

HIV AMONG YOUTH (AGES 13 TO 29) AND OLDER ADULTS (AGES 50 AND OVER) IN NEW YORK CITY, 2021



HIV Epidemiology Program

New York City Department of Health and Mental Hygiene



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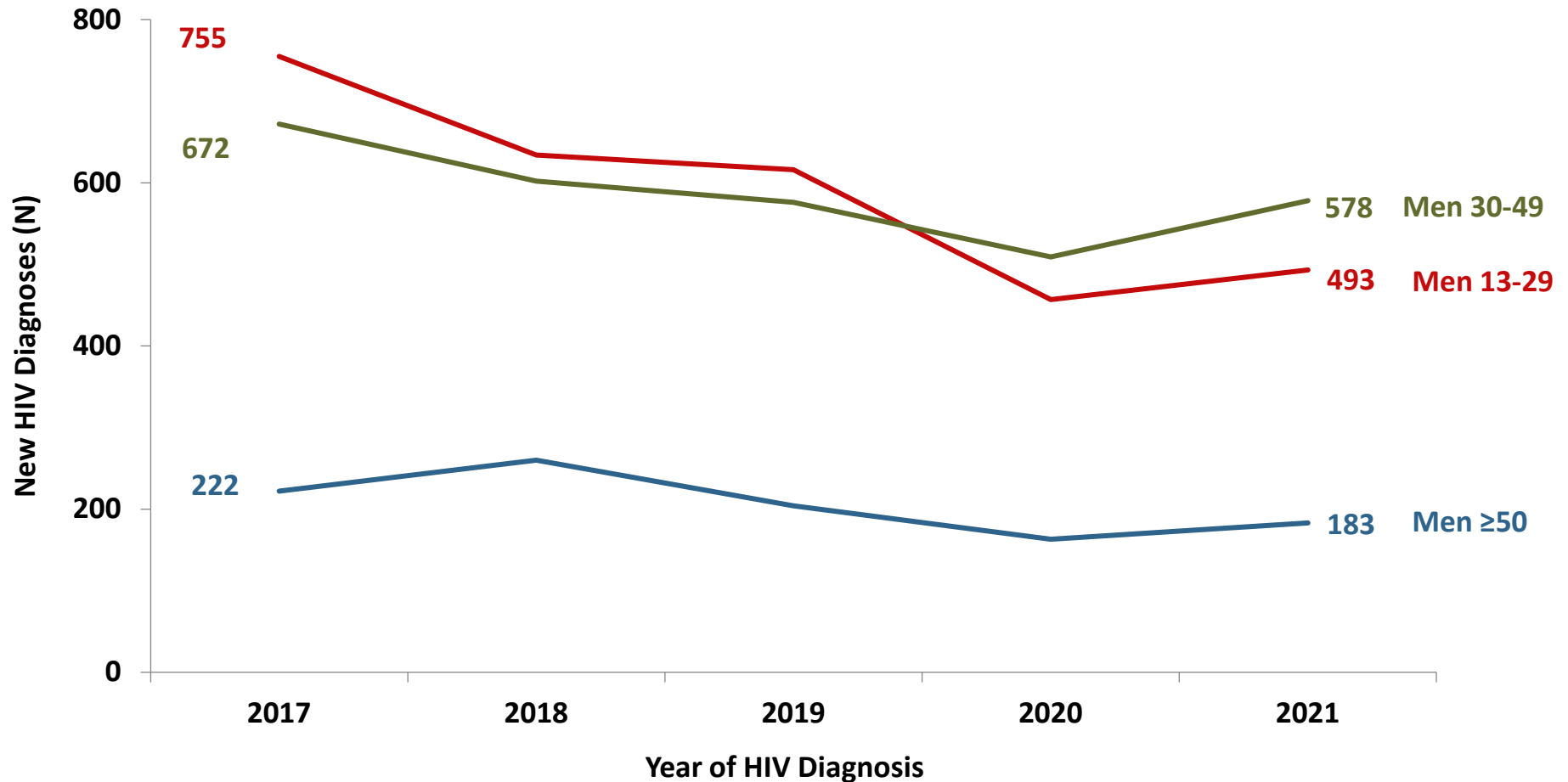
<https://www1.nyc.gov/site/doh/data/data-sets/epi-surveillance-slide-sets.page>

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



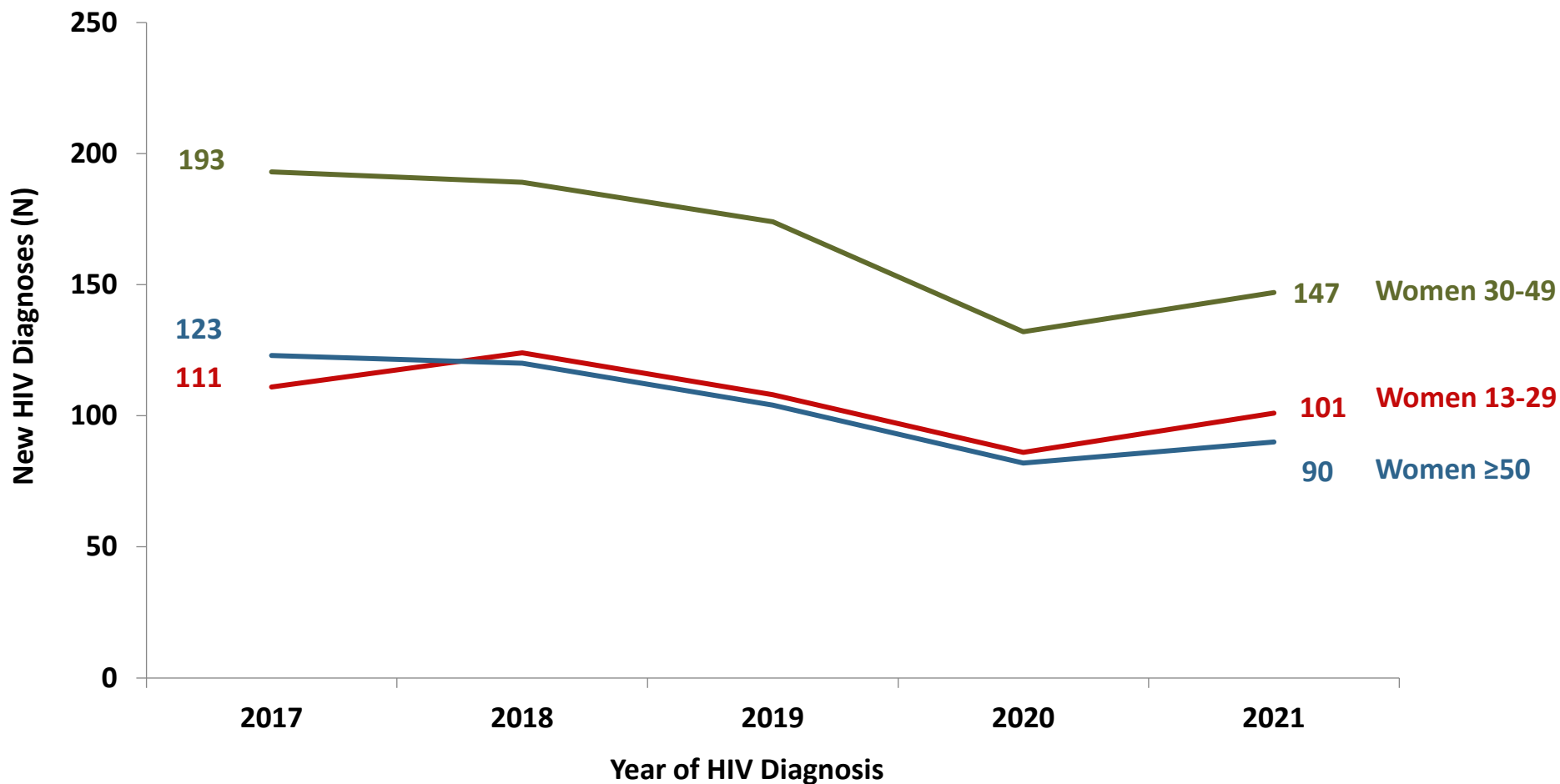
Between 2017 and 2021, the largest decrease in the number of new diagnoses among men was seen for those ages 13 to 29.

Men includes transgender men.

Data for people ages 0-12 years old are not shown. In 2021, there was one boy aged 0-12 newly diagnosed with HIV.

