV in American Indians in Wisconsin<sup>3</sup>*

- Wisconsin counties with the largest American Indian populations include: Milwaukee (16% of the total American Indian population); Brown (12%); Shawano, Menominee, and Outagamie (5% each); Sawyer, Dane, and Vilas (4% each); and Ashland (3%).
- Seventy American Indians were diagnosed with HIV in Wisconsin during 1985-2014.
- Male-to-male sexual contact accounted for more than half (55%) of HIV diagnoses in males.
- Injection drug use exposure accounted for 38% of diagnoses in females and 18% of diagnoses in males, higher percentages than in other racial/ethnic groups.
- An estimated 50 American Indians are living with HIV in Wisconsin, including about 10 who are unaware of their HIV status.

***Disparities Profiles***

As part of the initiative, the AIDS/HIV Program created five disparities profiles for specific populations affected by HIV/AIDS.<sup>4</sup> The profiles include more detailed epidemiologic data for the initiative's three focus populations. There are also profiles on *HIV in Females in Wisconsin*<sup>5</sup> and *HIV in Youth Ages 13-24 in Wisconsin*.<sup>6</sup>

**Implementation in Year 1: August 2015–July 2016**

***Objective 1: Testing Activities***

Over the past year, the initiative funded Pathfinders Milwaukee, Inc., a nonprofit organization serving at-risk youth in Milwaukee, to establish a partnership with the

---

<sup>2</sup> <https://www.dhs.wisconsin.gov/publications/p01207a.pdf>; In Spanish: <https://www.dhs.wisconsin.gov/publications/p01207as.pdf>

<sup>3</sup> <https://www.dhs.wisconsin.gov/publications/p01205d.pdf>

<sup>4</sup> <https://www.dhs.wisconsin.gov/aids-hiv/data.htm>

<sup>5</sup> <https://www.dhs.wisconsin.gov/publications/p01207b.pdf>

<sup>6</sup> <https://www.dhs.wisconsin.gov/publications/p01207c.pdf>

**September 2016**

Greater Milwaukee Center for Health and Wellness, Inc. (GMC), a Milwaukee clinic providing primary care medical services as well as HIV specialty care and transgender health services. Through this partnership, clients at Pathfinders are referred to GMC for testing for HIV and sexually transmitted infections (STI), HIV pre-exposure prophylaxis (PrEP), primary care, and health-related social services care coordination. GMC, in turn, refers patients who would be appropriate for social services case management to Pathfinders.

**Objective 2: Awareness Activities**

In its first year, the initiative partnered with six agencies in Milwaukee to sponsor HIV awareness events. The objectives of these events were to raise awareness of HIV in the general population, disseminate information about HIV, and provide community venues for HIV testing. The table below lists the awareness events held in the first year of the grant. Through these events, 177 people were tested for HIV, 96 for chlamydia, and 93 for gonorrhea. Interagency collaboration contributed to the success of the events with an average of six partners participating in each event and a total of 20 agencies involved overall.

<b>Month</b>	<b>Event</b>	<b>Lead Agency</b>
<b>February</b>	National Black HIV/AIDS Awareness Day	UMOS
<b>March</b>	National Women and Girls HIV/AIDS Awareness Day	Primary Care Support Network, MCW
<b>March</b>	Winter Pow Wow	Gerald L. Ignace Indian Health Center
<b>April</b>	National Youth HIV/AIDS Awareness Day	Pathfinders Milwaukee, Inc.
<b>May</b>	May Day Health Fair	Sixteenth Street Community Health Center
<b>June</b>	“The State of HIV Prevention in Milwaukee” Town Hall Meeting National HIV Testing Day	Greater Milwaukee Center for Health and Wellness, Inc.

During the first year, the initiative also funded the *Know More HIV Campaign 2.0*, a social marketing campaign providing HIV prevention messaging for young Black men who have sex with men. This is the second round of the campaign created by Monroe, Inc., with support from Diverse & Resilient. The campaign features a Facebook page<sup>7</sup> and model cards with photos and quotes from community members to spread the word about HIV.



