

HIV AMONG WOMEN IN NEW YORK CITY, 2018



HIV Epidemiology Program

New York City Department of Health and Mental Hygiene



Published December 2019

<https://www1.nyc.gov/site/doh/data/data-sets/epi-surveillance-slide-sets.page>

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HIV AMONG WOMEN¹ IN NYC, 2018

BASIC STATISTICS

- **430 new HIV diagnoses**
 - Includes 76 concurrent HIV/AIDS diagnoses (18%)
 - Women comprise 52% of the population of NYC and 22% of new HIV diagnoses
- **356 new AIDS diagnoses**
- **510 deaths among women with HIV**
 - 9.0 deaths per 1,000 mid-year women living with HIV²

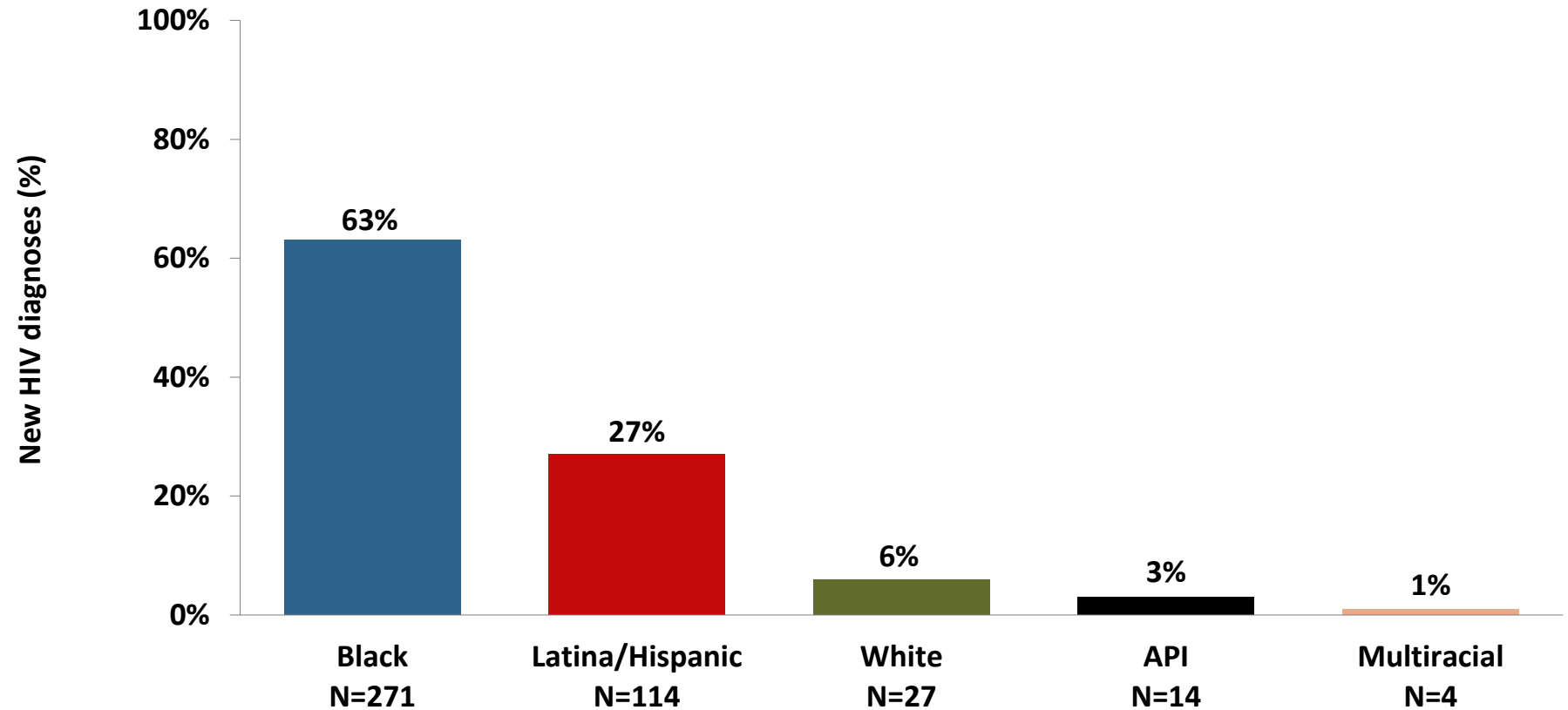
¹Women includes transgender women and men includes transgender men.

There were 56 new HIV diagnoses among transgender women in 2018.

²Rates are age-adjusted to the Census 2010 NYC population.

As reported to the New York City Department of Health and Mental Hygiene by March 31, 2019.

PERCENTAGE OF NEW HIV DIAGNOSES AMONG WOMEN BY RACE/ETHNICITY IN NYC, 2018



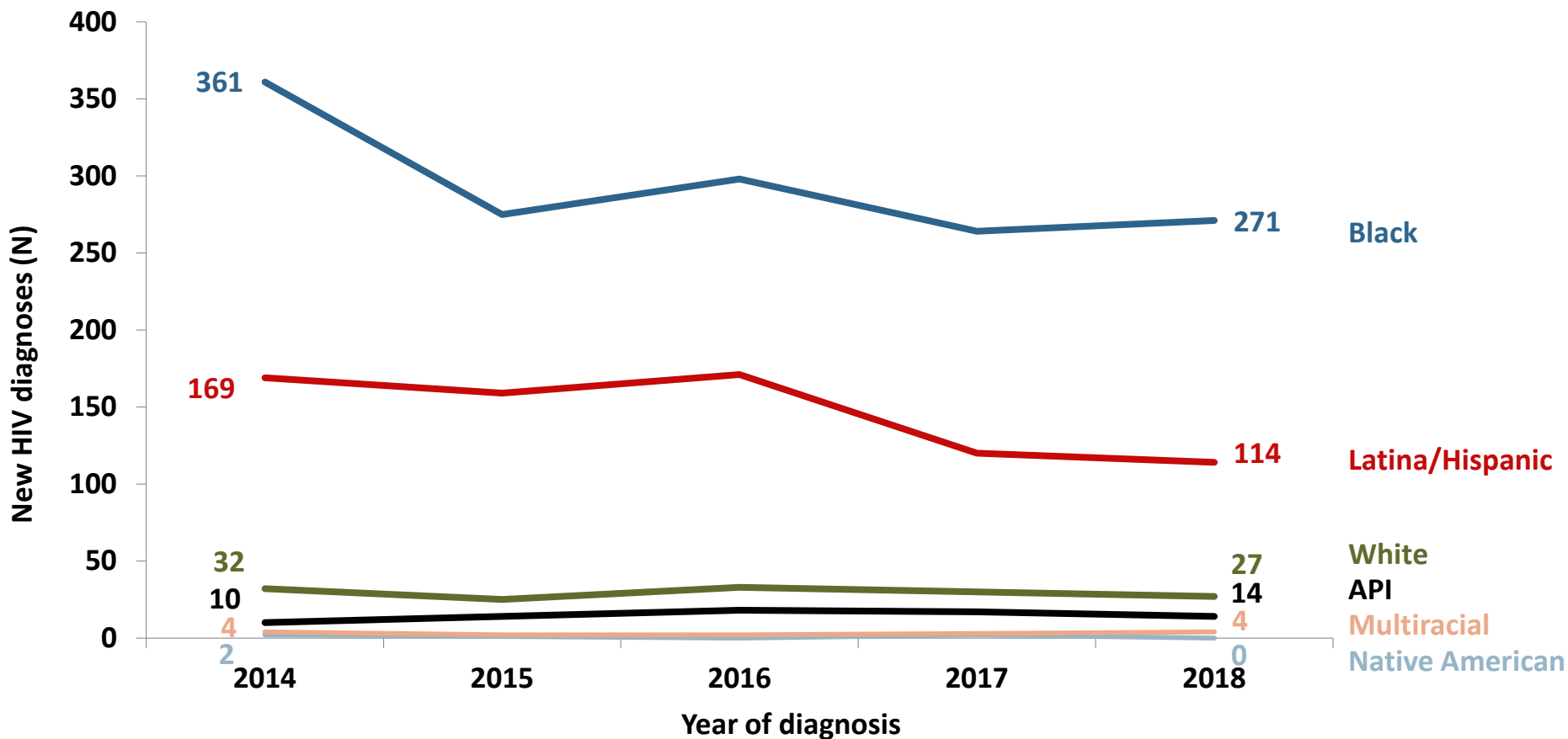
Black women accounted for the majority (63%) of new HIV diagnoses among women in 2018.

API = Asian/Pacific Islander. Native American women not shown due to N=0 diagnoses reported in 2018.

Women includes transgender women.

