This report, prepared by the Wisconsin HIV Program, is a retrospective view of people, ideas, and events shaping the course of HIV-related public health in Wisconsin. The timeline includes important events that have occurred during the HIV epidemic, with select national and international highlights drawn from federal resources. The timeline is limited primarily to state-level activities and is not a comprehensive list of important events that have occurred at the local or agency level.

During the course of the epidemic, the names and titles of various organizational units changed as a result of reorganizations and program updates. The Wisconsin Department of Health and Social Services became the Department of Health and Family Services, and subsequently became the Department of Health Services. The Division of Health transitioned to the Division of Public Health. The AIDS/HIV Program was renamed the HIV Program.

1981

The Centers for Disease Control and Prevention (CDC) publishes the first report of cases of Pneumocystis carinii pneumonia in five previously healthy, gay men in Los Angeles—the first official reporting of what becomes known as the AIDS (acquired immunodeficiency syndrome) epidemic. CDC highlights cases of Kaposi’s Sarcoma in gay men in New York and San Francisco.

Wisconsin Division of Health initiates physician surveillance of similar cases of unexplained immunosuppression.

1982

CDC uses the term “AIDS” and releases the first case definition of AIDS. Congress creates funding for AIDS-related surveillance at CDC and research at the National Institutes of Health (NIH). CDC reports on cases of AIDS in infants.

The first AIDS case is reported in Wisconsin of a nonresident who traveled to the state.

1983

CDC reports cases of AIDS in female sexual partners of males with AIDS. CDC reports of transmission among gay men, people with hemophilia, people who inject drugs, and Haitians suggests that AIDS is caused by an infectious agent that is transmitted sexually or through exposure to blood products. People living with AIDS (PLWA) mobilize a self-empowerment movement and establish The Denver Principles, calling for PLWA to be treated with dignity and to be actively engaged with others in policy development and decision-making.

- First AIDS case is diagnosed in a Wisconsin resident.
- AIDS becomes a reportable communicable disease in Wisconsin.

1984

Health and Human Services Secretary Margaret Heckler announces that the retrovirus HTLV-III was identified as the cause of AIDS and that a
diagnostic blood test was developed to identify HTLV-III. (French researchers previously identified the same virus they named as LAV.) CDC recommends avoiding injection drug use and reducing needle-sharing.

- First Division of Health staff are assigned to work on HIV in a designated position.

**1985**

CDC revises the AIDS case definition, noting that AIDS is caused by a virus. CDC issues provisional guidelines for blood screening. FDA licenses first commercial blood test and blood banks begin screening the blood supply. Ryan White, an Indiana teen who contracted HIV through contaminated blood, speaks out publicly on the need for AIDS education after facing refusal to be admitted entry to his middle school. U.S. Public Health Service issues first recommendations for preventing HIV transmission from mother to child. By year’s end, at least one HIV case is reported from each region of the world.

- HIV becomes a reportable communicable disease in Wisconsin.
- Wisconsin anonymous HIV antibody counseling and testing sites are opened to defer people from seeking testing through blood and plasma centers.
- Public Health Task Force on AIDS, a year-long collaborative partnership of public and private health and human service providers, generates 18 reports examining the biomedical, social, and legal aspects of the HIV epidemic for a variety of health and human services settings and providers, including schools, prisons, jails, hospitals, nursing homes, mental health institutions, workplace, funeral directors and pathologists, emergency medical services personnel, home care, child care, serologic screening, contact notification, chronically ill, neuropsychiatric aspects of HIV, public education, and professional education.
- State legislation now requires HIV reporting and informed consent for HIV testing.
- First legislative mandate for state funding of AIDS/HIV Program passes.
- Wisconsin receives first federal dollars to support HIV counseling and testing.

**1986**

The Surgeon General’s Report on AIDS, released this year, acknowledges that HIV cannot be transmitted casually. It calls for a nationwide educational campaign, increased use of condoms, and voluntary HIV testing. CDC reports that AIDS cases are disproportionately affecting African Americans and Latinos. Institute of Medicine (IOM) releases the report Confronting AIDS: Directions for Public Health, Health Care, and Research and calls for a broadly focused educational and public health campaign directed at preventing the spread of HIV.

- Wisconsin reports first 100 HIV cases and first heterosexual case.
- First Wisconsin seroprevalence study begins in intravenous drug users.
- Wisconsin is awarded first federal dollars for general prevention activities.
- First grants are awarded to local agencies in Wisconsin for prevention services.
- Statewide HIV hotline is funded at the Milwaukee AIDS Project.