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 AGE IN NYC, 2017-2021



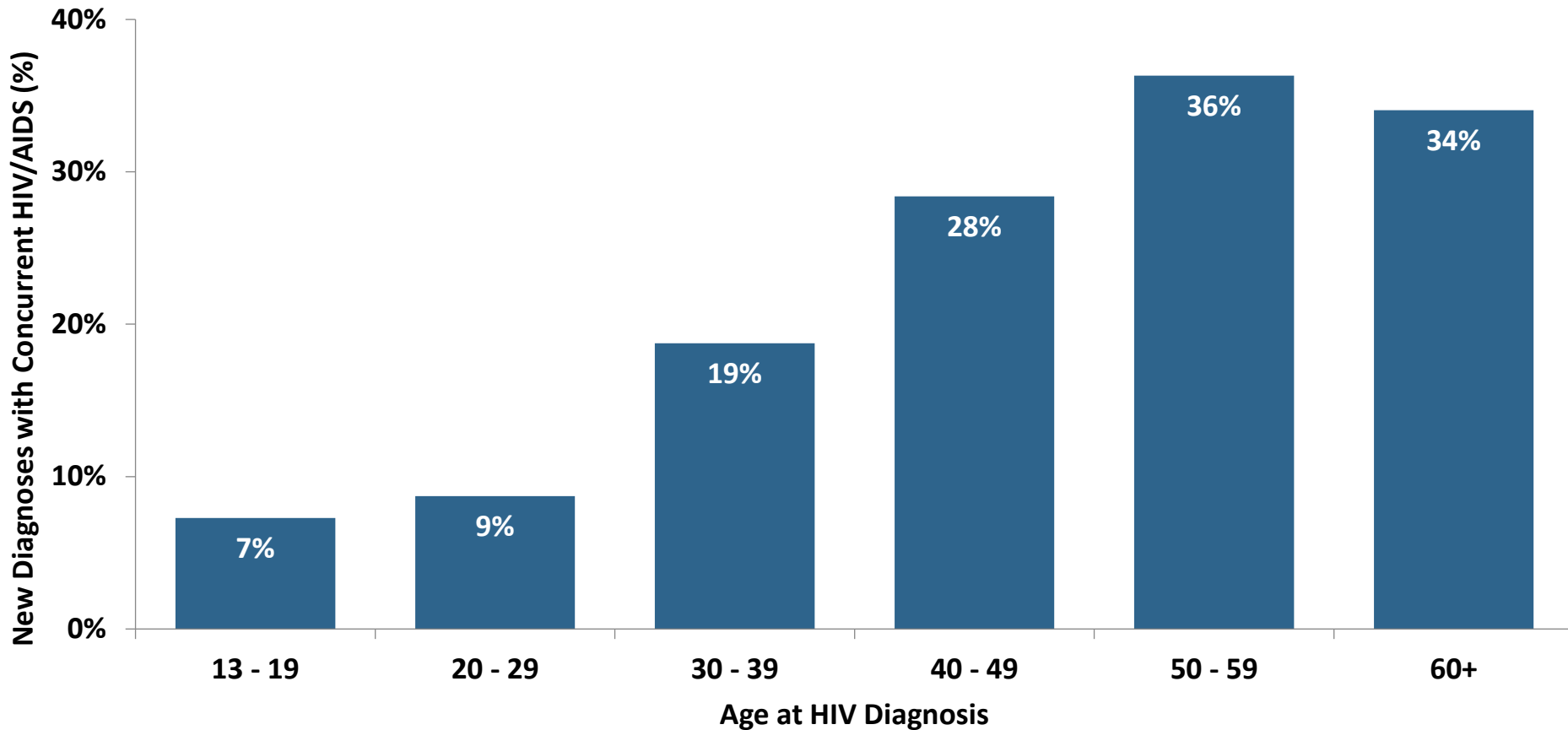
Between 2017 and 2021, the largest decrease in the number of new diagnoses among women was seen for those ages 30 to 49.

Women includes transgender women.

Data for people ages 0-12 years old not shown. In 2021, there was one girl aged 0-12 newly diagnosed with HIV.

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

PERCENTAGE OF NEW HIV DIAGNOSES CONCURRENT WITH AN AIDS DIAGNOSIS¹ BY AGE IN NYC, 2021



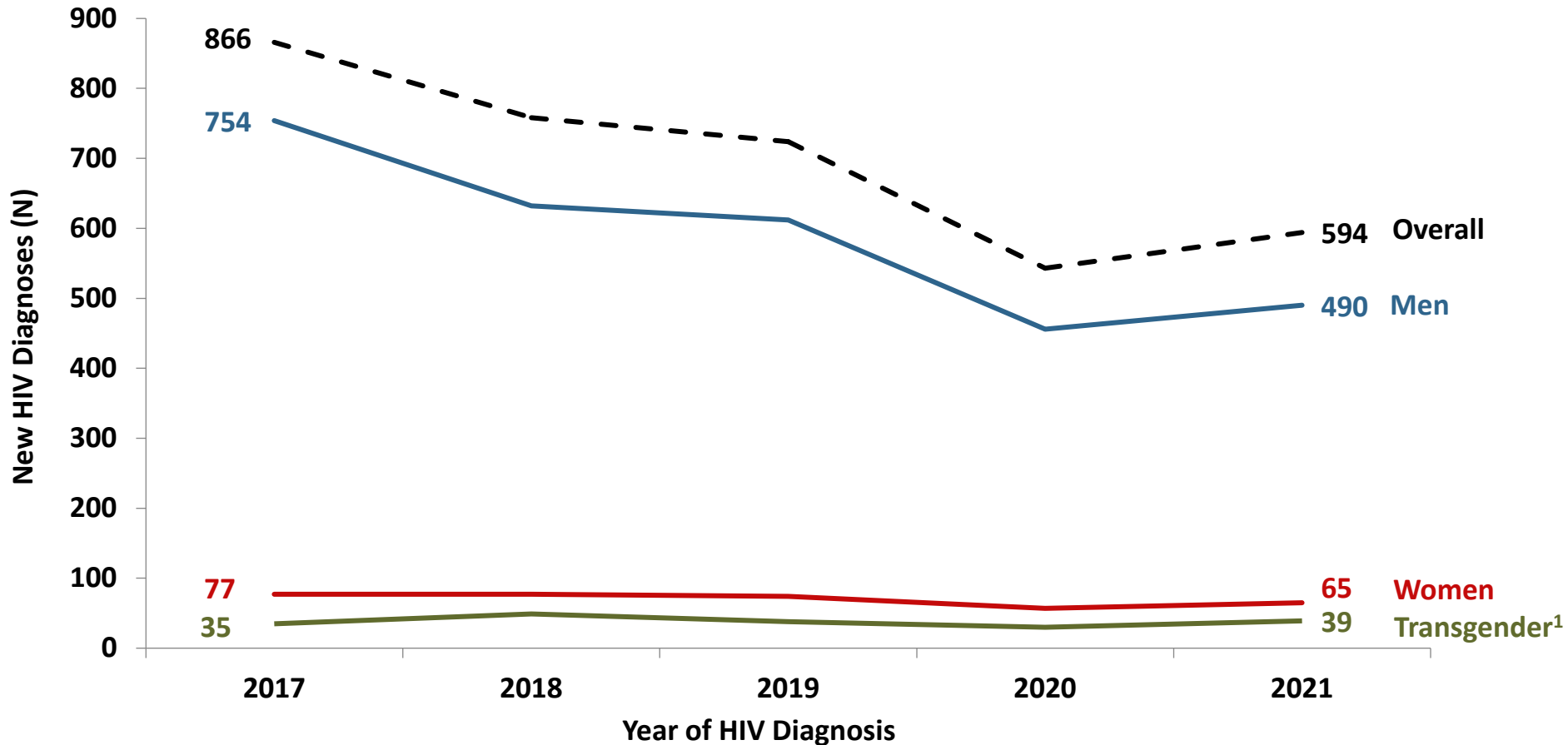
The percentage of new HIV diagnoses concurrent with an AIDS diagnosis was highest for people ages 50 to 59.

HIV AMONG YOUTH 13 TO 29 IN NYC, 2021

BASIC STATISTICS

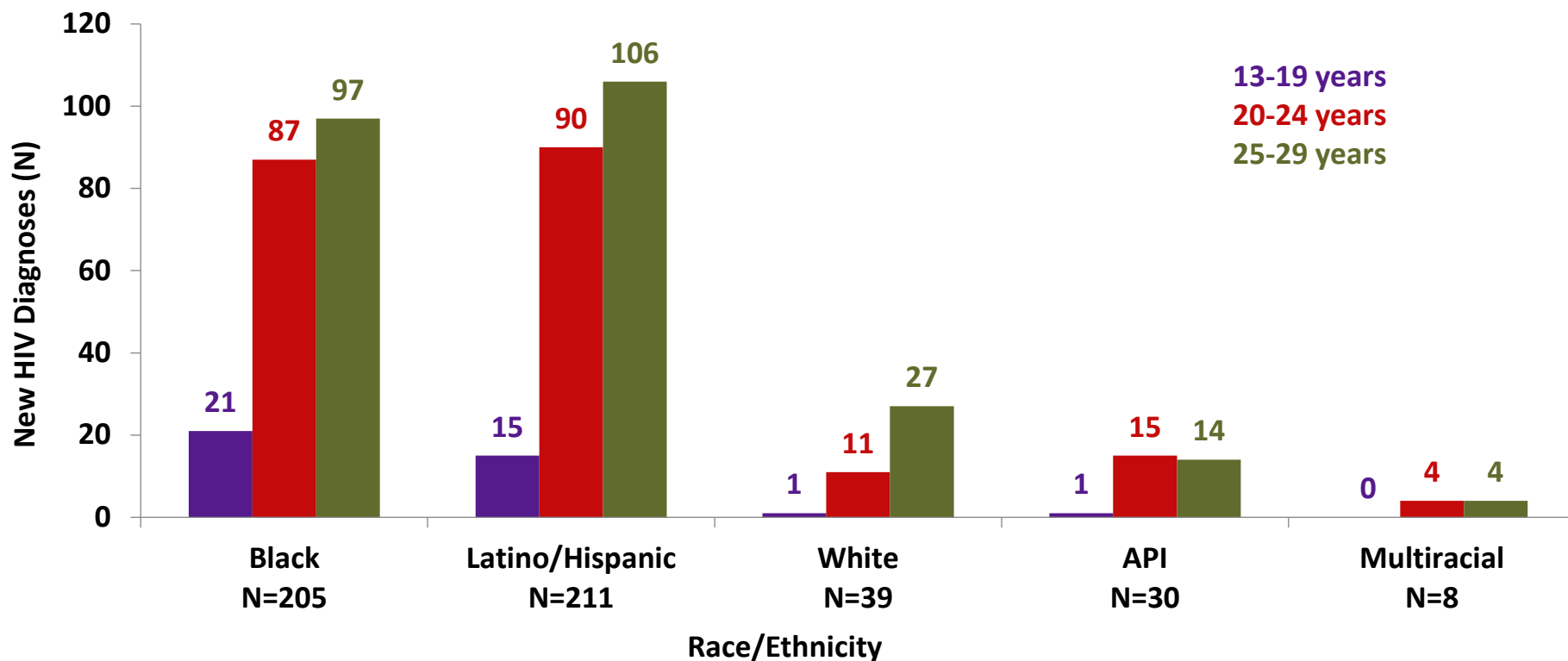
- **594 new HIV diagnoses among New Yorkers ages 13 to 29 years**
 - 51 HIV diagnoses concurrent with an AIDS diagnosis (9%)
- **141 new AIDS diagnoses**
- **30 deaths among youth with HIV**
 - 3.9 deaths per 1,000 youth with HIV¹

NUMBER OF NEW HIV DIAGNOSES AMONG YOUTH 13 TO 29 BY GENDER IN NYC, 2017-2021



The number of new HIV diagnoses among youth declined between 2017 and 2021 for all gender categories except transgender people.

