

HIV AMONG WOMEN IN NEW YORK CITY, 2021



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



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

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HIV AMONG WOMEN¹ IN NYC, 2021

BASIC STATISTICS

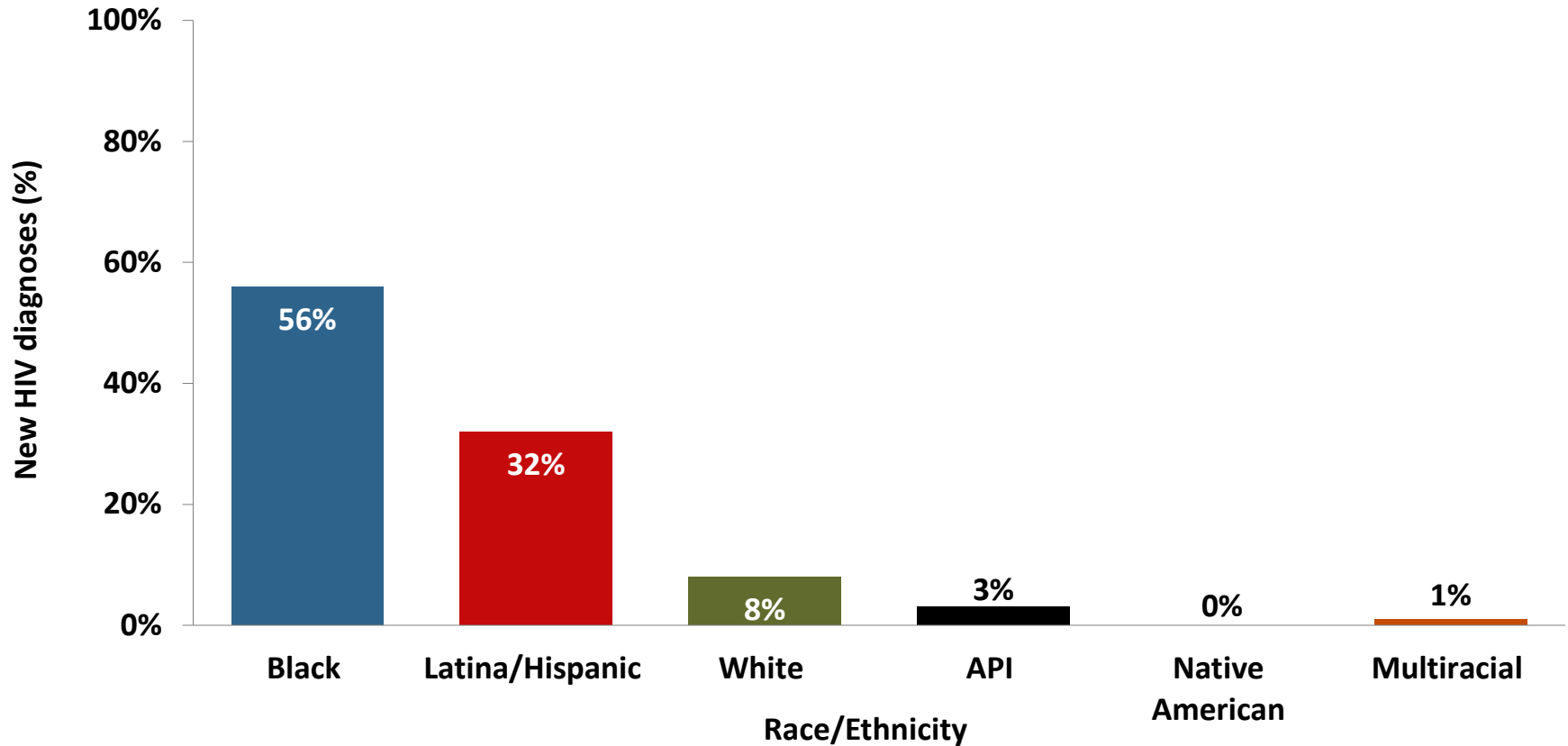
- **339 new HIV diagnoses**
 - Includes 65 concurrent HIV/AIDS diagnoses (19%)
 - Women comprise 52% of the population of NYC and 21% of new HIV diagnoses
- **291 new AIDS diagnoses**
- **621 deaths among women with HIV**
 - 10.5 deaths per 1,000 mid-year women living with HIV²

¹Women includes transgender women and men includes transgender men. There were 57 new HIV diagnoses among transgender women in 2021.

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, 2022.

PERCENTAGE OF NEW HIV DIAGNOSES AMONG WOMEN BY RACE/ETHNICITY IN NYC, 2021



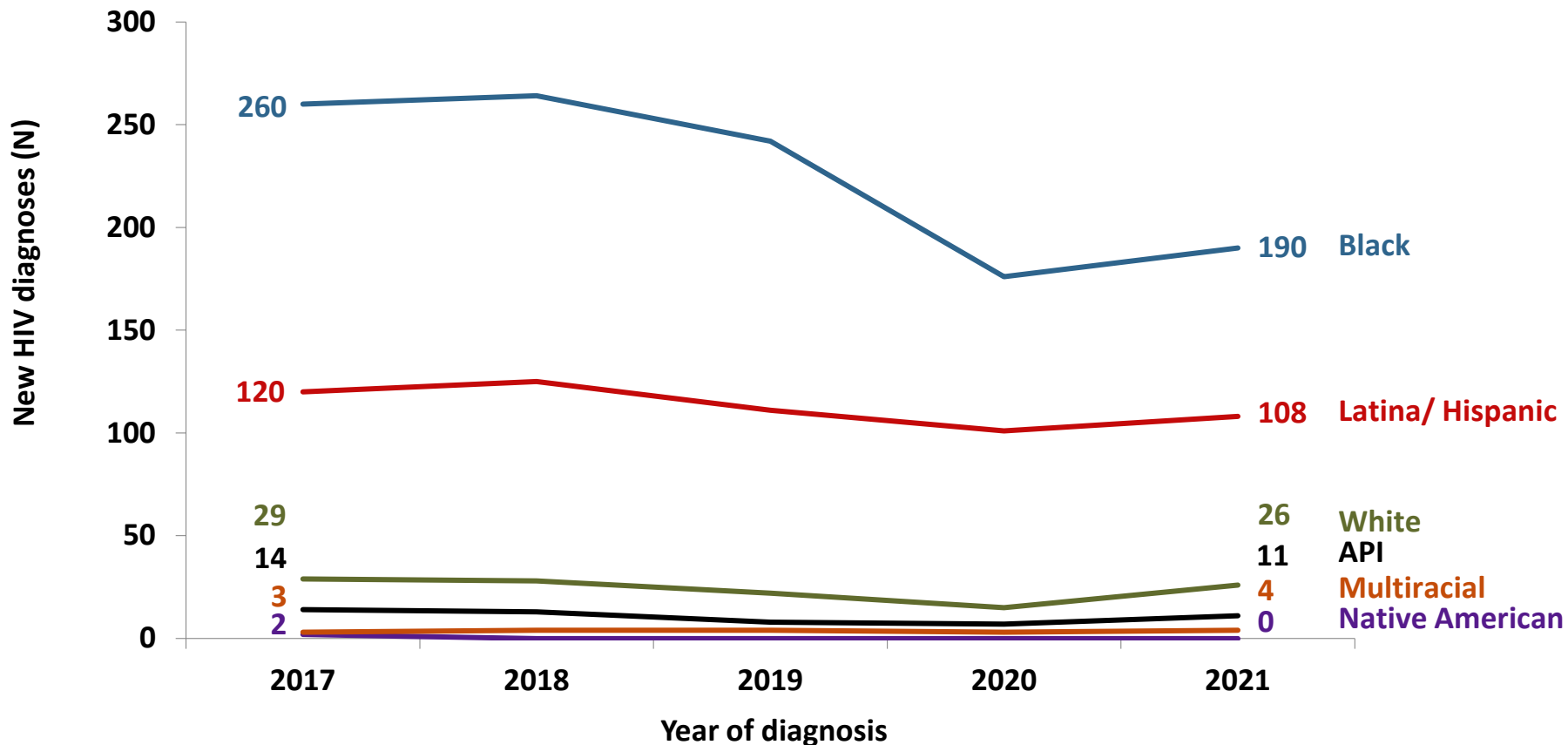
In 2021, 1,594 people were newly diagnosed with HIV in NYC and of these, 339 were women. Black women accounted for the majority (56%) of new HIV diagnoses among women in 2021.

API = Asian/Pacific Islander.

Women includes transgender women.

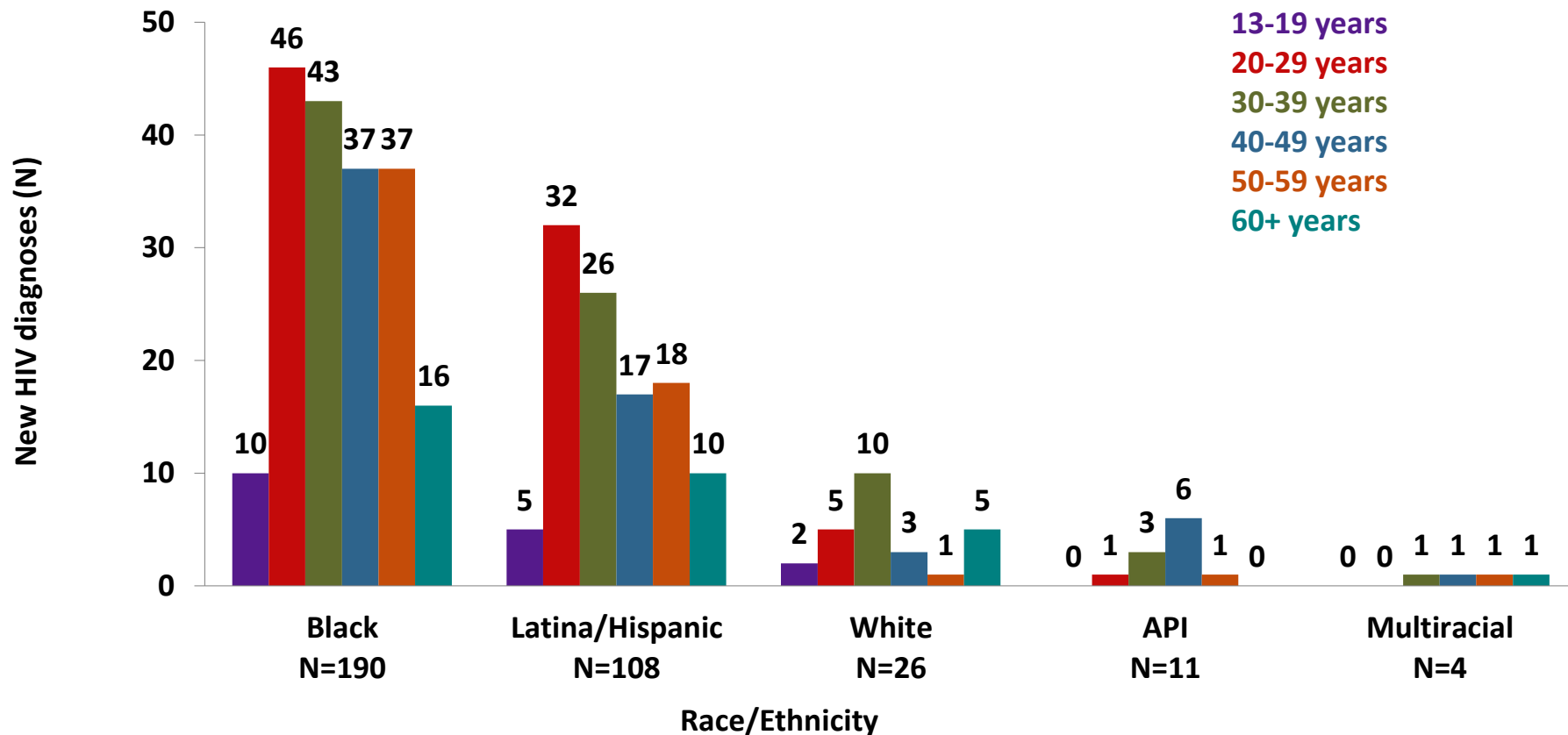
As reported to the New York City Department of Health and Mental Hygiene by March 31, 2022.