**1987**

Food and Drug Administration (FDA) approves AZT (zidovudine), the first medication for AIDS, and accelerates the drug approval process. Congress approves emergency funding to states for AZT, laying the groundwork for what will be the AIDS Drug Assistance Program (ADAP),
authorized later by the 1990 Ryan White CARE Act. FDA approved the Western blot test kit, a more specific test for HIV antibodies. First Presidential Commission on AIDS created. CDC issues Recommendations for Prevention of HIV Transmission in Health-Care Settings, calling for universal precautions. CDC launches the first AIDS-related public service announcements captioned “America Responds to AIDS.” American Medical Association declares that physicians have an ethical obligation to care for people with AIDS as well as those who have been infected with HIV but show no symptoms.

- First pediatric HIV case is reported in Wisconsin.
- Governor's HIV Infection Advisory Council is established.
- First clinician's guide and first issue of Wisconsin AIDS Update are published.
- Statewide AIDS/HIV-related training of correctional officers is conducted in correctional facilities.

1988

Surgeon General C. Everett Koop launches the first coordinated HIV/AIDS education campaign resulting in the eight-page booklet “Understanding AIDS” mailed to all American households. The first comprehensive needle exchange programs begin in Tacoma, Washington, and San Francisco, California. The first comprehensive federal AIDS bill authorizes use of funds for AIDS prevention, education, and testing. The federal Health Resources and Services Administration (HRSA) awards first planning grants to 11 states and 10 cities to create a plan for HIV/AIDS systems of care—this lays the groundwork for statewide programs that are later funded under the Ryan White CARE Act. First federal dollars for AIDS/HIV drug assistance awarded to states.

- Wisconsin Partner Notification Program is initiated.
- First statewide HIV media campaign “HIV/AIDS—Why Take Chances: Protect Yourself” is launched, including radio, television, and newspaper public service announcements, a wall poster, informational brochure, and outdoor billboard displays.
- School curriculum guides are distributed and school teachers trained.
- Department of Public Instruction receives five-year grant to assist school districts in integrating AIDS/HIV instruction into K-12 health education curricula.
- Emergency care guidelines are distributed statewide to emergency medical technicians and other emergency care providers.
- Risk assessment and name-associated HIV testing is initiated in family planning and sexually transmitted disease (STD) clinics.
- First statewide Division of Health sponsored AIDS/HIV conference is convened.
1989

Public Health Service releases first guidelines for prevention of Pneumocystis carinii pneumonia and the prevention of transmission of HIV and hepatitis B to health care workers and public safety workers. CDC reports the number of reported AIDS cases in the U.S. reaches 100,000. National Commission on AIDS meets for the first time. HRSA grants $20 million for HIV care and treatment through the Home-Based and Community-Based Care state grant program—for many states, this is their first involvement in HIV care and treatment.

- Cumulative reported HIV cases in Wisconsin exceed 500.
- Governor’s HIV Infection Advisory Council releases final report with 21 recommendations calling for priority attention and further study.
- Governor’s HIV/AIDS Technical Advisory Committee is established and charged with studying and recommending action on eight high priority issues identified by the Governor’s HIV Infection Advisory Council.
- Statewide network of nine AIDS service organizations (ASOs), serving entire state, is funded for life care services.
- State funds minority HIV prevention education initiatives.
- First AIDS/HIV slide library and narrative is distributed widely throughout Wisconsin.
- Seroprevalence study in childbearing women begins.
- Pastoral care regional trainings are conducted.
- Local health departments initiate participation in the HIV Partner Notification Program.

1990

Public Health Service issues statement on managing occupational exposure to HIV, including use of AZT for management of post-exposures. Ryan White dies. Congress enacts the American with Disabilities Act, which includes prohibition of discrimination against individuals with disabilities, including people living with HIV/AIDS. Congress enacts the Ryan White Comprehensive AIDS Resources Emergency (CARE) Act—the nation’s largest HIV-specific federal grant program. FDA approves use of AZT for pediatric AIDS. Congress enacts the AIDS House Opportunity Act which creates the Housing Opportunities for People with AIDS (HOPWA) grants.

- Wisconsin legislature establishes school-based AIDS/HIV education.
- Insurance Continuation Coverage Premium Subsidy Program is started.
- Governor's HIV/AIDS Technical Advisory Committee completes deliberations and releases reports and recommendations regarding legislation, access to investigational drugs, nursing homes, correctional system, multicultural perspectives, and health care financing.
- Wisconsin Community-Based Research Consortium is established to form a statewide program of community-based clinical trials of HIV investigational new drugs.
- Clinician roundtables and grand rounds are initiated through cooperative efforts of the Midwest AIDS Training and Education Center, State Medical Society, Wisconsin AIDS/HIV Program, and the University of Wisconsin Medical School.
- Federal Health and Human Services Administration awards Wisconsin grant supporting home and community-based health services for people living with HIV.
• Compilation of Wisconsin Statutes and Administrative Code Pertaining to AIDS/HIV is published and disseminated statewide.
• Wisconsin Public Health Agenda for the Year 2000 is published, including 12 major objectives and corresponding actions steps targeting key HIV prevention efforts in the 1990s.