NUMBER OF NEW HIV DIAGNOSES AMONG MEN 13 TO 29 BY RACE/ETHNICITY AND AGE IN NYC, 2021



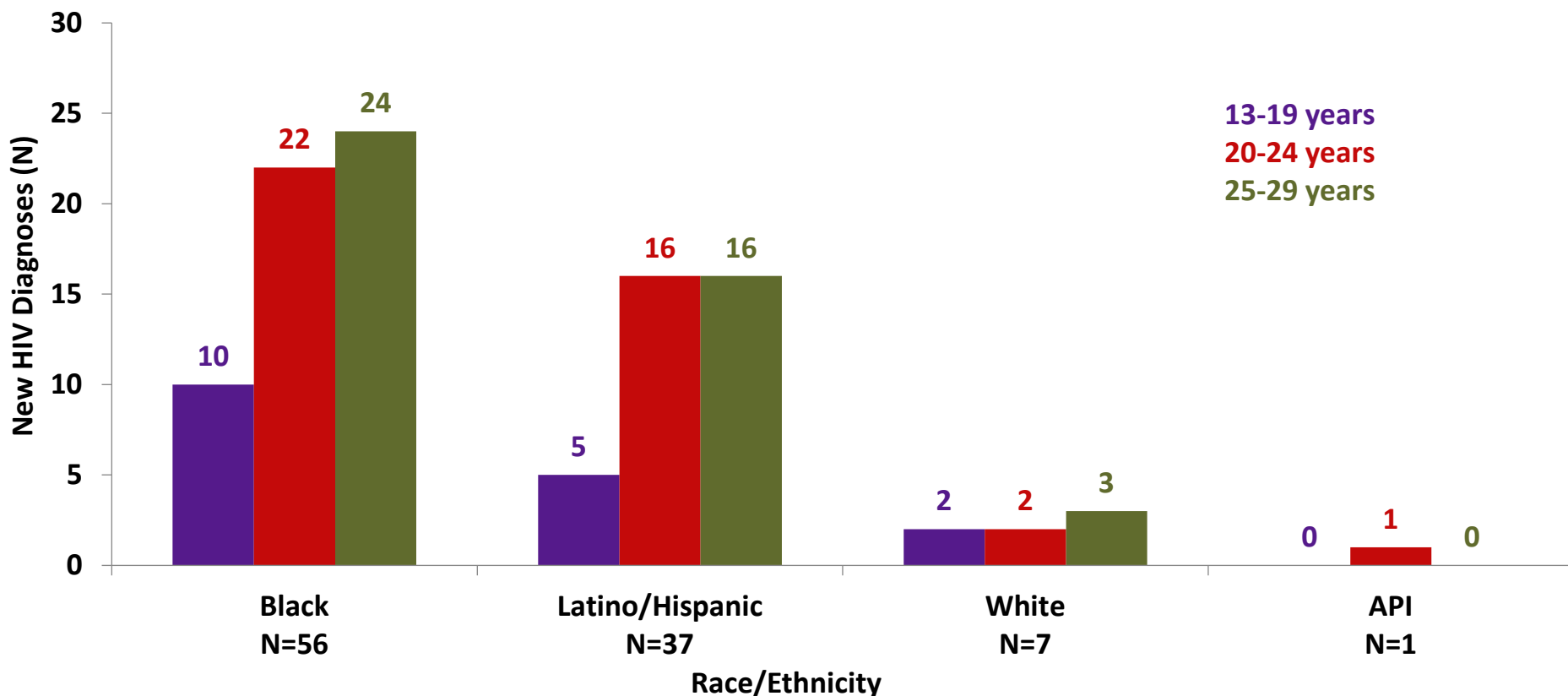
In 2021, there were more new HIV diagnoses among young Latino/Hispanic men than any other race/ethnicity. Across Black, Latino/Hispanic, and White race/ethnicity categories, the largest numbers of newly diagnosed young men were in the older age group of 25 to 29 years.

API=Asian/Pacific Islander. Men includes transgender men.

Data for Native American men ages 13 to 29 not shown. There were no Native American men diagnosed with HIV in 2021.

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

NUMBER OF NEW HIV DIAGNOSES AMONG WOMEN 13 TO 29 BY RACE/ETHNICITY AND AGE IN NYC, 2021



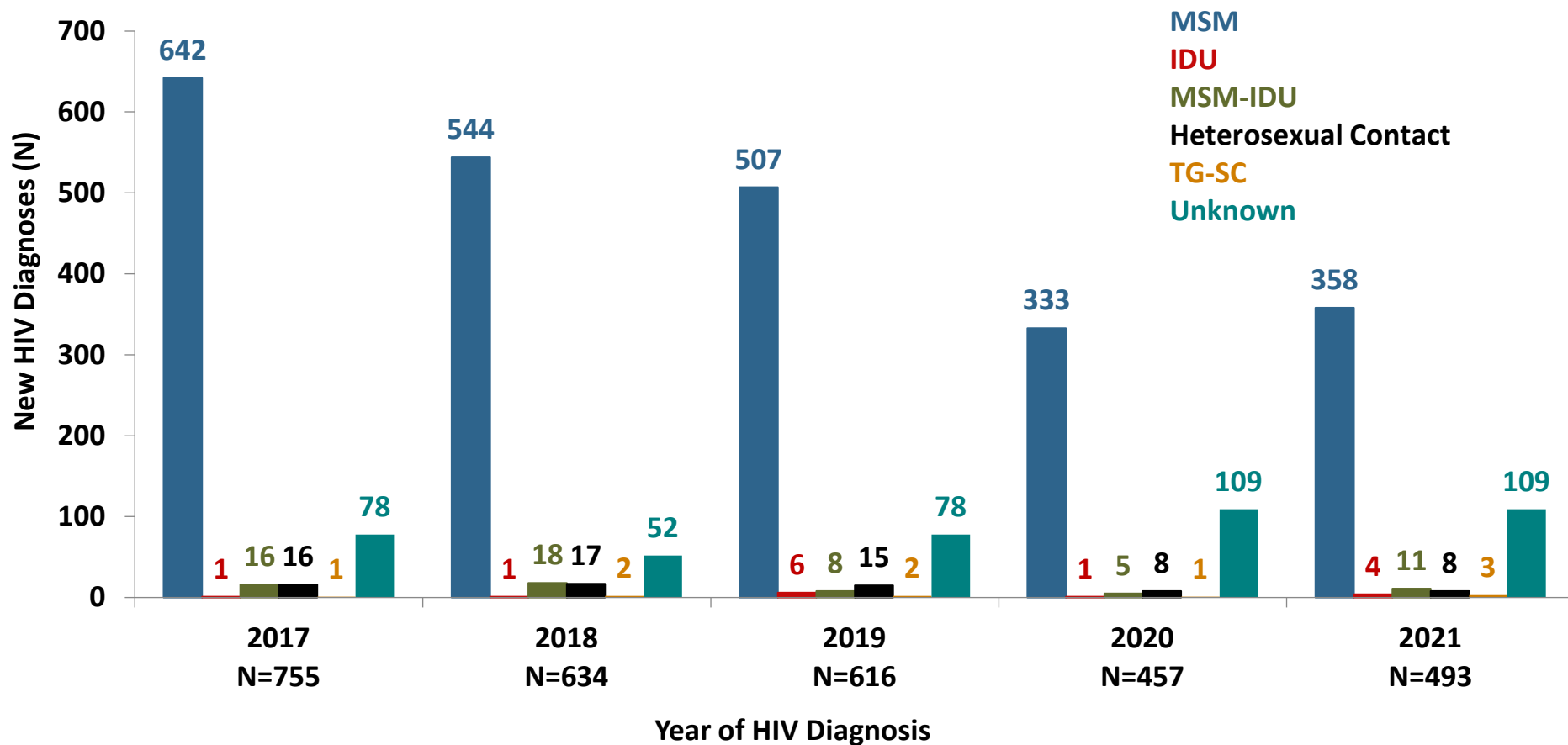
In 2021, there were more new HIV diagnoses among young Black women than any other race/ethnicity. Across Black, Latino/Hispanic, and White race/ethnicity categories, the largest numbers of newly diagnosed young women were in the older age groups of 20-24 and 25 to 29 years.

Women includes transgender women.

Data for Native American and multiracial women ages 13 to 29 not shown. There were no new diagnoses in these groups in 2021.

