

# HIV/AIDS among the Foreign-born in New York City, 2013



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

Prepared: February 2015

<http://www.nyc.gov/html/doh/html/data/hivepi.shtml>

# Table of Contents

---

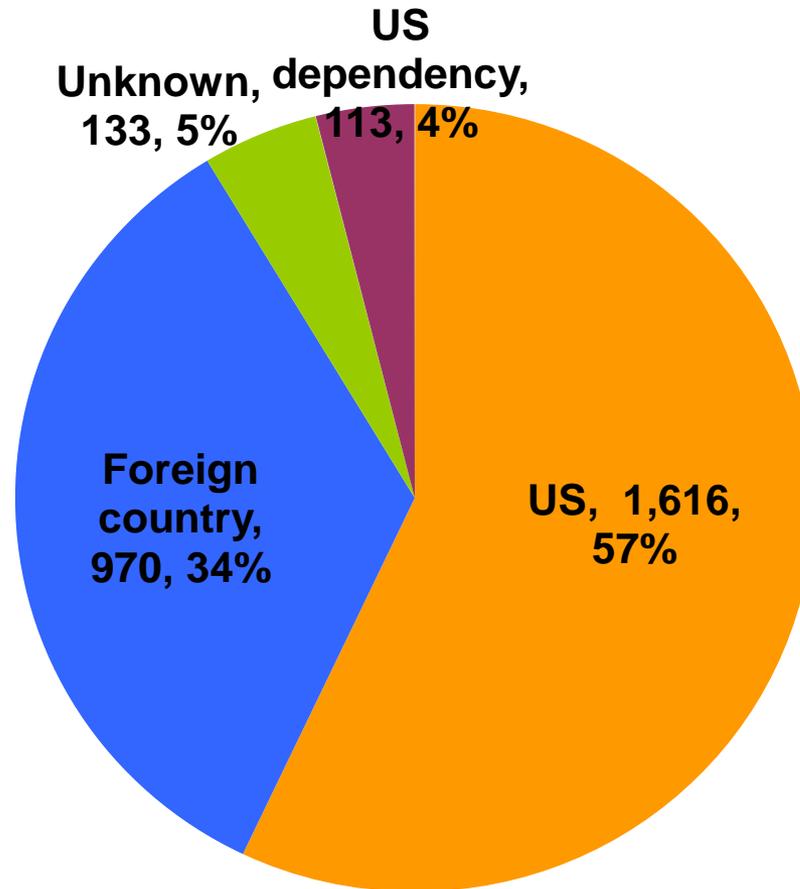
<u>Slide number</u>	3	Foreign-born population in New York City, basic statistics
	4	New HIV diagnoses in New York City by area of birth, 2013
	5	Comparing New Yorkers with new HIV diagnoses by Origin, 2013
	6	Number of new HIV diagnoses in NYC, 2009-2013
	7	Percentage of new HIV diagnoses by region of birth in NYC, 2013
	8	Most frequent foreign countries of birth among new HIV diagnoses, 2013
	9	New HIV diagnoses among persons born in the Caribbean, 2013
	10	New HIV diagnoses among persons born in Central & South America, 2013
	11	New HIV diagnoses in NYC by sex and area of birth, 2013
	12	New HIV diagnoses in NYC among males by transmission risk, 2013
	13	New HIV diagnoses in NYC among females by transmission risk, 2013
	14	Concurrent diagnoses of HIV/AIDS by region of birth, 2013
	15	HIV/AIDS among foreign-born by age in NYC, 2013
	16	Death rate among persons with HIV/AIDS by region of birth, 2013
	17	Number and proportion of foreign-born persons diagnosed with HIV in New York City engaged in selected stages of the continuum of care at the end of 2013
	18	Appendix (1): Definitions and statistical notes
	19	Appendix (2): Technical notes – NYC Continuum of care

# The Foreign-born Population in NYC

## Basic Statistics

- **36% of NYC population is foreign-born**
  - 3 million of 8 million residents were born outside the US
- **Growing foreign-born population in NYC and US**
  - NYC had 2 million foreign-born in 1990 (28% of population)
  - US foreign-born increased from 8% in 1990 to 13% in 2010
- **Foreign-born persons come from many countries**
  - Most-represented regions are Caribbean, Asia, Central & South America (including Mexico), and Europe
  - Foreign-born refers to people known to have been born outside of the US and US dependencies
    - People from Puerto Rico and other US dependencies (Virgin Islands, Guam) are *not* “foreign-born”

# New HIV Diagnoses in NYC by Area of Birth, 2013



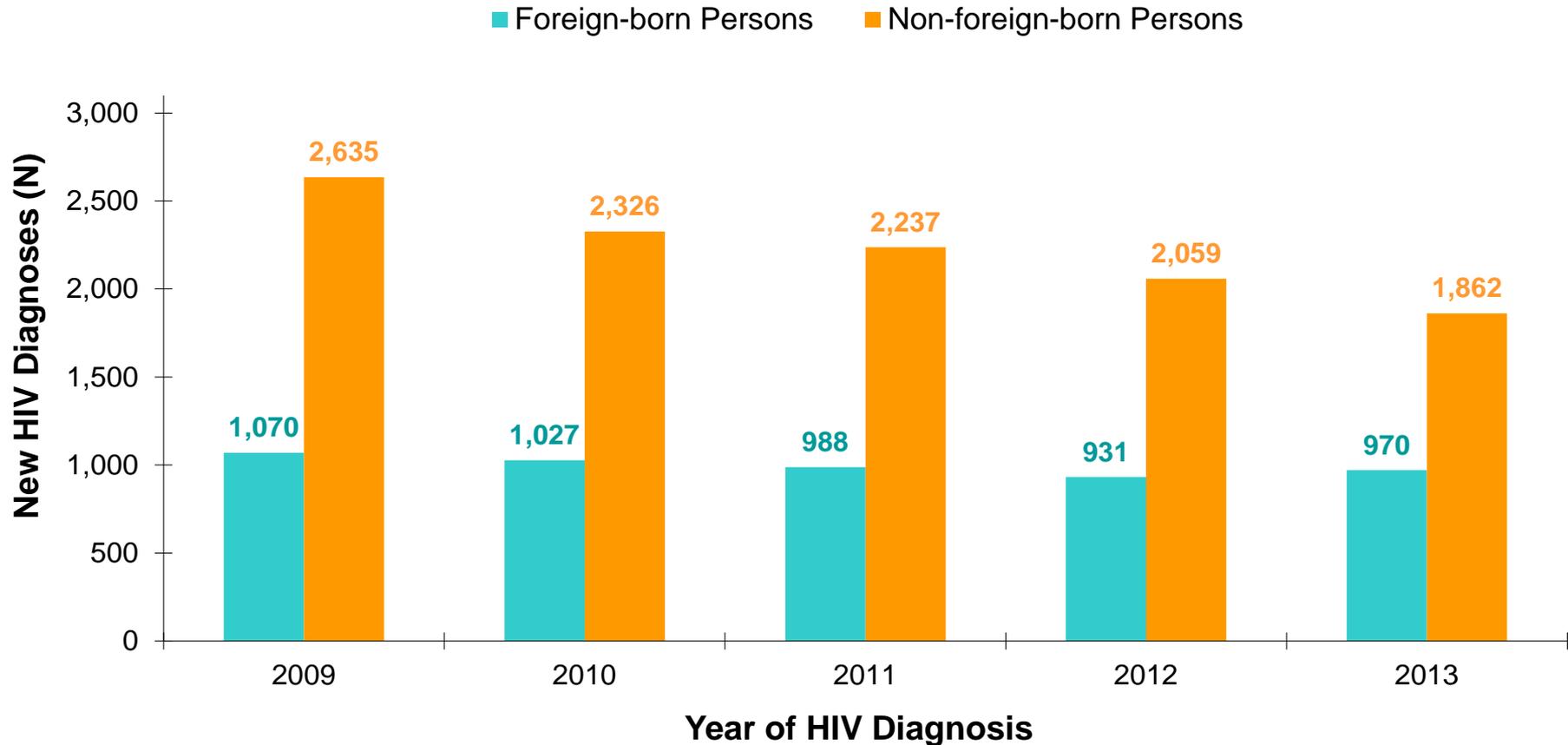
**In 2013, 2,832 New Yorkers were newly diagnosed with HIV. Of these, 970 people (34%) were born in a foreign country.**