1991

CDC recommends restriction on the practice of HIV-positive health care workers. Congress passes the Terry Beirn Community-Based Clinical Trials Program Act to establish a network of community-based clinical trials for HIV treatment. Magic Johnson announces he is HIV-positive.

• Cumulative reported HIV cases in Wisconsin exceed 1,000.
• Wisconsin’s first pediatric medical guide, Medical Management of Newborns and Infants Born to HIV Infected Mothers, is published.
• First federal Ryan White CARE Act funds are awarded to Wisconsin.
• Eight Wisconsin HIV Care Consortia are established and supported with federal Ryan White CARE Act funds to assess the organization, availability, and accessibility of local services for people with HIV and their families.
• Keeping the Workplace Safe guide is published.

1992

AIDS becomes the number one cause of death for U.S. men ages 25 to 44. FDA licenses a rapid HIV diagnostic test kit that gives results from a blood test in 10 minutes. The 8th International AIDS Conference is held in Amsterdam rather than Boston due to U.S. immigration restrictions on people living with HIV/AIDS. CDC launches the Business Responds to AIDS program to help large and small businesses meet the challenges of HIV/AIDS in the workplace and community.

• Cumulative deaths among HIV cases in Wisconsin exceed 1,000.
• AIDS/HIV Program and the Wisconsin site of the Midwest AIDS Training and Education Center jointly publish Early Intervention for HIV Disease: Guidelines for Patient Care.
• Division of Health and Division of Community Services co-sponsor HIV prevention conferences for African American injection drug users and high risk youth.
• Bureau of Community Health and Prevention is reorganized into Bureau of Public Health.
• State guidelines are issued regarding prevention of HIV transmission from health care workers to patients.

1993

President Clinton establishes the White House Office of National AIDS Policy. FDA approves female condoms. CDC expands the case definition of AIDS to include those with CD4 counts below 200. CDC adds three new conditions—pulmonary tuberculosis, recurrent pneumonia, and invasive cervical cancer—to the list of clinical indicators of...
AIDS. These new conditions mean that more women and people who inject drugs will be diagnosed with AIDS. CDC institutes the community planning process to better target local prevention efforts.

- Cumulative HIV cases reported in Wisconsin exceed 2,000.
- Wisconsin establishes and publishes “Practice Standards and Administrative Guidelines for HIV-Related Case Management.”
- Cryptosporidiosis outbreak occurs in Milwaukee. More than 46 people living with HIV and infected with cryptosporidiosis eventually die.
- AIDS/HIV Program publishes clinicians’ guidelines for HIV counseling and testing.
- Joint TB and HIV surveillance project is initiated between Wisconsin AIDS/HIV Program and Wisconsin TB Program.

1994

AIDS becomes the leading cause of death for all Americans ages 25 to 44. Public Health Service recommends that HIV-positive pregnant women receive AZT to reduce the risk of perinatal transmission of HIV. FDA approves oral HIV testing, the first non-blood-based antibody test for HIV. The federal Department of Health and Human Services issues guidelines requiring applicants for National Institutes of Health (NIH) grants to address the appropriate inclusion of women and minorities in clinical research. Federal HIV prevention marketing initiative started.

- Wisconsin HIV Prevention Community Planning Council is established.
- Statewide pediatric HIV care program (Primary Care Support Network) is started at Children’s Hospital of Wisconsin.
- Lifepoint needle exchange program is started at Milwaukee AIDS Project.
- Survey is conducted of HIV prevention services in Wisconsin prenatal care settings.
- State is awarded funds for early intervention services.

1995

By October 31, 500,000 cases of AIDS have been reported in the U.S. FDA approves the first protease inhibitor, resulting in a new era of highly active antiretroviral therapy (HAART). President Clinton establishes the first Presidential Advisory Council on HIV/AIDS. CDC issues first guidelines to help health care providers prevent opportunistic infections in people living with HIV. CDC launches HIV media campaign “Respect Yourself, Protect Yourself.” The National Academy of Science concludes that syringe exchange programs are an effective component of a comprehensive strategy to prevent infectious disease.