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

NUMBER OF NEW HIV DIAGNOSES AMONG MEN 13 TO 29 BY TRANSMISSION CATEGORY IN NYC, 2017-2021



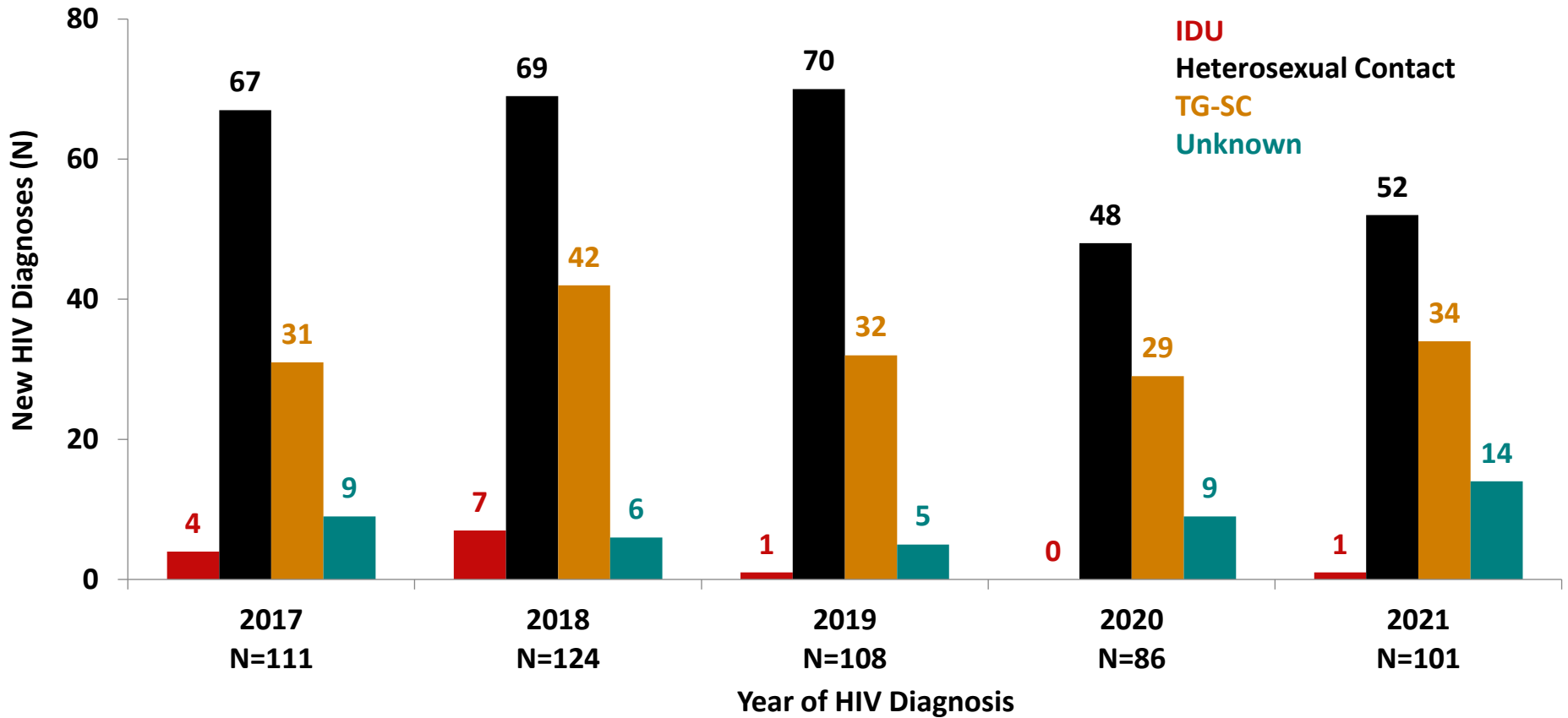
The number of new HIV diagnoses among men aged 13 to 29 years in the MSM transmission category was consistently higher than other transmission categories during 2017-2021.

MSM=men who have sex with men; IDU=history of injection drug use; TG-SC=transgender people with sexual contact. Men includes transgender men.

Between 2017 and 2021 among men ages 13-29, there were none in the Perinatal transmission category and N=1 in the Other transmission category (diagnosed in 2017).

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

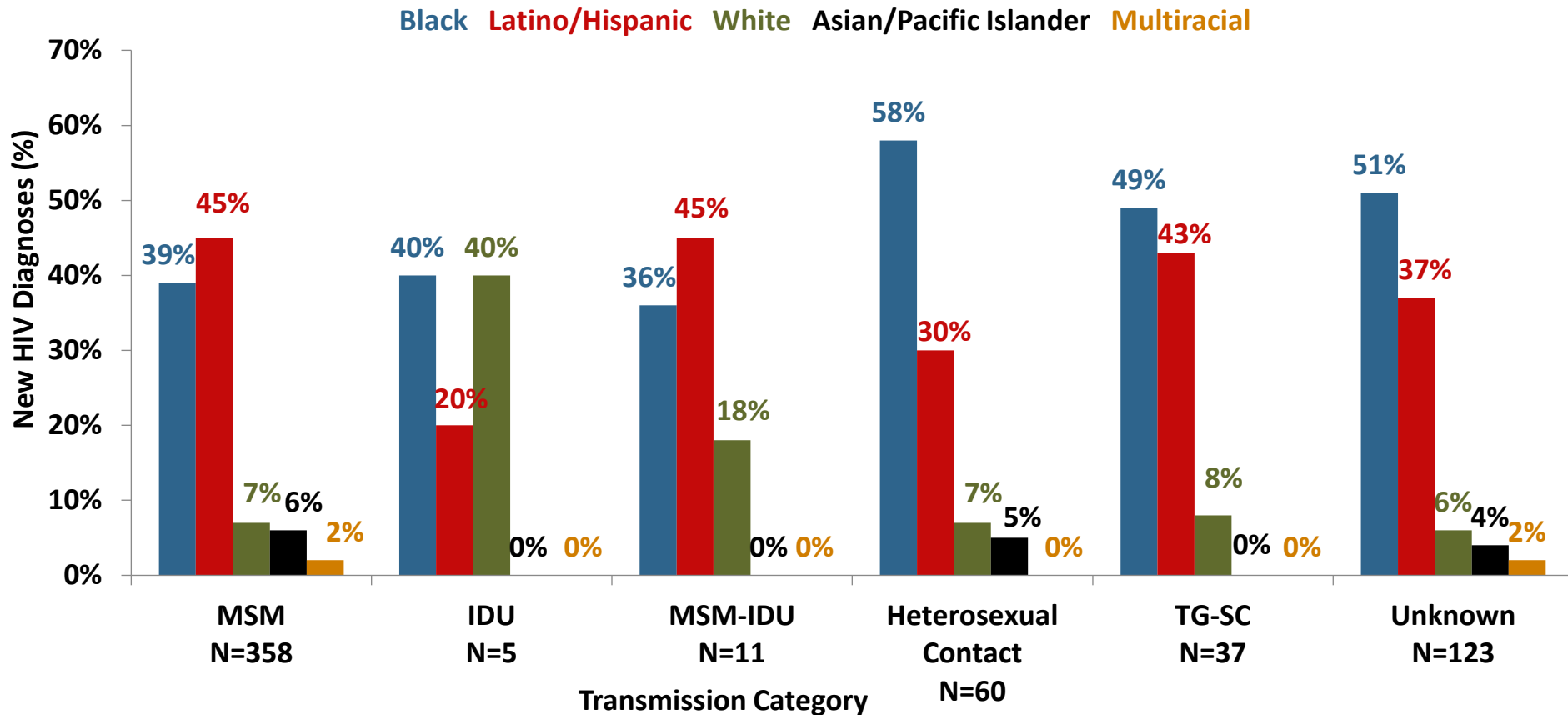
NUMBER OF NEW HIV DIAGNOSES AMONG WOMEN 13 TO 29 BY TRANSMISSION CATEGORY IN NYC, 2017-2021



The number of new HIV diagnoses among women aged 13 to 29 years in the heterosexual contact transmission category was consistently higher than other transmission categories during 2017-2021.

IDU=history of injection drug use; TG-SC=transgender people with sexual contact.
 From 2017 to 2021, there were no women ages 13-29 newly diagnosed in the Perinatal or Other transmission categories.
 As reported to the New York City Department of Health and Mental Hygiene by March 31, 2022.

PERCENTAGE OF NEW HIV DIAGNOSES AMONG YOUTH 13 TO 29 BY TRANSMISSION CATEGORY AND RACE/ETHNICITY IN NYC, 2021



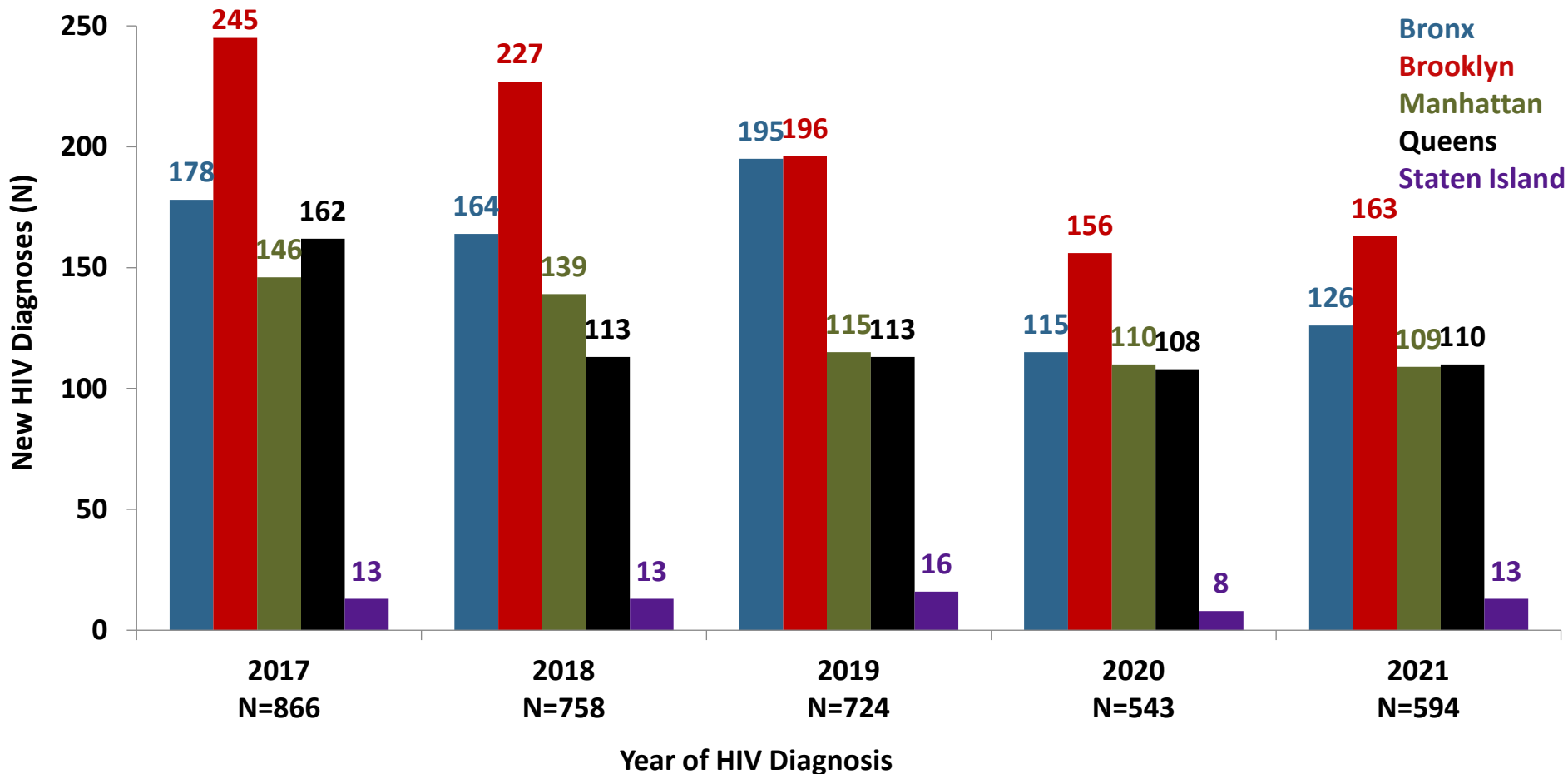
Across all transmission categories except IDU, newly diagnosed youth were predominantly Black and Latino/Hispanic.