NUMBER OF NEW HIV DIAGNOSES AMONG WOMEN BY RACE/ETHNICITY IN NYC, 2017-2021



Black women accounted for the majority of new HIV diagnoses among women from 2017 to 2021.

NUMBER OF NEW HIV DIAGNOSES AMONG WOMEN BY RACE/ETHNICITY AND AGE IN NYC, 2021



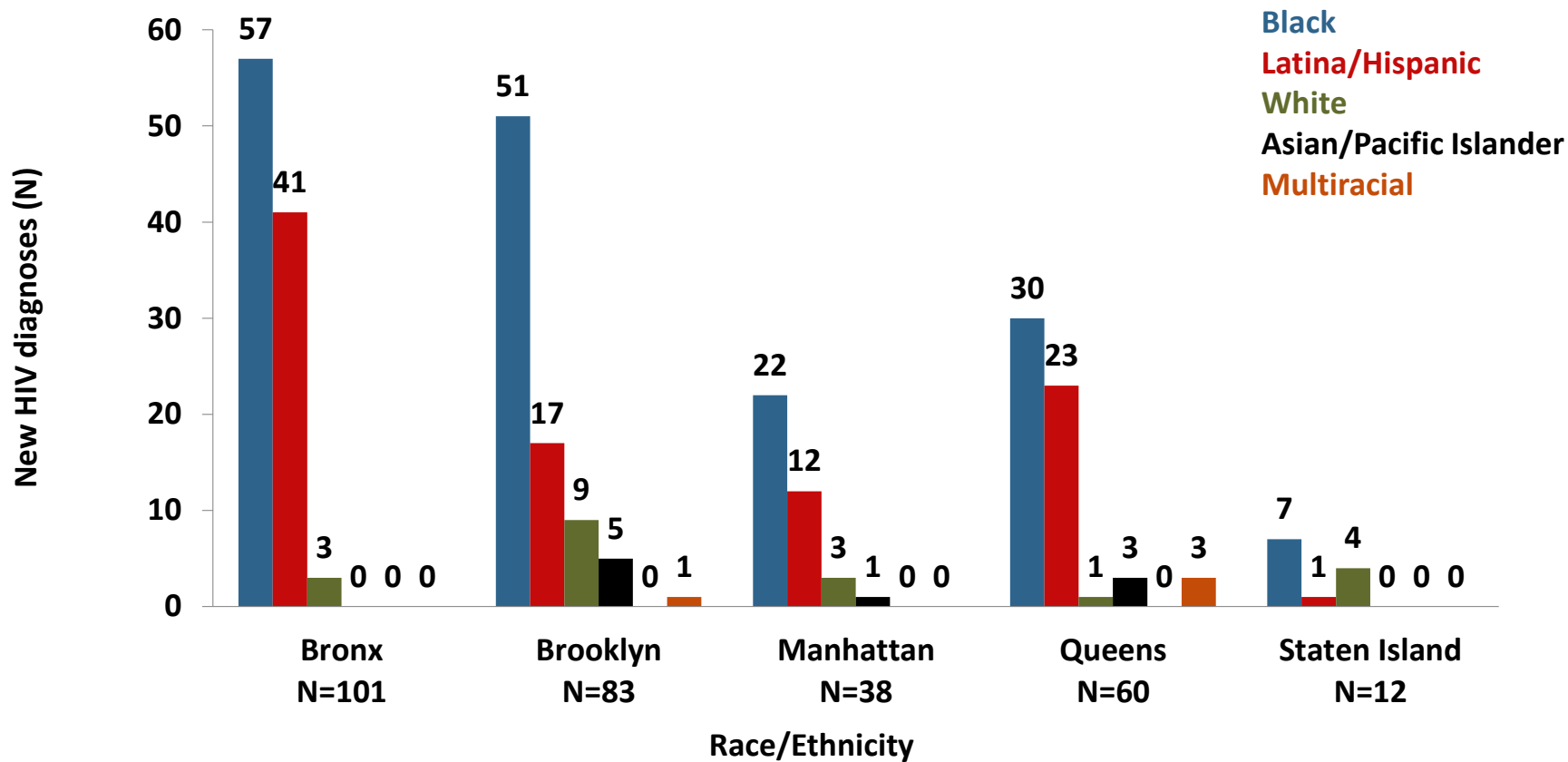
Most newly diagnosed Black and Latina/Hispanic women were ages 20-39.

API = Asian/Pacific Islander. New diagnoses among Native American people are not displayed (N=0).

Women includes transgender women.

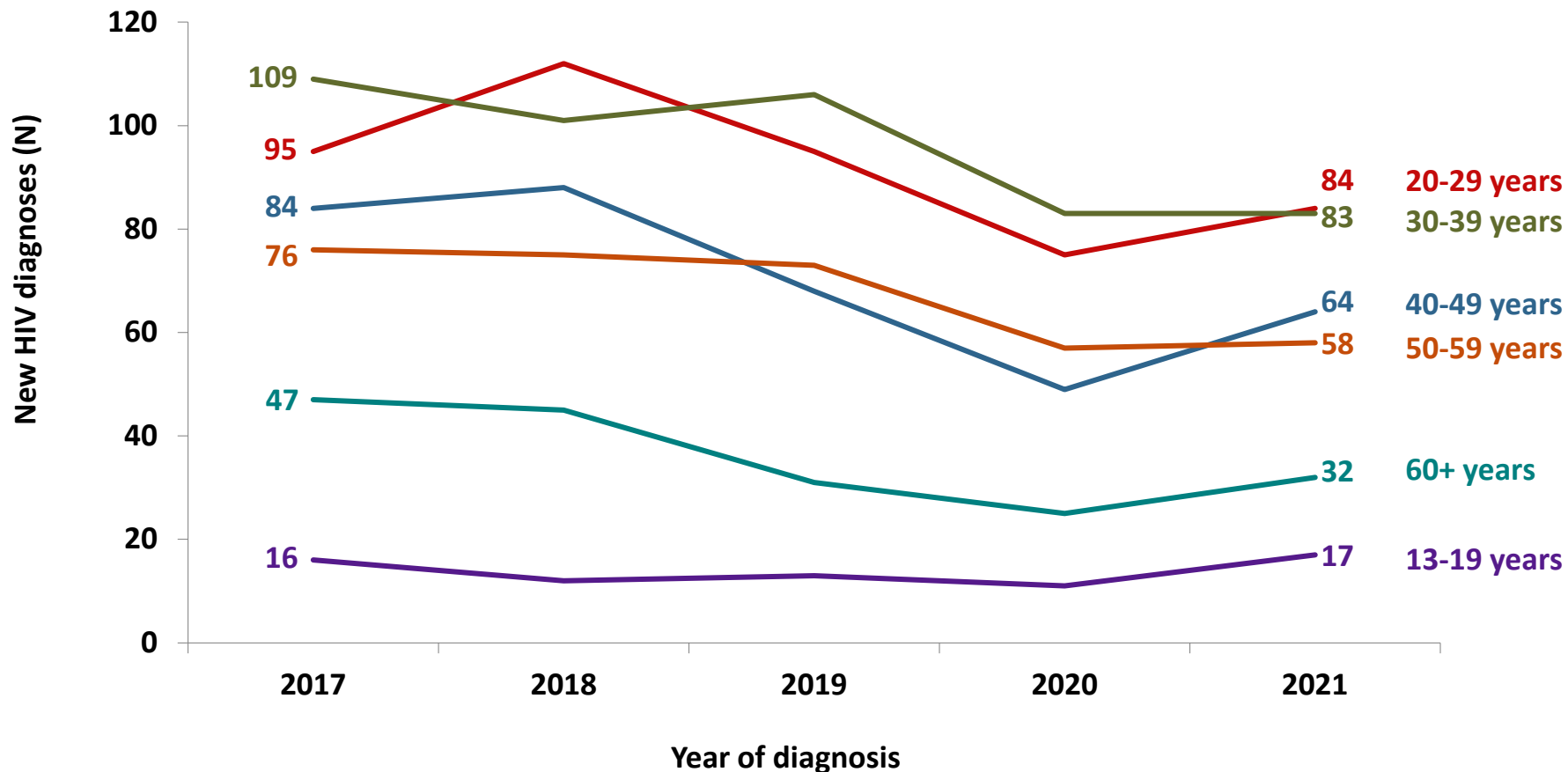
As reported to the New York City Department of Health and Mental Hygiene by March 31, 2022.