- Cumulative HIV cases reported in Wisconsin exceed 3,000.
- Cumulative deaths among Wisconsin HIV cases exceed 2,000.
- Federal blinded childbearing women seroprevalence survey is discontinued.
- First Division of Health statewide conference for youth peer educators occurs.
- Maternal and child health advisory on HIV counseling and voluntary testing in pregnancy is released by Division of Health.
- Wisconsin Comprehensive HIV Prevention Plan 1996 is published.
- First competitive request for proposals is released for prevention grants supported by CDC supplemental funds.
1996

The number of new AIDS cases diagnosed in the U.S. declines for the first time since the beginning of the epidemic. The Joint United Nations Programme on HIV/AIDS (UNAIDS) begins operations to advocate for global action on the HIV epidemic and coordinate efforts across the UN system. FDA approves the first HIV home testing and collection kit, a viral load test, and the first non-nucleoside reverse transcriptase inhibitor (NNRTI) drug. The 11th International AIDS Conference in Vancouver creates a sense of optimism by highlighting the effectiveness of HAART. Federal Public Health Service releases provisional recommendations for chemoprophylaxis after HIV occupational exposure.

- Wisconsin publishes consumer brochures on prenatal counseling and voluntary testing.
- State epidemiologist approves sale of first HIV home collection kit.
- Statewide prenatal care provider training is funded.
- First Division of Health statewide conference is implemented for people living with HIV.
- Evaluation of Wisconsin HIV counseling and testing program is conducted.

1997

HAART becomes the new standard of care. Due largely to the use of HAART, AIDS-related deaths in the U.S. decline by 47% compared to the previous year. President Clinton announces the goal of finding an effective vaccine in 10 years as a top national priority and calls for the creation of an AIDS vaccine research center at NIH. FDA approves Combivir®, a combination of two antiretroviral drugs in one tablet. Congress enacts the FDA Modernization Act, codifying an accelerated drug approval process and allowing dissemination of information about off-label uses of drugs. With increasing numbers of people taking protease inhibitors, resistance to the drugs becomes more common and an area of grave concern.

- Division of Health releases request for proposals for reconfigured network of Wisconsin AIDS service organizations.
- Wisconsin AIDS/HIV Health Insurance Premium Subsidy Program broadens coverage.

1998

CDC reports African Americans account for 49% of U.S. AIDS-related deaths—a mortality rate for African Americans almost 10 times that of whites and three times that of Hispanics. Congressional Black Caucus and African American leaders develop a “Call for Action” requesting a declaration that HIV/AIDS is a state of emergency in the African American community. President Clinton declares AIDS to be a severe and ongoing crisis in African American and Hispanic communities in the U.S. Congress funds the Minority AIDS Initiative to improve the nation’s effectiveness in preventing and treating HIV/AIDS in African American, Hispanic, and other minority communities. CDC issues the first national treatment guidelines for the use of antiretroviral therapy in adults and adolescents with HIV. U.S. Supreme Court rules that the Americans with Disabilities Act covers those in earlier stages of HIV disease, not just those who have developed AIDS.

- Cumulative HIV cases reported in Wisconsin exceed 4,000.
- Grants for reconfigured statewide network of AIDS service organizations are awarded.
• Plans for restructuring Wisconsin HIV Counseling and Testing Program is released.
• Targeted grants are awarded for capacity building for men of color who have sex with men.
• Joint meeting takes places between the Wisconsin HIV Prevention Community Planning Council and the Statewide Coordinated Statement of Need Work Group.
• Wisconsin is awarded federal grant for implementation of Prevention with HIV Infected Persons Project.
• Division of Health sponsors five regional youth peer educator conferences.
• Division of Health is reorganized into Division of Public Health and Division of Health Care Financing.
• Department of Health and Family Services launches Wisconsin Turning Point Initiative, targeting the development of a 10-year strategic public health plan.

1999

World Health Organization (WHO) announces that HIV/AIDS has become the fourth leading cause of death worldwide and the number one cause in Africa. WHO estimates that 33 million people are living with HIV worldwide and that 14 million have died of AIDS. CDC releases a new HIV case definition to help state health departments expand and accurately track the changing course of the epidemic.

• Division of Public Health awards contracts supporting targeted technical assistance and capacity building for community-based organizations.
• AIDS/HIV Program sponsors statewide HIV prevention networking day.
• AIDS/HIV Program launches a website (https://www.dhs.wisconsin.gov/aids-hiv).

2000

UN Security Council discusses HIV as a threat to peace and security. The Clinton Administration declares that HIV/AIDS is a threat to U.S. national security. UNAIDS, WHO, and other global health groups enter into a joint initiative with five major pharmaceutical manufacturers to negotiate reduced prices for HIV/AIDS drugs in developing countries. Congress enacts the Global AIDS and Tuberculosis Relief Act. IOM releases report “No Time to Lose: Getting More from HIV Prevention.”