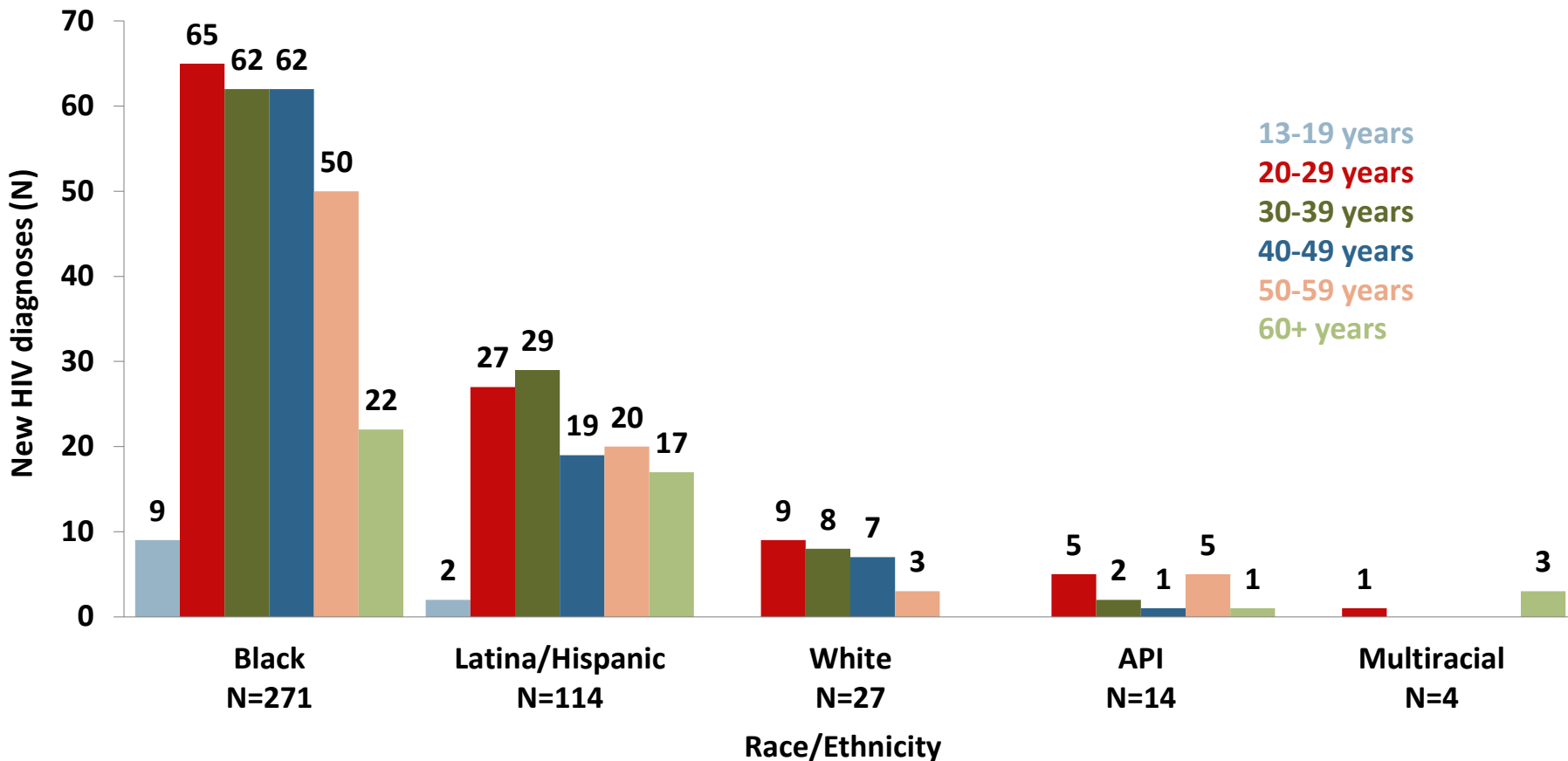
As reported to the New York City Department of Health and Mental Hygiene by March 31, 2019.

NUMBER OF NEW HIV DIAGNOSES AMONG WOMEN BY RACE/ETHNICITY IN NYC, 2014-2018



Black women accounted for the majority of new HIV diagnoses among women from 2014 to 2018.

NUMBER OF NEW HIV DIAGNOSES AMONG WOMEN BY RACE/ETHNICITY AND AGE IN NYC, 2018



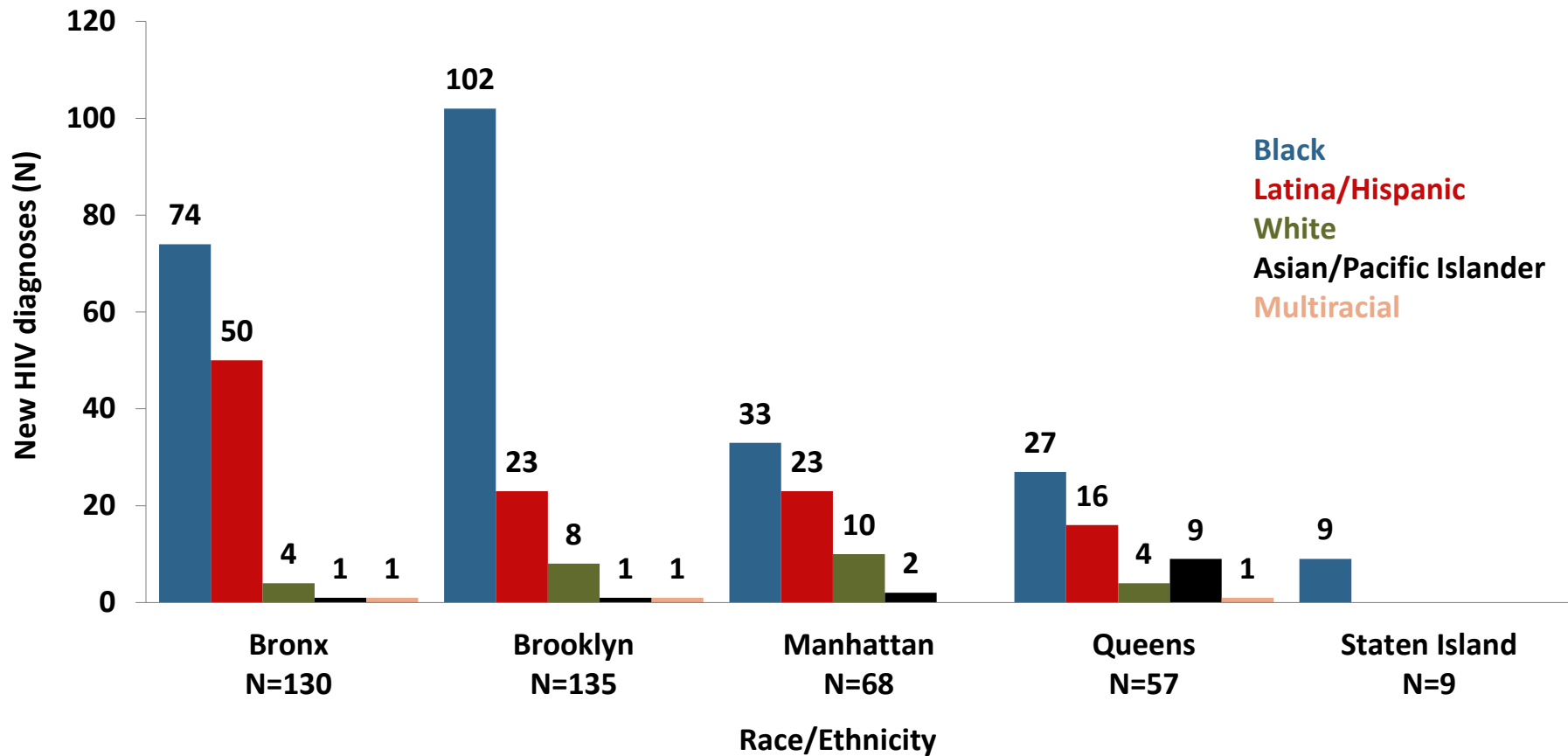
Across all racial/ethnic groups, most newly diagnosed women were ages 20-49.

API = Asian/Pacific Islander. Native American women not shown due to small numbers (N=0 diagnoses reported in 2018).

Women includes transgender women.

As reported to the New York City Department of Health and Mental Hygiene by March 31, 2019.

NUMBER OF NEW HIV DIAGNOSES AMONG WOMEN BY BOROUGH OF RESIDENCE AND RACE/ETHNICITY IN NYC, 2018



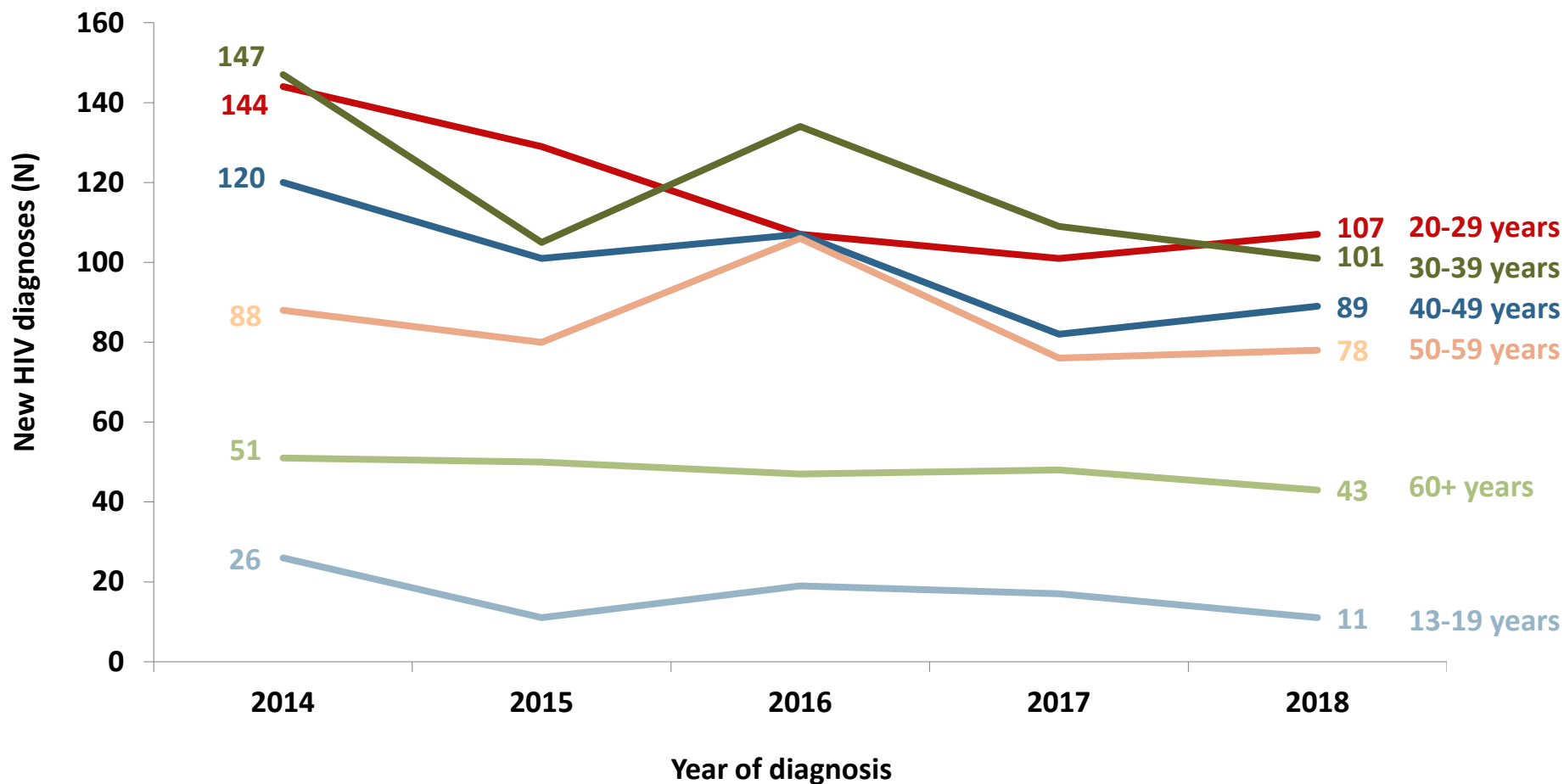
Black women in Brooklyn and the Bronx comprised the largest proportion of new HIV diagnoses in women in 2018.