NUMBER OF NEW HIV DIAGNOSES AMONG WOMEN BY BOROUGH OF RESIDENCE AND RACE/ETHNICITY IN NYC, 2021



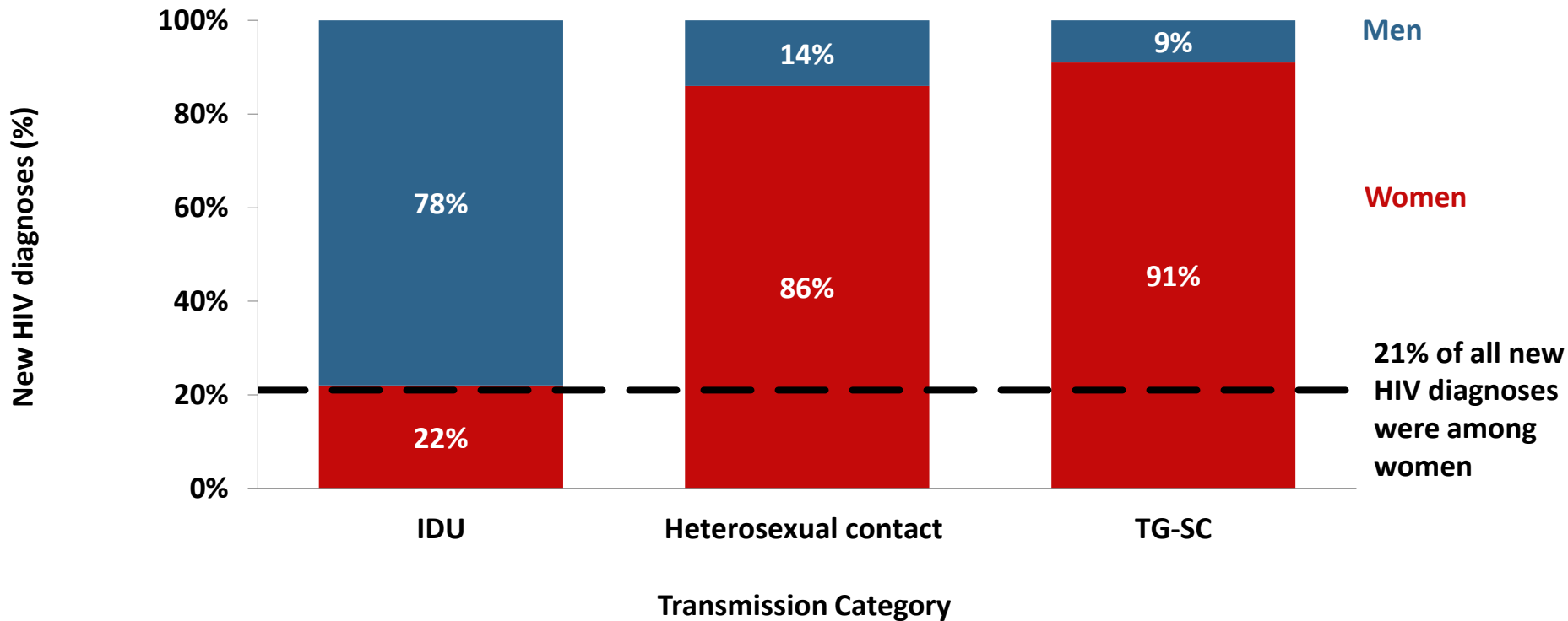
Black women comprised the highest number of new HIV diagnoses among women across all boroughs in 2021.

NUMBER OF NEW HIV DIAGNOSES AMONG WOMEN BY AGE IN NYC, 2017-2021



New HIV diagnoses in women declined or was stable among all age groups from 2017 to 2021.

PERCENTAGE OF NEW HIV DIAGNOSES BY TRANSMISSION CATEGORY IN NYC, 2021



In 2021, women comprised a larger proportion of newly HIV diagnosed people with heterosexual contact and TG-SC than those with a history of IDU.

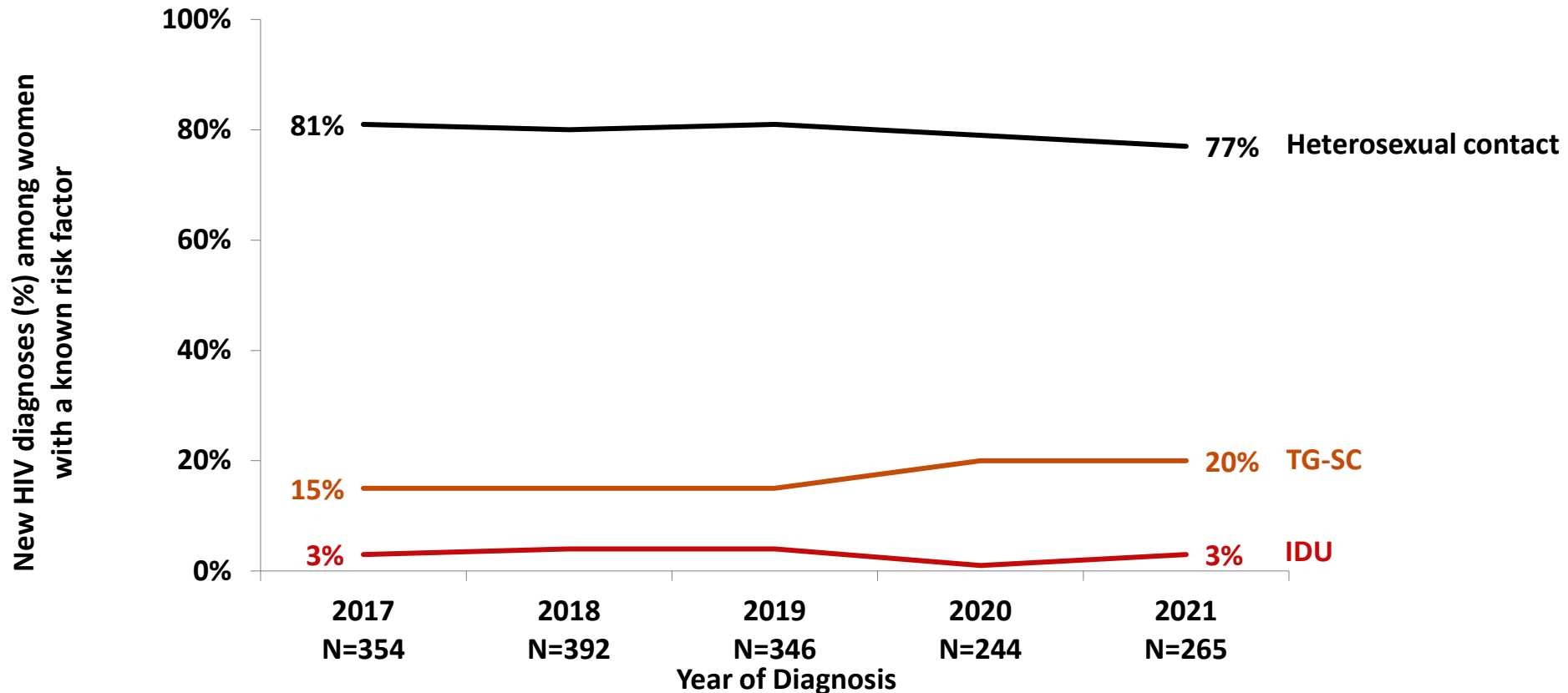
IDU=injection drug use history; TG-SC=transgender people with sexual contact.

¹The IDU transmission 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, 2022.

PERCENTAGE OF NEW HIV DIAGNOSES AMONG WOMEN BY TRANSMISSION CATEGORY IN NYC, 2017-2021



In 2021, 77% of new HIV diagnoses among women with a known transmission category were attributed to heterosexual contact. The proportion of cases among transgender people with sexual contact has increased in recent years.

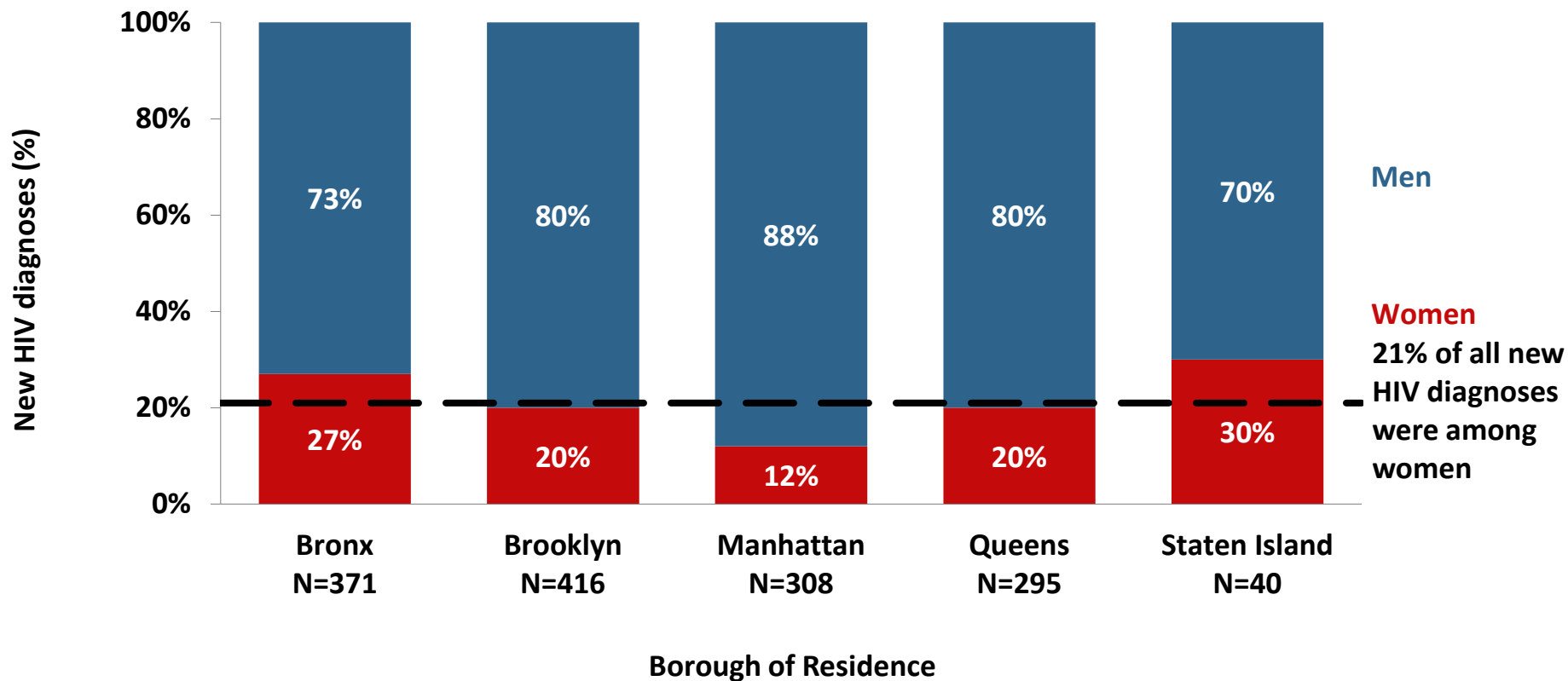
TG-SC=transgender people with sexual contact; IDU=injection drug use history.

Unknown transmission category excluded from the total Ns and from percentage calculations. There were N=74 women with an unknown transmission category newly diagnosed with HIV in 2021 (21.8% of all new diagnoses among women).

Women includes transgender women.

