

SELECT DATA ON HIV AMONG TRANSGENDER PEOPLE IN NEW YORK CITY

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DATA SOURCES

- NYC HIV Surveillance data
- Data from the eSHARE system on clients receiving Ryan White Part A services

HOW IS TRANSGENDER STATUS COLLECTED BY NYC HIV SURVEILLANCE?

- Collected routinely since 2005 for newly reported cases
- Includes people identified as transgender by self-report, diagnosing provider, or medical chart review
- Requires accurate collection of both sex assigned at birth and current gender identity

WHO IS CONSIDERED TRANSGENDER BY NYC HIV/AIDS SURVEILLANCE?

- People whose current gender identity differs from their sex assigned at birth
- Surveillance classifies all transgender people as one of:
 - Transgender woman (MTF) = male-to-female, male sex assigned at birth and identifies as a woman
 - Transgender man (FTM) = female-to-male, female sex assigned at birth and identifies as a man
- People classified as transgender can be of any sexual orientation and may or may not have received hormone therapy or sex reassignment surgery

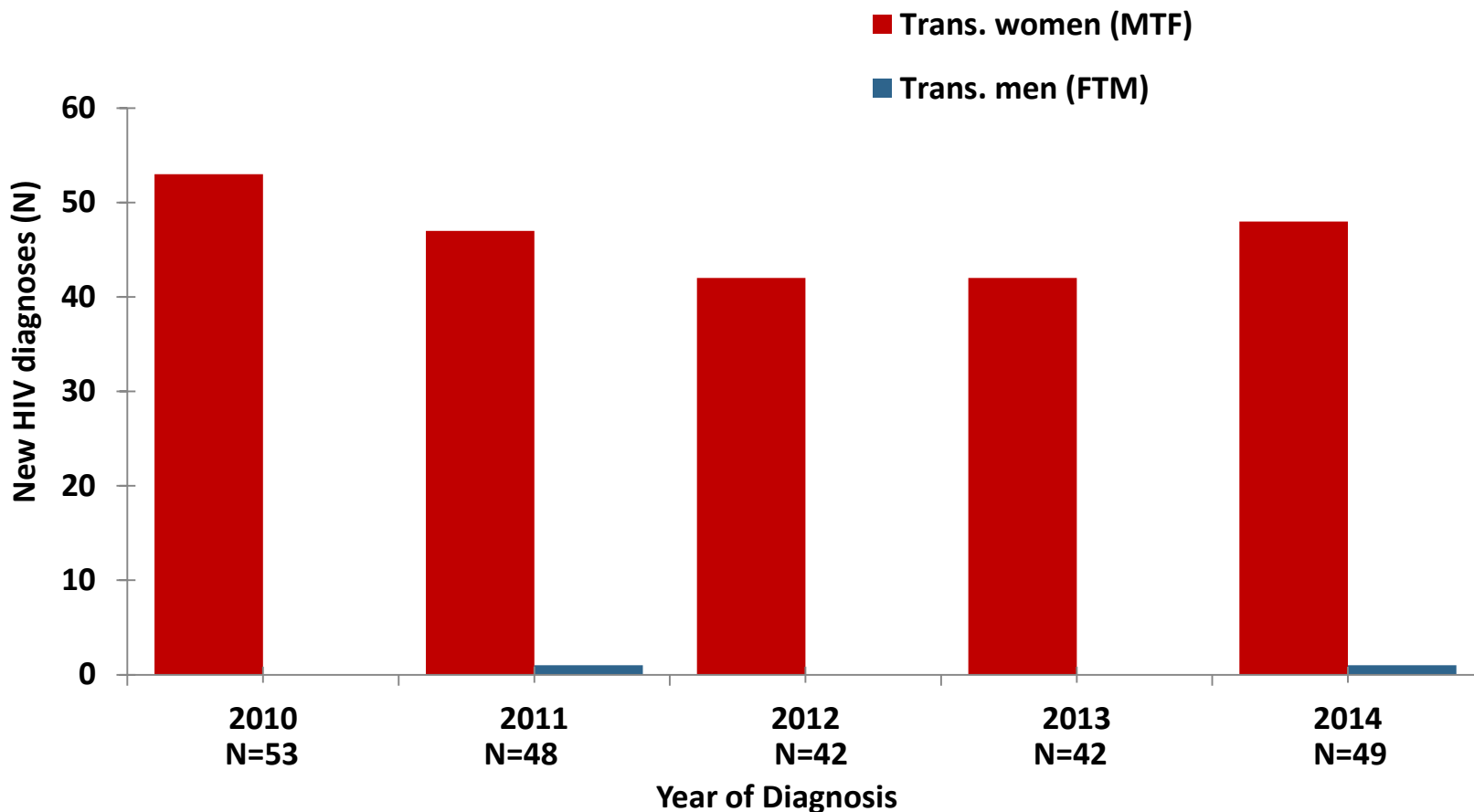
NEW HIV DIAGNOSES AMONG TRANSGENDER PEOPLE IN NYC, 2010-2014

- 234 new HIV diagnoses in 2010-2014
 - 232 transgender women (MTF; 99%)
 - 2 transgender men (FTM; 1%)
- Includes 21 diagnoses of HIV concurrent with AIDS* (9%) in 2010-2014
- Transgender people comprised 1.5% of all new HIV diagnoses in NYC in 2010-2014
- 49 new HIV diagnoses in 2014
 - 48 transgender women (MTF; 98%)
 - 1 transgender men (FTM; 2%)

*AIDS diagnosed within 31 days of HIV.