• Cumulative HIV cases reported in Wisconsin exceed 7,000.
• Cumulative deaths among Wisconsin HIV cases exceed 3,000.
• Wisconsin is awarded federal Minority HIV/AIDS Demonstration Project.
• AIDS/HIV Program convenes biennial statewide AIDS/HIV conference at Midwest Express Center in Milwaukee.

2001

General Colin Powell, newly appointed as U.S. Secretary of State, reaffirms the U.S. statement that HIV/AIDS is a national security threat. Several major pharmaceutical manufacturers agree to further reduce HIV drug prices for developing countries. The federal Health Resources and Services Administration focuses on people with HIV disease who know their status and are not receiving HIV-related services—HRSA grantees are instructed by HRSA to address this “unmet need” for services. CDC announces a new HIV Prevention Strategic Plan to cut annual HIV infections in the U.S. by half within five years. CDC releases National Hepatitis C Prevention Strategy. Surgeon General David Satcher releases report “Call to Action to Promote Sexual Health and Responsible Sexual Behavior.”
• Wisconsin launches “Live. And let live.” media campaign to promote HIV counseling and testing within African American and Hispanic communities.

• Wisconsin HIV care and treatment needs assessment conducted.

• Wisconsin Hepatitis C Program is established and integrated with Wisconsin AIDS/HIV Program.

• AIDS/HIV Program incorporates HIV social networks testing into the Prevention for HIV Infected Persons Project.

• Wisconsin HIV Primary Care Support Network creates statewide outreach program for women with HIV.

• Wisconsin Department of Health and Family Services contracts with the University of Wisconsin–Madison to implement a statewide HIV Prevention Training System.

• Native American HIV leadership summit is convened.

• Wisconsin Turning Point Transformation Team releases the state health plan Healthiest Wisconsin 2010 and includes high risk sexual behavior as a health priority.

2002

U.S. establishes the Global Fund to fight AIDS and approves first round of grants to government and private sector organizations in developing countries. FDA approves the first rapid HIV diagnostic test kit for use in the U.S., with a 99.6% accuracy and test results in as little as 20 minutes.

• Department of Health and Family Services releases targeted request for proposals for funding HIV prevention services in community agencies, AIDS service organizations (ASOs), and the statewide HIV/Sexually Transmitted Diseases (STD)/Hepatitis C Information and Referral Center.

• Statewide biennial HIV conference is convened in Madison, coordinated with an international event highlighting global HIV issues.

• Hepatitis strategic planning activities begin.

• Quality management initiative focuses on creating a comprehensive quality management plan for HIV care and treatment services supported with Ryan White Part B funding.

• Wisconsin AIDS/HIV Health Insurance Premium Program and Wisconsin AIDS/HIV Drug Assistance Program implement consolidated application and recertification process.

• Wisconsin AIDS/HIV Drug Assistance Program expands to include medications for managing hepatitis C virus (HCV) infection for people co-infected with HIV and HCV.

• The HIV Prevention Training System offers 21 face-to-face courses during the first full year of operation.

2003

CDC calculates that 27,000 of the estimated 40,000 new infections that occur each year in the U.S. result from transmission by individuals unaware they are infected. President George W. Bush announces the creation of the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR). CDC announces Advancing HIV Prevention: New Strategies for a Changing Epidemic—a prevention initiative focused on reducing barriers to early diagnosis, increasing access to needed quality care, and providing
ongoing prevention services for people living with HIV. WHO announces the “3 by 5” initiative to bring treatment to 3 million people by 2005.

- Cumulative HIV cases reported in Wisconsin exceed 8,000.
- Competitive HIV prevention grants are awarded to community agencies to address disparities, especially among men of color who have sex with men.
- DHFS is awarded competitive funding from CDC for HIV rapid testing demonstration projects in correctional facilities, medical settings, and partner notification.
- Wisconsin Hepatitis Strategic Plan is released.
- Hepatitis C guidelines for local health departments is published.
- Wisconsin HIV/STD/Hepatitis C Information and Referral Center begins operations.

2004

Congress authorizes the first funding for PEPFAR. FDA approves use of oral fluid samples with a rapid HIV diagnostic test. FDA issues guidance for expedited approval of low-cost, safe, and effective therapies for use in Africa and developing countries under the PEPFAR initiative. Leaders of the Group of Eight (G8) Summit call for the creation of a global HIV vaccine enterprise. Federal Health Resources and Services Administration identifies six essential core services for Ryan White Part B funding.

- Six regional HIV Care consortia in Wisconsin are consolidated into a single statewide Care consortium.
- DHFS agenda for HIV prevention prioritizes the four key service initiatives of Prevent, Test, Link, and Treat.
- Needs assessment is conducted of HIV case management services in Wisconsin.