Native American women not shown due to 0 women diagnosed with HIV in 2018.

Women includes transgender women.

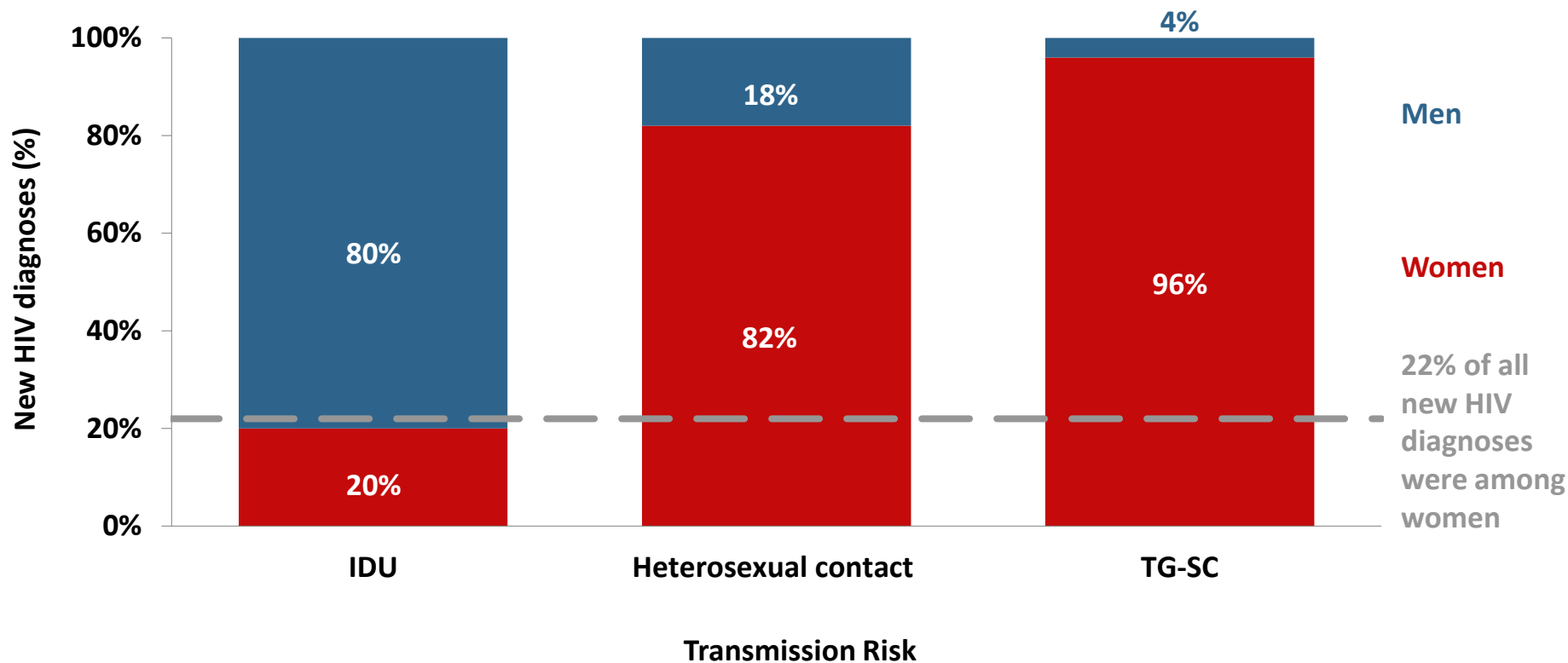
As reported to the New York City Department of Health and Mental Hygiene by March 31, 2019.

NUMBER OF NEW HIV DIAGNOSES AMONG WOMEN BY AGE IN NYC, 2014-2018



New HIV diagnoses decreased in each age group of women between 2014 and 2018.

PERCENTAGE OF NEW HIV DIAGNOSES BY TRANSMISSION CATEGORY IN NYC, 2018



Women comprised a larger proportion of newly HIV diagnosed people with heterosexual contact and TG-SC risk than those with a history of IDU.

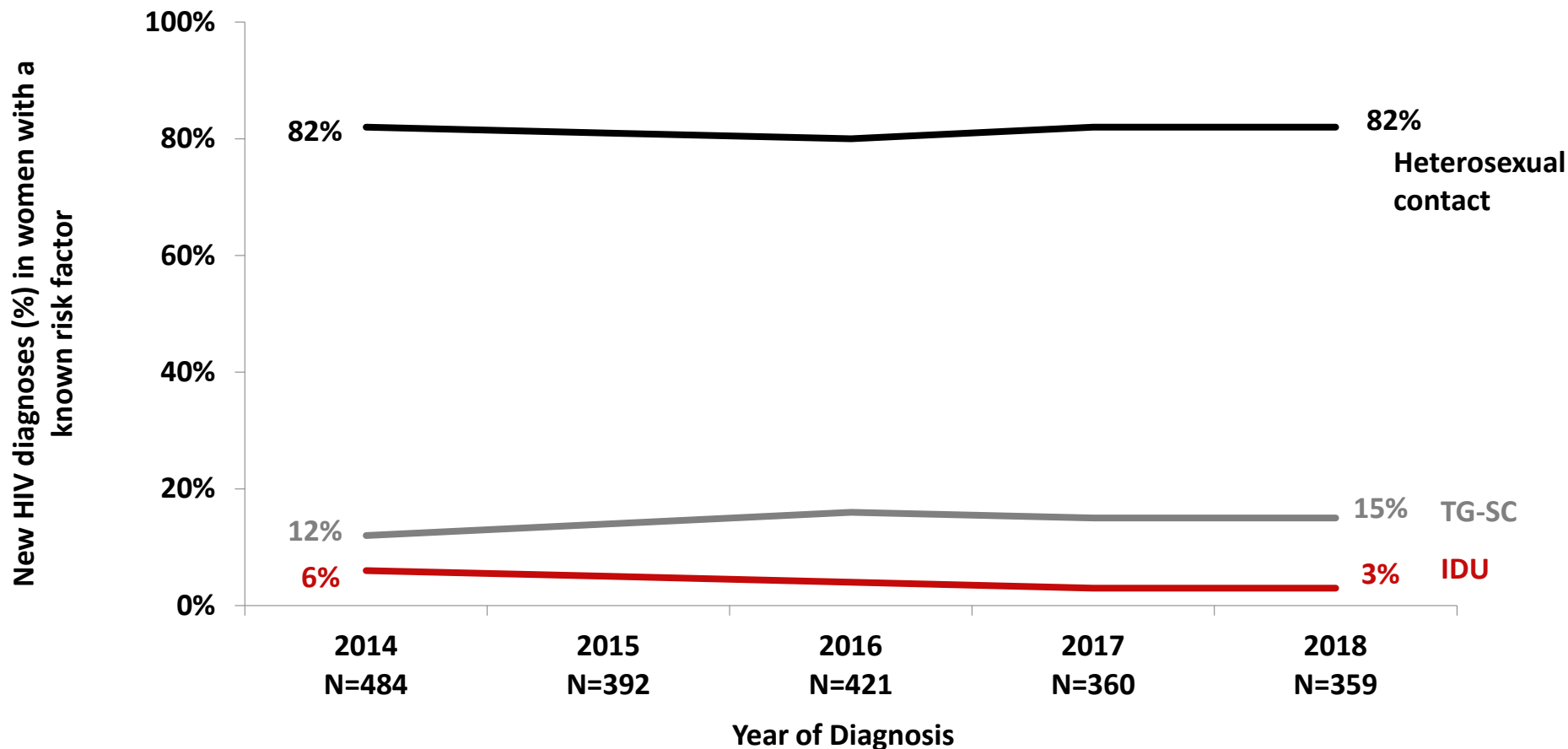
IDU=injection drug use history; TG-SC=transgender people with sexual contact.

¹The IDU risk category for men includes men who have sex with men and have a history of injection drug use (MSM-IDU).

Women includes transgender women and men includes transgender men.

As reported to the New York City Department of Health and Mental Hygiene by March 31, 2019.

PERCENTAGE OF NEW HIV DIAGNOSES AMONG WOMEN BY TRANSMISSION RISK CATEGORY IN NYC, 2014-2018



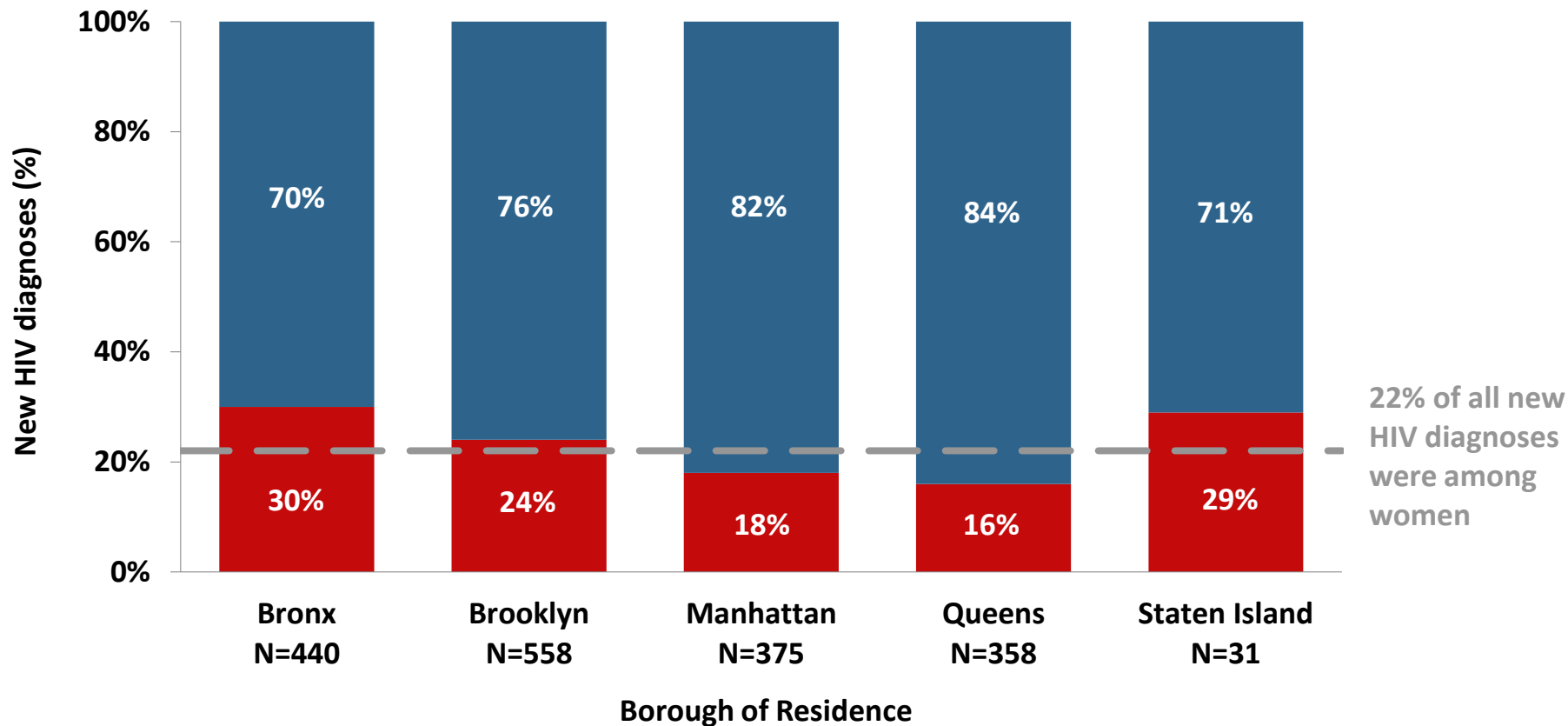
In 2018, 82% of new HIV diagnoses among women with known risk were attributed to heterosexual contact transmission.