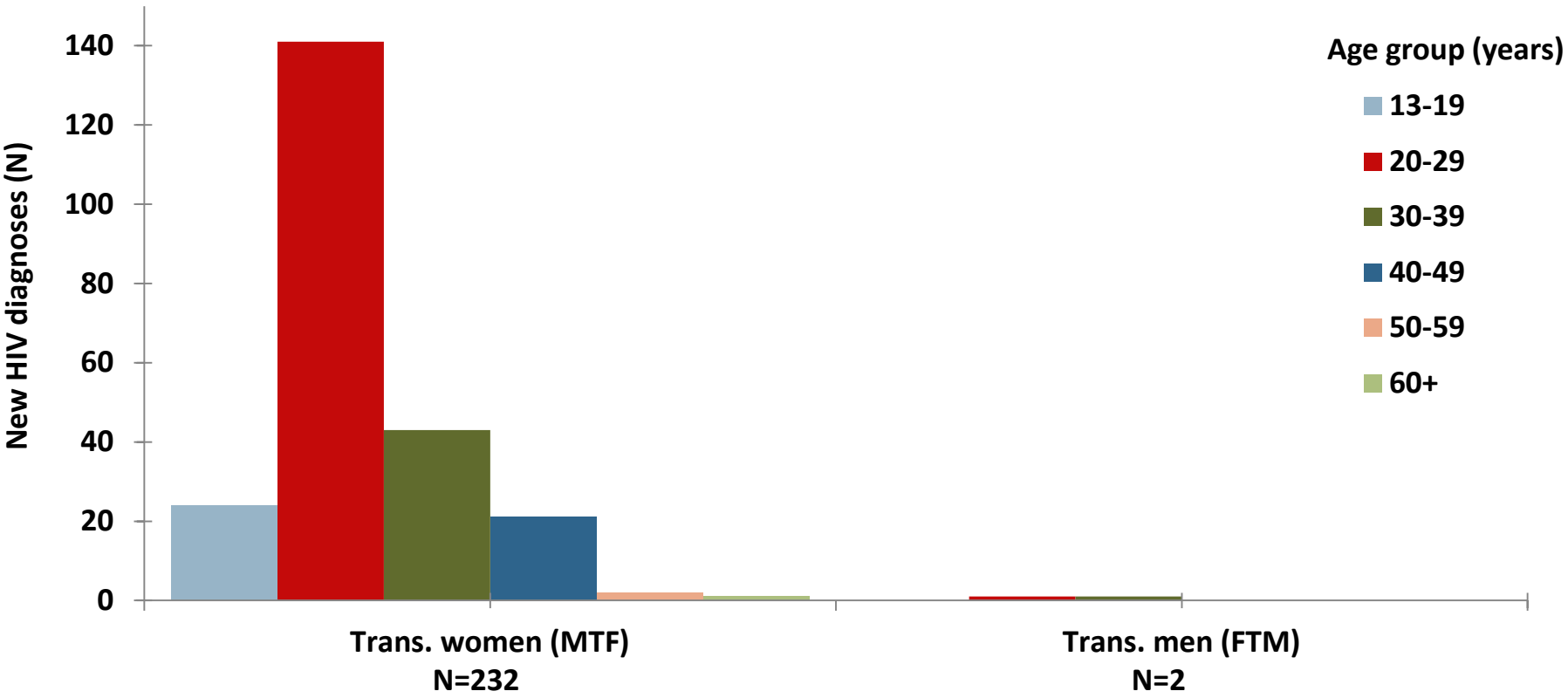
As reported to the New York City Department of Health and Mental Hygiene by June 30, 2015.

NEW HIV DIAGNOSES AMONG TRANSGENDER PEOPLE BY GENDER IDENTITY AND YEAR OF DIAGNOSIS IN NYC, 2010-2014



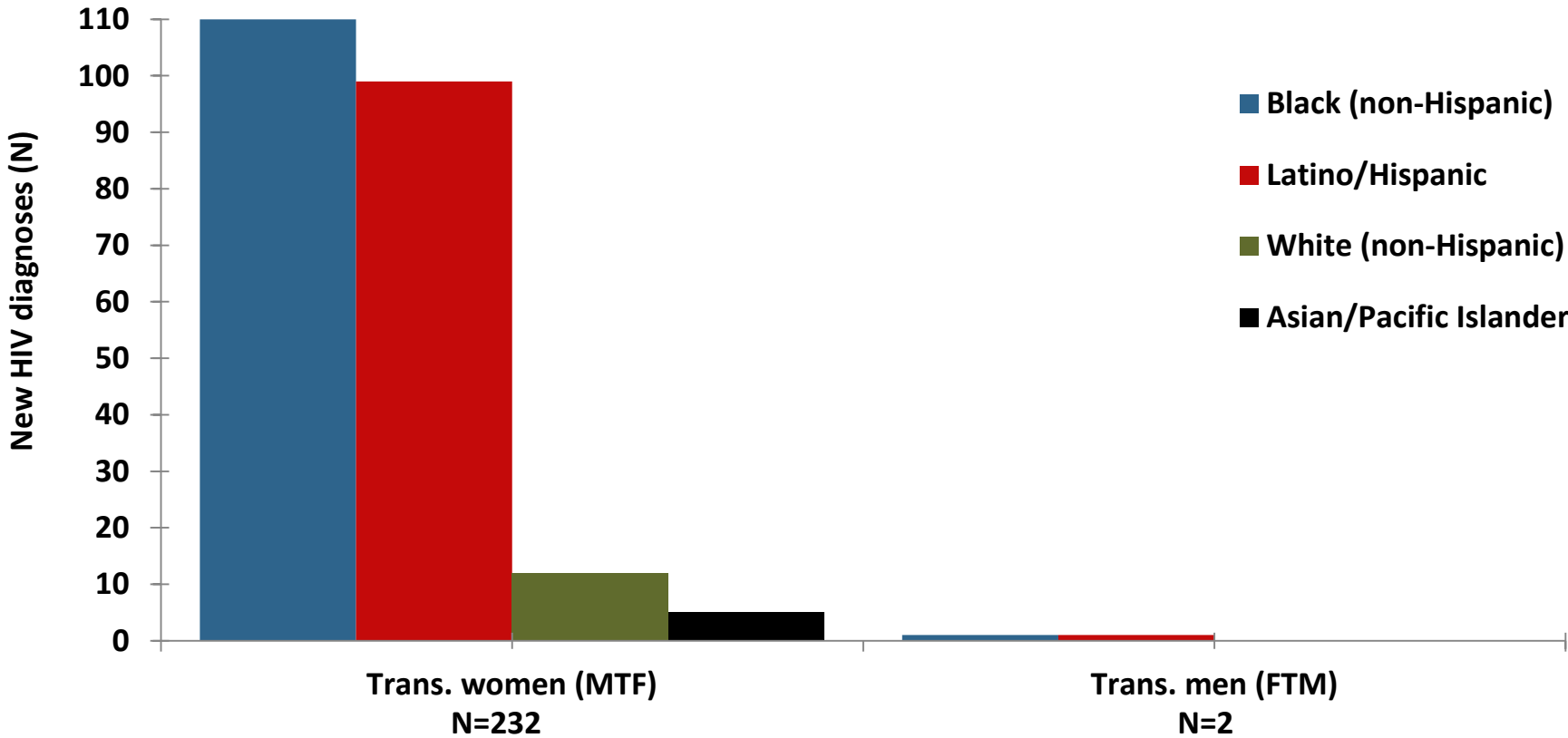
Between 2010 and 2014, 234 transgender people were newly diagnosed with HIV. This included 42-53 transgender women (MTF) and 0-1 transgender men (FTM) each year.