2005

The World Economic Forum approves a priority to focus on HIV/AIDS in Africa and other hard-hit regions. After announcing the death of his son due to AIDS, former South African president Nelson Mandela urges families to treat AIDS as an ordinary disease, rather than as a curse, and to speak openly about HIV in order to break down the taboos associated with HIV/AIDS. President’s Advisory Council on HIV/AIDS releases report “Achieving an HIV-Free Generation: Recommendations for a new American HIV Strategy.”

- Cumulative HIV cases reported in Wisconsin exceed 9,000.
- Preliminary planning efforts begin in consolidating Ryan White Care Consortium and Wisconsin HIV Prevention Community Planning Council.

2006

Scientists announce discovering signs of an HIV-like virus in chimpanzees in southern Cameroon, bolstering the theory that the first people to contract HIV did so through contact with infected blood from wild chimps. CDC releases revised testing recommendations for health care settings, recommending routine HIV screening for all adults aged 13-64, and yearly screening for those at high risk. NIH announces early end to a clinical trial that reveals that medically performed
circumcision reduces a man’s risk of acquiring HIV through heterosexual intercourse by up to 53%.

- AIDS/HIV Program releases request for proposal (RFP) for Ryan White Part B funding in the DHFS five regions.
- AIDS/HIV Program implements customized web-based data reporting for prevention-funded activities.
- AIDS/HIV Program partners with the City of Milwaukee Health Department, Health Care Education and Training, Inc., and the Medical College of Wisconsin in the development of the Milwaukee Alliance for Sexual Health directed at decreasing STDs and unplanned pregnancies in Milwaukee’s zip codes with the highest STD morbidity and teen pregnancy rates.

2007

WHO officially recommends circumcision as a way to prevent heterosexual HIV transmission. WHO and UNAIDS issue new guidance recommending provider-initiated testing in health care settings. CDC launches a social marketing campaign designed for health care providers who deliver care to people living with HIV. CDC reports cases of transplant recipients who contracted both HIV and hepatitis C from an organ donor—calling for more intensive testing of organ donors. WHO and UNAIDS announce improved surveillance data showing the global HIV prevalence has leveled off.

- First combined statewide prevention and care planning body is established, designated as the Statewide Action Planning Group (SAPG).
- HIV Prevention Training System expands course offerings to address training needs of care providers in addition to HIV prevention providers.

2008

New HIV diagnoses in gay men under age 30 rose 32% between 2001 and 2006. Of most concern was the doubling of the number of new diagnoses among the youngest men in the reported study. A large international study found evidence that people taking HIV treatment could expect to live into their 60s and beyond. A report from the Black AIDS Institute noted that the HIV/AIDS epidemic among African Americans in some parts of the U.S. was as severe as in some parts of Africa. A CDC study of people newly-infected with HIV in the U.S. confirmed that the majority of new cases occur among gay and bisexual men, that African Americans are most at risk, and that most of the new cases of HIV among White gay and bisexual men occur in their 30s and 40s, while black and gay bisexual men are more likely to be infected in their teens and 20s.

- Cumulative HIV cases reported in Wisconsin exceed 10,000.
- AIDS/HIV Program implements regionalized, multi-jurisdictional HIV Partner Services.
- AIDS/HIV Program, in collaboration with the City of Milwaukee Health Department and the Centers for Disease Control and Prevention, conducts epidemiologic investigation of cases of HIV infection among young Black men who have sex with men in Milwaukee.
2009

Newly-elected President Barack Obama calls for the development of the first National HIV/AIDS Strategy. The White House and CDC launch the Act Against AIDS campaign. With PEPFAR as a core component, the Administration launches the Global Health Initiative directed at addressing global health in low- and middle-income countries. Department of Veterans Affairs moves to increase the number of veterans getting HIV tests by dropping the requirement for written informed consent, only requiring verbal consent.

- First combined prevention and care planning document is released, known as the Wisconsin HIV Comprehensive Plan.
- AIDS/HIV Program, in collaboration with the AIDS Resource Center of Wisconsin, local health departments, and community-based agencies, conducts cluster investigations of increased cases of HIV infection among young men who have sex with men in the Fox Valley.

2010

U.S. Government officially lifts the HIV travel and immigration ban. President Obama signs the Patient Protection and Affordable Care Act, expanding access to care and prevention services for all Americans and offering special protections for those living with chronic illnesses like HIV. The first National HIV/AIDS Strategy for the U.S. is released. The NIH iPrEx study shows that a daily dose of HIV drugs reduced the risk of HIV infection among HIV-negative men who have sex with men by 44%, supporting the concept of pre-exposure (PrEP) in a targeted population.