# Comparing New Yorkers with New HIV Diagnoses by Foreign-born Status, 2013

<b>All New Yorkers</b>	<b>36% foreign-born</b>
<b>New Yorkers newly diagnosed with HIV</b>	<b>34% foreign-born</b>

**Relative to their proportion in the NYC population overall (36%), foreign-born people were about as likely to be newly diagnosed with HIV (34%).**

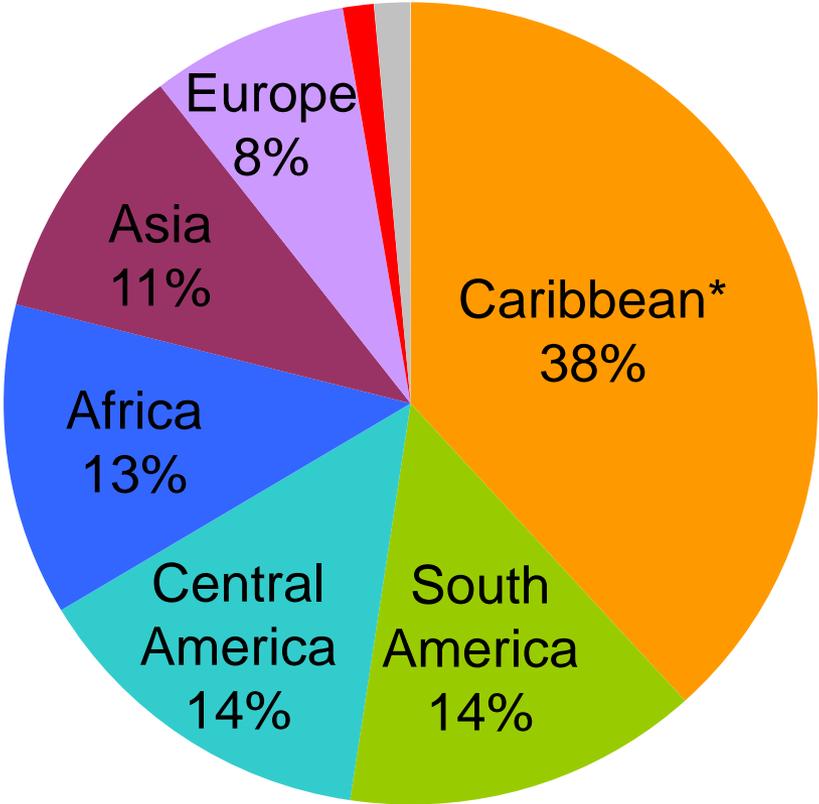
# Number of New HIV Diagnoses in NYC by Area of Birth, 2009-2013



**The decline in new HIV diagnoses in 2009-2013 was steeper among non-foreign-born people (29%) than among foreign-born people (9%)**