NEW HIV DIAGNOSES AMONG TRANSGENDER PEOPLE BY GENDER IDENTITY AND AGE AT DIAGNOSIS IN NYC, 2010-2014



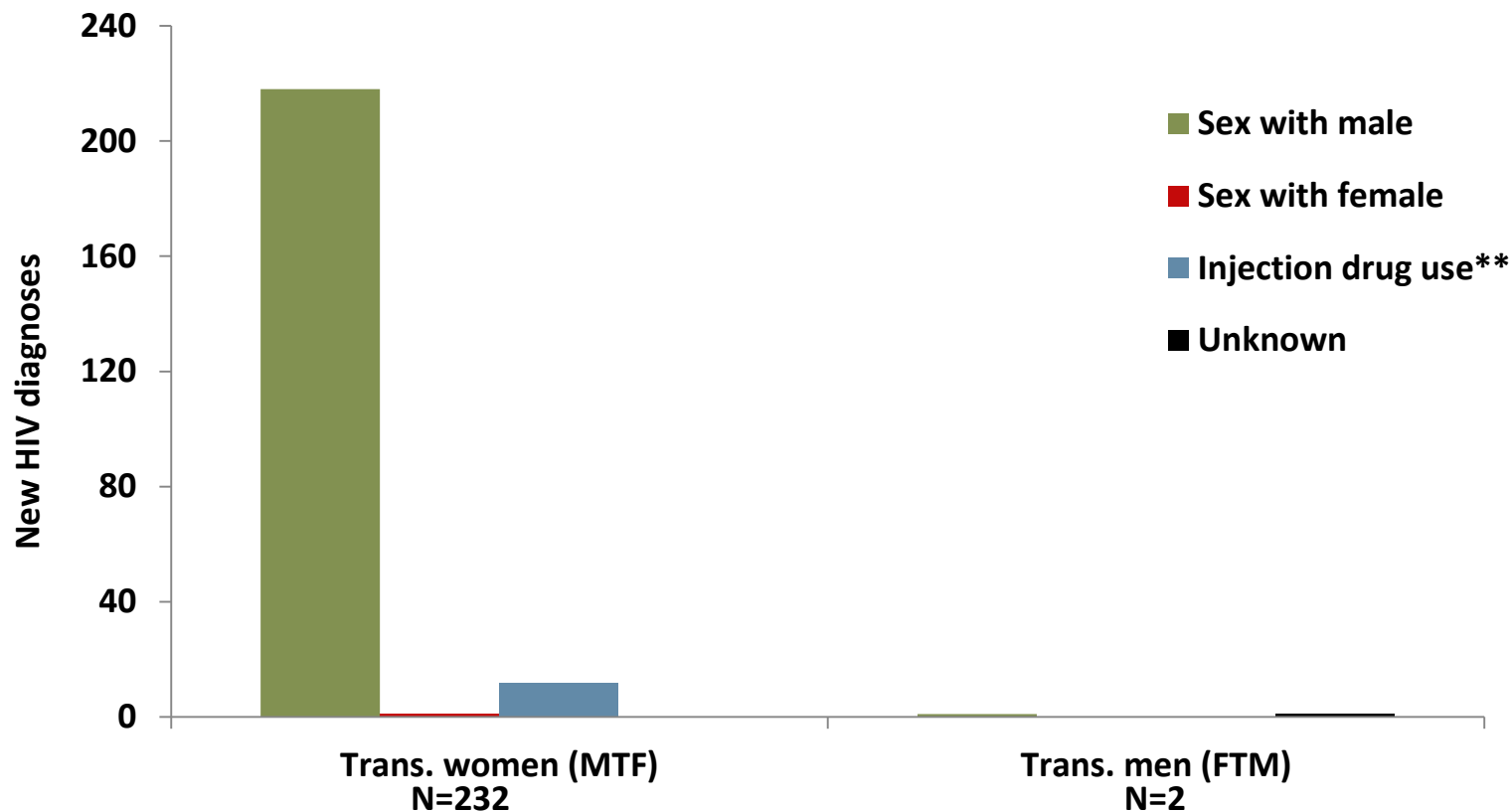
Newly diagnosed transgender women (MTF) were predominantly in their 20s. Newly diagnosed transgender men (FTM) were in their 20s and 30s.

NEW HIV DIAGNOSES AMONG TRANSGENDER PEOPLE BY GENDER IDENTITY AND RACE/ETHNICITY IN NYC, 2010-2014



About 93% of transgender women (MTF) newly diagnosed with HIV between 2010 and 2014 were Black or Latino/Hispanic. Newly diagnosed transgender men (FTM) were Latino/Hispanic and Black.