TG-SC=transgender people with sexual contact; IDU=injection drug use history.

Unknown transmission risk excluded from the total Ns and from percentage calculations. There were N=70 women with unknown risk newly diagnosed with HIV in 2018.

Women includes transgender women. As reported to the New York City Department of Health and Mental Hygiene by March 31, 2019.

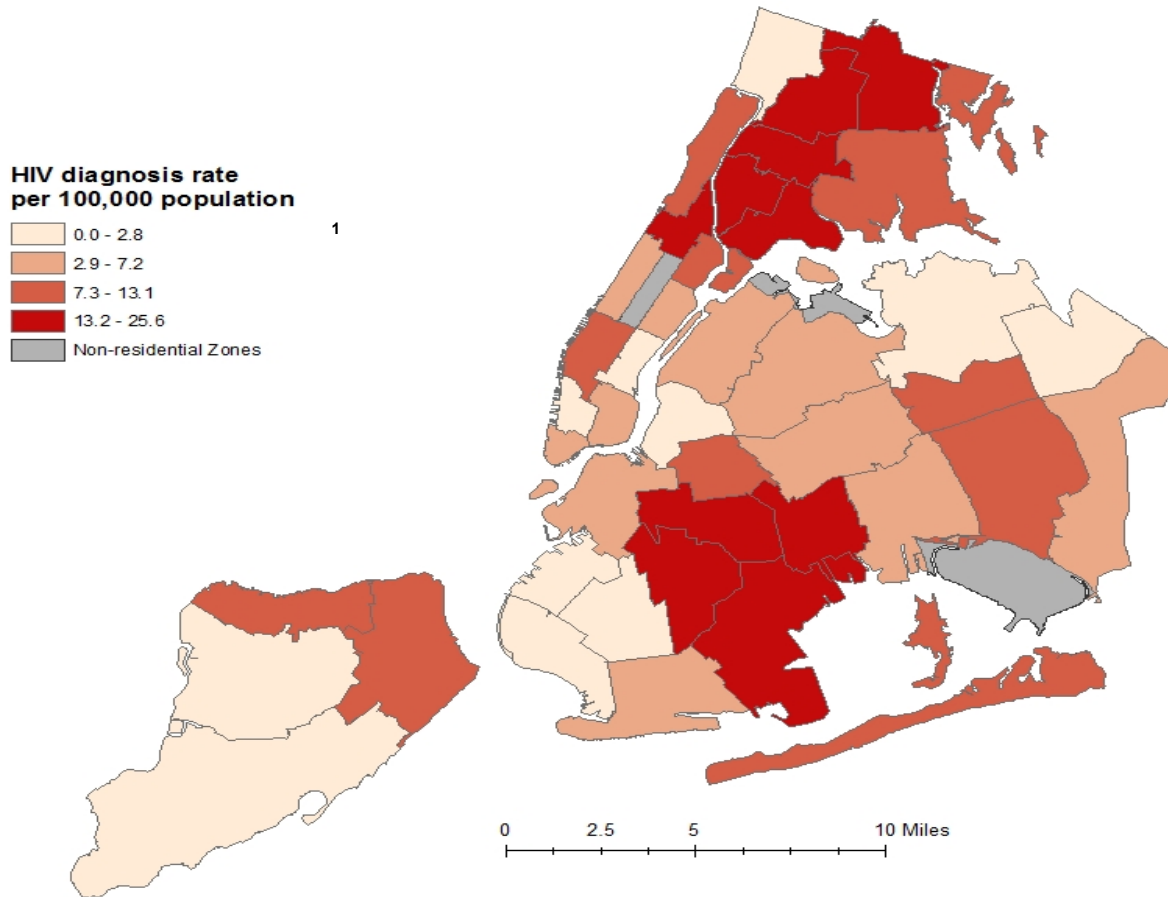
PERCENTAGE OF NEW HIV DIAGNOSES BY GENDER AND BOROUGH IN NYC, 2018



In 2018, women comprised a larger proportion of new HIV diagnoses in the Bronx and Staten Island than in other boroughs.

Women includes transgender women and men includes transgender men.
New HIV diagnoses residing outside of NYC or with an unknown borough of residence not shown.
As reported to the New York City Department of Health and Mental Hygiene by March 31, 2019.

HIV DIAGNOSIS RATE BY UHF AMONG WOMEN IN NYC, 2018



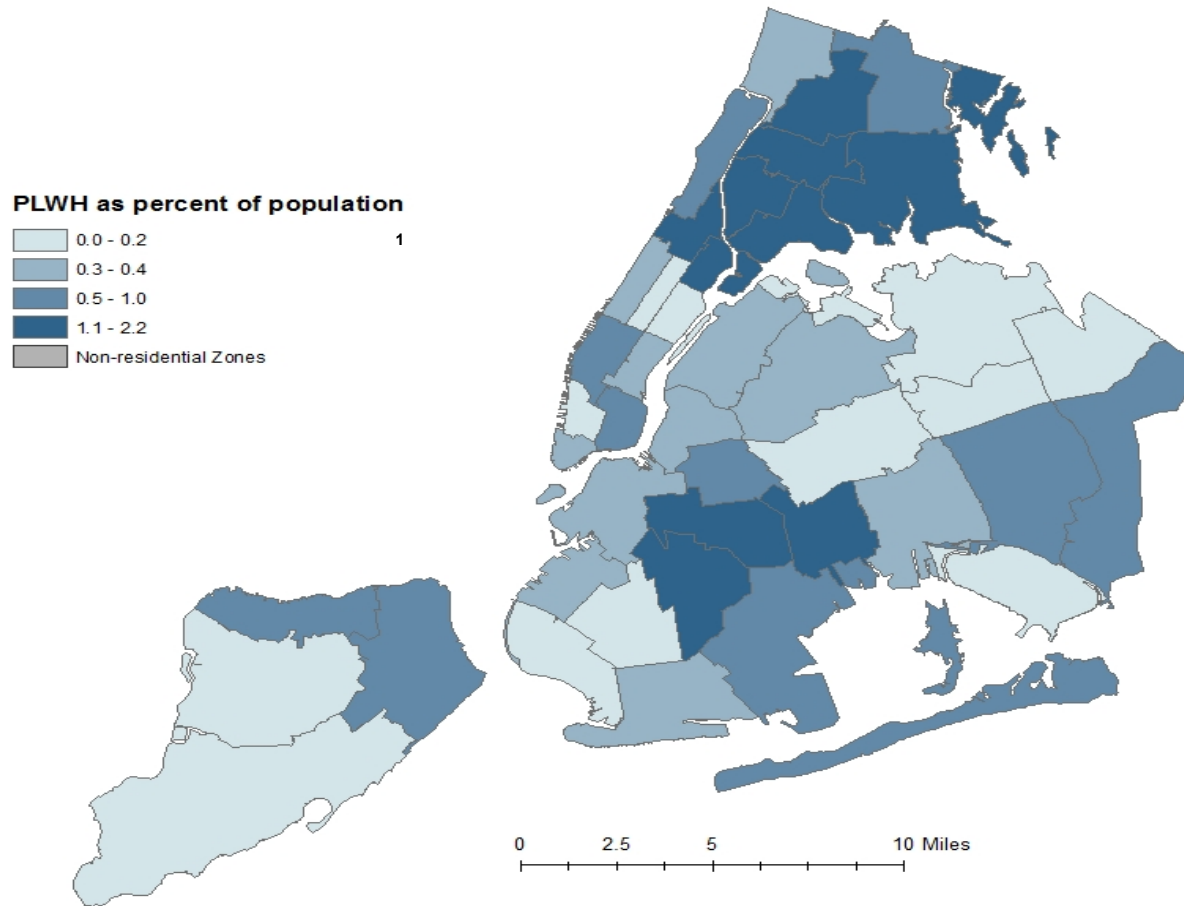
Rates of new HIV diagnoses among women in 2018 were highest in High Bridge-Morrisania, Crotona-Tremont, and Bedford Stuyvesant-Crown Heights.

¹Rates calculated using DOHMH 2017 population estimates, modified from US Census Bureau intercensal population estimates, updated September 2018.

Women includes transgender women.

As reported to the New York City Department of Health and Mental Hygiene by March 31, 2019.

