HIV/AIDS IN NEW YORK CITY

HIV Epidemiology Program
New York City Department of Health and Mental Hygiene
May 2006

New York City has one of the highest AIDS case rates in the US

The NYC AIDS case rate is almost 4 times the US average and 60 times the Healthy People 2010 target.

AIDS case rate per 100,000 population, 2004

- New York City: 56.7
- Miami: 57.8
- US average: 15.0
- Healthy People 2010 Goal: 1.0 per 100,000 population

The number of new HIV diagnoses declined by about 500 cases annually between 2001 and 2004.

As reported to the New York City Department of Health and Mental Hygiene by September 30, 2005.
HIV/AIDS in NYC, 2004
Basic Statistics

• 3,653 new HIV diagnoses (45.6/100,000)

• 4,330 new AIDS diagnoses

• 94,495 persons living with HIV/AIDS
  – 1% of the population of NYC
  – Many more do not know they are infected because they have never been tested

As reported to the New York City Department of Health and Mental Hygiene by September 30, 2005.
New HIV Diagnoses in NYC, 2004
Gender and Transmission Category

• 69% of new HIV diagnoses are in males
  – Among males with a known risk factor, 69% are in the MSM transmission category

• 31% of new HIV diagnoses are in females
  – Among females with a known risk factor, 78% are in the heterosexual contact transmission category

As reported to the New York City Department of Health and Mental Hygiene by September 30, 2005.
New HIV Diagnoses in NYC, 2004
Race/Ethnicity

• 82% of new HIV diagnoses are in blacks and Hispanics
  – Blacks have a higher rate of new HIV diagnosis, PWHA, and death
  – The HIV diagnosis rate has declined significantly more in blacks than in other racial/ethnic groups over the past 4 years
HIV Diagnosis Rates by UHF Neighborhood in NYC, 2004

HIV diagnoses per 100,000 in 2004

- 2.4 - 19.1
- 19.2 - 32.7
- 32.8 - 56.6
- 56.7 - 151.2

HIV/AIDS is concentrated in the poorest neighborhoods (South Bronx, Central Brooklyn, Harlem) and also in lower Manhattan.

As reported to the New York City Department of Health and Mental Hygiene by September 30, 2005.
Among all persons newly diagnosed with HIV in 2004 (n=3,653), almost 30% were concurrently diagnosed with AIDS.

* HIV diagnosed concurrently with AIDS (within 31 days of HIV diagnosis). As reported to the New York City Department of Health and Mental Hygiene by September 30, 2005.
## Persons Newly Diagnosed HIV+ Who Accessed Care Within 6 Months

<table>
<thead>
<tr>
<th>Location</th>
<th>Accession Rate</th>
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</thead>
<tbody>
<tr>
<td><strong>New York City total</strong></td>
<td>63%</td>
</tr>
<tr>
<td><strong>Bronx DPHO</strong></td>
<td>66%</td>
</tr>
<tr>
<td>High Bridge – Morrisania</td>
<td>64%</td>
</tr>
<tr>
<td>Hunts Point – Mott Haven</td>
<td>78%</td>
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<tr>
<td>Crotona – Tremont</td>
<td>59%</td>
</tr>
<tr>
<td><strong>Brooklyn DPHO</strong></td>
<td>60%</td>
</tr>
<tr>
<td>Bedford Stuyvesant – Crown Heights</td>
<td>59%</td>
</tr>
<tr>
<td>Williamsburg – Bushwick</td>
<td>57%</td>
</tr>
<tr>
<td><strong>Harlem DPHO</strong></td>
<td>55%</td>
</tr>
<tr>
<td>Central Harlem</td>
<td>56%</td>
</tr>
<tr>
<td>East Harlem</td>
<td>52%</td>
</tr>
</tbody>
</table>
HIV/AIDS Mortality in NYC, 2004

- 2,189 persons with HIV/AIDS died in 2004
  - 89% had AIDS at death
  - 26% of deaths among persons with AIDS were non-HIV-related (up from 7% in 1995)