# Percentage of New HIV Diagnoses among Foreign-born in NYC by Region of Birth, 2013

Middle East 1% Other/Not Specified 1%

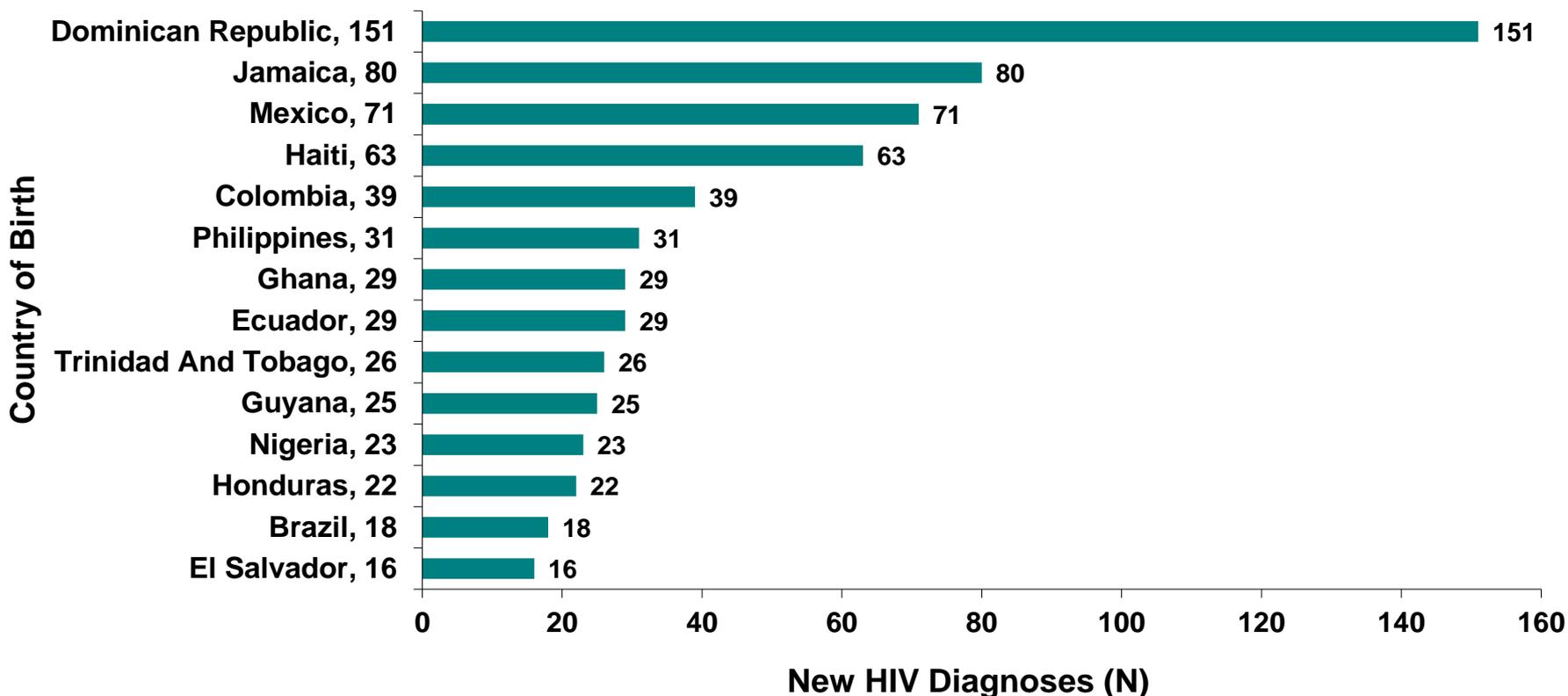


**Foreign-born New Yorkers newly diagnosed with HIV were born in many different regions. Over one-third were from the Caribbean.**

\*Excludes Puerto Rico and the US Virgin Islands.

As reported to the New York City Department of Health and Mental Hygiene by June 30, 2014.

# Most Frequent Countries of Birth among Foreign-born with New HIV Diagnoses in NYC, 2013



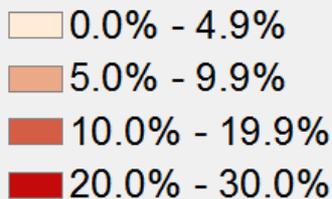
Among foreign-born New Yorkers newly diagnosed with HIV, the most frequent countries of birth were in the Caribbean and Central and South America.

Only those countries of birth accounting for at least new 15 HIV diagnoses are shown.  
As reported to the New York City Department of Health and Mental Hygiene by June 30, 2014.



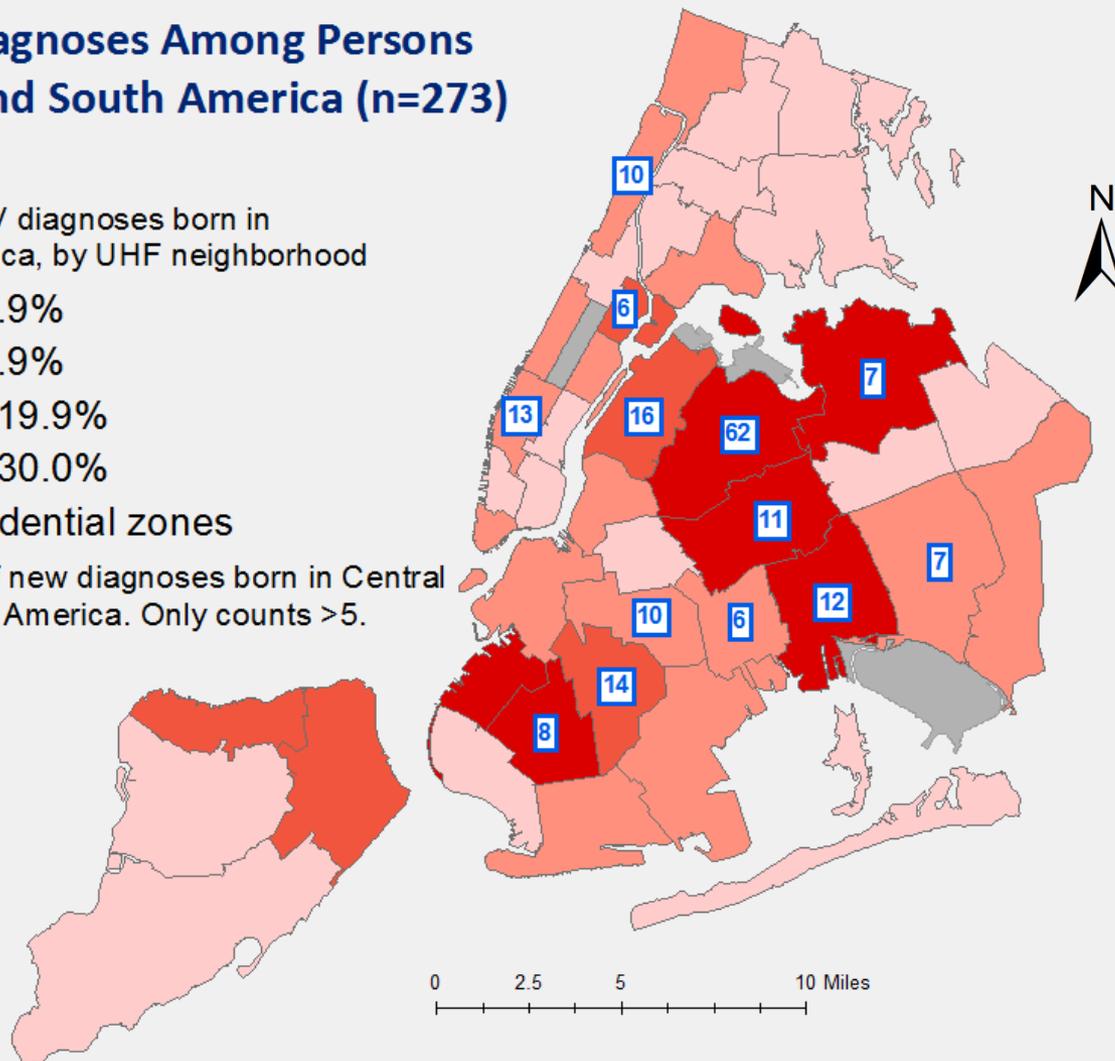
## 2013 New HIV Diagnoses Among Persons Born in Central and South America (n=273)