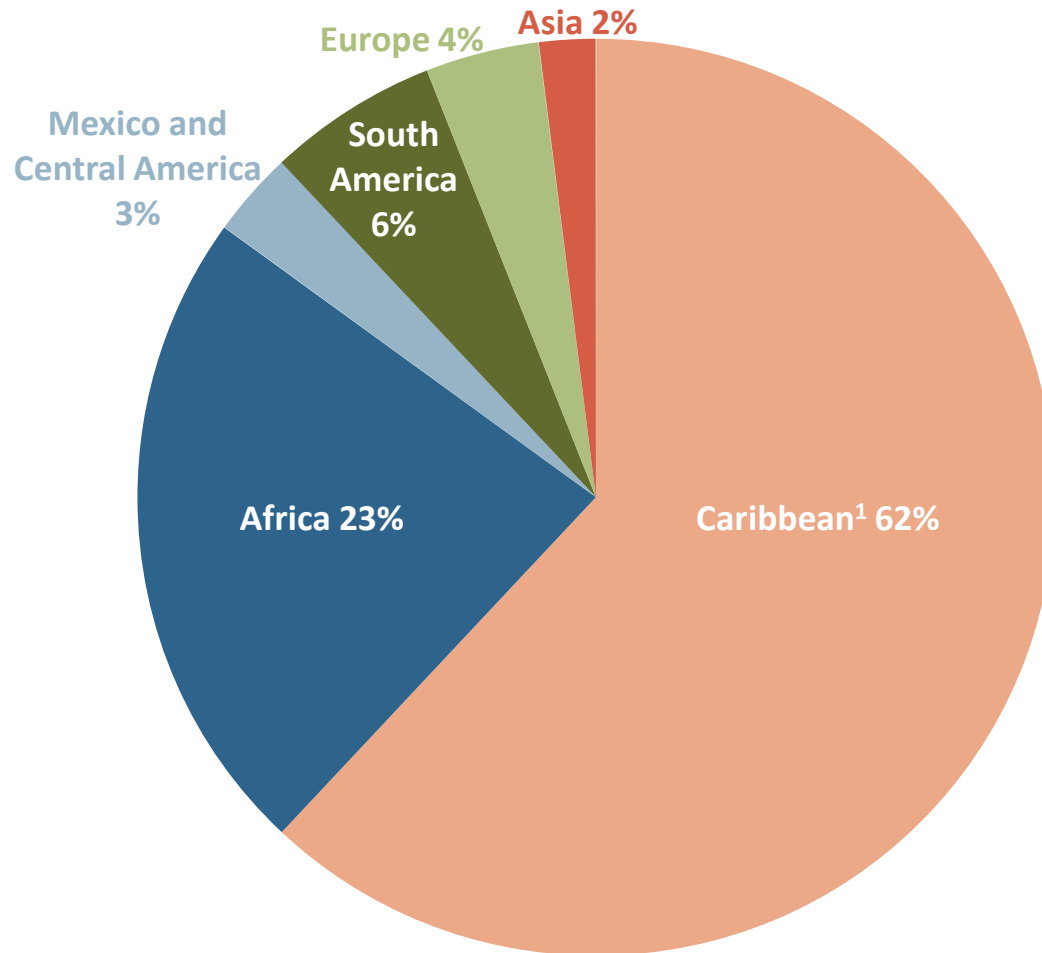
HIV PREVALENCE BY UHF AMONG WOMEN IN NYC, 2018



The neighborhoods with the highest HIV prevalence among women in 2018 were Crotona-Tremont, High Bridge-Morrisania, and Hunts Point-Mott Haven.

¹Rates calculated using DOHMH 2017 population estimates, modified from US Census Bureau intercensal population estimates, updated September 2018. Women includes transgender women. As reported to the New York City Department of Health and Mental Hygiene by March 31, 2019.

PERCENTAGE OF NEW HIV DIAGNOSES AMONG WOMEN BORN OUTSIDE OF THE US BY REGION OF BIRTH, NYC 2018



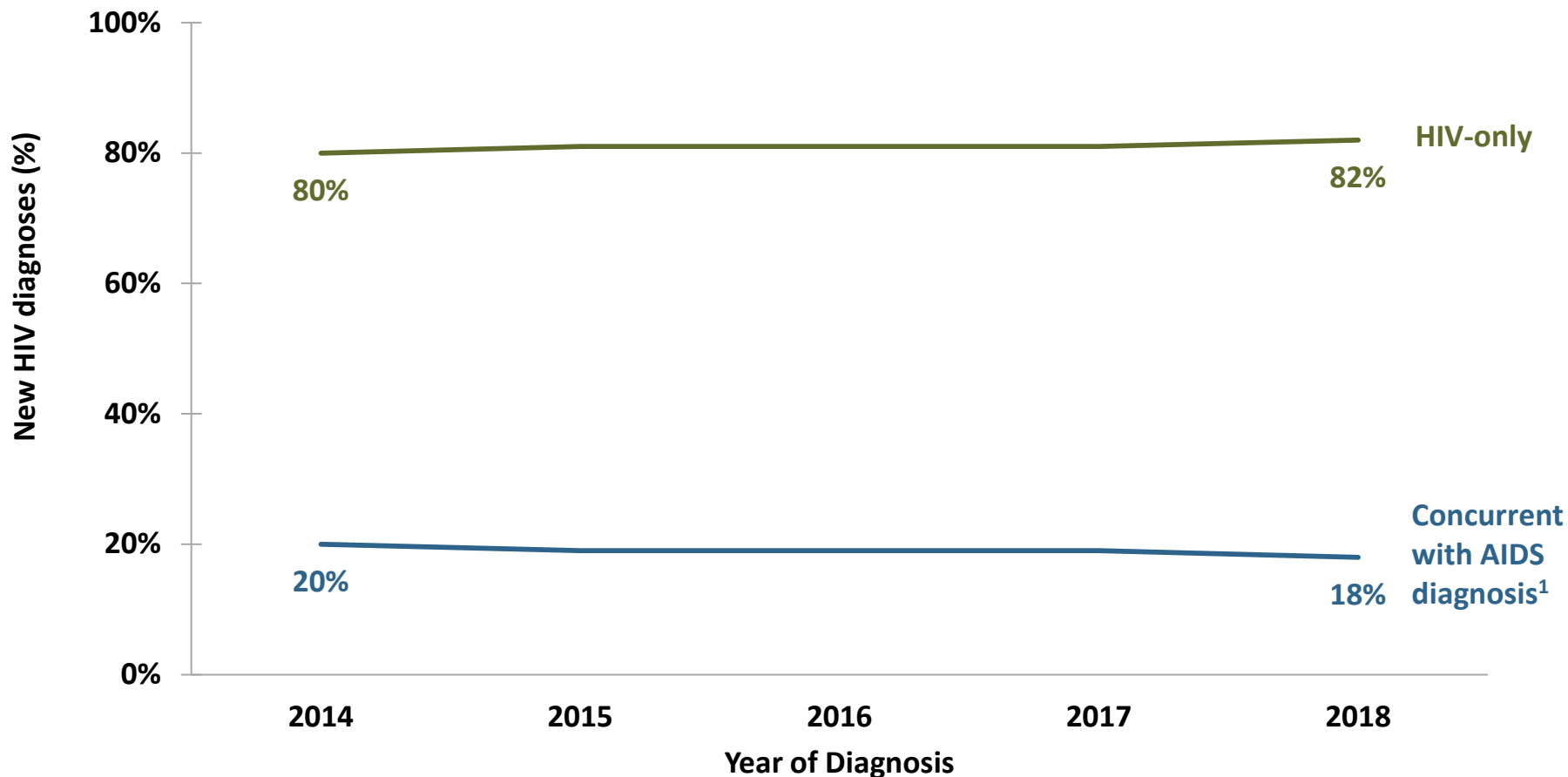
34% of women newly diagnosed in 2018 were born outside the US. Of those, women born in the Caribbean¹ and Africa accounted for 85% of new diagnoses.

¹Excludes Puerto Rico and the US Virgin Islands.

Women includes transgender women.

As reported to the New York City Department of Health and Mental Hygiene by March 31, 2019.

PROPORTION OF NEW HIV DIAGNOSES CONCURRENT WITH AN AIDS DIAGNOSIS¹ AMONG WOMEN IN NYC, 2014-2018



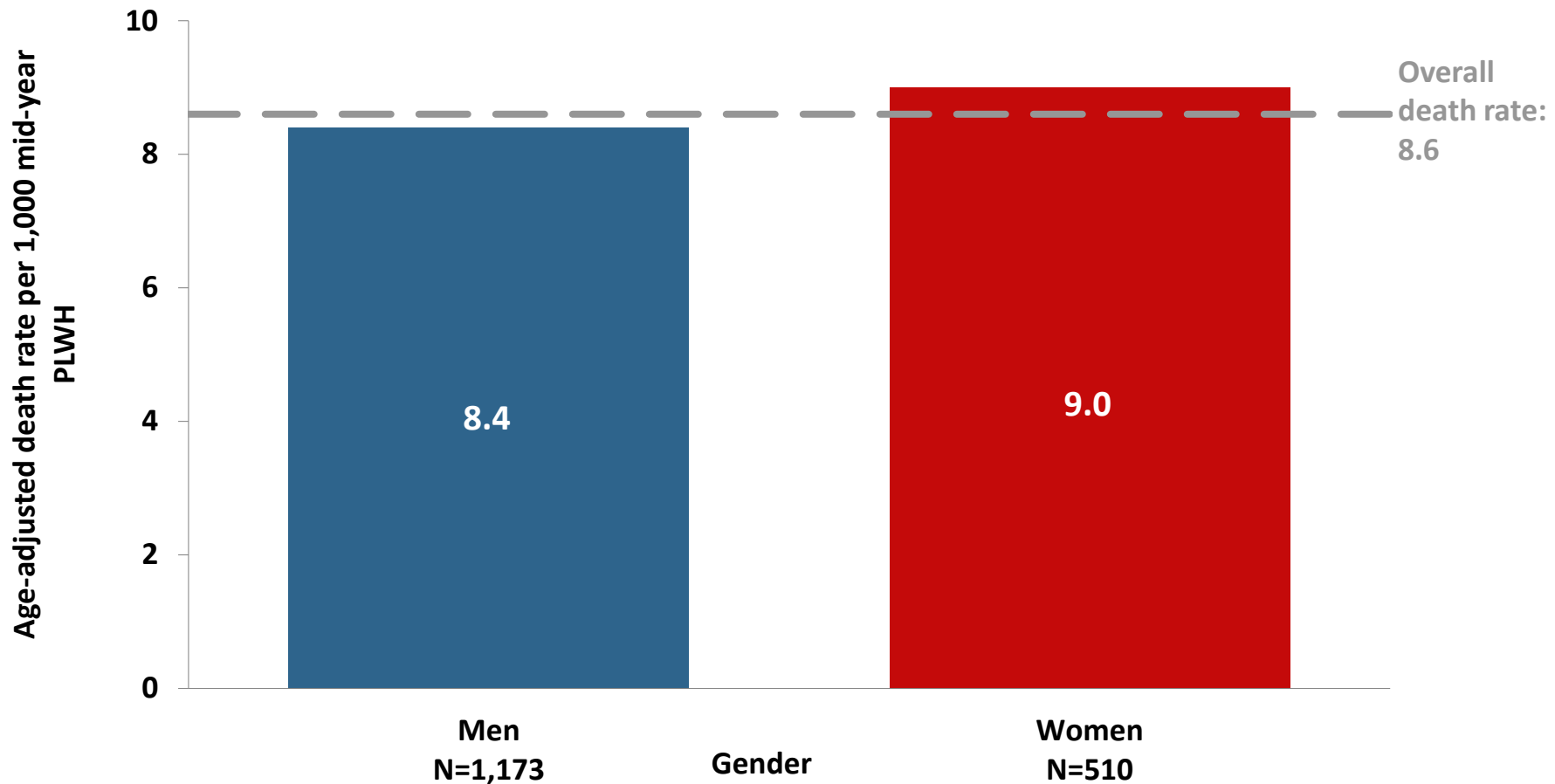
The proportion of new HIV diagnoses among women that were concurrent with an AIDS diagnosis remained relatively consistent from 2014 to 2018.