Brought to you by: Monroe Inc.

**Objective 3: CLAS Activities**

The *National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care* are a set of 15 standards to guide health and health care providers in advancing health equity, improving quality of services, and helping to eliminate health care disparities.<sup>8</sup> As a means of increasing the provision of CLAS in HIV services in Milwaukee, the initiative will focus on implementing the three CLAS standards focused on governance, leadership, and workforce:

<sup>7</sup> <https://www.facebook.com/nomoreHIV?fref=ts>

<sup>8</sup> <https://www.thinkculturalhealth.hhs.gov/content/clas.asp>

September 2016

- Advance and sustain organizational governance and leadership that promotes CLAS and health equity through policy, practices, and allocated resources.
- Recruit, promote, and support a culturally and linguistically diverse governance, leadership, and workforce that are responsive to the population in the service area.
- Educate and train governance, leadership, and workforce in culturally and linguistically appropriate policies and practices on an ongoing basis.

The first year of the grant involved planning and strategizing for implementation of the standards. Six informational interviews with agency leaders elicited views on barriers and opportunities to implement CLAS, with a focus on increasing leadership and workforce diversity. Leaders identified what would be needed from agencies and their staff in order to increase leadership diversity. They felt that agencies could benefit from trainings on racism and implicit bias and, in general, needed to better invest in and support staff prior to and after promotion into management roles. For staff, leaders saw the need for stronger interpersonal skills and for strategies for maintaining professional boundaries in their work. Leaders noted that increasing leadership diversity could strengthen client buy-in and agency credibility, which would lead to better client outcomes. They also described the valuable experience that staff who are community members bring to their work.

## Looking Ahead to Year 2

### ***Objective 1: Planned Testing Activities***

In its second year, the initiative will fund GMC to conduct social networks testing with high-risk communities. Through social networks testing, an HIV-testing agency works with clients and community members who are high risk or HIV-positive to recruit their peers for testing. It is based on the principle that people in the same social network share the same risk behaviors and have a similar chance of becoming infected with HIV. As a health care provider doing HIV outreach and prevention work, GMC is uniquely suited to conduct social networks testing and to provide at-risk peers who are recruited with HIV and STI testing, PrEP, primary health care, and assistance with health insurance enrollment.

### ***Objective 2: Planned Awareness Activities***

In year two, the initiative plans to fund five awareness events as well an awareness campaign to promote PrEP. Events to be celebrated will be decided in collaboration with partner agencies.

### ***Objective 3: Planned CLAS Activities***

The initiative is planning three main activities for the coming year to implement the governance, leadership, and workforce standards.

1. Implement the Wisconsin HIV Workforce Capacity Building Initiative to increase the number of staff of color in leadership positions in organizations that provide HIV services in Milwaukee.
2. Provide trainings to increase provision of culturally responsive HIV prevention and care services by direct service providers in organizations that provide HIV services in Milwaukee.

**September 2016**

3. Provide trainings to increase supervisor support of staff to provide culturally responsive HIV prevention and care services in Milwaukee.

For more information about the Wisconsin Minority Health HIV Partnership Initiative, contact Hester Simons at [Hester.Simons@dhs.wisconsin.gov](mailto:Hester.Simons@dhs.wisconsin.gov) or 608-261-6871.

**Additional HIV Data Resources**

Wisconsin HIV Integrated Epidemiology Profile 2010-2014:  
<https://www.dhs.wisconsin.gov/publications/p01294.pdf>

Wisconsin HIV/AIDS Surveillance Annual Review 2015:  
<https://www.dhs.wisconsin.gov/publications/p0/p00484.pdf>

Other reports on HIV in Wisconsin are available on the AIDS/HIV Program website: <https://www.dhs.wisconsin.gov/aids-hiv/data.htm>