NEW HIV DIAGNOSES AMONG TRANSGENDER PEOPLE BY GENDER IDENTITY AND TYPE OF HIV RISK IN NYC, 2010-2014

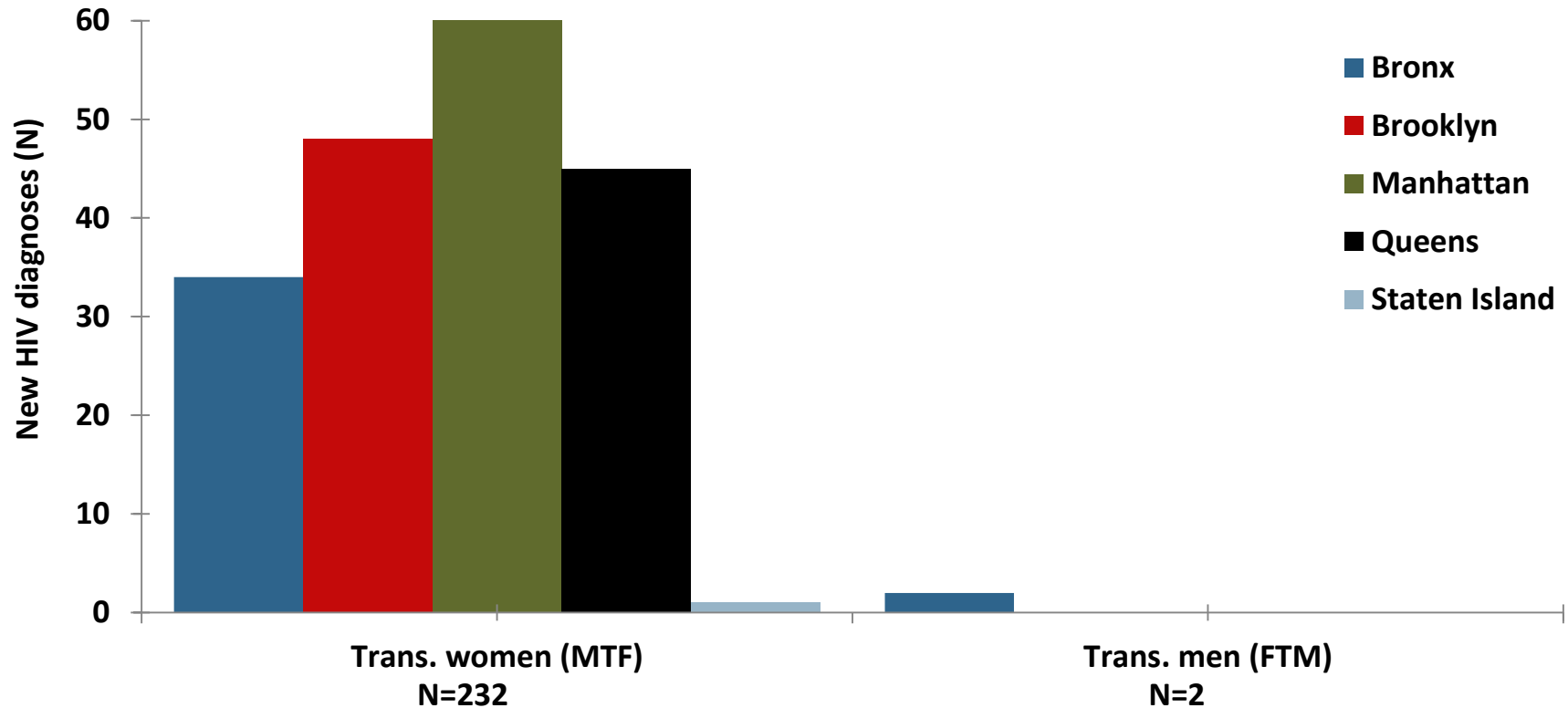


Sex with a male was the predominant type of HIV risk among newly diagnosed transgender women (MTF).

**Injection drug use likely does not include injection of hormones.

As reported to the New York City Department of Health and Mental Hygiene by June 30, 2015.

NEW HIV DIAGNOSES AMONG TRANSGENDER PEOPLE BY GENDER IDENTITY AND BOROUGH* IN NYC, 2010-2014



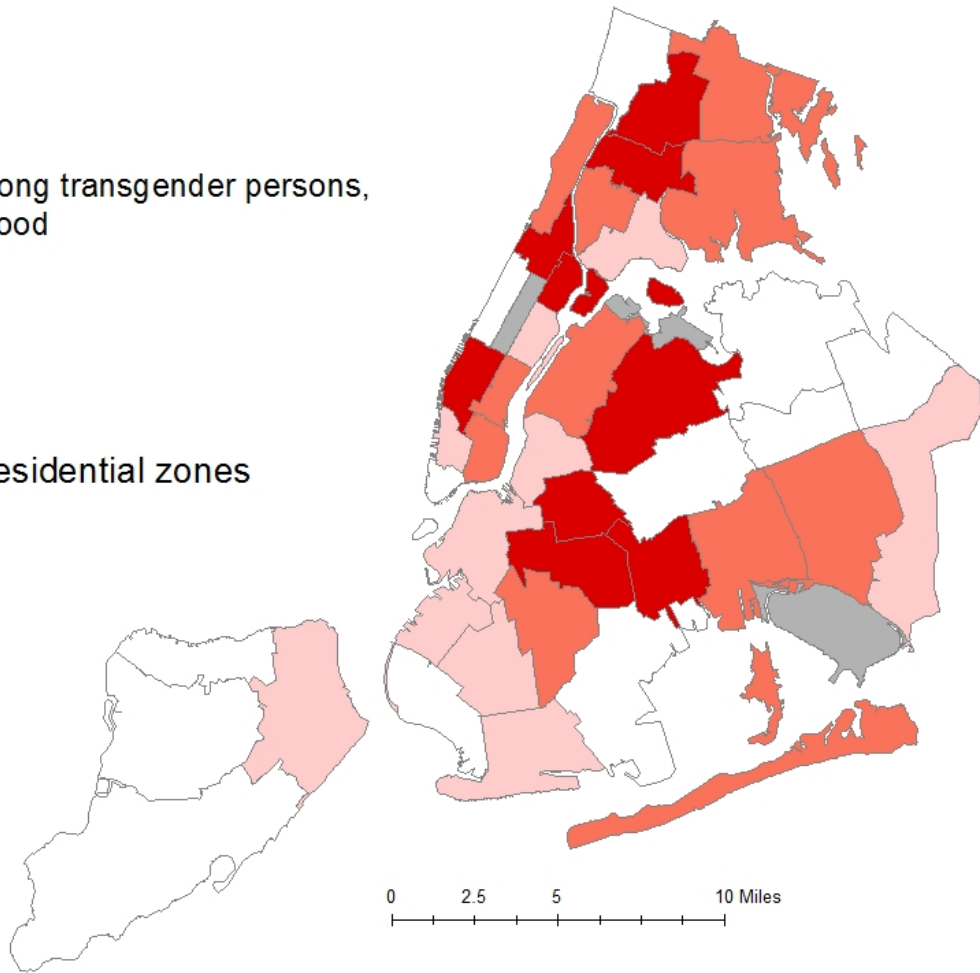
Brooklyn, Manhattan, and Queens were home to the majority of newly diagnosed transgender women (MTF). Newly diagnosed transgender men (FTM) lived in the Bronx.