- Cumulative HIV cases reported in Wisconsin exceed 11,000.
- Cumulative deaths among Wisconsin HIV cases exceed 4,000.
- As of December 31, 2010, 6,295 individuals are presumed to be alive and living with HIV in Wisconsin.
- Wisconsin Act 209 is signed into law, eliminating requirement for written informed consent for HIV testing by replacing it with a verbal consent process.
- 2009 Wisconsin Act 280 enacts expedited partner therapy, enabling medical providers to prescribe, dispense or furnish medication for STDs to partners of patients diagnosed with trichomoniasis, gonorrhea, and chlamydia infection without conducting a medical assessment of the partner.
- AIDS/HIV Program and Adult Viral Hepatitis Program, in collaboration with local health departments, conducts epidemiologic investigations of increased cases of hepatitis C infections in north central and northeast Wisconsin.
- AIDS/HIV Program assumes lead responsibility in developing and launching the Department’s Lesbian, Gay, Bisexual, and Transgender (LGBT) Health website.

2011

White House and lead federal agencies release one-year update on implementation of the National HIV/AIDS Strategy. Office of National AIDS Policy convenes regional dialogues on implementation issues for the National HIV/AIDS Strategy. CDC clinical trial provides first evidence that a daily oral dose of HIV antiretroviral drugs can also prevent new infections in individuals exposed to HIV through heterosexual sex.

- AIDS/HIV Program is awarded fourth-year Systems Linkages grant under the federal Ryan White Special Projects of National Significance (SPNS).
- AIDS/HIV Program focuses resources on implementing HIV linkage to care initiatives to improve health outcomes and curb the transmission of HIV by connecting
individuals with HIV to care and treatment services for the first time.

2012

Federal Department of Health and Human Services issues new treatment guidelines recommending treatment for all HIV-infected adults and adolescents, regardless of CD4 count or viral load. FDA approves first at-home HIV rapid test and the use of Truvada® for pre-exposure prophylaxis. CDC launches “Let’s Stop HIV Together,” a national campaign to combat stigma and complacency about the HIV epidemic.

- The Wisconsin Medicaid Program, in collaboration with the AIDS Resource Center of Wisconsin, develops the proposed HIV Health Home to provide comprehensive care coordination to Medicaid members.
- The HIV Training System continues expansion and provides 37 face-to-face and online courses attended by 860 course participants.
- The HIV Training system begins offering a 60-hour Screening, Brief Intervention, and Referral to Treatment (SBIRT) course for HIV case managers at local agencies funded by the HIV Program.
- The basic foundational HIV 101 course is revised as an online course to increase availability and access for staff at funded agencies.

2013

White House issues an Executive Order directing federal agencies to prioritize supporting the HIV care continuum as a means of implementing the National HIV/AIDS Strategy and accelerating efforts to improve the percentage of people living with HIV who move from testing to treatment and ultimately viral suppression. President Obama signs the HIV Organ Policy Equity (HOPE) Act allowing people living with HIV to receive organs from other infected donors. UNAIDS announces that new HIV infections dropped more than 50% in 25 low- and middle-income countries, and the number of people getting antiretroviral treatment has increased 63% in the past two years.

- The Centers for Medicare & Medicaid Services approves Wisconsin’s proposed HIV medical home model.
- The AIDS/HIV Program develops and disseminates guidance regarding implications of the Affordable Care Act for people living with HIV.

2014

Major provisions of the Affordable Care Act designed to protect consumers goes into effect. European researchers release initial results of the first phase of the PARTNER Study, finding no HIV-positive people who were undergoing antiretroviral therapy and who had an undetectable viral load had transmitted HIV. CDC releases report that finds gaps in care and treatment among Latinos diagnosed with HIV. CDC reports that only 30% of Americans with HIV had the virus under control in 2011. Approximately two-thirds of those whose virus was out-of-control had been diagnosed but were no longer in care.

- AIDS/HIV Program promotes trauma-informed approaches to health and human service programs for people living with or at risk of HIV.
- The Insurance Assistance Program begins paying premiums for Silver level health plans purchased from the health insurance marketplace for eligible individuals living with HIV.
- Wisconsin enacts Heroin, Opioid Prevention and Education (HOPE) legislation to combat the heroin epidemic.

2015

CDC announces that more than 90% of new HIV infections in the U.S. could be prevented by
diagnosing people living with HIV and ensuring they receive prompt, ongoing care and treatment. Indiana state health officials announce an HIV outbreak linked to injection drug use in the southeastern, rural portion of the state. White House launches the National HIV/AIDS Strategy: Updated to 2020. Congress restrictions that prevented states and localities from spending federal funds for needle exchange programs.