Percent of 2013 new HIV diagnoses born in Central and South America, by UHF neighborhood



Non-residential zones

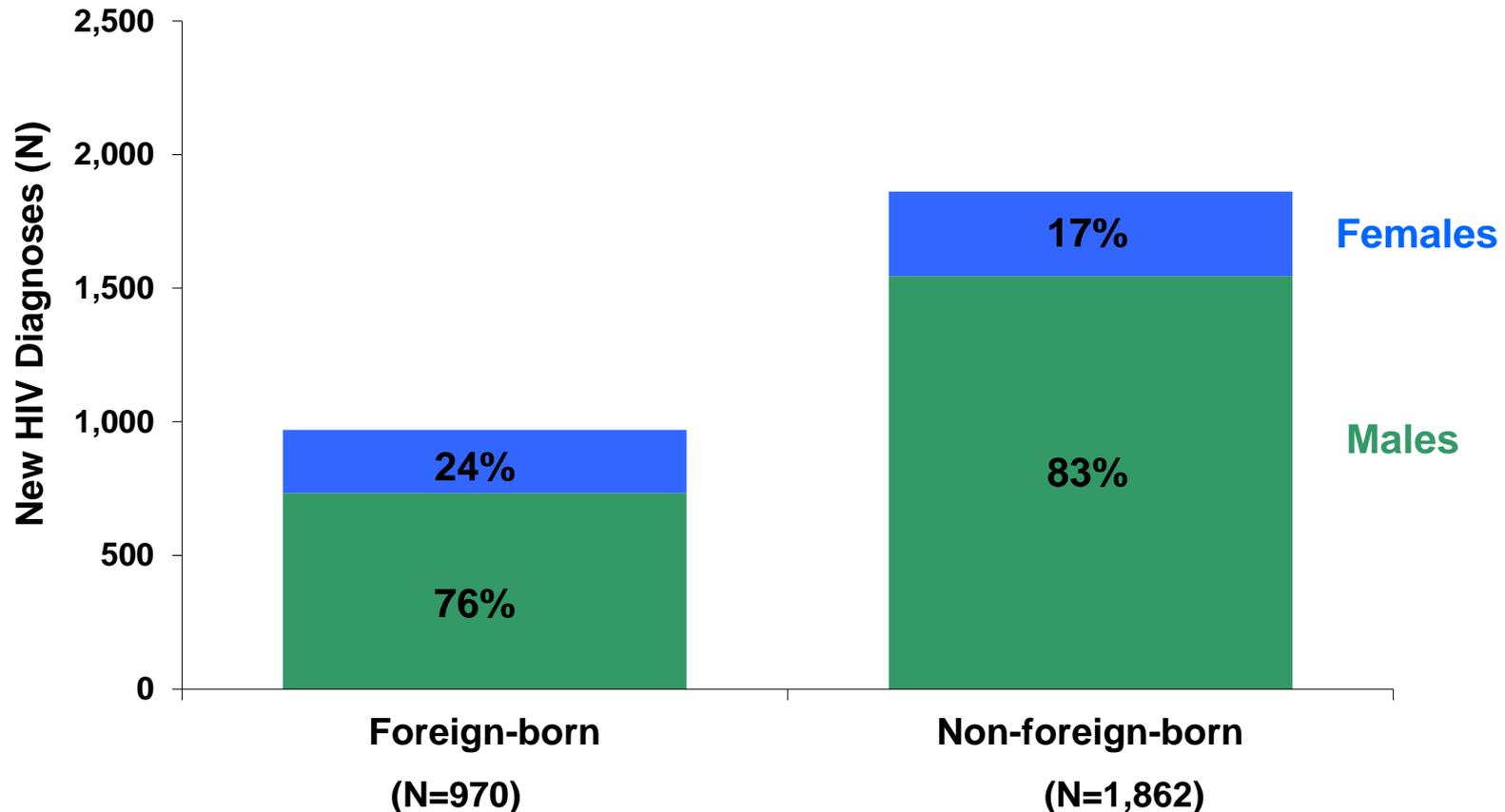
25 Number of new diagnoses born in Central and South America. Only counts >5.



**West Queens\* was the UHF neighborhood with the largest number (62) and percent (30%) of its new HIV diagnoses born in Central and South America.**

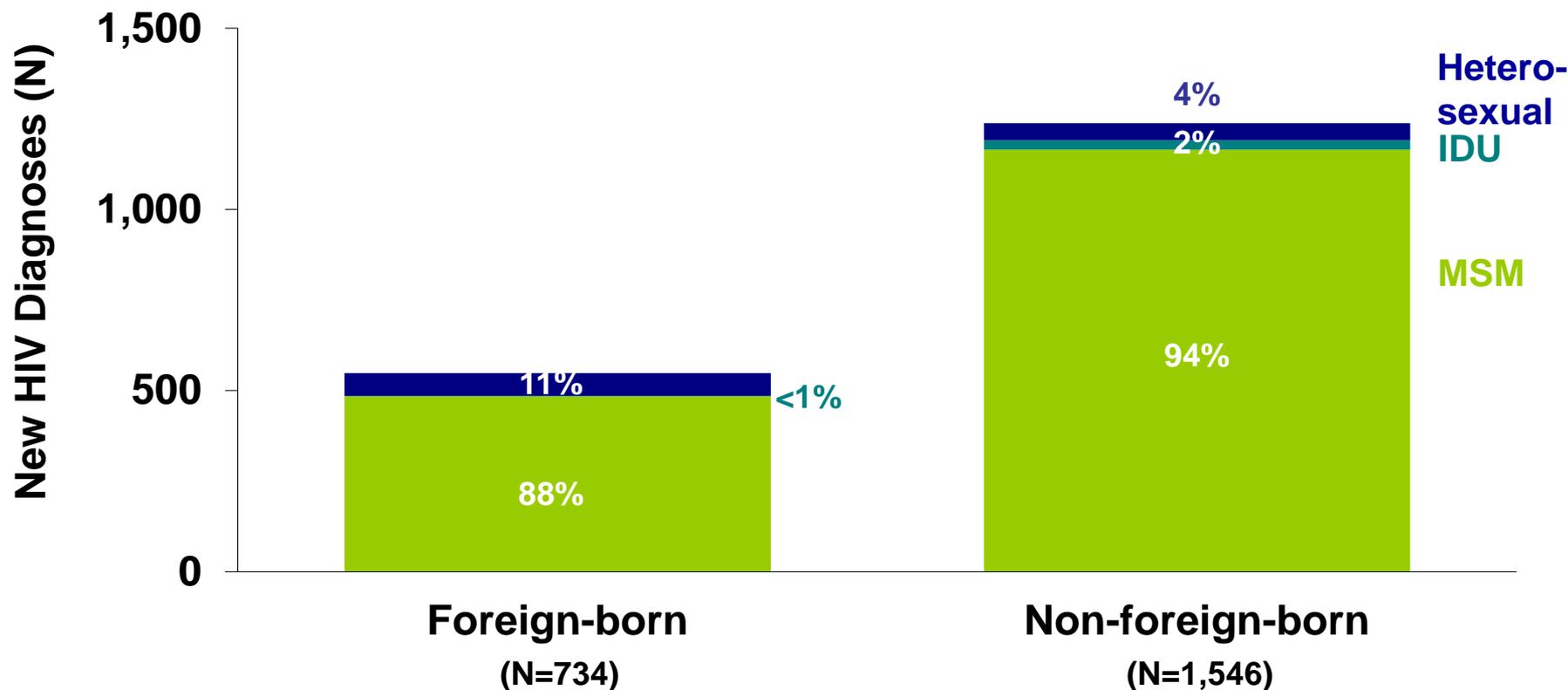
\* Rikers Island is classified with the UHF neighborhood of West Queens. As reported to the New York City Department of Health and Mental Hygiene by June 30, 2014.