*Borough is NYC borough of patient residence at time of HIV diagnosis. Some newly diagnosed people lived outside NYC. As reported to the New York City Department of Health and Mental Hygiene by June 30, 2015.

NEW HIV DIAGNOSES AMONG TRANSGENDER PEOPLE BY UHF NEIGHBORHOOD IN NYC, 2010–2014

HIV diagnoses among transgender persons, by UHF neighborhood

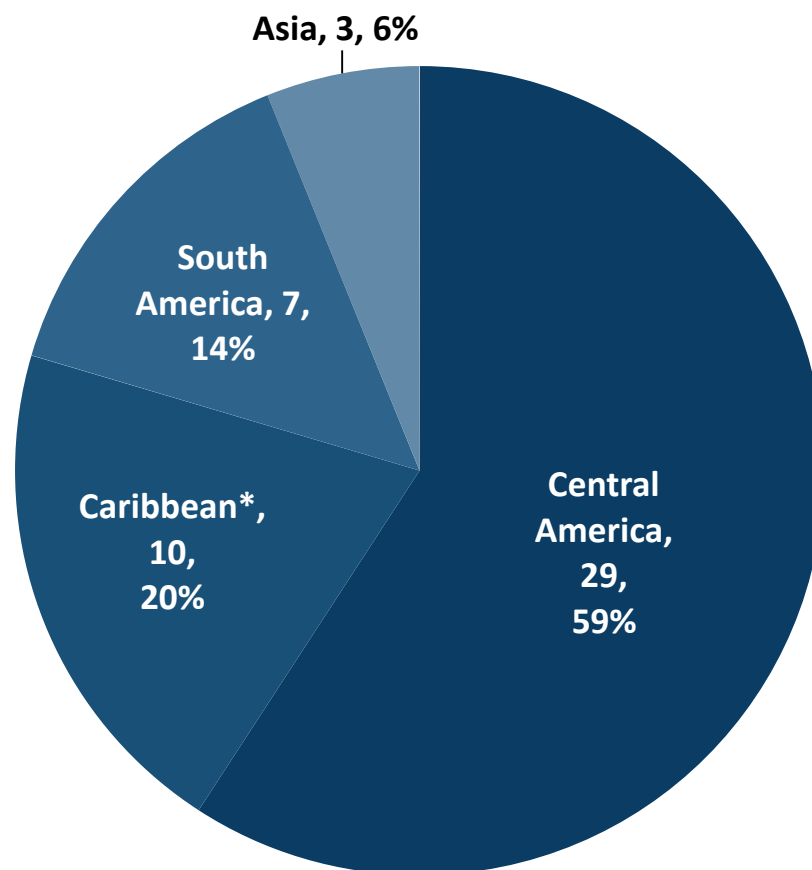
- 0
- 1 - 3
- 3 - 6
- 6 - 23
- Non-residential zones



West Queens*, Chelsea-Clinton, Bedford Stuyvesant-Crown Heights, Fordham-Bronx Park, and Chelsea-Clinton had the highest numbers of newly diagnosed transgender people.

*Rikers Island is classified with the UHF neighborhood of West Queens.
N=234 new HIV diagnoses among transgender people displayed on the map.
As reported to the New York City Department of Health and Mental Hygiene by June 30, 2015.