As reported to the New York City Department of Health and Mental Hygiene by September 30, 2005.
FEMALES WITH HIV/AIDS OF CHILDBEARING AGE (Age 15 to 44)

HIV Epidemiology Program
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New HIV Diagnoses in Females in NYC, 2004
Age distribution

In 2004, there were 1,151 females newly diagnosed with HIV in NYC. Among this group, 789 persons (68.5%) were of childbearing age.
HIV/AIDS in Females in NYC, 2004
(Age 15 – 44 only)
Basic Statistics

• 789 new HIV diagnoses
  – 612 HIV without AIDS
  – 177 HIV concurrent with AIDS (22%)
• 852 new AIDS diagnoses
  – Includes 177 concurrent HIV/AIDS cases
• 22,296 females living with HIV/AIDS
  – Many more do not know they are infected because they have never been tested

As reported to the New York City Department of Health and Mental Hygiene by September 30, 2005.
In 2004, over 90% of women of childbearing age who were newly diagnosed with HIV were black or Hispanic.

*Excludes Puerto Rico and the US Virgin Islands.

As reported to the New York City Department of Health and Mental Hygiene by September 30, 2005.
HIV/AIDS in Females in NYC, 2004
(Age 15 – 44 only)
Transmission risk

- Heterosexual sex accounts for 70% of women 15 - 44 with AIDS and a known risk factor

- Heterosexual sex as risk factor increasing among women with AIDS

- Surpassed IDU in 1996

As reported to the New York City Department of Health and Mental Hygiene by September 30, 2005.
HIV Diagnoses per 100,000 Females in NYC, 2004

- The rates of new HIV diagnoses in females are highest in:
  - High Bridge – Morrisania
  - Central Harlem – Morningside Heights
  - Hunts Point – Mott Haven

As reported to the New York City Department of Health and Mental Hygiene by September 30, 2005.
27% were born in a foreign country (n=214). This distribution is similar to that of all females.
New HIV Diagnoses in Females in NYC, 2004
(Age 15 – 44 only)
Concurrent HIV/AIDS diagnoses*

- Without AIDS: 77.6%
- Concurrent with AIDS diagnosis: 22.4%

The proportion of concurrent HIV/AIDS diagnoses is lower among females of childbearing age than all females in NYC.

* HIV diagnosed concurrently with AIDS (within 31 days of HIV diagnosis).
As reported to the New York City Department of Health and Mental Hygiene by September 30, 2005.
Two-thirds of females newly diagnosed with HIV in 2004 are linked to care within six months of their diagnosis.

* Care initiation is defined as having a reported CD4 or viral load test within six months of HIV diagnosis. New HIV diagnoses concurrent with AIDS were excluded because AIDS status is often based on a reported CD4 count below 200, which we would also define as care initiation. Persons who died within 3 months of diagnosis were also excluded.

As reported to the New York City Department of Health and Mental Hygiene by September 30, 2005.
Causes of Death in Female PWA in NYC, 2004
(Age 15 – 44 at time of death)

HIV disease 81%
Unknown cause 3%
Non-HIV-related cause 16%

In 2004, 81% of female PWA of childbearing age died of HIV-related causes.

As reported to the New York City Department of Health and Mental Hygiene by September 30, 2005.
Foreign-born Population in NYC, 2004
Basic statistics

• 36% of New York City’s population is foreign born, compared to 12% of the U.S. population

• Queens has the highest percentage of foreign-born persons (46%)
  – Brooklyn (38%)
  – Bronx (29%)
  – Manhattan (29%)
  – Staten Island (16%)

As reported to the New York City Department of Health and Mental Hygiene by September 30, 2005.
In 2004, there were 94,495 persons living with HIV/AIDS in NYC. Among this group, 12,263 persons were born in a foreign country (13% of all PLWHA).
In 2004, there were 3,653 persons newly diagnosed with HIV in NYC; 845 (23%) were born in a foreign country.
Almost 60% of foreign-born persons newly diagnosed with HIV in NYC were born in Africa or the Caribbean/West Indies.
New HIV Diagnoses in NYC, 2004
Top countries of birth by borough