# New HIV Diagnoses by Sex and Area of Birth in NYC, 2013



**In 2013, males comprised about three-quarters of foreign-born and five-sixths of non-foreign-born people diagnosed with HIV.**

# New HIV Diagnoses among Males by Area of Birth and Transmission Risk in NYC, 2013

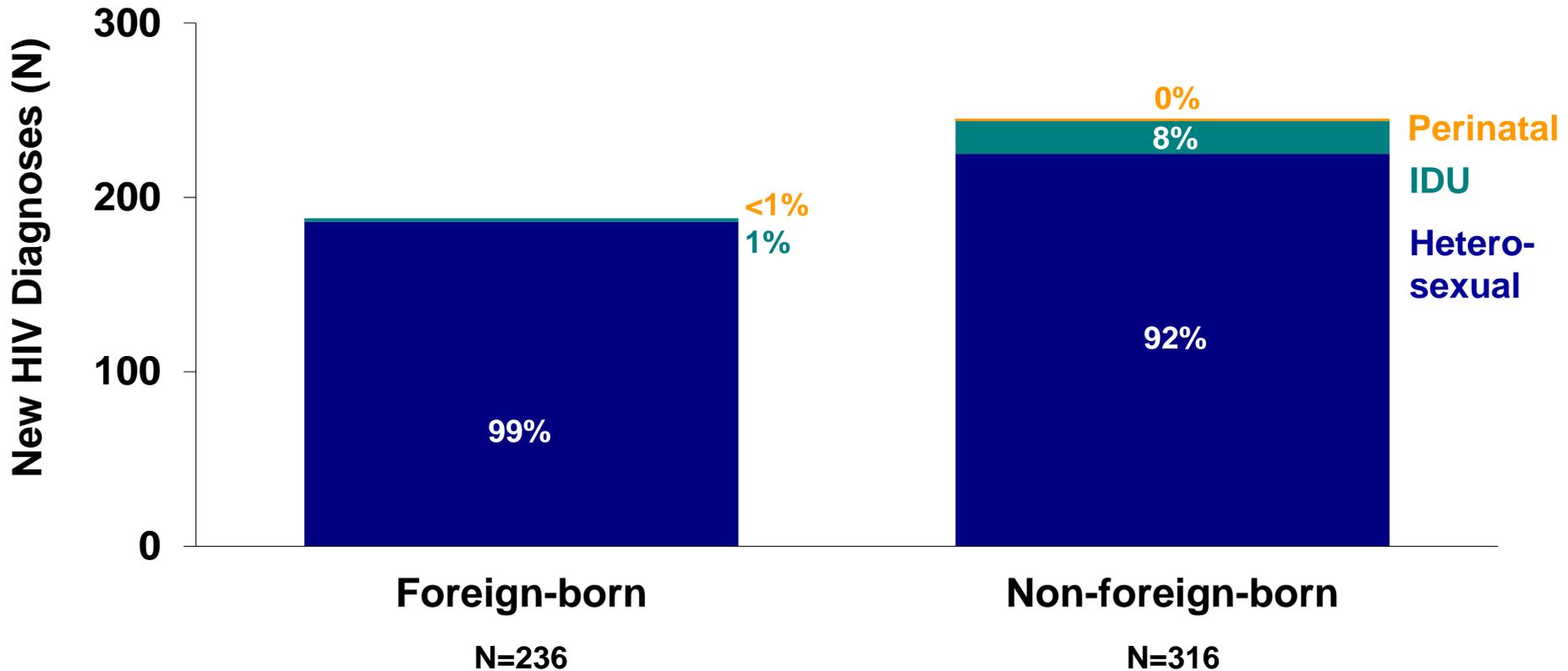


**In 2013, at least 88% of both foreign-born and non-foreign-born males diagnosed with HIV had MSM risk.**

MSM risk category includes men who have sex with men and inject drugs (MSM-IDU). Perinatal, other and unknown transmission risks not shown but included in the total N's. Perinatal transmission accounted for less than 1% of transmission risk among males.