MSM=men who have sex with men; IDU=history of injection drug use; TG-SC=transgender people with sexual contact.

In 2021, there were no newly diagnosed people ages 13-29 in the Perinatal, IDU, or Other transmission categories, and no newly diagnosed Native American people ages 13-29.

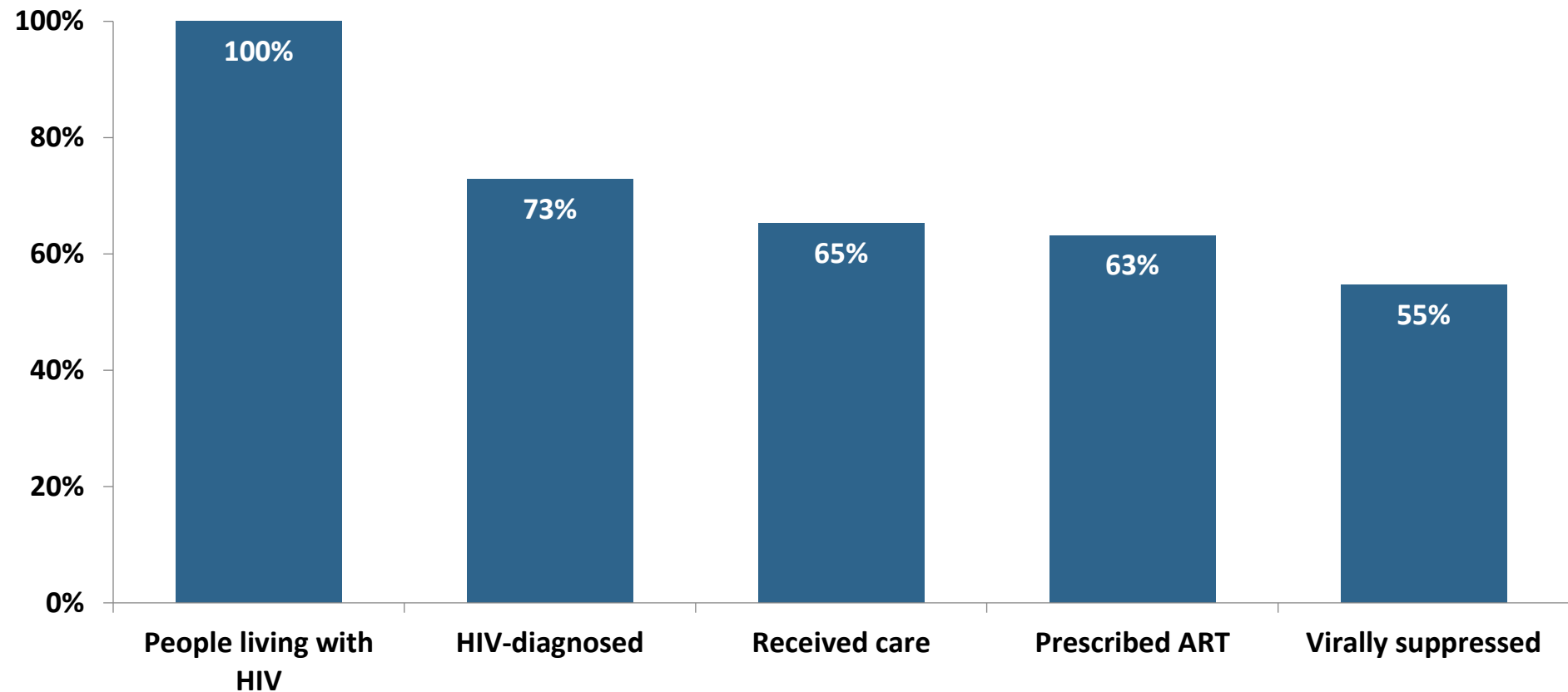
As reported to the New York City Department of Health and Mental Hygiene by March 31, 2022.

NUMBER OF NEW HIV DIAGNOSES AMONG YOUTH 13 TO 29 BY BOROUGH IN NYC, 2017-2021



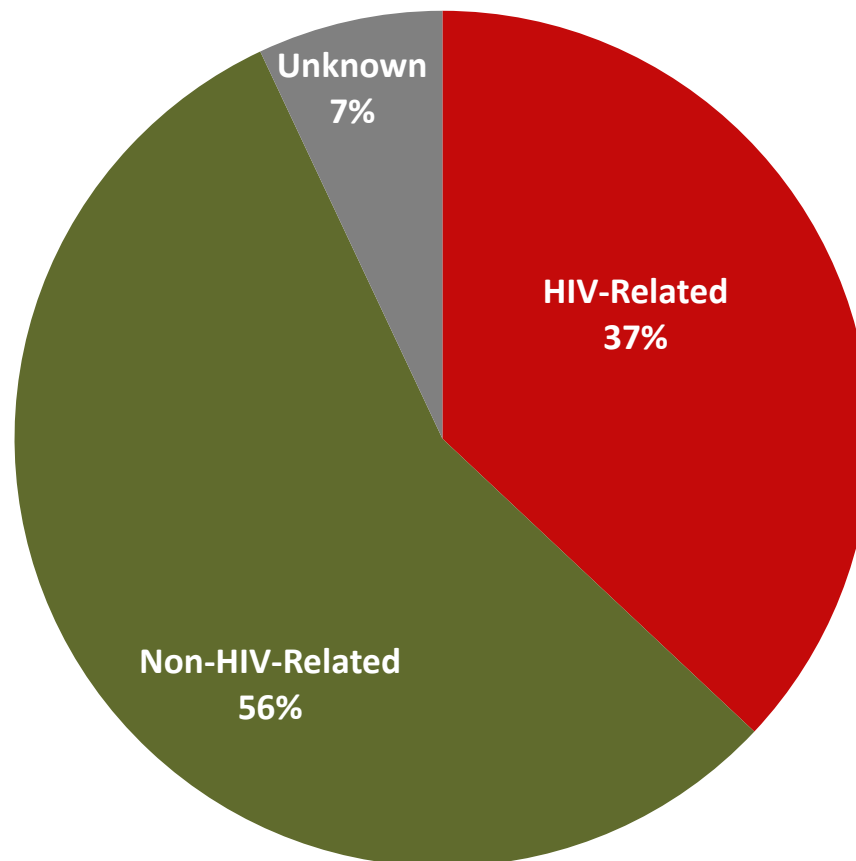
In 2021, Brooklyn and the Bronx accounted for 49% of new HIV diagnoses among people ages 13 to 29 years.

PROPORTION OF PLWH YOUTH 13 TO 29 ENGAGED IN SELECTED STAGES OF THE HIV CARE CONTINUUM IN NYC, 2021



Of the approximately 7,700 youth ages 13 to 29 years with HIV and living in NYC in 2021, 55% had a suppressed viral load.

CAUSE OF DEATH AMONG YOUTH 13 TO 29 WITH HIV IN NYC, 2020¹



In 2020, 56% of deaths among youth with HIV were due to non-HIV-related causes. Among these, the top non-HIV-related cause was accidents (25%).

¹Cause of death data are 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/2014sum.pdf>.

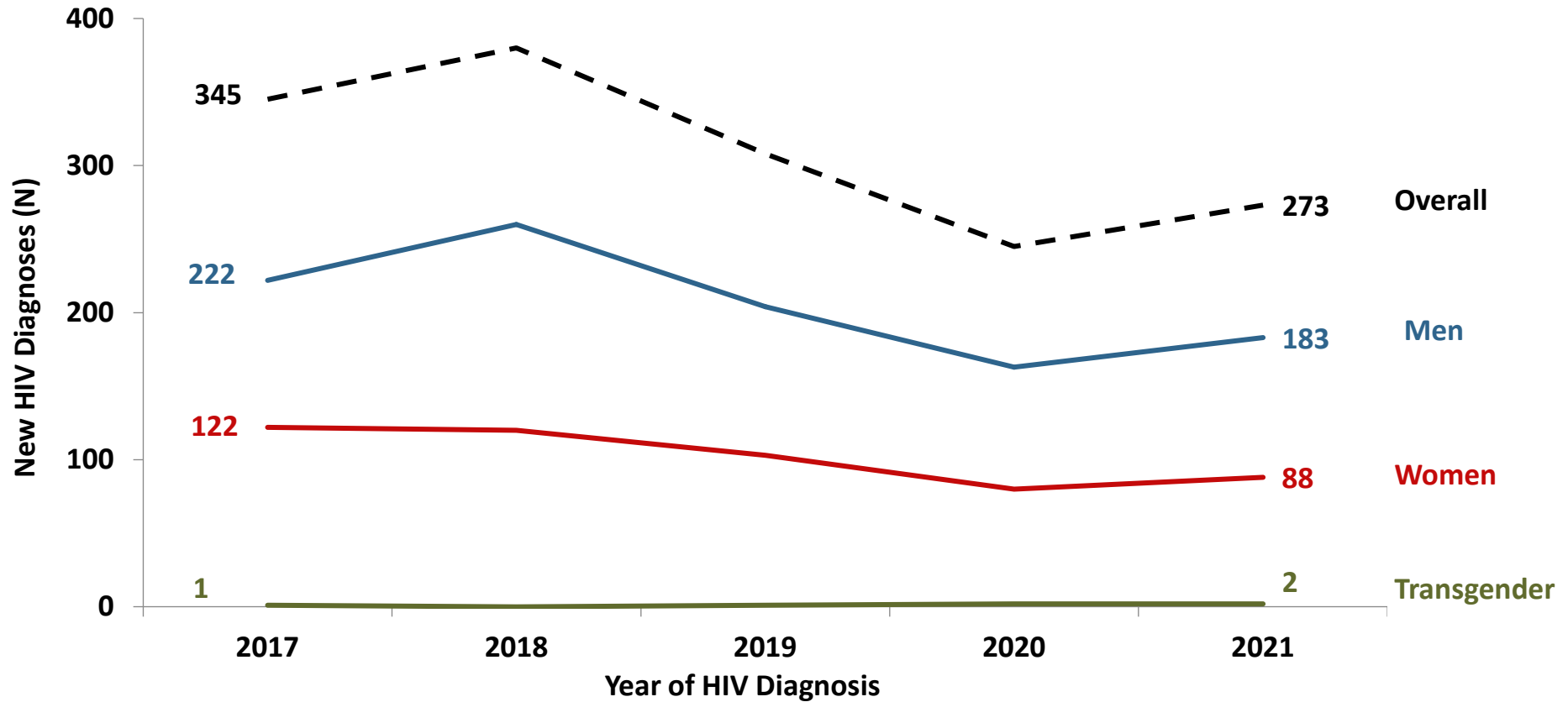
As reported to the New York City Department of Health and Mental Hygiene by March 31, 2022.