¹AIDS diagnosis within 31 days of HIV diagnosis.

Women includes transgender women.

As reported to the New York City Department of Health and Mental Hygiene by March 31, 2019.

AGE-ADJUSTED DEATH RATES¹ PER 1,000 MID-YEAR PLWH BY GENDER IN NYC, 2018



The death rate among people with HIV was higher among women (9.0 deaths per 1,000 people) than among men (8.4 per 1,000 people).

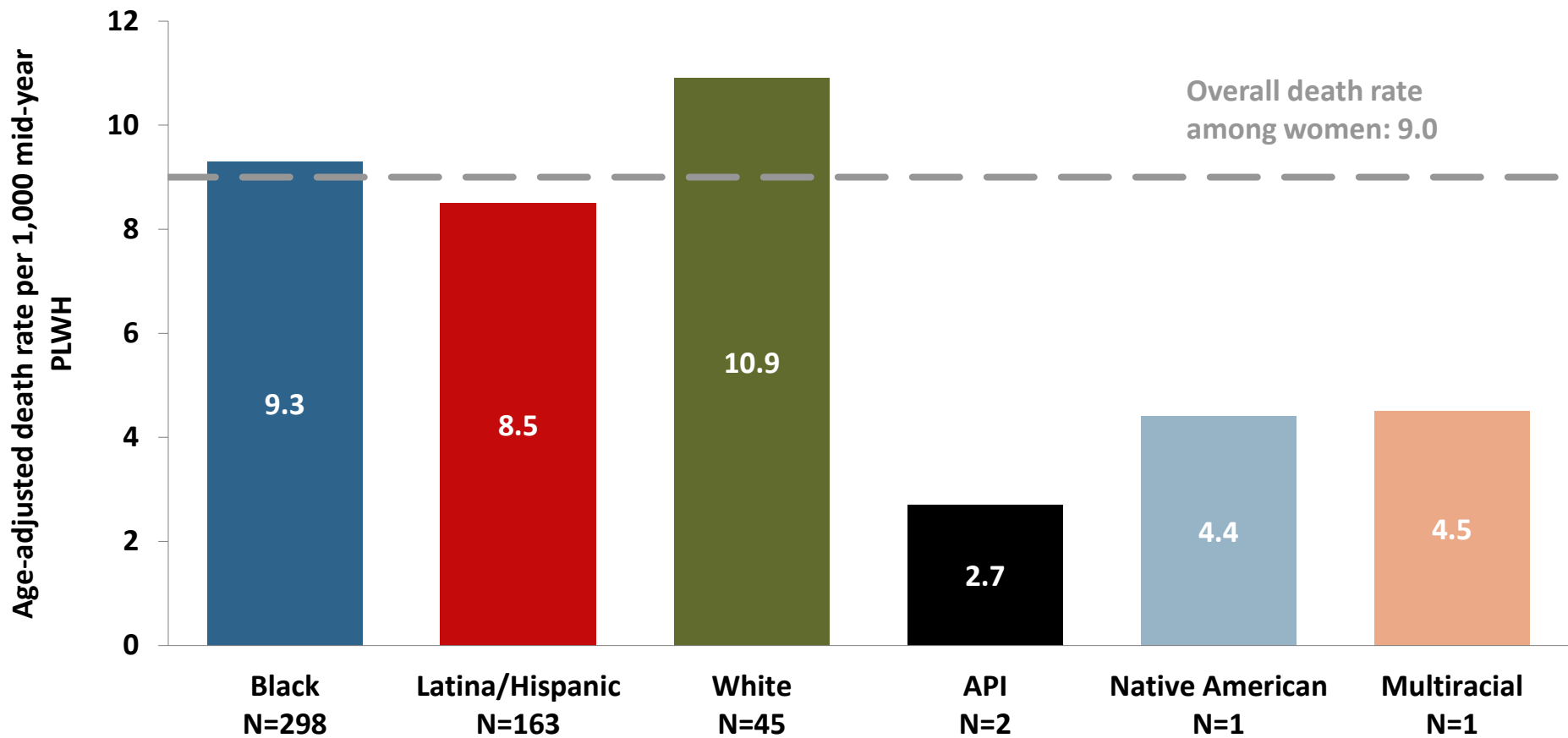
¹Rates are age-adjusted to the Census 2010 NYC population.

Death data for 2018 are incomplete.

Women includes transgender women and men includes transgender men.

As reported to the New York City Department of Health and Mental Hygiene by March 31, 2019.

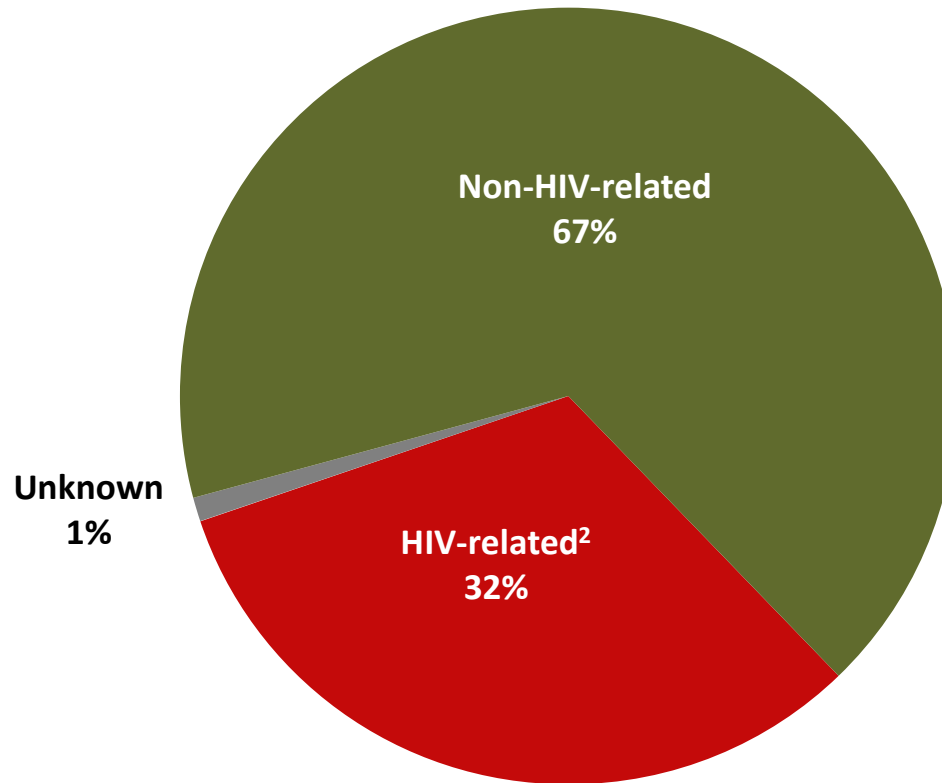
AGE-ADJUSTED DEATH RATE¹ PER 1,000 MID-YEAR PLWH BY RACE/ETHNICITY AMONG WOMEN IN NYC, 2018



In 2018, among all women with HIV, the age-adjusted death rate was highest among White women.

API – Asian/Pacific Islander ¹Death data for 2018 are incomplete. Rates are age-adjusted to the Census 2010 NYC population. Women includes transgender women. As reported to the New York City Department of Health and Mental Hygiene by March 31, 2019.

CAUSE OF DEATH AMONG WOMEN WITH HIV IN NYC, 2017¹



In 2017, over two-thirds of deaths among women with HIV were due to non-HIV-related causes (67%). Among these, the top causes were cardiovascular diseases (32%) and non-HIV-related cancers (26%).

Women includes transgender women.

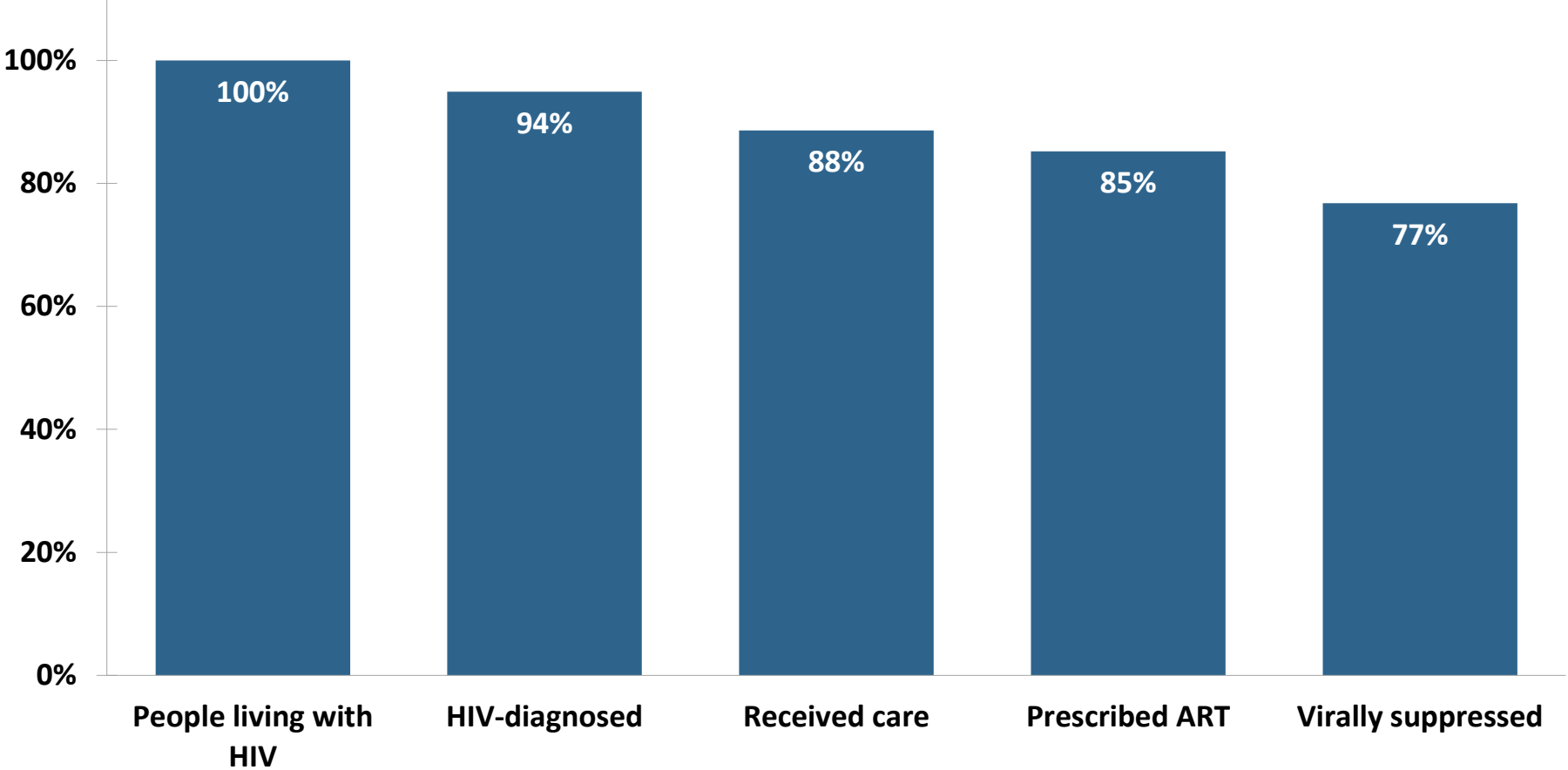
¹Cause of death data is not yet available for 2018.