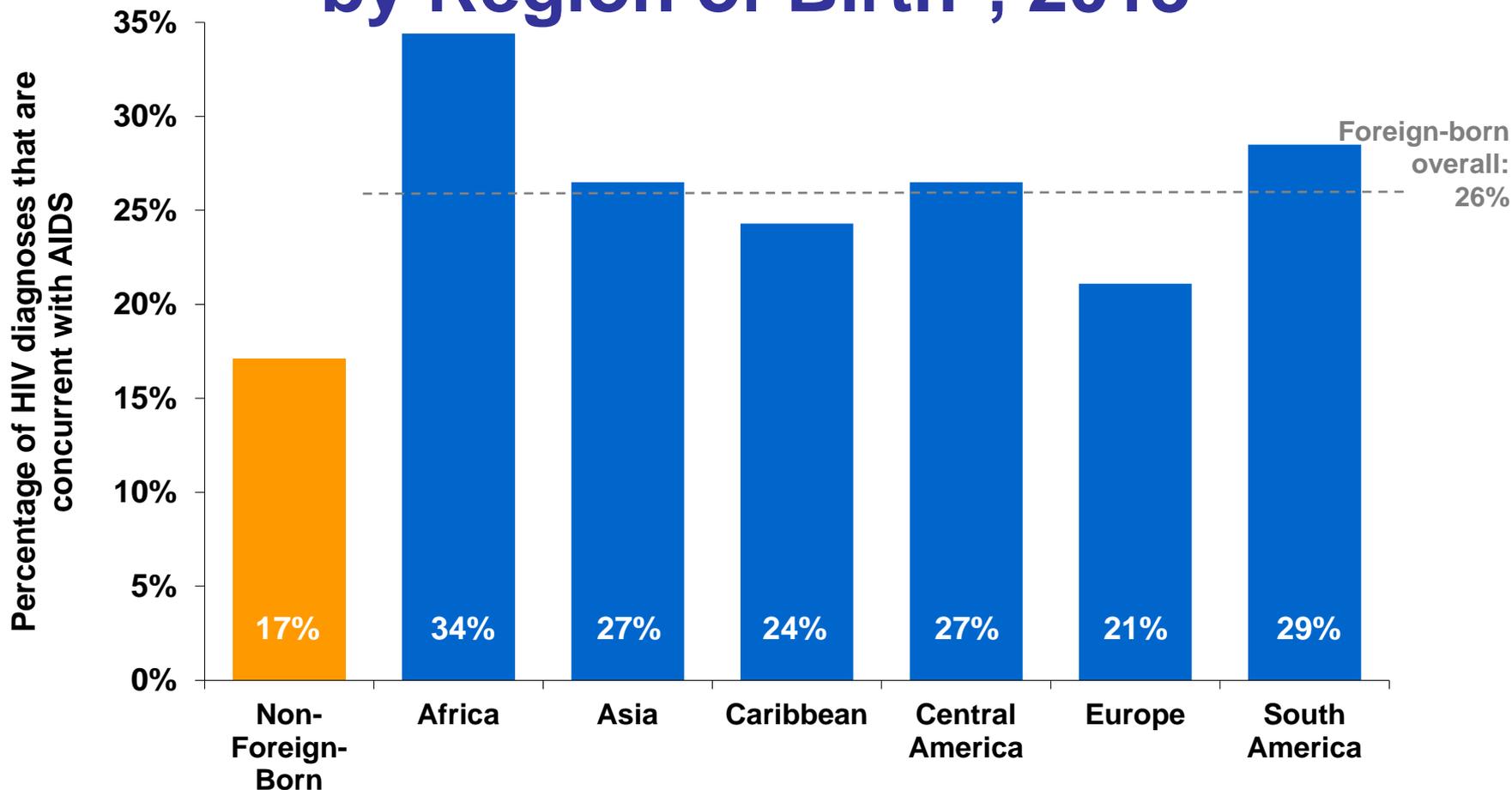
As reported to the New York City Department of Health and Mental Hygiene by June 30, 2014.

# New HIV Diagnoses among Females by Area of Birth and Transmission Risk in NYC, 2013



In 2013, 99% of foreign-born females diagnosed with HIV had heterosexual risk, whereas 8% of non-foreign-born females diagnosed with HIV had IDU risk.

# Concurrent Diagnosis<sup>1</sup> of HIV/AIDS in NYC by Region of Birth\*, 2013



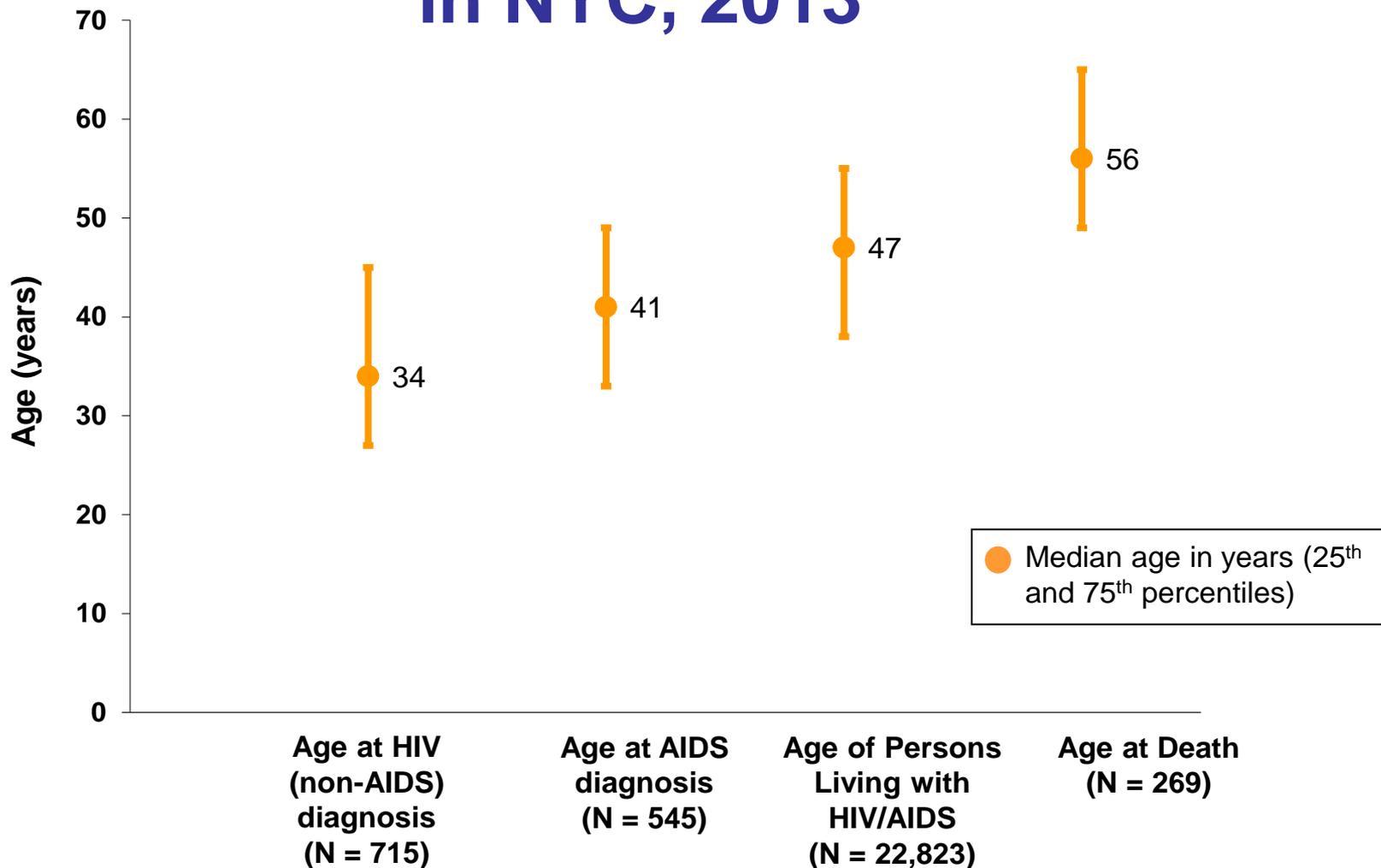
**Foreign-born New Yorkers from every region were more frequently diagnosed concurrently with HIV and AIDS than the non-foreign-born.**

<sup>1</sup>AIDS diagnosis within 31 days of HIV diagnosis.