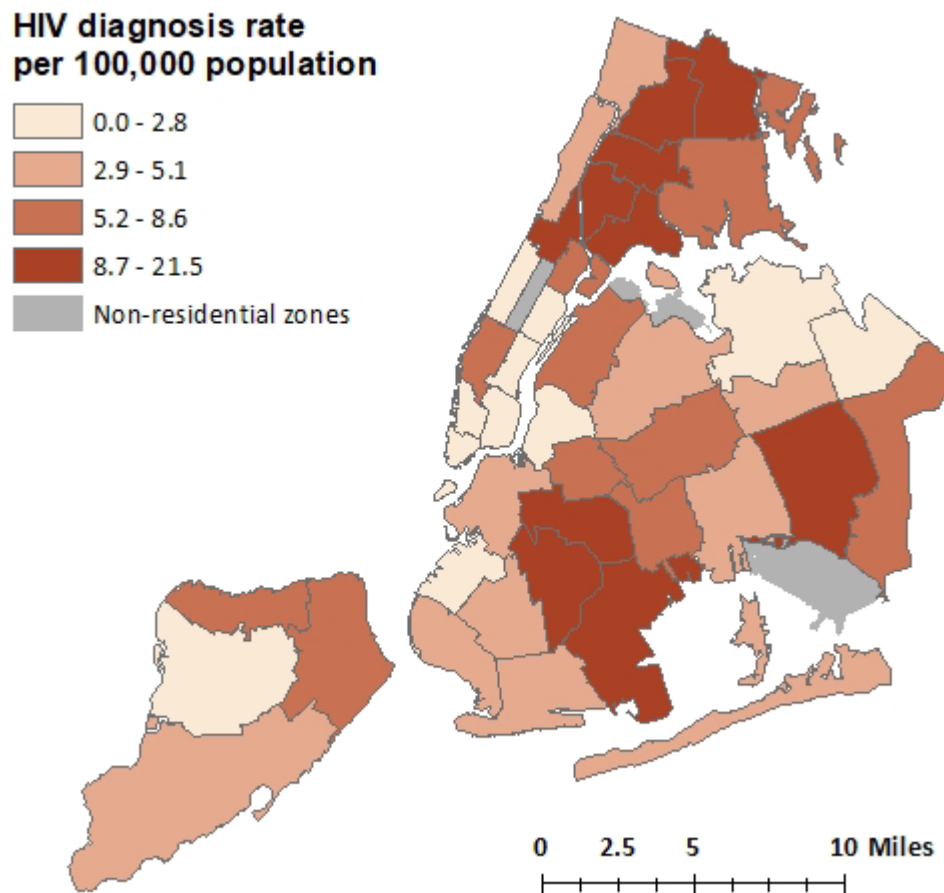
As reported to the New York City Department of Health and Mental Hygiene by March 31, 2022.

PERCENTAGE OF NEW HIV DIAGNOSES BY GENDER AND BOROUGH IN NYC, 2021



In 2021, women represented a larger proportion of new HIV diagnoses in the Bronx and Staten Island than in other boroughs.

HIV DIAGNOSIS RATE BY UHF AMONG WOMEN IN NYC, 2021



Rates of new HIV diagnoses among women in 2021 were highest in the neighborhoods of Crotona-Tremont, High Bridge–Morrisania, and Northeast Bronx.

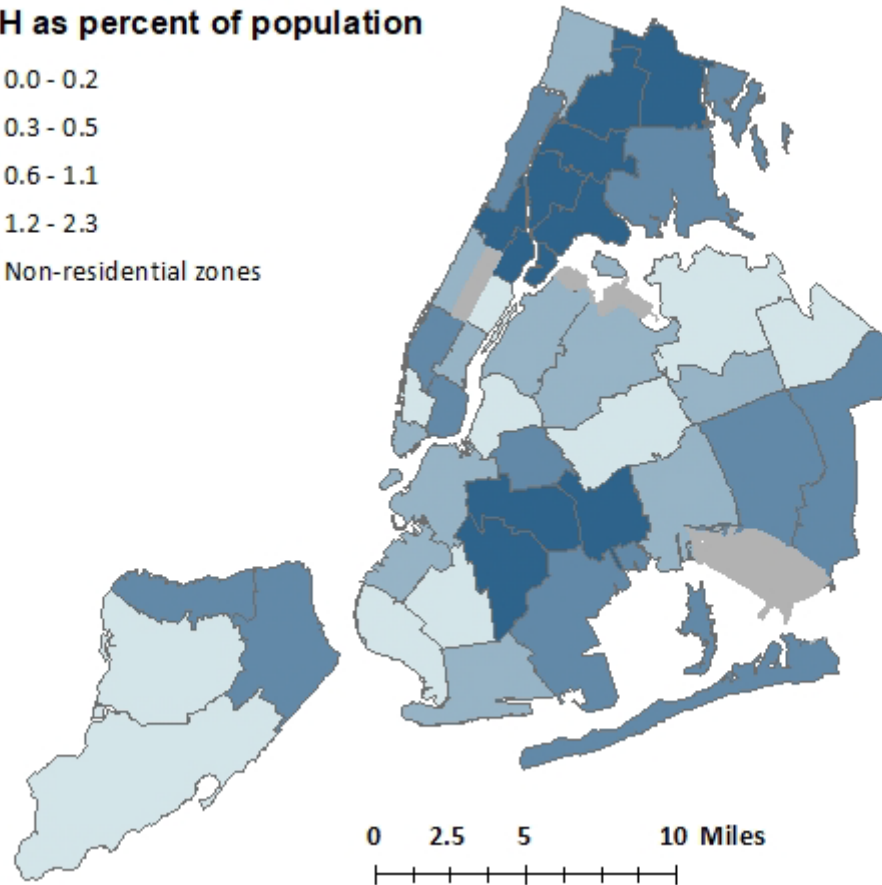
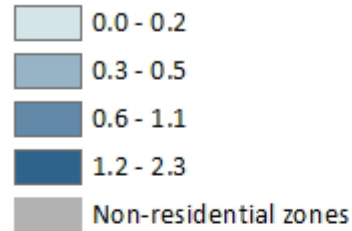
¹Rates calculated using DOHMH 2020 population estimates, modified from US Census Bureau intercensal population estimates, updated October 2021.

Women includes transgender women.

As reported to the New York City Department of Health and Mental Hygiene by March 31, 2022.

HIV PREVALENCE BY UHF AMONG WOMEN IN NYC, 2021

PLWH as percent of population



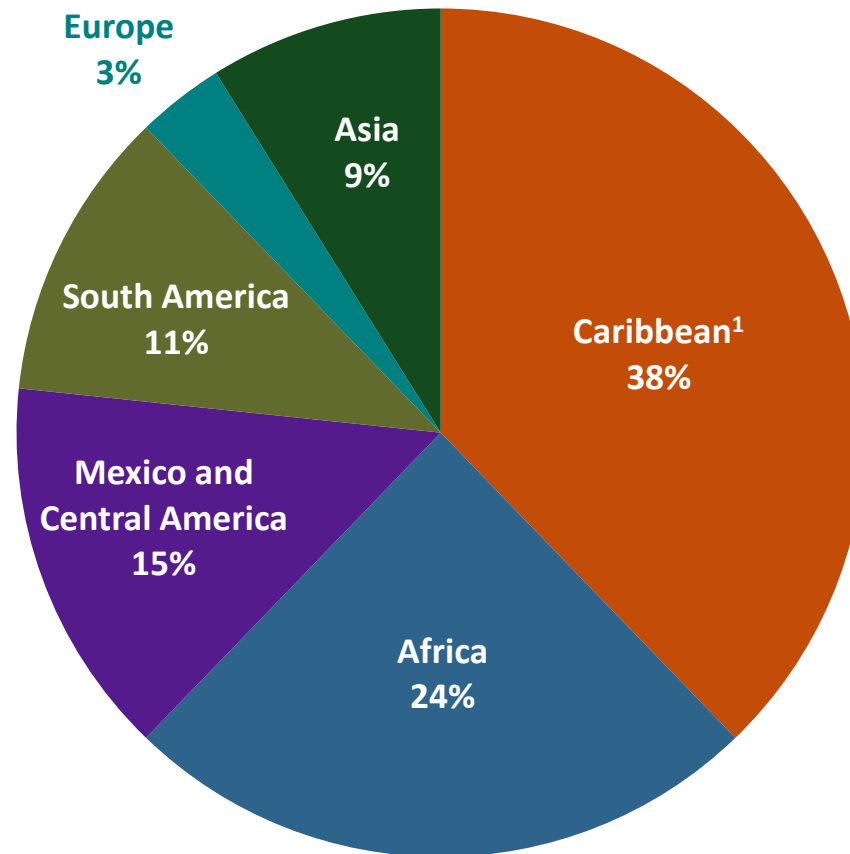
The neighborhoods with the highest HIV prevalence among women in 2021 were Crotona–Tremont, Hunts Point–Mott Haven, and High Bridge–Morrisania.

¹Rates calculated using DOHMH 2020 population estimates, modified from US Census Bureau intercensal population estimates, updated October 2021.

Women includes transgender women.

As reported to the New York City Department of Health and Mental Hygiene by March 31, 2022.