HIV AMONG PEOPLE 50 AND OLDER IN NYC, 2021

BASIC STATISTICS

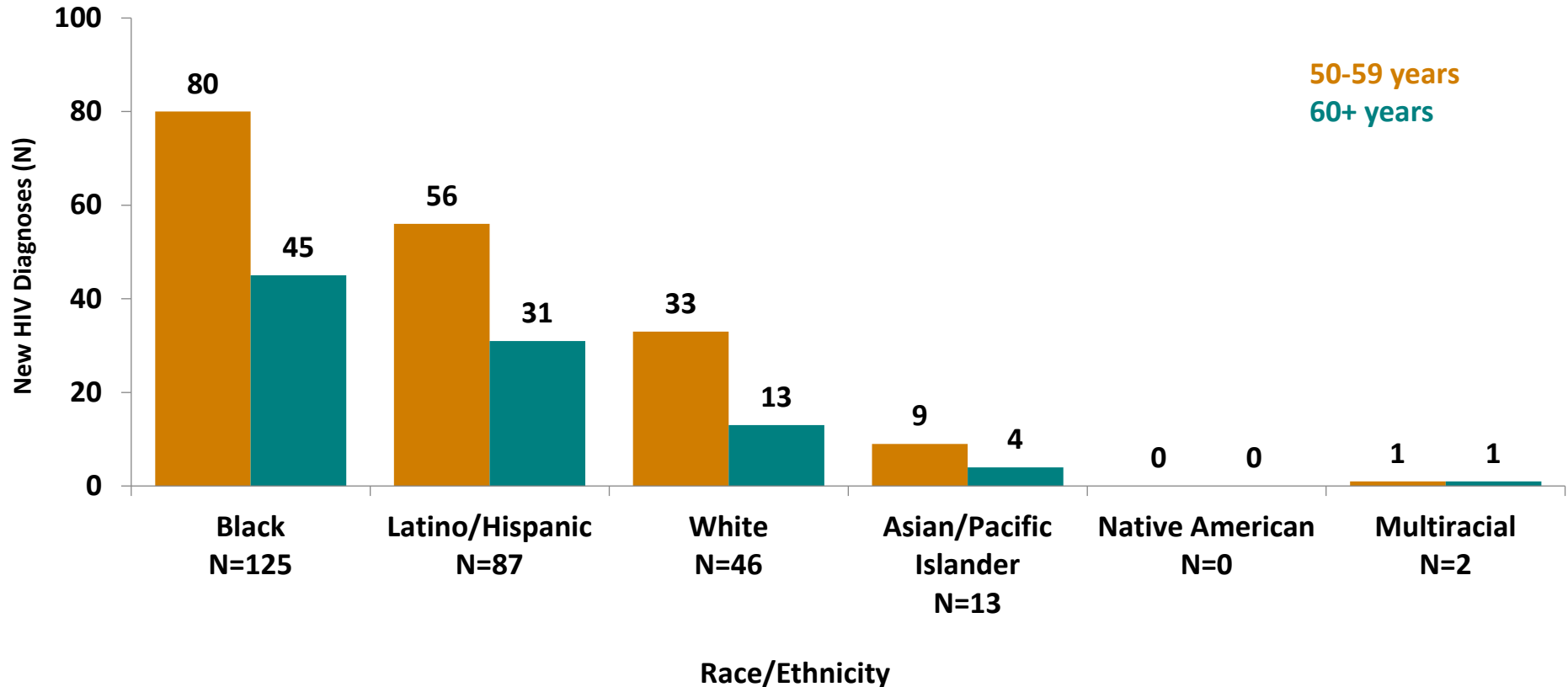
- **273 new HIV diagnoses among New Yorkers ages 50+ years**
 - 97 HIV diagnoses concurrent with an AIDS diagnosis (35.5%)
- **399 new AIDS diagnoses**
- **1,785 deaths among older adults with HIV**
 - 22.7 deaths per 1,000 older adults with HIV¹

NUMBER OF NEW HIV DIAGNOSES AMONG PEOPLE 50 AND OLDER BY GENDER IN NYC, 2017-2021



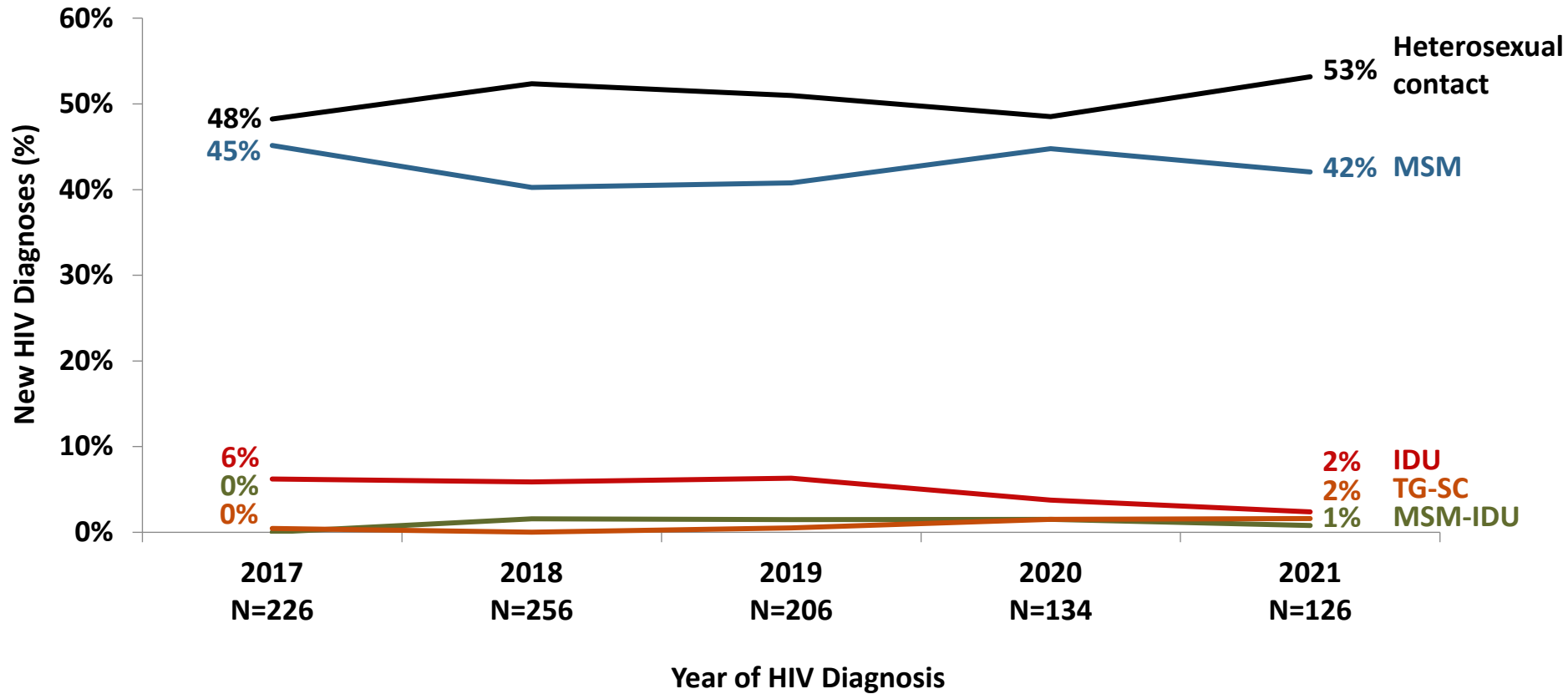
The number of new HIV diagnoses among all people 50 years and older, as well as the number among men and women 50 years and older, declined between 2017 and 2021.

NUMBER OF NEW HIV DIAGNOSES AMONG PEOPLE 50 AND OLDER BY RACE/ETHNICITY IN NYC, 2021



In 2021, Black people 50 years and over had more new HIV diagnoses than the same age group in any other race/ethnicity. Across nearly all race/ethnicities, the largest proportion of newly diagnosed older people were in the 50 to 59 age group.