NEW HIV DIAGNOSES AMONG FOREIGN-BORN TRANSGENDER PEOPLE BY REGION OF BIRTH, NYC, 2010-2014

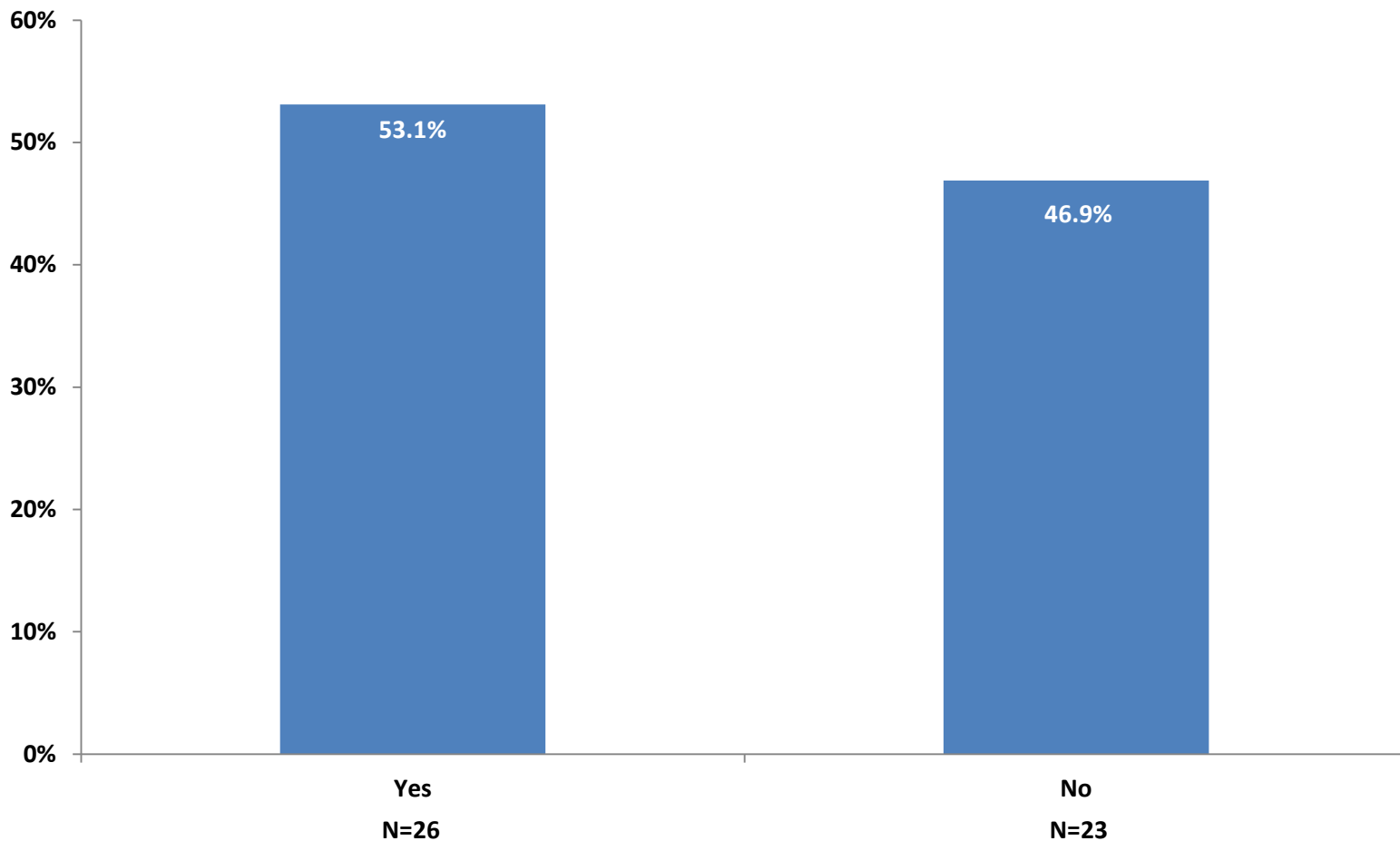


Among transgender people newly diagnosed with HIV, 21% were foreign-born (n=49), of whom more than three-quarters were from Central America (including Mexico) and the Caribbean*.

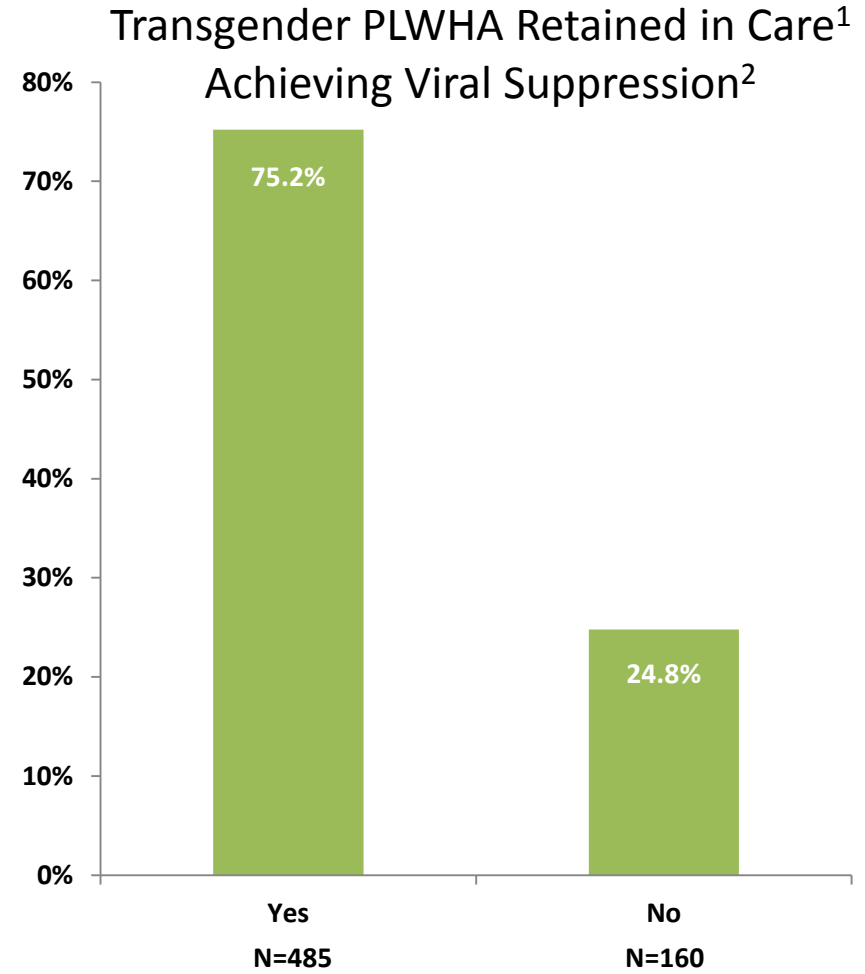
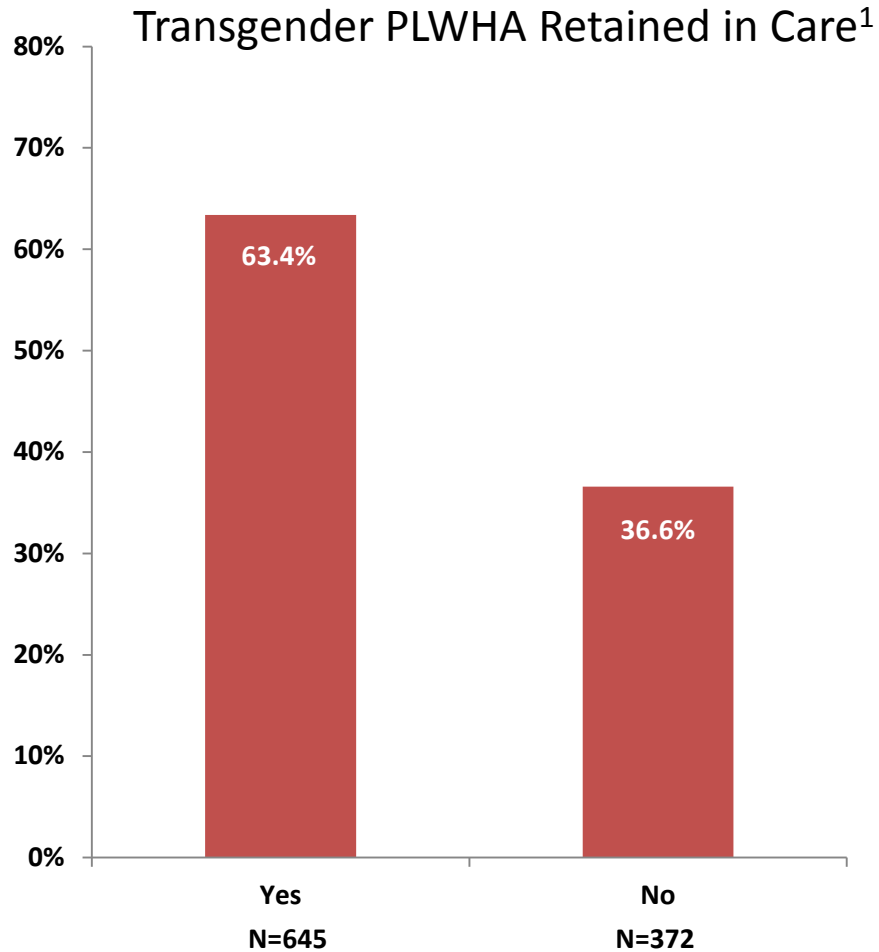
*Excludes Puerto Rico and the US Virgin Islands.