²ICD10 codes B20-B24 were used to denote HIV-related deaths. For technical notes on cause of death by the NYC DOHMH's Office of Vital

Statistics see: <https://www1.nyc.gov/assets/doh/downloads/pdf/vs/2014sum.pdf>.

As reported to the New York City Department of Health and Mental Hygiene by March 31, 2019.

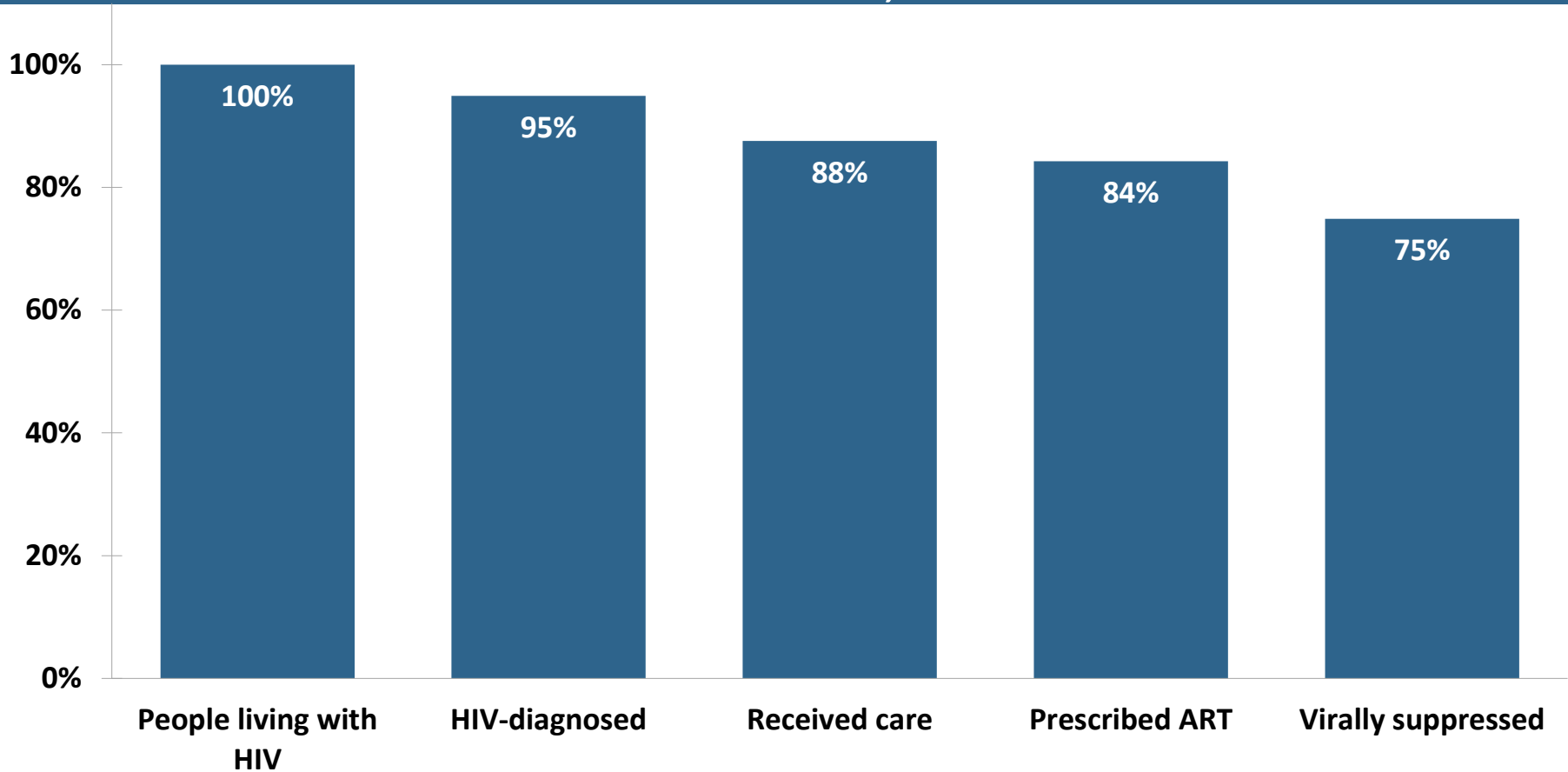
PROPORTION OF WOMEN LIVING WITH HIV IN NYC ENGAGED IN SELECTED STAGES OF THE HIV CARE CONTINUUM, 2018



Of the approximately 26,000 women with HIV living in NYC in 2018, 77% had a suppressed viral load.

Women includes transgender women.
As reported to the New York City Department of Health and Mental Hygiene by March 31, 2019.
For more definitions of the stages of the continuum of care, see Appendix 2.

PROPORTION OF BLACK WOMEN LIVING WITH HIV IN NYC ENGAGED IN SELECTED STAGES OF THE HIV CARE CONTINUUM, 2018



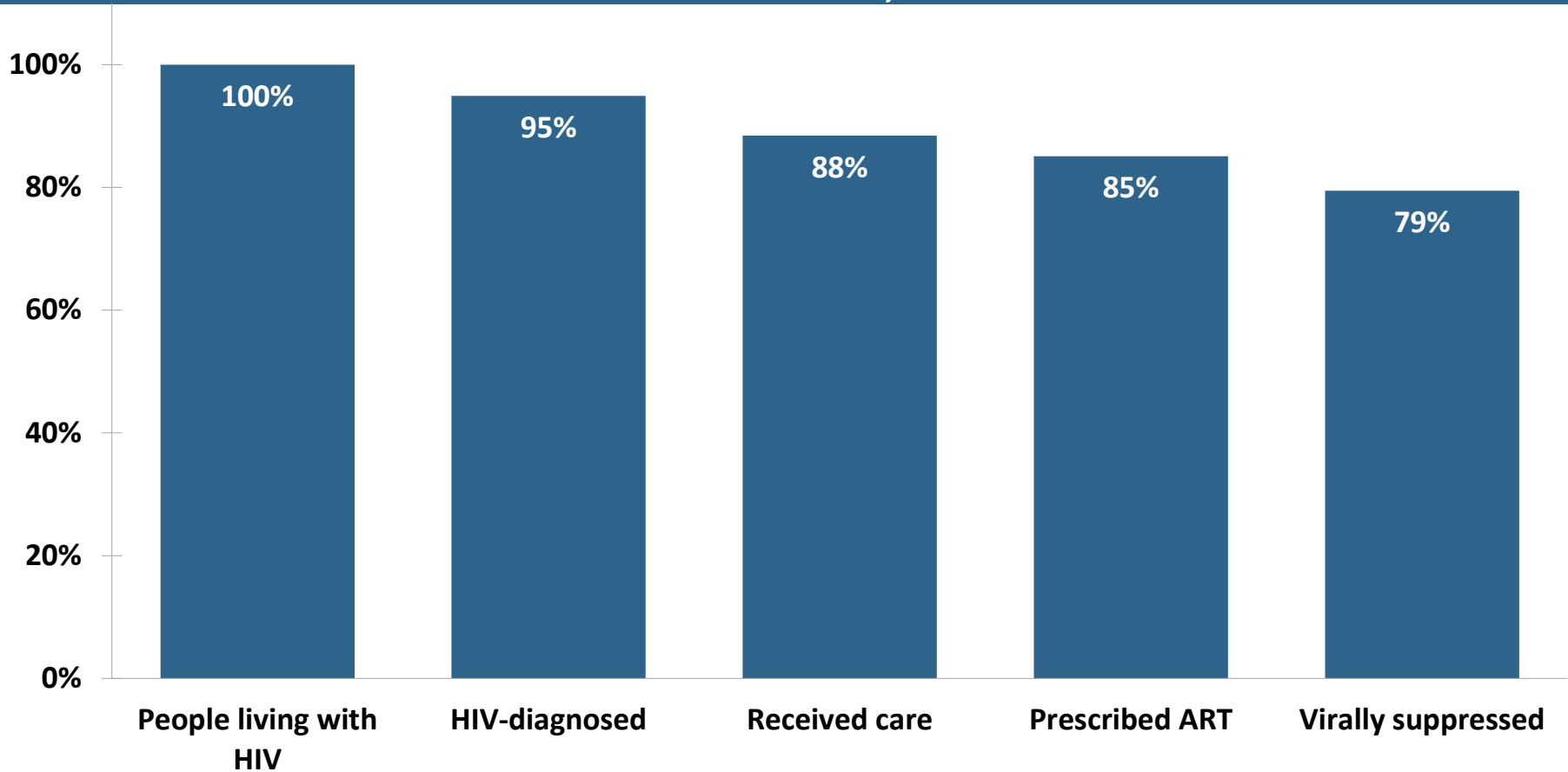
Of the approximately 15,000 Black women with HIV living in NYC in 2018, 75% had a suppressed viral load.