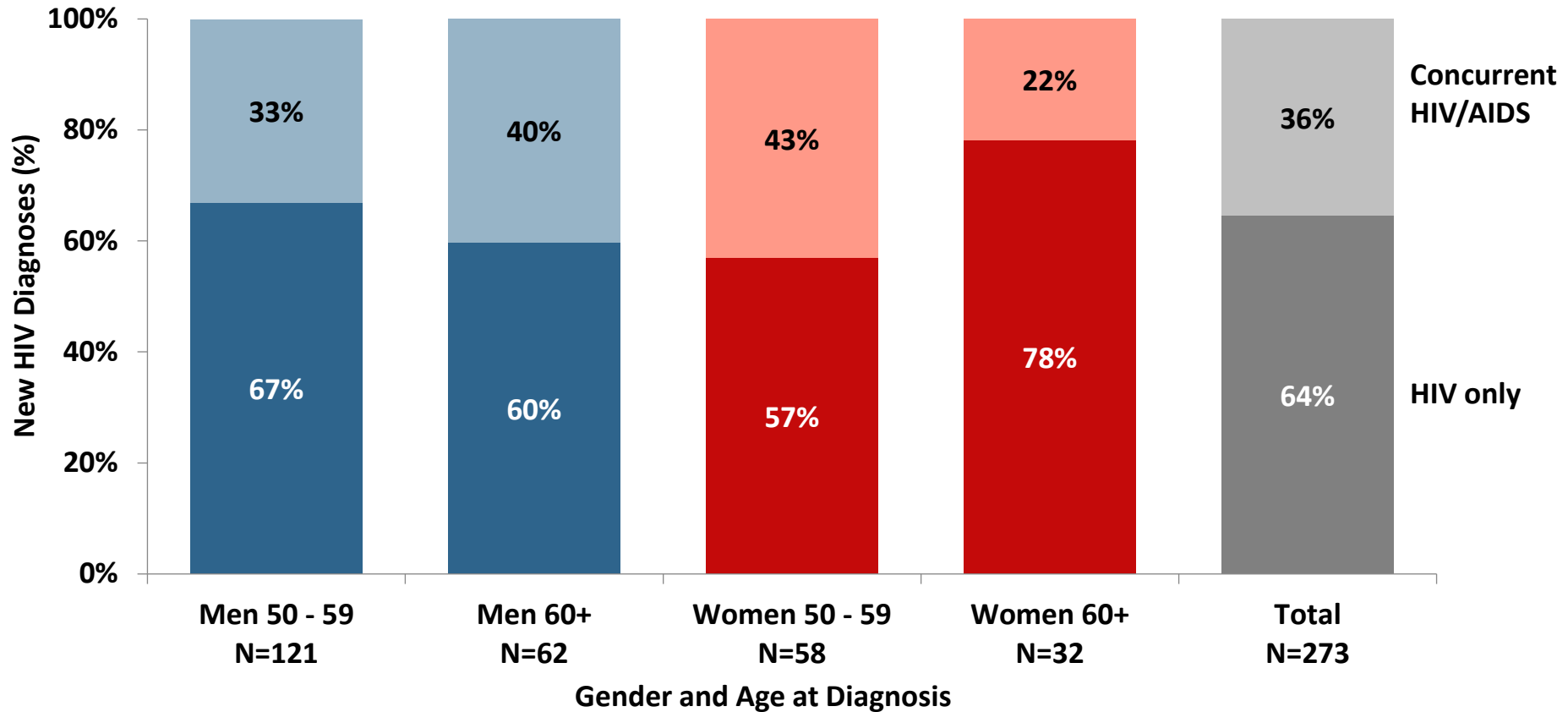
PERCENTAGE OF NEW HIV DIAGNOSES AMONG PEOPLE 50 AND OLDER BY TRANSMISSION CATEGORY IN NYC, 2017-2021



Between 2017 and 2021, the proportions of new HIV diagnoses among people ages 50 years and older by transmission category remained relatively flat.

MSM=men who have sex with men; IDU=history of injection drug use; TG-SC=transgender people with sexual contact.
 New diagnoses between 2017 and 2021 with a perinatal (N=0), other (N=0), or unknown (N=603) transmission category are not shown.
 As reported to the New York City Department of Health and Mental Hygiene by March 31, 2022.

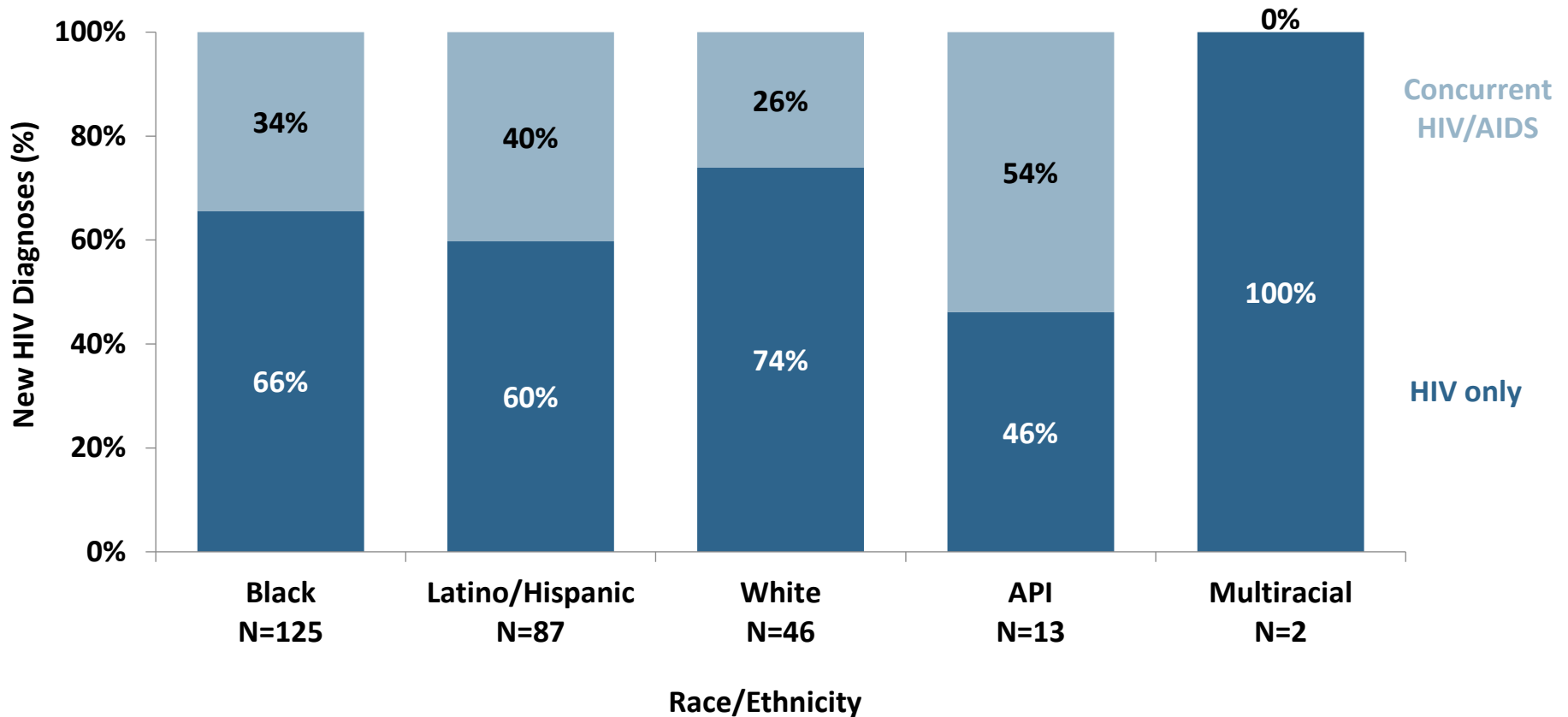
PERCENTAGE OF NEW HIV DIAGNOSES CONCURRENT WITH AN AIDS DIAGNOSIS¹ AMONG PEOPLE 50 AND OLDER BY GENDER AND AGE IN NYC, 2021



Women ages 50 to 59 had a higher proportion of concurrent HIV/AIDS diagnoses than men in the same age group, while men ages 60+ had a higher proportion of concurrent HIV/AIDS diagnoses than women in the same age group.

¹AIDS diagnosis within 31 days of HIV diagnosis.
 Men includes transgender men and 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 CONCURRENT WITH AN AIDS DIAGNOSIS¹ AMONG PEOPLE 50 AND OLDER BY RACE/ETHNICITY IN NYC, 2021



The proportion of concurrent HIV/AIDS diagnoses was higher among API people (54%) ages 50+ than among White (26%), Black (34%), and Latino/Hispanic (40%) people ages 50+.