PERCENTAGE OF NEW HIV DIAGNOSES AMONG WOMEN BORN OUTSIDE OF THE U.S. BY REGION OF BIRTH, NYC 2021



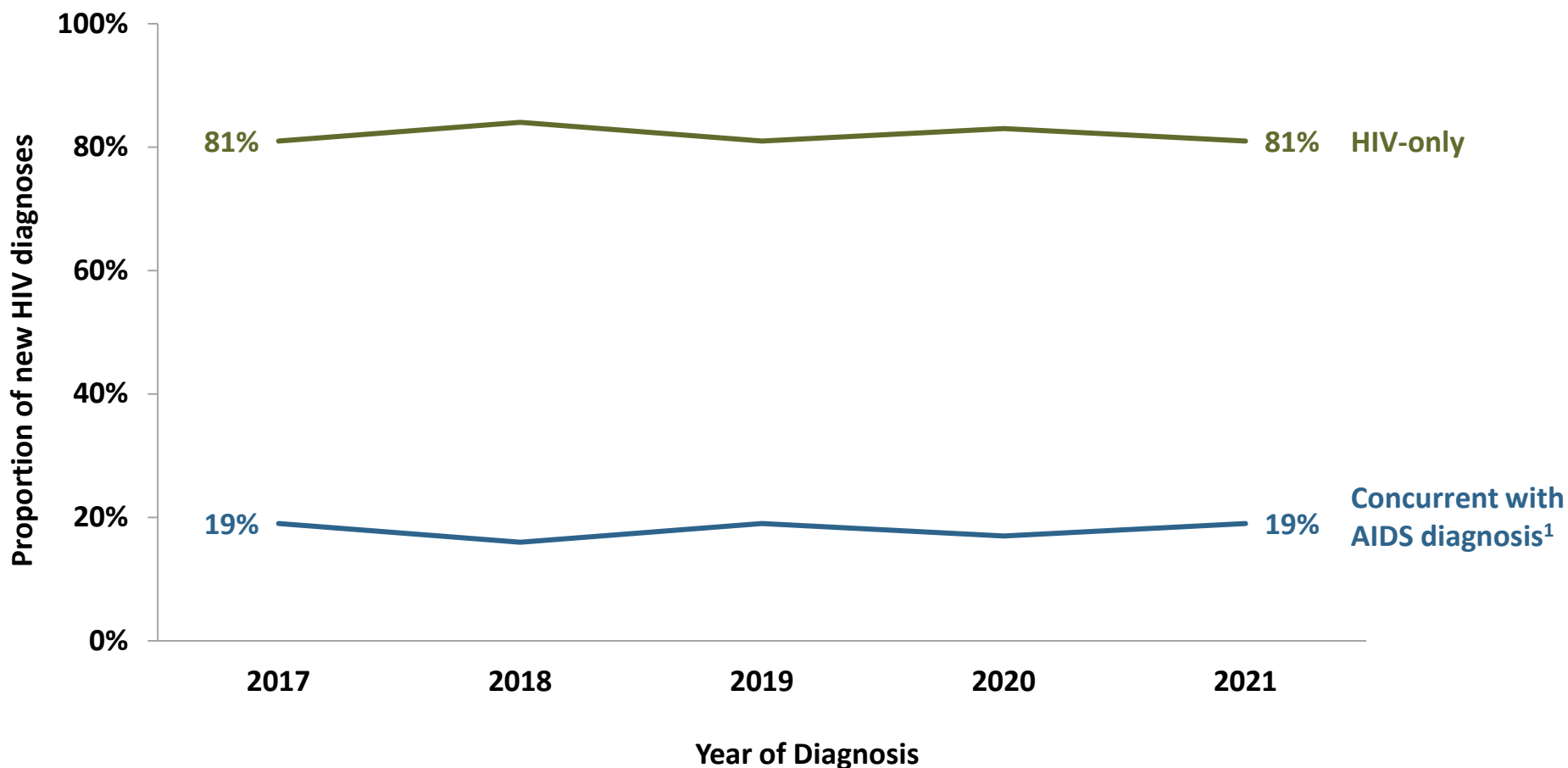
27% of women newly diagnosed with HIV in 2021 were born outside of the U.S. Of those, women born in the Caribbean¹, Africa, Mexico and Central America, and South America accounted for 79% of new diagnoses.

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, 2022.

PROPORTION OF NEW HIV DIAGNOSES CONCURRENT WITH AN AIDS DIAGNOSIS¹ AMONG WOMEN IN NYC, 2017-2021



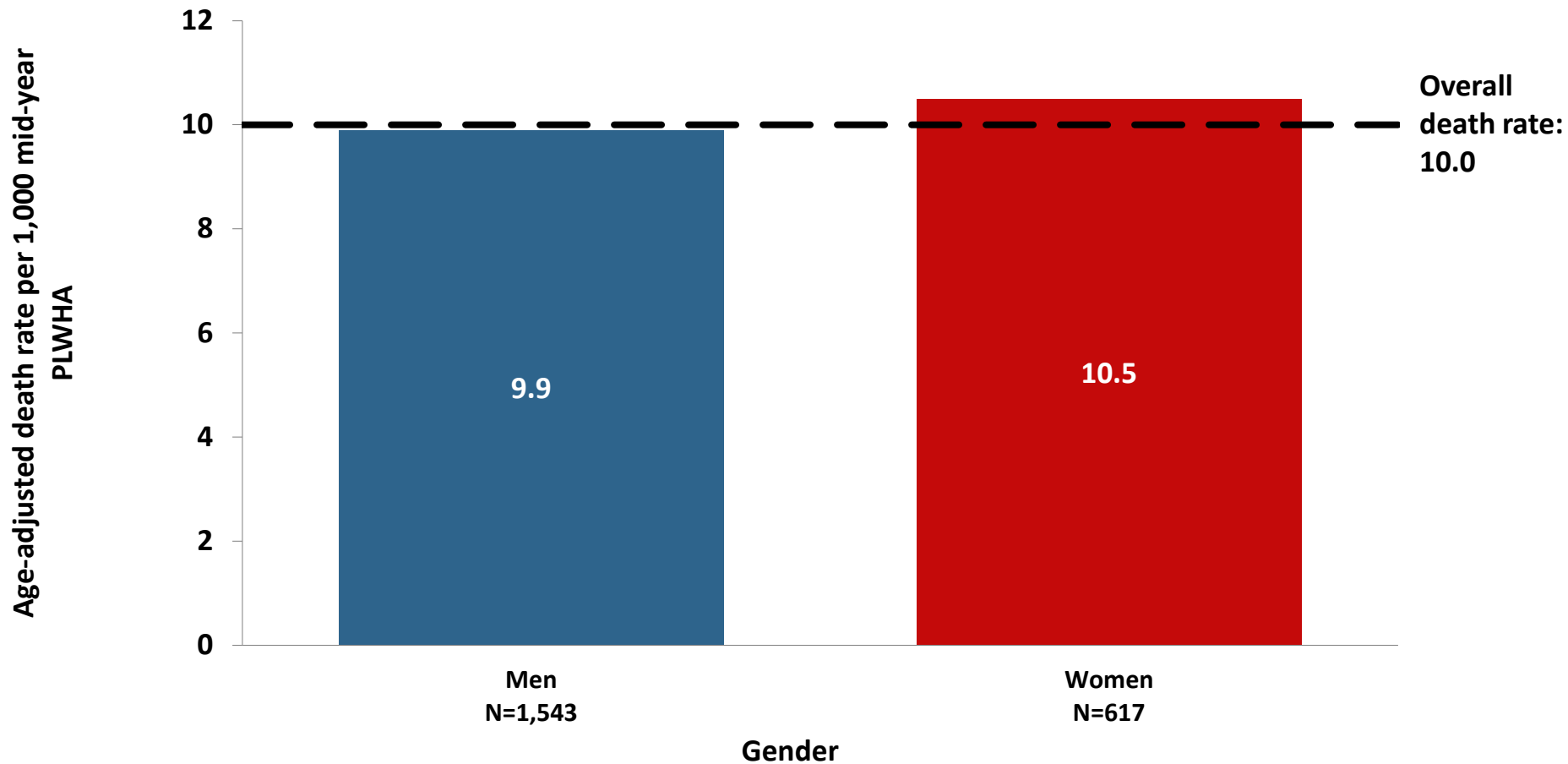
The proportion of new HIV diagnoses among women that were concurrent with an AIDS diagnosis was relatively consistent from 2017 to 2021.

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, 2022.

AGE-ADJUSTED DEATH RATES¹ PER 1,000 MID-YEAR PLWH BY GENDER IN NYC, 2021



The death rate among people with HIV/AIDS was higher in women (10.5 deaths per 1,000 people) than in men (9.9).

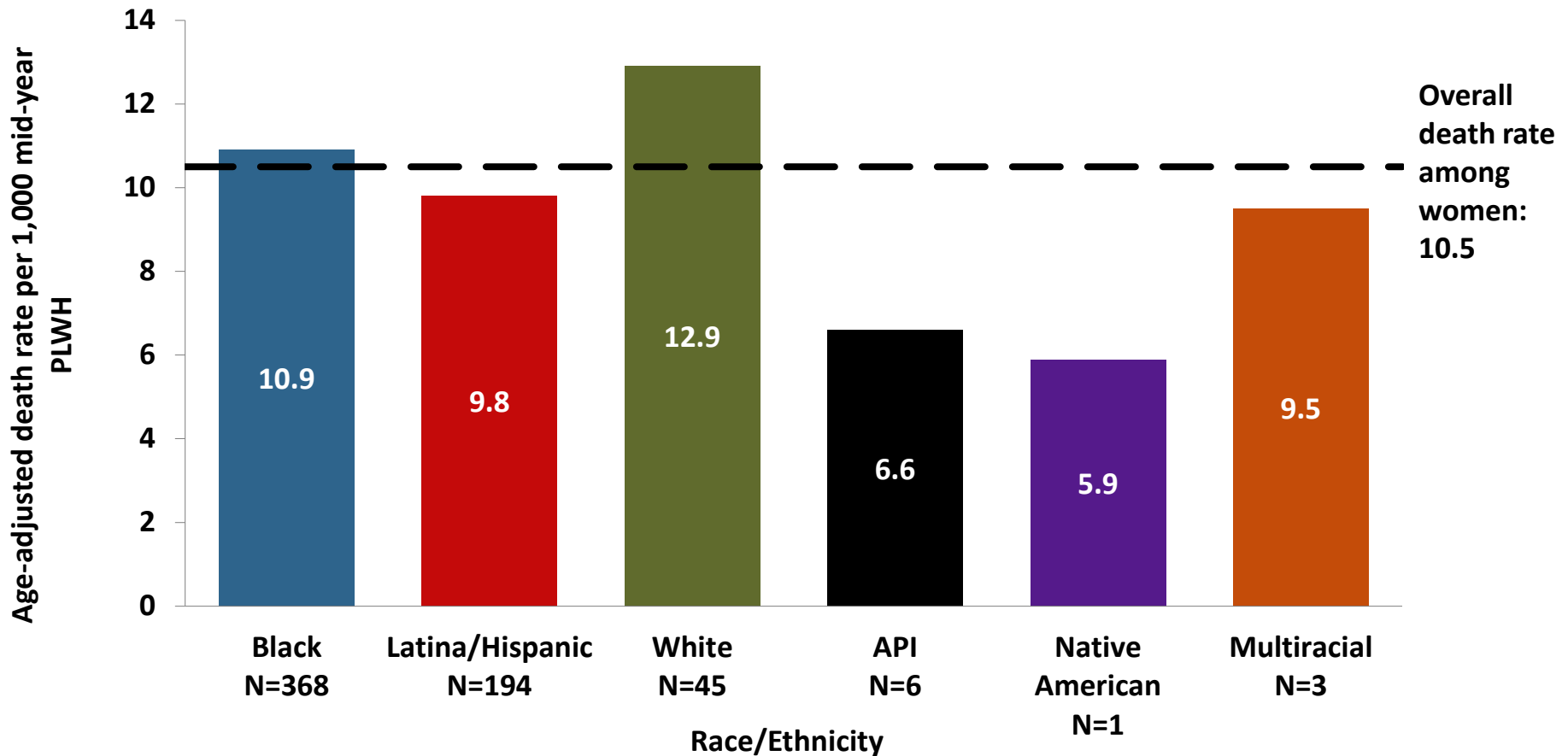
¹Rates are age-adjusted to the Census 2010 NYC population.

Death data for 2021 are incomplete. People newly diagnosed with HIV at death were excluded from the numerator.

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, 2022.