\*Middle East not shown because of small numbers. Among 29 Middle-East-born persons newly diagnosed with HIV in NYC in 2012-2013 combined, 17% were diagnosed concurrently with AIDS.

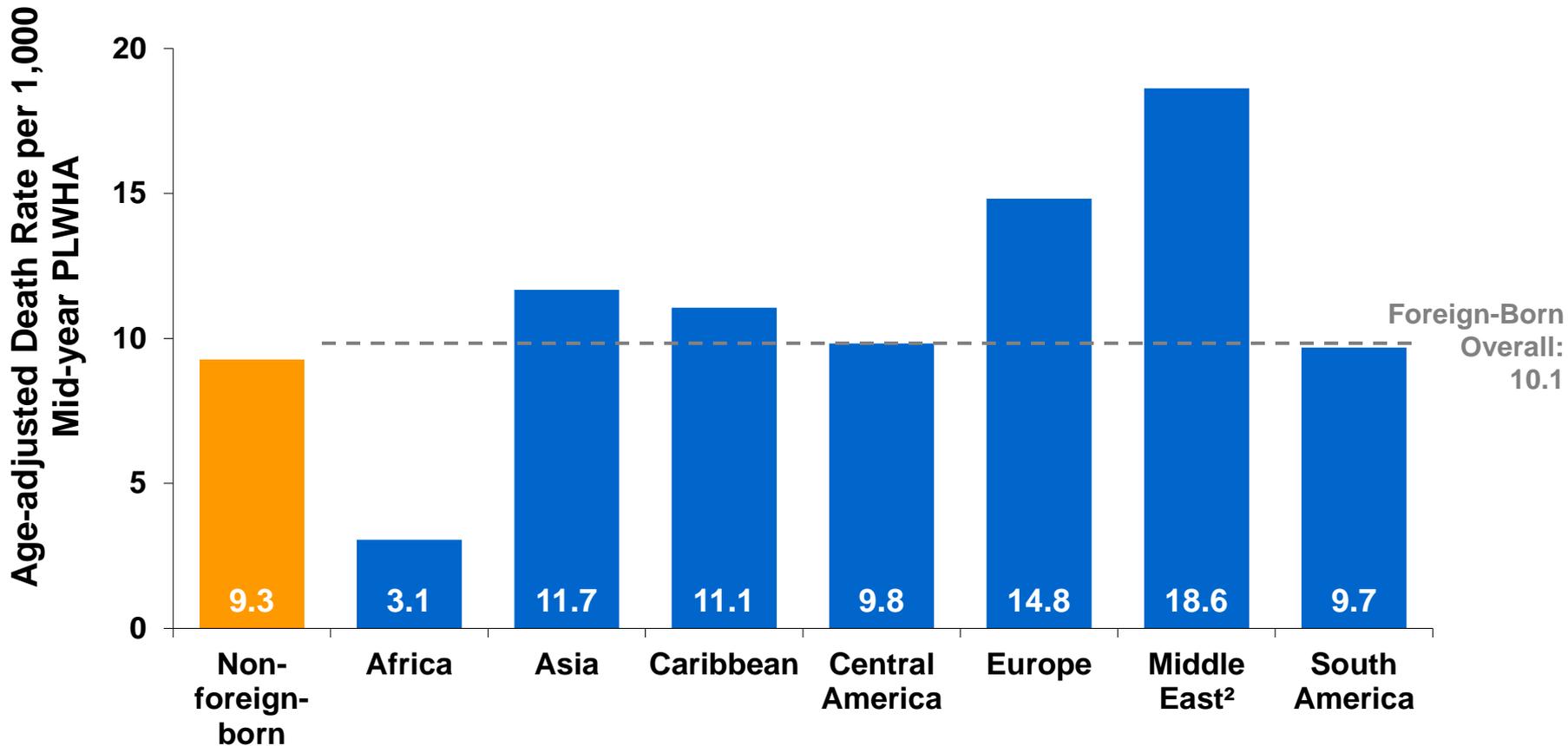
As reported to the New York City Department of Health and Mental Hygiene by June 30, 2014.

# HIV/AIDS among the Foreign-born by Age in NYC, 2013



**In 2013, the burden of HIV/AIDS among foreign-born people was heaviest for those in their mid-30s to mid-50s.**

# Age-adjusted Death Rate<sup>1</sup> among Persons with HIV/AIDS in NYC by Region of Birth, 2013



The death rate among foreign-born overall was similar to that among non-foreign-born New Yorkers. Death rates among foreign-born people varied by region, with notably lower rates among persons born in Africa.