Women includes transgender women.

As reported to the New York City Department of Health and Mental Hygiene by March 31, 2019.

For more definitions of the stages of the continuum of care, see Appendix 2.

PROPORTION OF WHITE WOMEN LIVING WITH HIV IN NYC ENGAGED IN SELECTED STAGES OF THE HIV CARE CONTINUUM, 2018



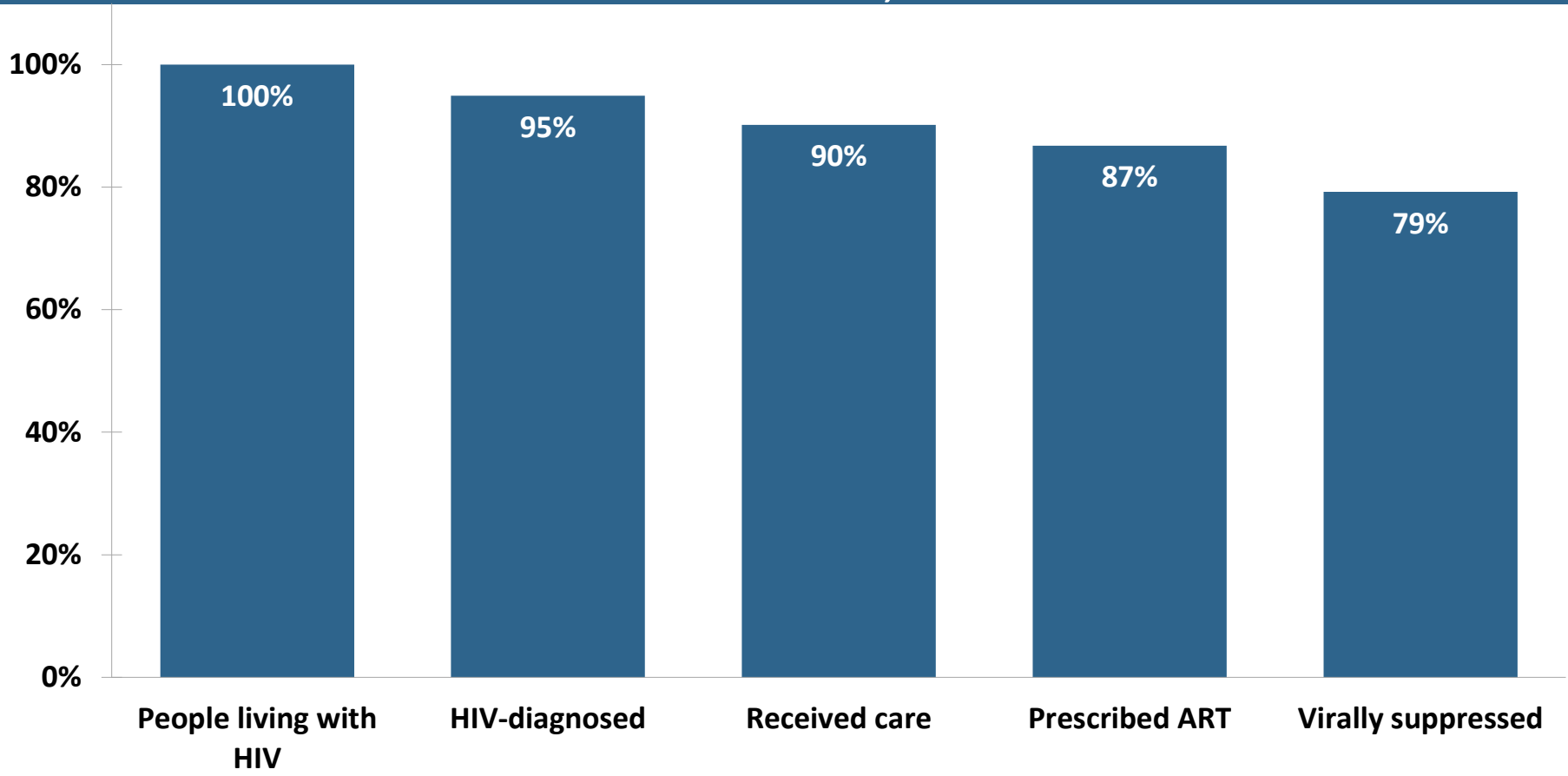
Of the approximately 1,500 White women with HIV living in NYC in 2018, 79% had a suppressed viral load.

Women includes transgender women.

As reported to the New York City Department of Health and Mental Hygiene by March 31, 2019.

For more definitions of the stages of the continuum of care, see Appendix 2.

PROPORTION OF LATINA/HISPANIC WOMEN LIVING WITH HIV IN NYC ENGAGED IN SELECTED STAGES OF THE HIV CARE CONTINUUM, 2018



Of the approximately 8,800 Latino/Hispanic women with HIV living in NYC in 2018, 79% had a suppressed viral load.

Women includes transgender women.
As reported to the New York City Department of Health and Mental Hygiene by March 31, 2019.
For more definitions of the stages of the continuum of care, see Appendix 2.

HOW TO FIND OUR DATA

- **Our program publishes annual surveillance reports, slide sets, and statistics tables:**
 - Annual reports: <http://www1.nyc.gov/site/doh/data/data-sets/hiv-aids-surveillance-and-epidemiology-reports.page>
 - Slide sets: <http://www1.nyc.gov/site/doh/data/data-sets/epi-surveillance-slide-sets.page>
 - Statistics tables: <http://www1.nyc.gov/site/doh/data/data-sets/hiv-aids-annual-surveillance-statistics.page>
- **Other resources:**
 - HIV Care Status Reports (CSR) system: <https://www1.nyc.gov/site/doh/health/health-topics/aids-hiv-care-status-reports-system.page>
 - HIV Care Continuum Dashboards (CCDs): <http://www1.nyc.gov/site/doh/health/health-topics/care-continuum-dashboard.page>
- **For surveillance data requests, email:** HIVReport@health.nyc.gov
 - 2 weeks minimum needed for requests to be completed

APPENDIX 1:

DEFINITIONS AND STATISTICAL NOTES

- “HIV diagnoses” include diagnoses of HIV (non-AIDS) *and* HIV concurrent with AIDS, unless otherwise specified.
- “New HIV diagnoses” include individuals diagnosed in NYC during the reporting period and reported in NYC.
- “Death rates” refer to deaths from all causes, unless otherwise specified.
- “PWH” refers to people with HIV during the reporting period (Note: includes people with HIV who remained alive or died during the reporting period); “PLWH” refers to people living with HIV during the reporting period.
- “Women” includes transgender women and “men” includes transgender men. For more information on transgender surveillance in NYC, please see the “HIV among People identified as Transgender” slide set.
- Data presented by “Transmission risk” categories include only individuals with known or identified transmission risk, except when an “unknown” category is presented.
- “Heterosexual contact” includes people who had heterosexual sex with a person they know to be HIV-positive, an injection drug user, or a person who has received blood products. For women only, also includes history of sex work, multiple sex partners, sexually transmitted disease, crack/cocaine use, sex with a bisexual man, probable heterosexual transmission as noted in medical chart, or sex with a man and negative history of injection drug use. “Transgender people with sexual contact” includes people identified as transgender by self-report, diagnosing provider, or medical chart review with sexual contact reported and negative history of injection drug use. “Other” includes people who received treatment for hemophilia, people who received a transfusion or transplant, and children with a non-perinatal transmission risk.

APPENDIX 1, CONTINUED:

DEFINITIONS AND STATISTICAL NOTES

- Surveillance collects information about individuals' current gender identity, when available. These slides display the following gender categories: men, women, transgender (if applicable). People whose current gender identity differs from their sex assigned at birth are considered transgender. Classifying transgender people in surveillance requires accurate collection of both sex assigned at birth and current gender identity. Sex and gender information are collected from people's self-report, their diagnosing provider, or medical chart review. This information may or may not reflect the individual's self-identification. Transgender status has been collected routinely since 2005 for newly reported cases. Reported numbers of new transgender HIV diagnoses and transgender PLWH are likely to be underestimates. For more information, see the "HIV among Transgender people in New York City" surveillance slide set available at: www1.nyc.gov/assets/doh/downloads/pdf/dires/hiv-in-transgender-persons.pdf. Surveillance collects information on other gender identity categories, including "Non-binary/Gender non-conforming." In these slides, data for these individuals (N=7 at time of publication) are displayed by sex at birth.
- UHF boundaries in maps were updated for data released in 2010 and onward. Non-residential zones are indicated, and Rikers Island is classified with West Queens.

APPENDIX 2:

TECHNICAL NOTES: NYC HIV CARE CONTINUUM

- “People living with HIV”: calculated as “HIV-diagnosed” divided by the estimated proportion of women people living with HIV (PLWH) who had been diagnosed (94.7%), based on a CD4 depletion model.
 - Source: NYC HIV Surveillance Registry. Method: Song R, et al. Using CD4 Data to Estimate HIV Incidence, Prevalence, and Percent of Undiagnosed Infections in the United States. *J Acquir Immune Defic Syndr*. 2017 Jan 1;74(1):3-9.
- “HIV-diagnosed”: calculated as PLWH “received care” plus the estimated number of PLWH who were out of care, based on a statistical weighting method. This estimated number aims to account for out-migration from NYC, and therefore is different from the total number of people diagnosed and reported with HIV in NYC.
 - Source: NYC HIV Surveillance Registry. Method: Xia Q, et al. Proportions of Patients With HIV Retained in Care and Virally Suppressed in New York City and the United States. *JAIDS* 2015;68(3):351-358.
- “Received care”: PLWH with ≥ 1 VL or CD4 count or CD4 percent drawn in 2018 and reported to NYC HIV surveillance.
 - Source: NYC HIV Surveillance Registry.
- “Prescribed ART”: calculated as PLWH “received care” multiplied by the estimated proportion of women PLWH prescribed ART in the previous 12 months (96.2%), based on the proportion of NYC Medical Monitoring Project participants whose medical record included documentation of ART prescription.
 - Source: NYC HIV Surveillance Registry and NYC Medical Monitoring Project, 2017.
- “Virally suppressed”: calculated as PLWH in care with a most recent viral load measurement in 2018 of < 200 copies/mL, plus the estimated number of out-of-care 2018 PLWH with a viral load < 200 copies/mL, based on a statistical weighting method.
 - Source: NYC HIV Surveillance Registry. Method: Xia Q, et al. Proportions of Patients With HIV Retained in Care and Virally Suppressed in New York City and the United States. *JAIDS* 2015;68(3):351-358.