As reported to the New York City Department of Health and Mental Hygiene by June 30, 2015.

PROPORTION OF NEWLY HIV-DIAGNOSED TRANSGENDER PEOPLE WITH TIMELY LINKAGE TO CARE¹ IN NYC, 2014



HIV CARE INDICATORS FOR TRANSGENDER PEOPLE LIVING WITH HIV/AIDS IN NYC, 2014

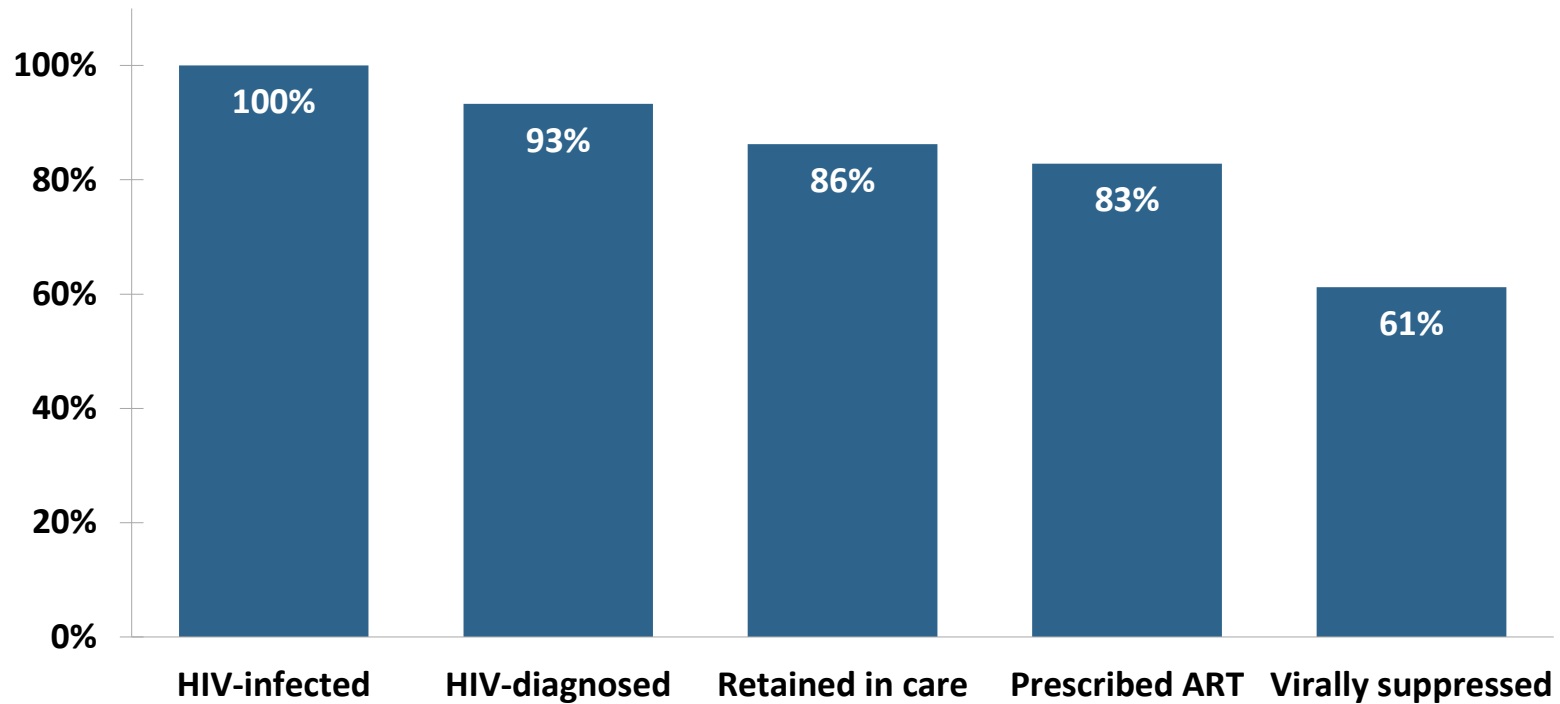


¹Retained in care: At least 2 CD4 and/or VL tests ≥ 90 days apart in 2014, excluding tests within 7 days of HIV diagnosis.

²Viral suppression: Most recent VL in 2014 was ≤ 200 copies/mL.