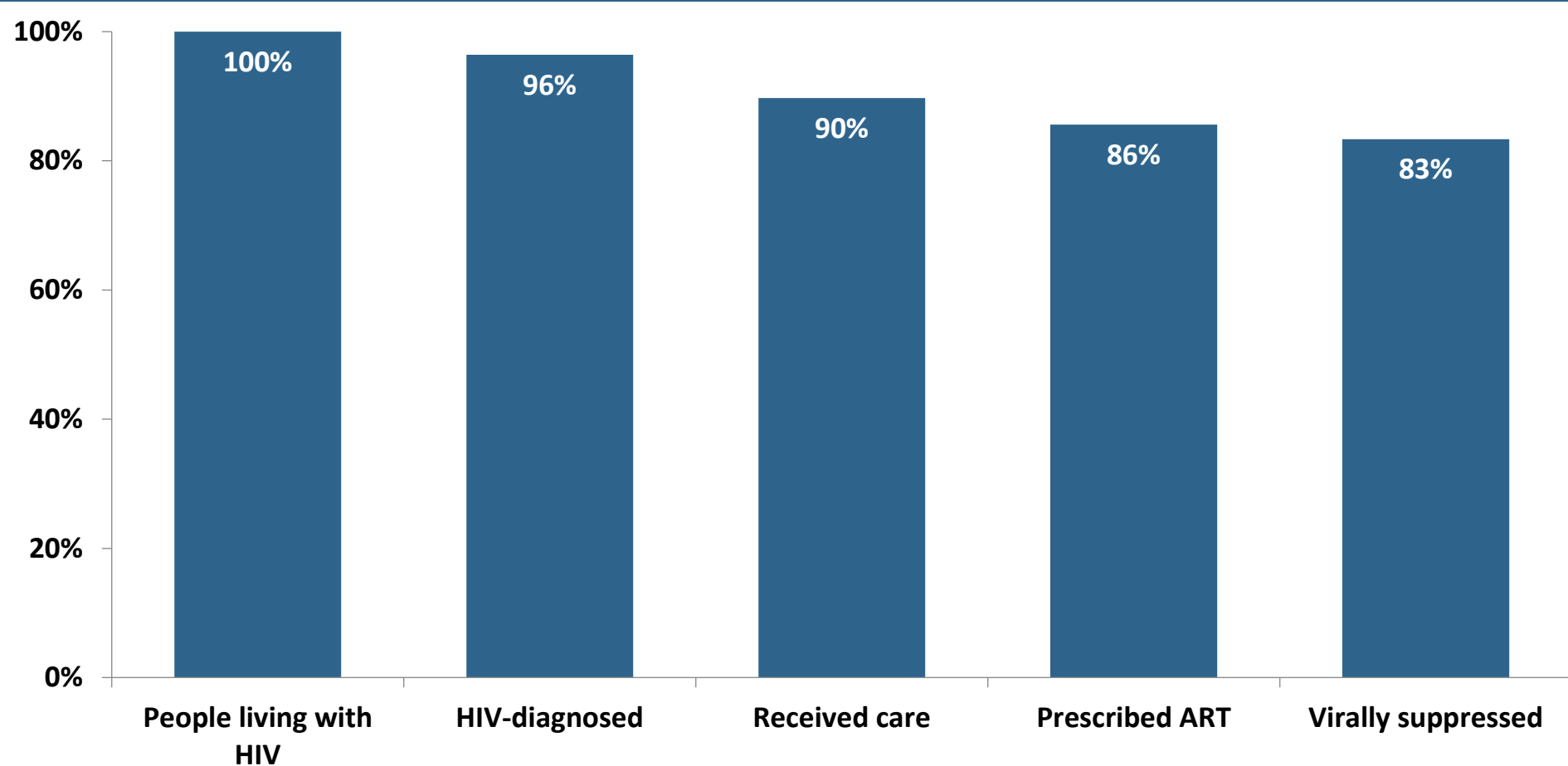
¹AIDS diagnosis within 31 days of HIV diagnosis.

API=Asian/Pacific Islander

In 2021, there were no Native Americans ages 50 and older diagnosed with HIV.

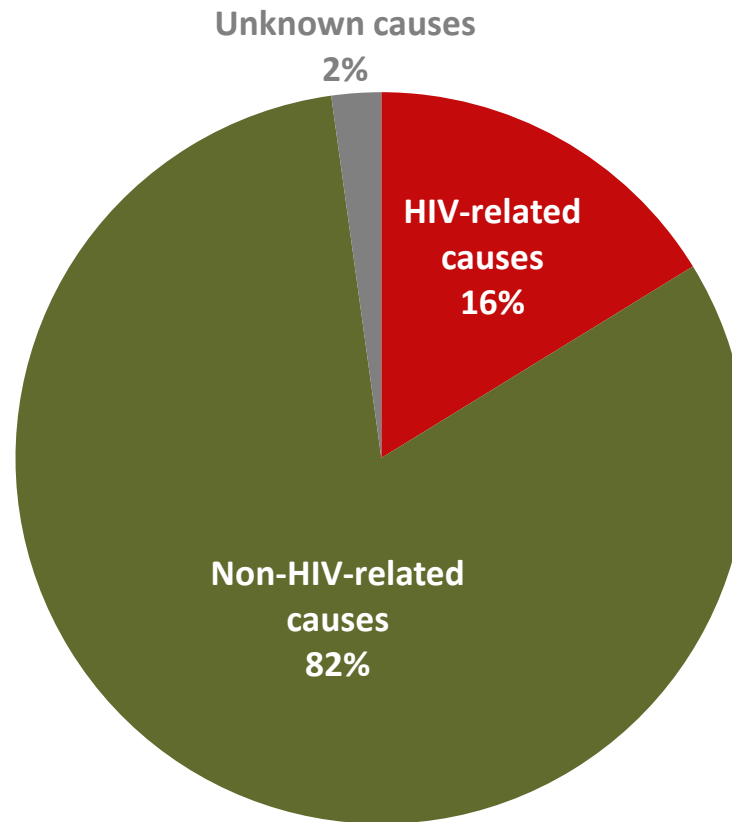
As reported to the New York City Department of Health and Mental Hygiene by March 31, 2022.

PROPORTION OF PLWH AGES 50 AND OLDER ENGAGED IN SELECTED STAGES OF THE HIV CARE CONTINUUM IN NYC, 2021



Of the approximately 49,400 people ages 50 years and over with HIV and living in NYC in 2021, 83% had a suppressed viral load.

CAUSE OF DEATH AMONG PEOPLE 50 AND OLDER WITH HIV IN NYC, 2020¹



In 2020, 82% of deaths among people 50 years and older with HIV were due to non-HIV-related causes. Among these, the top causes were cardiovascular diseases (24%) and COVID-19 (23%).

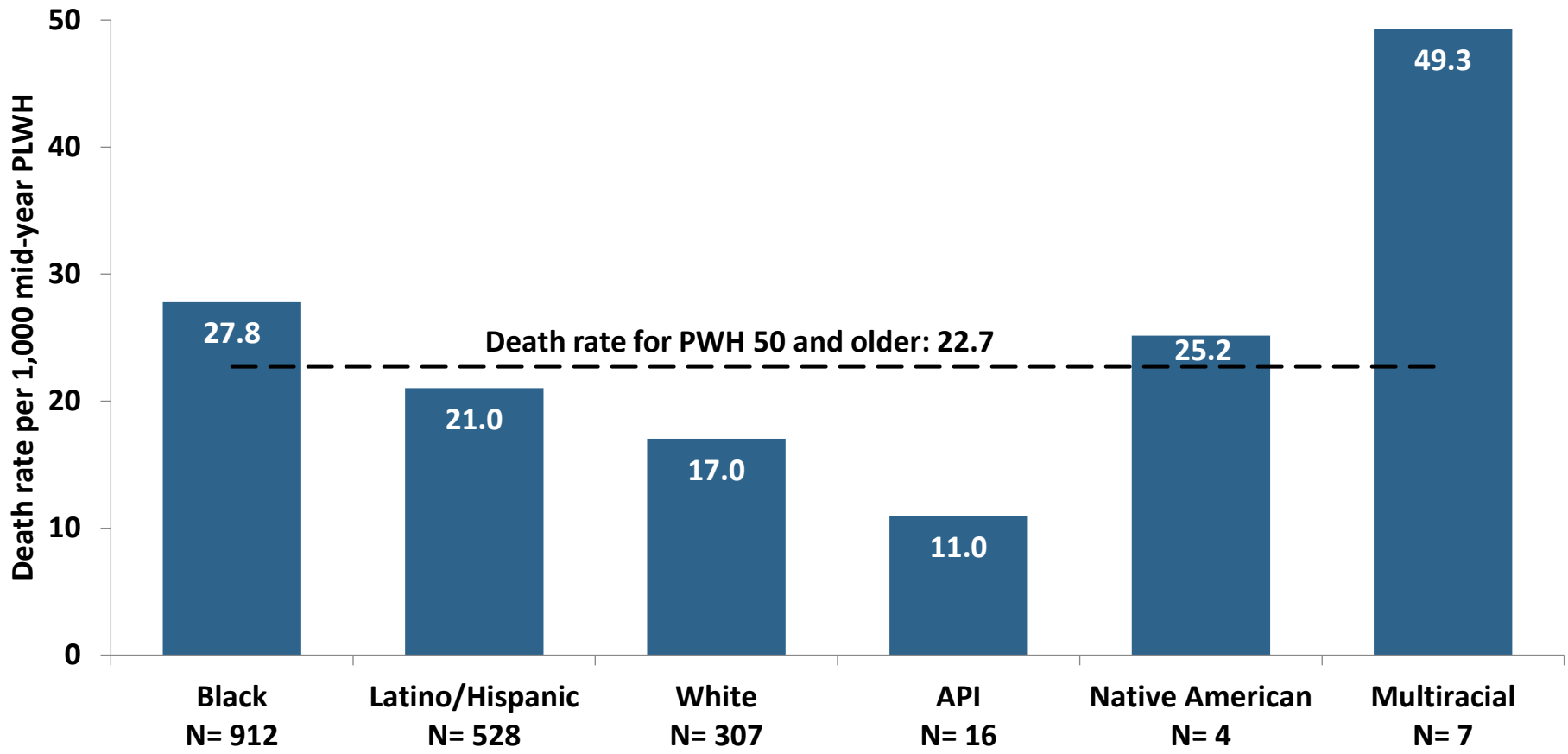
¹Cause of death data are not yet available for 2021.

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/2014sum.pdf>.

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

DEATH RATES¹ AMONG PEOPLE 50 AND OLDER BY RACE/ETHNICITY IN NYC, 2021



Death rates among Black, Native American, and multiracial PWH ages 50 and older were higher than the overall death rate among PWH in this age group.

PWH=People with HIV; API=Asian/Pacific Islander.
¹Crude death rates. Death data for 2021 are incomplete.
As reported to the New York City Department of Health and Mental Hygiene by March 31, 2022.

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

Definitions:

- “HIV diagnoses” include diagnoses of HIV (non-AIDS) and HIV concurrent with AIDS (AIDS diagnosed within 31 days of HIV), 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.
- Data presented by “Transmission category” include only individuals with a known or identified transmission category, except when an “unknown” category is presented.
- “PWH” refers to people with HIV during the reporting period and includes people who 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.
- 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.
- “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 in the non-perinatal transmission category.
- Youth are defined as people between 13 and 29 years of age (inclusive). Older adults are defined as people 50 years of age and older.

APPENDIX 2:

TECHNICAL NOTES: NYC HIV CARE CONTINUUM

- “People living with HIV ”: calculated as “HIV-diagnosed” divided by the estimated proportion of 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 “retained in care” multiplied by the estimated proportion of 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.
- “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.