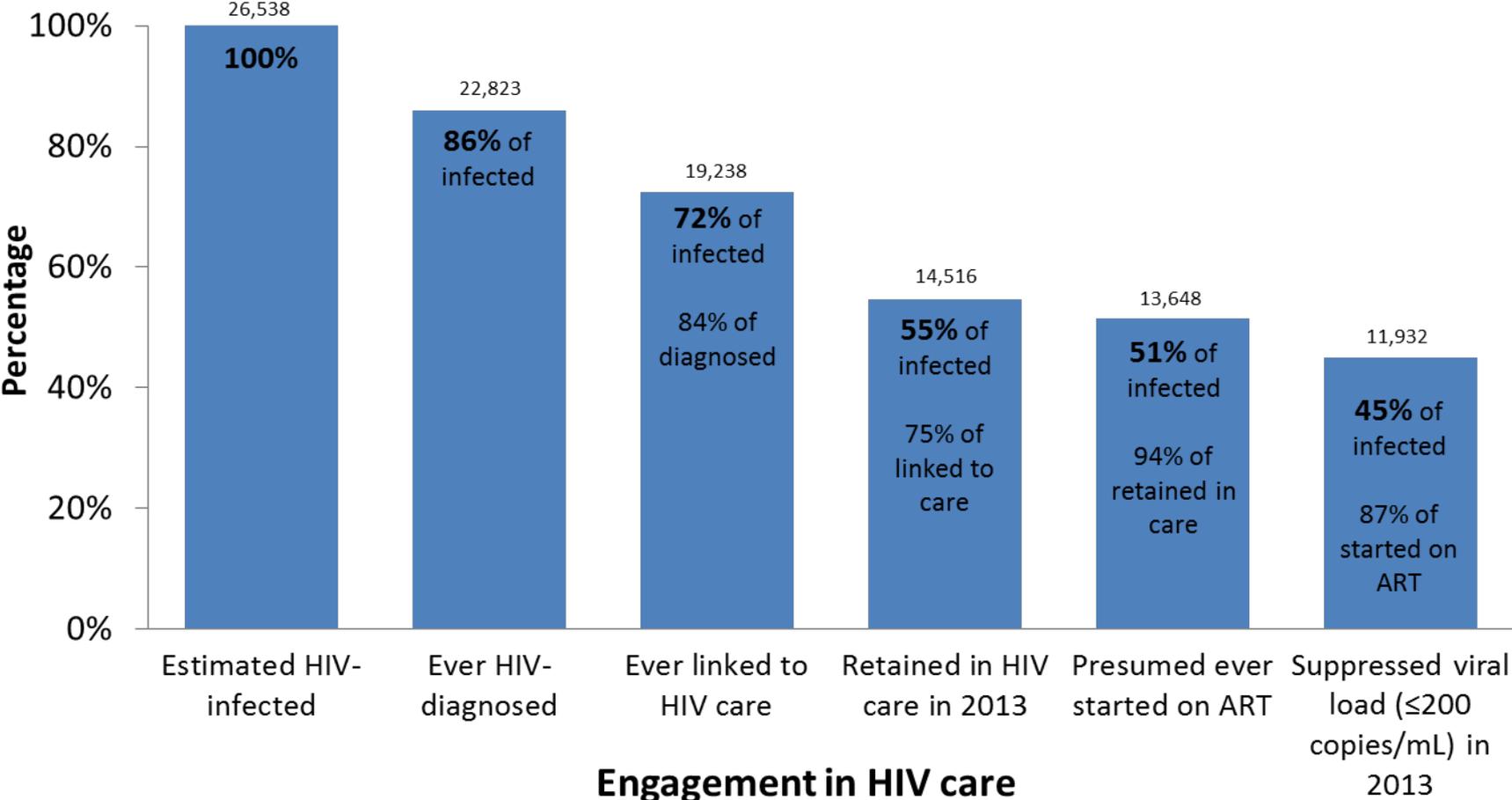
<sup>1</sup> Death data for 2013 are incomplete. Death rates are age-adjusted to the NYC Census 2010 population.

<sup>2</sup> Rate is based on small numbers and should be interpreted with caution.

As reported to the New York City Department of Health and Mental Hygiene by June 30, 2014.



# Number and Proportion of Foreign-born Persons with HIV in New York City Engaged in Selected Stages of the Continuum of Care at the End of 2013



**Of all foreign-born people estimated to be infected with HIV in NYC, 45% had a suppressed viral load in 2013.**

As reported to the New York City Department of Health and Mental Hygiene by June 30, 2014. For definitions of the stages of the continuum of care, see Appendix 2.

# 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.
- “Death rates” refer to deaths from all causes, unless otherwise specified.
- “Foreign-born” refers to people known to have been born outside of the US and US dependencies.
  - This designation is regardless of immigration status, time in the US, language, etc.
  - “Non-foreign-born” includes persons born in the US or US dependencies, and persons for whom documentation of their place of birth was not found in their medical record.
- Within the HIV Epidemiology and Field Services Program of the NYC Department of Health and Mental Hygiene, Central America is inclusive of Mexico, and the Caribbean is comprised of the following countries: Aruba (Netherlands), Anguilla (UK), Antigua and Barbuda, Bahamas, Barbados, Bermuda (UK), British Virgin Islands (UK), Cayman Islands (UK), Cuba, Dominica, Dominican Republic, Grenada, Guadeloupe (France), Haiti, Jamaica, Martinique (France), Montserrat (UK), Netherlands Antilles (Netherlands), St. Kitts and Nevis [St. Christopher], St. Lucia, St. Vincent and The Grenadines, Trinidad and Tobago and Turks and Caicos Islands (UK).

### Statistical Notes:

- “New HIV diagnoses” include individuals diagnosed in NYC during the reporting period and reported in NYC.
- “PLWHA” refers to persons living with HIV or AIDS at the end of the reporting period, unless otherwise noted..
- Data presented by “Transmission risk” categories include only individuals with known or identified transmission risk, except when an “unknown” category is presented.
- 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 and definitions for Slide 17, on the continuum of care for New York City

- “Estimated HIV-infected”: equal to the number of persons diagnosed with and presumed living with HIV in NYC at the end of 2013 (PLWHA), divided by the estimated proportion of all HIV-infected persons in NYC who have been diagnosed. CDC and a recent local emergency room serosurvey estimated this proportion to be 86%. Sources:
  - Bradley H, Hall HI, Wolitski RJ, *et. al.* Vital Signs: HIV Diagnosis, Care, and Treatment Among Persons Living with HIV - United States, 2011. *MMWR Morb Mortal Wkly Rep.* 2014 Nov 28;63(47):1113-7.
  - Eavey JJ, Torian LV, Jablonsky A, *et. al.* Undiagnosed HIV Infection in a New York City Emergency Room: Results of a Blinded Serosurvey, December 2009-January 2010. 19th International AIDS Conference, 2012, Washington, DC. Abstract# TUPE282.
- “HIV diagnosed”: PLWHA as of 12/31/2013, per surveillance case reporting.
- “Ever linked to HIV care”: Any viral load (VL) or CD4 count drawn in the years 2001-2013 and received after HIV diagnosis following a 7-day lag, and reported to DOHMH HIV surveillance.
- “Retained in HIV care in 2013”: VL or CD4 count or CD4 percent drawn in 2013, and reported to DOHMH HIV surveillance.
- “Presumed ever started on ART”: Suppressed VL ( $\leq 200$  copies/mL) reported to DOHMH HIV surveillance at any point from 2001-2013.
- “Suppressed viral load in 2013”: Most recent VL drawn in 2013 and reported to NYC DOHMH HIV surveillance was  $\leq 200$  copies/mL.