<table>
<thead>
<tr>
<th>Borough</th>
<th>Dominican Republic</th>
<th>Dominican Republic</th>
<th>Haiti</th>
<th>Mexico</th>
</tr>
</thead>
<tbody>
<tr>
<td>Manhattan</td>
<td>n=17 (12.5%)</td>
<td>n=27 (14.7%)</td>
<td>n=37 (15.4%)</td>
<td>n=28 (12.0%)</td>
</tr>
<tr>
<td>Bronx</td>
<td>Mexico n=12 (8.8%)</td>
<td>Jamaica n=23 (12.5%)</td>
<td>Jamaica n=30 (12.5%)</td>
<td>Ecuador n=21 (9.0%)</td>
</tr>
<tr>
<td>Brooklyn</td>
<td>Ghana n=16 (8.7%)</td>
<td>Trinidad &amp; Tobago n=37 (15.4%)</td>
<td>Guyana n=19 (8.2%)</td>
<td></td>
</tr>
<tr>
<td>Queens</td>
<td>Mexico n=12 (6.5%)</td>
<td>Guyana n=16 (6.6%)</td>
<td>Haiti n=19 (8.2%)</td>
<td></td>
</tr>
<tr>
<td>Staten Island</td>
<td>Barbados n=10 (4.2%)</td>
<td>Jamaica n=19 (8.2%)</td>
<td></td>
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</tr>
</tbody>
</table>

* Cells representing less than 10 persons are left blank.

As reported to the New York City Department of Health and Mental Hygiene by September 30, 2005.
Among the foreign-born, two-thirds of new HIV diagnoses were in men, similar to the distribution among non-foreign-born persons.

As reported to the New York City Department of Health and Mental Hygiene by September 30, 2005.
Among foreign-born males, 58% had a risk of MSM, lower than among non-foreign-born males.
Among foreign-born females, 92% had heterosexual risk, higher than among non-foreign-born females.
Foreign-born persons were more likely to be diagnosed concurrently with HIV/AIDS.
72% of foreign-born persons were linked to care within six months of HIV diagnosis, compared with 69% among non-foreign-born persons.

* Care initiation is defined as having a reported CD4 or viral load test within six months of HIV diagnosis. New HIV diagnoses concurrent with AIDS were excluded because AIDS status is often based on a reported CD4 count below 200, which we would also define as care initiation. Persons who died within 3 months of diagnosis were also excluded.

As reported to the New York City Department of Health and Mental Hygiene by September 30, 2005.
New HIV Diagnoses in NYC, 2004

Mortality

As reported to the New York City Department of Health and Mental Hygiene by September 30, 2005.
Causes of Death in Foreign-born Persons with AIDS in NYC, 2004

In 2004, 82% of foreign-born PWA died of HIV-related causes.

As reported to the New York City Department of Health and Mental Hygiene by September 30, 2005.
Incarcerated Persons with HIV/AIDS

• 3% of new HIV diagnoses in 2004 were reported from corrections facilities
• With increases in rapid testing, new reports could rise
• Currently doing a serosurvey in jails
• Beginning a matching project with the Department of Corrections

As reported to the New York City Department of Health and Mental Hygiene by September 30, 2005.
How to Find Our Data

- Our program publishes quarterly and annual summaries, as well as special supplemental reports during the year.
- The reports contain surveillance updates and results from the program’s research studies.
- Tables showing 2004 data by sex, race, age, transmission category, borough and UHF neighborhood are also available.
- A bibliography, plus recent papers, abstracts and presentations from the program can also be found on the website.
- To receive an electronic copy of a report, email us at hivreport@health.nyc.gov.
- Thanks to >150 members of the HIV Epidemiology Program staff for these data.