- As of December 31, 2015, 6,868 individuals are presumed to be alive and living with HIV in Wisconsin.
- Annual surveillance data reports reformatted to include data visualizations and SAPG-requested content.
- AIDS Resource Center of Wisconsin (ARCW) and AIDS Network, the two state-designated AIDS service organizations, merge into one service provider as ARCW with 10 offices across the state.
- Primary Care Support Network is named as a designee of the state epidemiologist for the purposes of specialized HIV, prevention, care, and consultation for pregnant women, infants, children, adolescents, and young adults to promote coordination and data sharing.
- AIDS/HIV Program, in partnership with the Minority Health Program, is awarded five-year grant to fund the Wisconsin Minority Health HIV Partnership Initiative through the federal Office of Minority Health’s State Partnership Initiative to Address Health Disparities.
- Wisconsin AIDS/HIV Program develops pre-exposure prophylaxis (PrEP) guidance for Wisconsin health care providers and web-based PREP information for consumers.

2016

CDC reports that only 1 in 5 sexually active high school students has been tested for HIV. An estimated 50% of young Americans who are living with HIV do not know they are infected. Researchers announce that HIV resistance to the HIV medication Tenofovir is becoming increasingly common. The federal Department of Health and Human Services releases new guidance to state, local, tribal, and territorial health departments that will allow them to request permission to use federal funds to support syringe-services programs—but not to be used to purchase sterile needles or syringes for illegal drug injection. White House launches the “National HIV/AIDS Strategy: Updated to 2020.”

- **Wisconsin Integrated HIV Prevention and Care Plan 2017-2021** is released.
- AIDS/HIV Program publishes “HIV Medical Case Management Practice Standards and Administrative Guidelines.”
- AIDS/HIV Program receives CDC grant to improve linkage of prevention and surveillance data systems.
- AIDS/HIV Program begins Data to Care Program.
- AIDS/HIV Program develops the Wisconsin Health Leaders Fellowship as part of the Wisconsin Minority Health HIV Partnership Initiative.

2017

CDC releases a Dear Colleague letter reconfirming that people who take antiretroviral therapy daily as prescribed and achieve and maintain an undetectable viral load have effectively no risk of sexually transmitting the virus to an HIV-negative
partner. CDC reports significant declines in HIV/AIDS death rates for black/African Americans between 1999 and 2015. The Bill and Melinda Gates Foundation announces a major investment in developing implants that can deliver HIV prevention medication over a long period of time and focuses on eliminating the need for people to take daily PrEP.

- The AIDS Drug Assistance Program (ADAP) adds 12 mental health drugs to the ADAP formulary.
- AIDS/HIV Program develops the Empowering Community Action Institute as part of its efforts to build capacity in the HIV field.
- AIDS/HIV Program advocates the use of person-centered language to address HIV-related stigma and support trauma-informed care.
- Motivational Interviewing Certificate Program at the University of Wisconsin-Madison becomes a requirement for case managers at agencies funded by the HIV Program.

2018

PEPFAR celebrates 15th anniversary, now supporting over 14 million people on treatment globally. A global analysis finds that people living with HIV are twice as likely as their HIV-negative counterparts to suffer from heart disease. U.S. Preventive Services Task Force gives its “A” recommendation—the strongest endorsement it can give—to PrEP, stating that, when taken as prescribed, PrEP is highly effective in preventing HIV among those at high risk, and concluding with “high certainty” that there is a substantial benefit to the target population.

- HIV Program is awarded four-year Demonstration Project grant to build leadership among LGBTQ communities of color in Milwaukee through CDC’s PS18-1802 Component B grant.
- HIV laboratory data are integrated into the Wisconsin Electronic Disease Surveillance System (WEDSS).
- AIDS/HIV Program refocuses naming and branding of Program to the Wisconsin HIV Program.
- Division of Public Health achieves accreditation by the national Public Health Accreditation Board.
- Department of Health Services collaborates with Walgreens to provide free rapid HIV testing at select Walgreens pharmacies in Milwaukee.
- HIV Program launches the media campaign HIV in Real Life in Milwaukee to eliminate HIV-related stigma.

2019

The federal Department of Health and Human Services announces a proposed plan, “Ending the HIV Epidemic: A Plan for America,” which targets reducing new HIV infections by 90% by 2030.

- HIV Program commits resources to develop a Peer Mentorship Program for people living with HIV.
- Hepatitis C Program releases updated Hepatitis C Guidelines for Local Health Departments.
- HIV Program begins major updating of Ryan White HIV service standards.
- James Vergeront, MD, the first and only Wisconsin HIV Program Director, retires.