AGE-ADJUSTED DEATH RATE¹ PER 1,000 MID-YEAR PLWH BY RACE/ETHNICITY AMONG WOMEN IN NYC, 2021

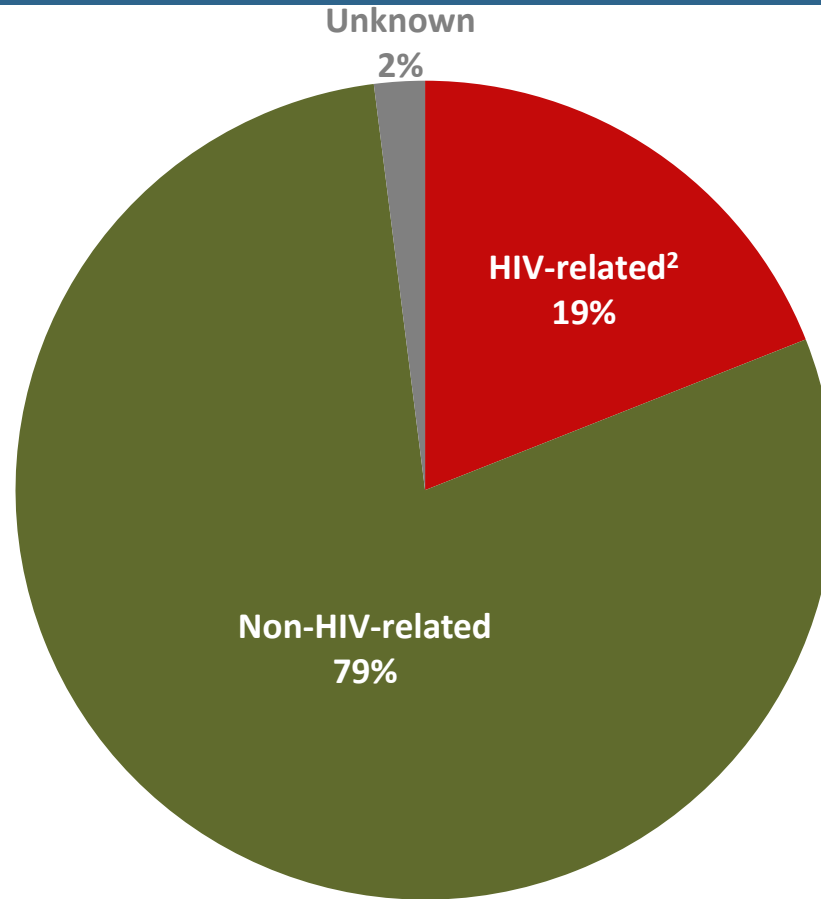


In 2021, among all women with HIV, the age-adjusted death rate was highest among White women, although the number of deaths was relatively low (N=45).

API = Asian/Pacific Islander. Women includes transgender women.

¹Death data for 2021 are incomplete. Rates are age-adjusted to the Census 2010 NYC population. People newly diagnosed with HIV at death were excluded from the numerator. As reported to the New York City Department of Health and Mental Hygiene by March 31, 2022.

CAUSE OF DEATH AMONG WOMEN WITH HIV IN NYC, 2020¹



In 2020, 79% of deaths among women with HIV were due to non-HIV-related causes. Among these, the top causes were COVID-19 (22%), cardiovascular diseases (18%), and non-HIV-related cancers (18%).

Women includes transgender women.

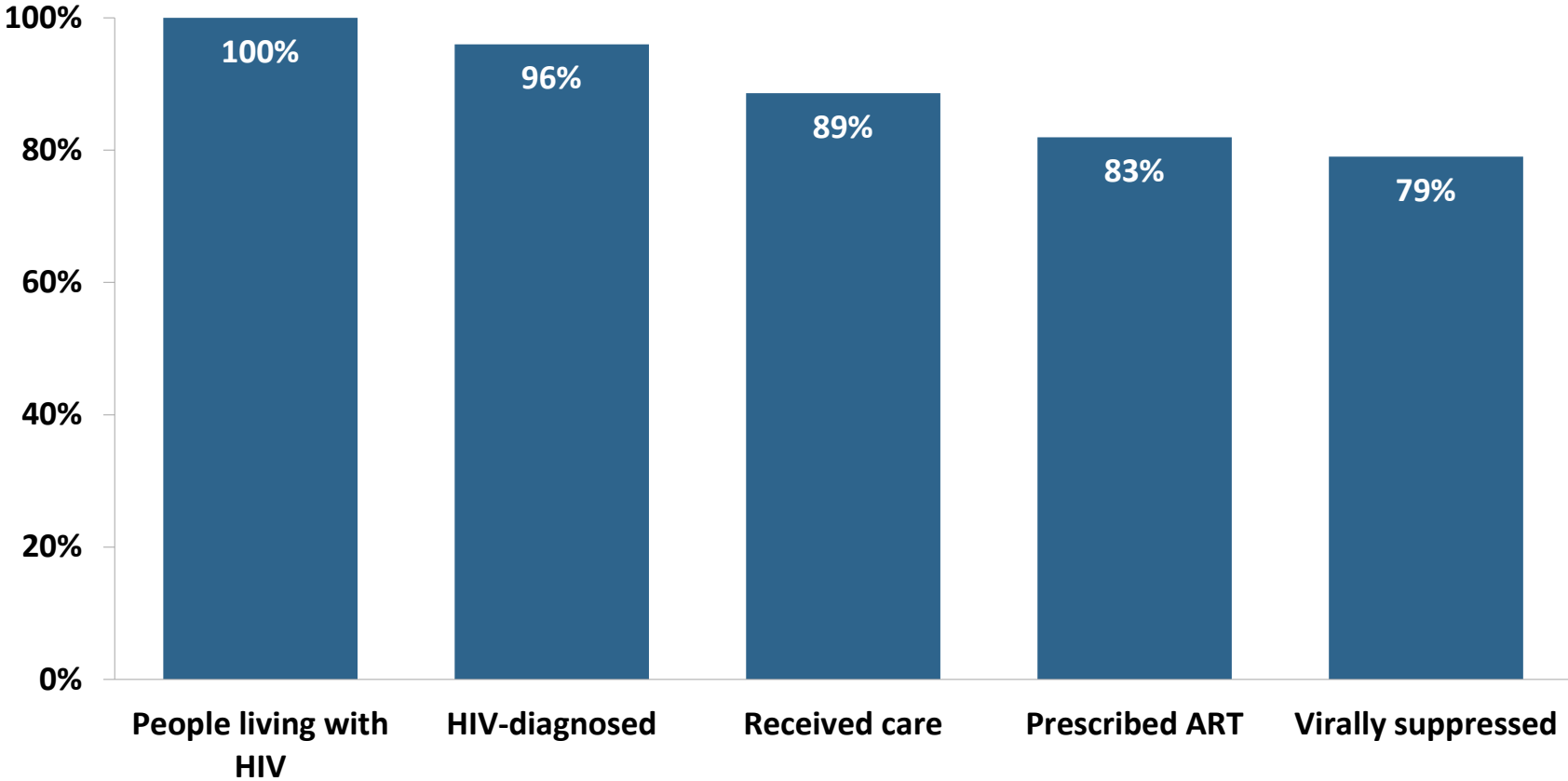
¹Cause of death data is not yet available for 2021.

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/2015sum.pdf>.

As reported to the New York City Department of Health and Mental Hygiene by March 31, 2022.

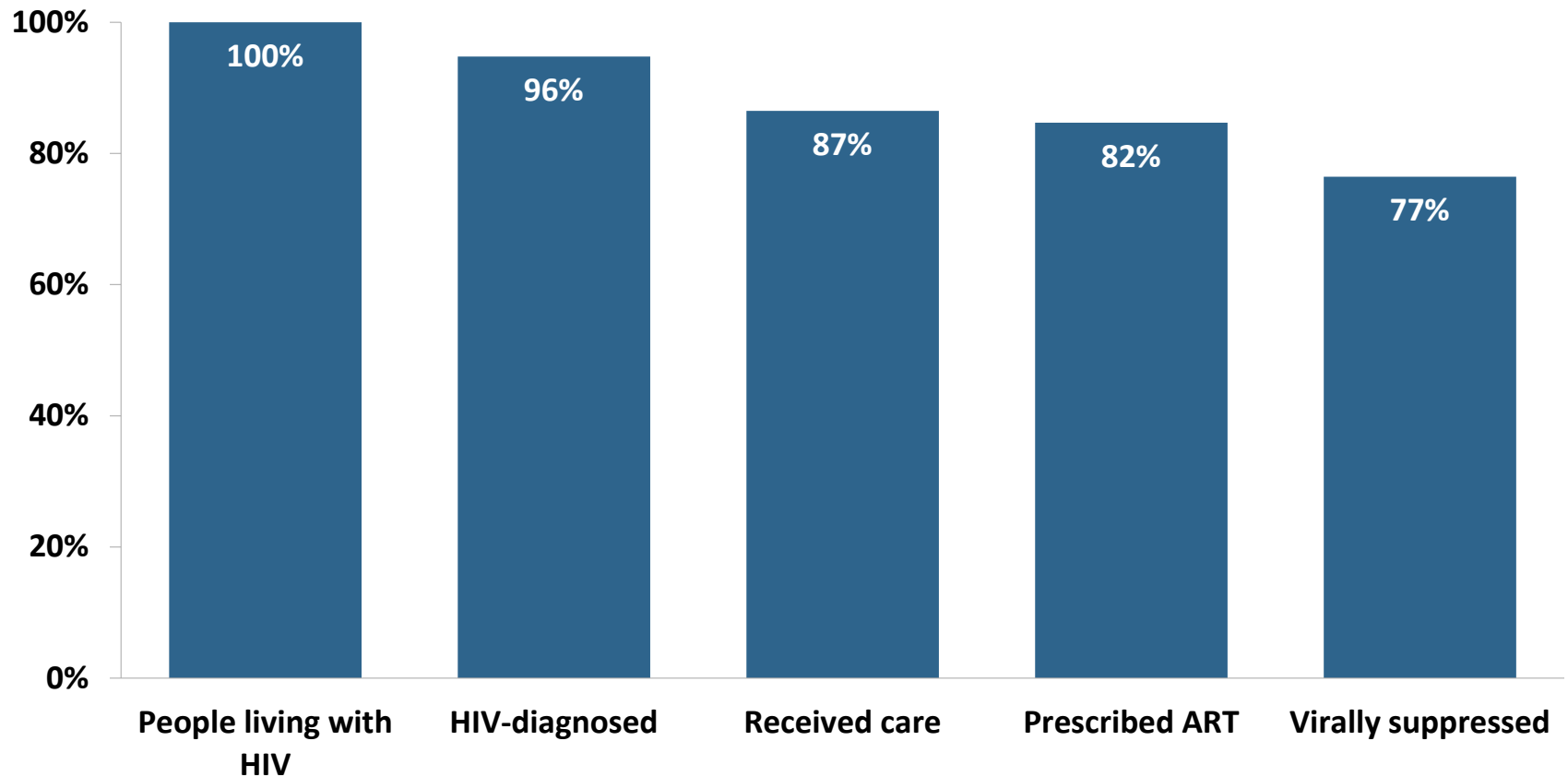
PROPORTION OF WOMEN LIVING WITH HIV IN NYC ENGAGED IN SELECTED STAGES OF THE HIV CARE CONTINUUM, 2021



Of the approximately 25,000 women with HIV living in NYC in 2021, 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, 2022.
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, 2021



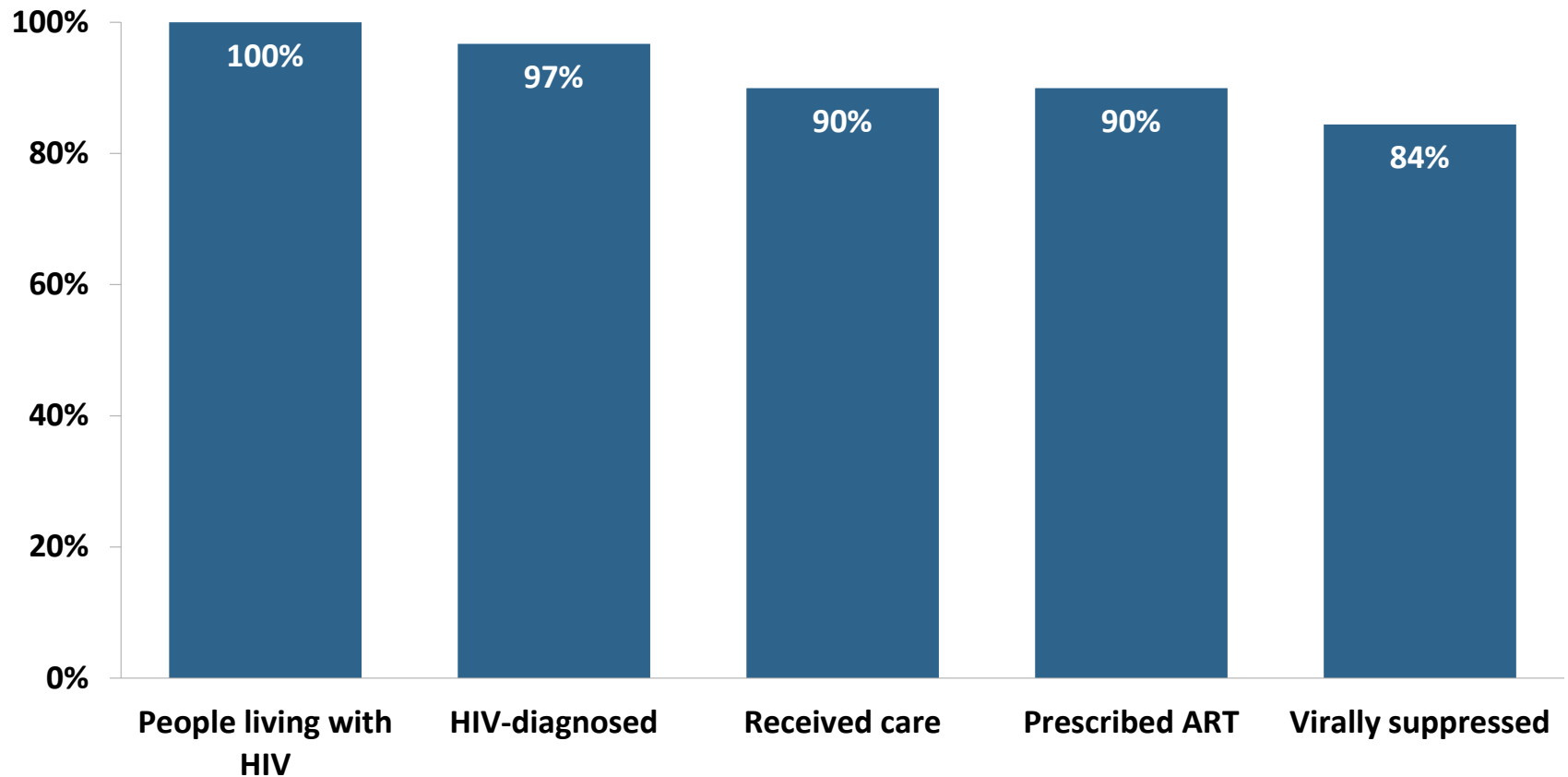
Of the approximately 14,800 Black women with HIV living in NYC in 2021, 77% had a suppressed viral load.

Women includes transgender women.

As reported to the New York City Department of Health and Mental Hygiene by March 31, 2022.

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, 2021



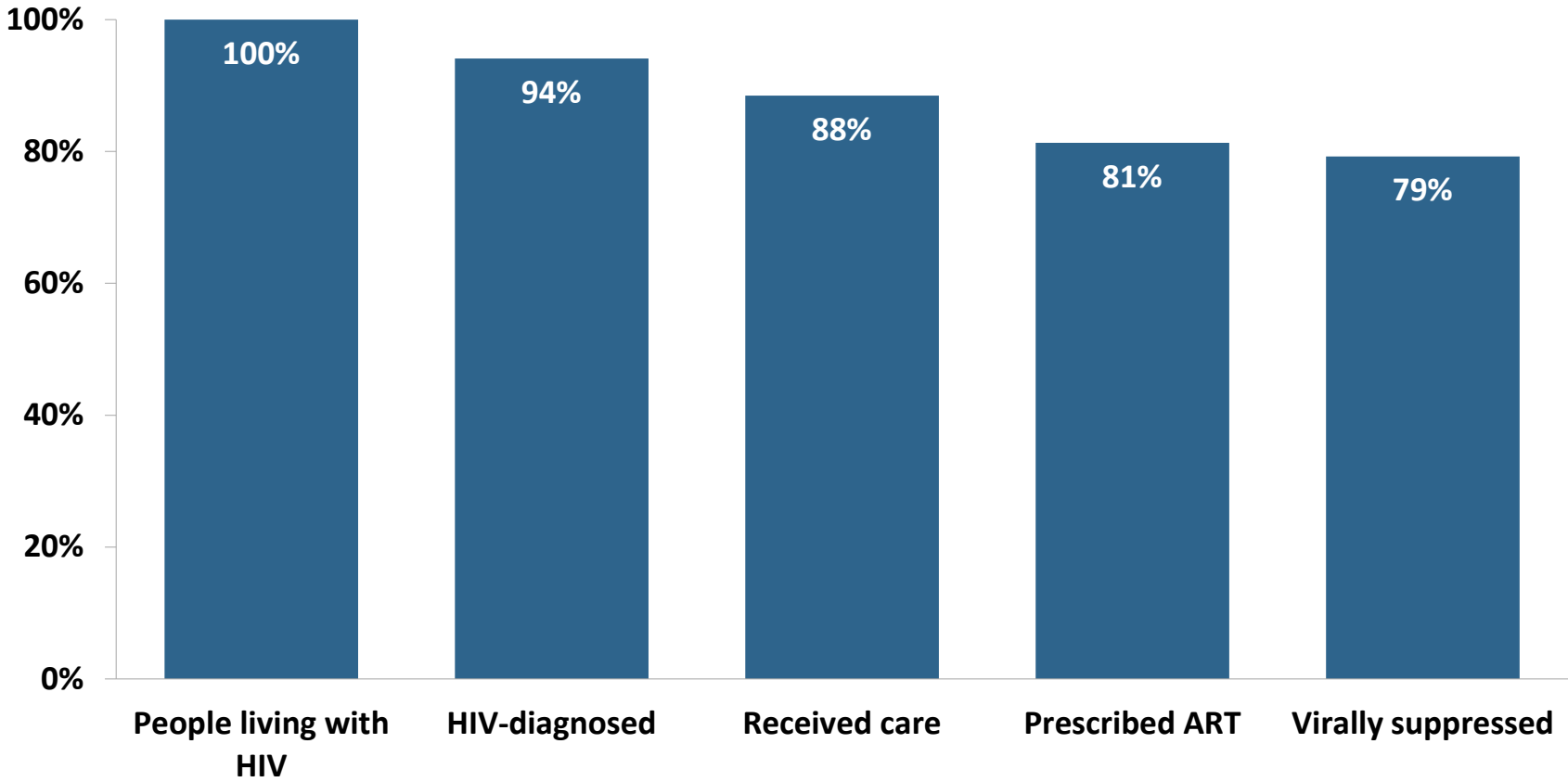
Of the approximately 1,400 White women with HIV living in NYC in 2021, 84% had a suppressed viral load.

Women includes transgender women.

As reported to the New York City Department of Health and Mental Hygiene by March 31, 2022.

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

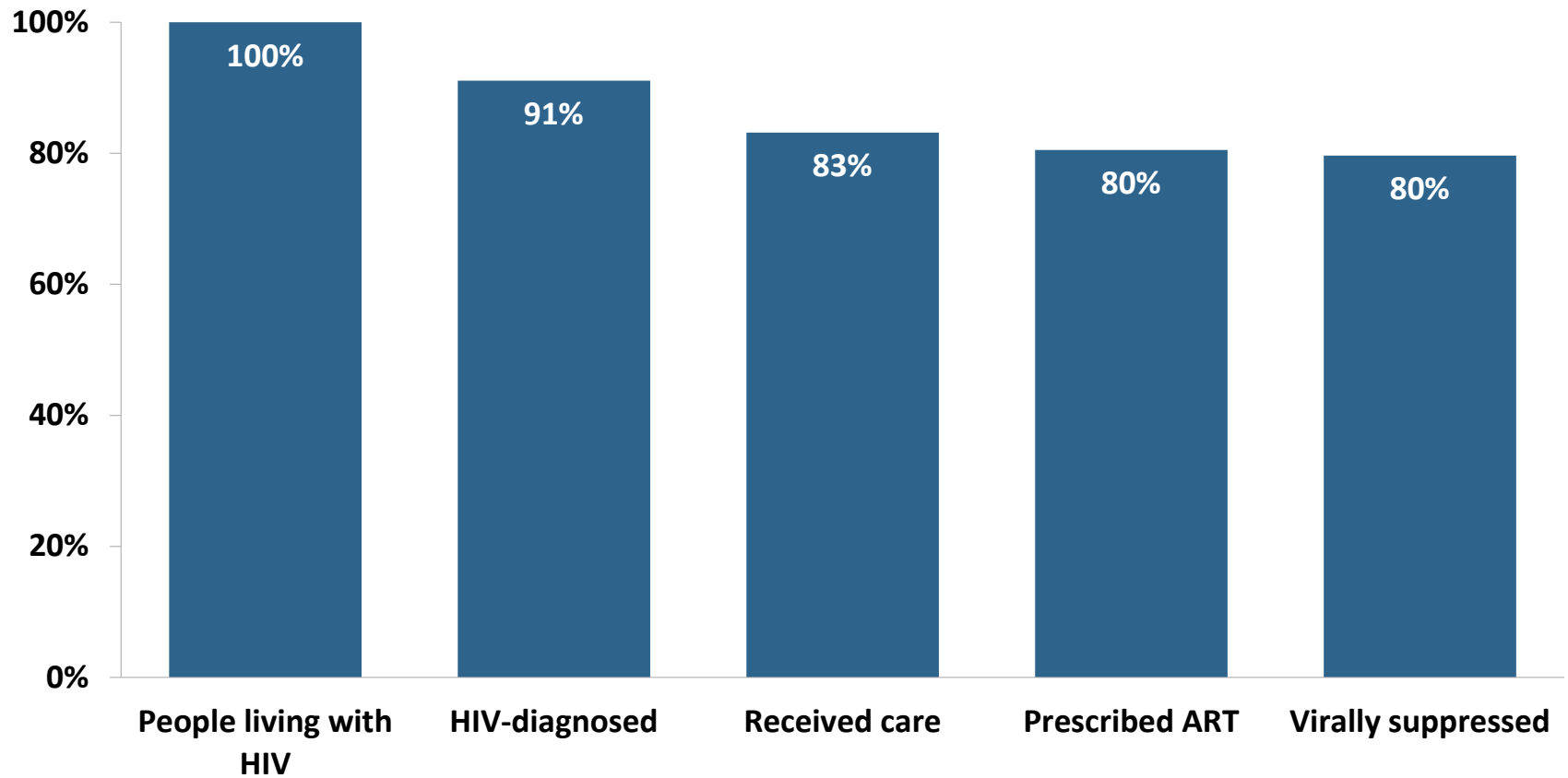
PROPORTION OF LATINA/HISPANIC WOMEN LIVING WITH HIV IN NYC ENGAGED IN SELECTED STAGES OF THE HIV CARE CONTINUUM, 2021



Of the approximately 8,700 Latino/Hispanic women with HIV living in NYC in 2021, 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, 2022.
For more definitions of the stages of the continuum of care, see Appendix 2.

PROPORTION OF ASIAN/PACIFIC ISLANDER WOMEN LIVING WITH HIV IN NYC ENGAGED IN SELECTED STAGES OF THE HIV CARE CONTINUUM, 2021



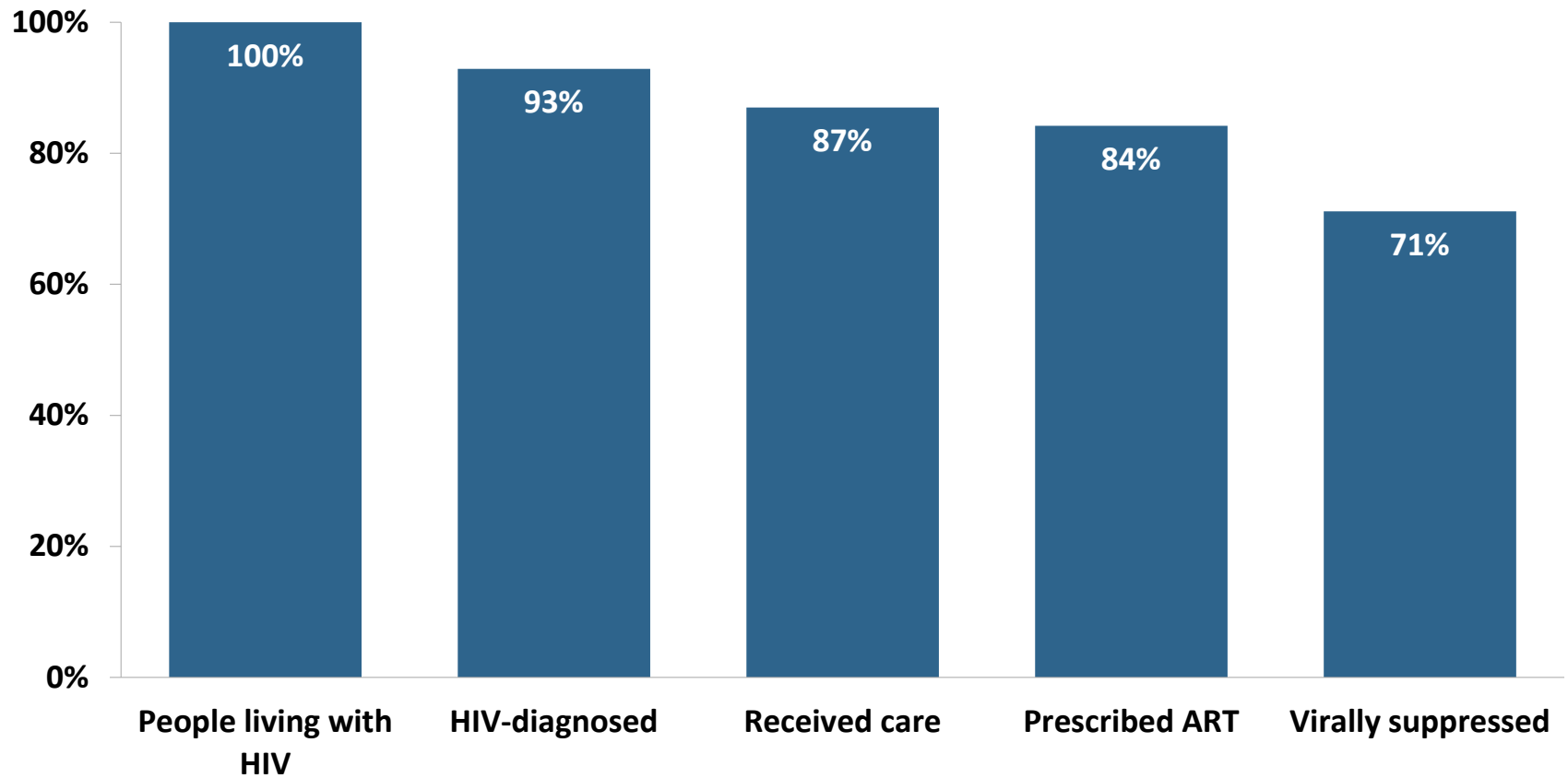
Of the approximately 430 Asian/Pacific Islander women with HIV living in NYC in 2021, 80% had a suppressed viral load.

Women includes transgender women.

As reported to the New York City Department of Health and Mental Hygiene by March 31, 2022.

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

PROPORTION OF NATIVE AMERICAN WOMEN LIVING WITH HIV IN NYC ENGAGED IN SELECTED STAGES OF THE HIV CARE CONTINUUM, 2021



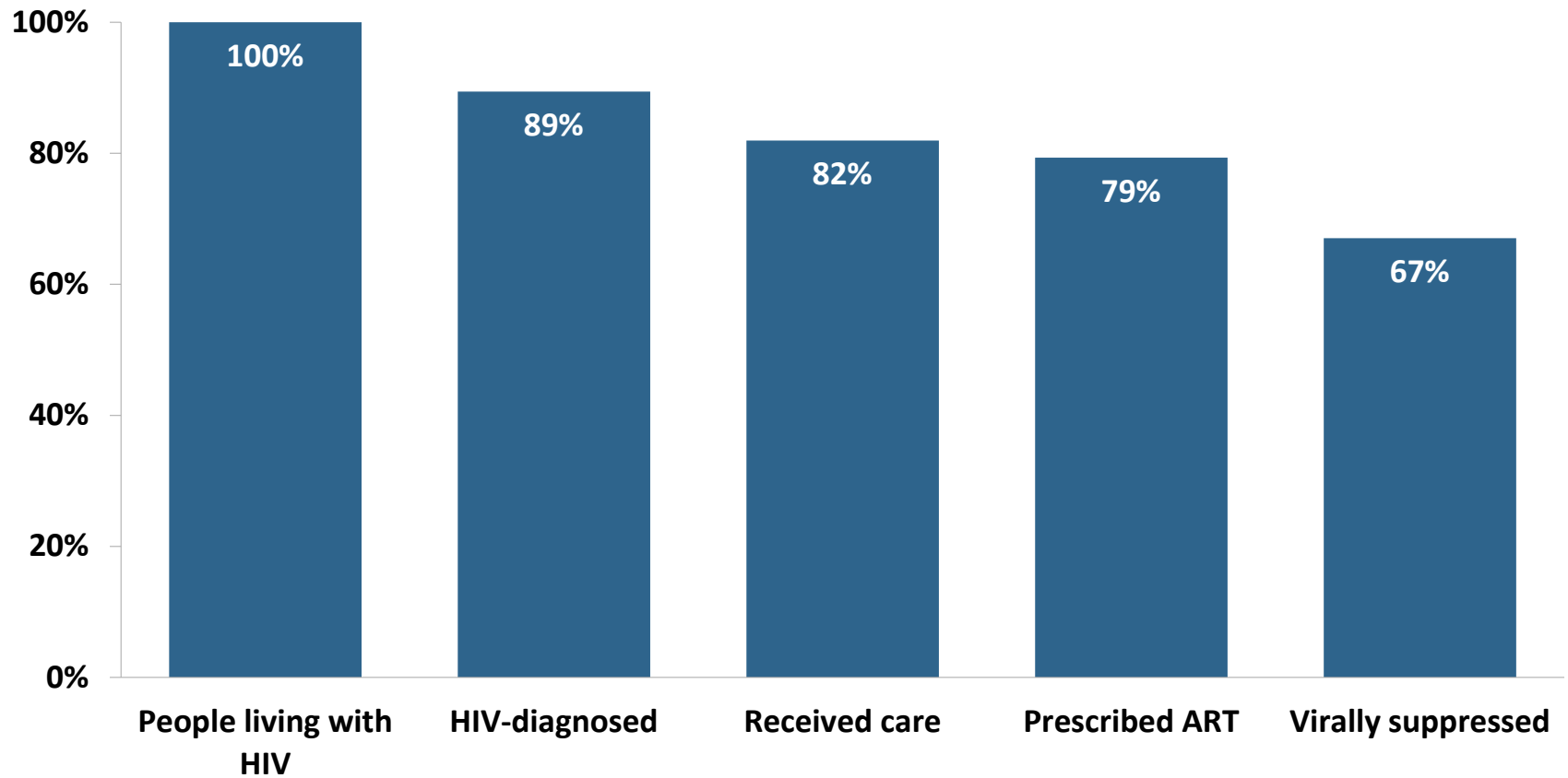
Of the approximately 50 Native American women with HIV living in NYC in 2021, 71% had a suppressed viral load.

Women includes transgender women.

As reported to the New York City Department of Health and Mental Hygiene by March 31, 2022.

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

PROPORTION OF MULTIRACIAL WOMEN LIVING WITH HIV IN NYC ENGAGED IN SELECTED STAGES OF THE HIV CARE CONTINUUM, 2021



Of the approximately 110 Multiracial women with HIV living in NYC in 2021, 67% 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, 2022.

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
 - Please allow a minimum of two weeks 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 and alive at the end of 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” categories include only individuals with a known or identified transmission category, 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 category.

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 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, 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 2021 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, 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, 2019.
- “Virally suppressed”: calculated as PLWH in care with a most recent viral load measurement in 2021 of < 200 copies/mL, plus the estimated number of out-of-care 2021 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.