Data as reported to NYC DOHMH by June 30, 2015.

PROPORTION OF TRANSGENDER HIV-INFECTED PEOPLE ENGAGED IN SELECTED STAGES OF THE HIV CARE CONTINUUM IN NYC, 2014



Of the approximately 900 transgender people infected with HIV in NYC in 2014, 61% had a suppressed viral load.

HIV DIAGNOSES AND CARE AMONG TRANSGENDER PEOPLE AND COMPARISON WITH MSM IN NYC, 2006-2011

- Analysis to compare outcomes of the 260 transgender women and 10,675 MSM who were newly diagnosed with HIV in NYC from 2006-2011
- Transgender women and MSM were found to be equally likely to be diagnosed with AIDS concurrently with HIV, and to have timely linkage to care. However, transgender women were found to be less likely to achieve viral suppression within 12 months of diagnosis compared with MSM.

DELAYED LINKAGE TO CARE AMONG TRANSGENDER WOMEN AND MEN WHO HAVE SEX WITH MEN NEWLY DIAGNOSED WITH HIV: NEW YORK CITY, 2006-2011

	Total, No. (Column %)	Delayed Linkage to Care, No. (Row %)	AOR (95% CI)
Total	10,935 (100.0)	4,182 (38.2)	
Population			
-Transgender Women	260 (2.4)	122 (46.9)	1.16 (0.88, 1.51)
-Men who have sex with men	10,675 (97.6)	4,060 (38.0)	1 (Ref)

AOR= adjusted odds ratio; CI=confidence interval. Delayed linkage to care was defined as having no laboratory evidence of HIV-related medical care (i.e., viral load or CD4 test) within 8-91 days of HIV diagnosis . Adjusted for year of HIV diagnosis, timeliness of HIV diagnosis, type of diagnosing facility, age at diagnosis, race/ethnicity, area of birth, history of homelessness, incarceration history, and place and poverty level of residence at diagnosis.

NON-ACHIEVEMENT OF HIV VIRAL SUPPRESSION WITHIN 1 YEAR OF DIAGNOSIS AMONG TRANSGENDER WOMEN AND MSM NEWLY DIAGNOSED WITH HIV, OVERALL AND AMONG THOSE WITH TIMELY LINKAGE TO CARE: NEW YORK CITY, 2006-2011

	All Newly Diagnosed Persons			Newly Diagnosed Persons With Timely Linkage to Care ^a		
	Total, No. (Col%)	Not VS, No. (Row %)	AOR 95% CI	Total, No. (Col %)	Not VS, No. (Row %)	AOR (95% CI)
Total	10,935 (100.0)	6,508 (59.5)		6,753 (100.0)	2,988 (44.2)	
Population						
-Transgender women	260 (2.4)	188 (72.3)	1.56 (1.14, 2.16)	138 (2.0)	75 (54.3)	1.44 (0.99, 2.11)
-MSM	10,675 (97.6)	6,320 (59.2)	1.00 (Ref)	6,615 (98.0)	2,913 (44.0)	1 (Ref)

VS=virologically suppressed; AOR= adjusted odds ratio; CI=confidence interval. "Non-achievement of viral suppression" defined as having no suppressed (<400 copies/mL) viral load results within 365 days following diagnosis.

Adjusted for year of HIV diagnosis, CD4 count at diagnosis, age at diagnosis, race/ethnicity, history of homelessness, incarceration history (only in model with all newly diagnosed persons), and place and poverty level of residence at diagnosis.

^aTimely linkage to care was defined as having laboratory evidence of HIV-related medical care (i.e., viral load or CD4 test) within 8-91 days of HIV diagnosis.

TRANSGENDER WOMEN SERVED BY RYAN WHITE

PART A IN NYC

- Transgender women appear to account for 2.3% of all HIV+ clients served in NYC RWPA from Jan 2013-Dec 2015.
- *Electronic System for HIV/AIDS Reporting and Evaluation (eSHARE)*:
 - DOHMH-developed reporting system for HIV services contracts, including Ryan White Part A (RWPA)
 - Only goes back to 2012 for most RWPA contracts (2010 for Care Coordination)
 - Captures demographics, enrollments, services (individual and group), referrals, assessments, and outcome measures over time
 - Can be matched and merged with client-level HIV Surveillance Registry data for use of complete NYC laboratory reporting on viral load and CD4 tests

BASELINE CHARACTERISTICS OF NYC RWPA CLIENTS AS OF EARLIEST ESHARE ENROLLMENT, 2010-2016

Characteristic	Transgender Women (N=579)		All Other RWPA Clients (N=27,078)		χ ² p-Value
	N	% ^A	N	% ^A	
Age Group					
Under 30	173	29.9	3672	13.6	<.0001
30-49	320	55.3	12597	46.5	
50+	86	14.9	10809	39.9	
Race/Ethnicity					
Black	294	50.8	14269	52.7	<.0001
White	23	4.0	2516	9.3	
Hispanic	236	40.8	9261	34.2	
Other	26	4.5	1032	3.8	
Employment					
Unemployed	472	81.5	20063	74.1	0.043
Employed	59	10.1	3324	12.3	
Education Level					
Less than high school degree	211	36.4	9143	33.8	0.016
High School/GED or equivalent	150	25.9	6499	24.0	
Some college or above	128	22.1	7461	27.6	
Insurance Status					
Uninsured	92	16.9	3281	12.1	0.007
Insured	444	76.7	21577	79.7	
Housing Status					
Unstable/temporary	265	45.8	7315	27.0	<.0001
Stable/permanent	282	48.7	17429	64.4	
Household Income					
<=138% Federal Poverty Level	441	76.2	17342	64.0	<.0001
>138-200% Federal Poverty Level	48	8.3	3894	14.4	
>200% Federal Poverty Level	5	0.9	432	1.6	

^A Due to unknown or declined responses, percentages may not always appear to add up to 100%

BASELINE CHARACTERISTICS OF NYC RWPA CLIENTS AS OF EARLIEST ESHARE ENROLLMENT, 2010-2016 (CONT'D)

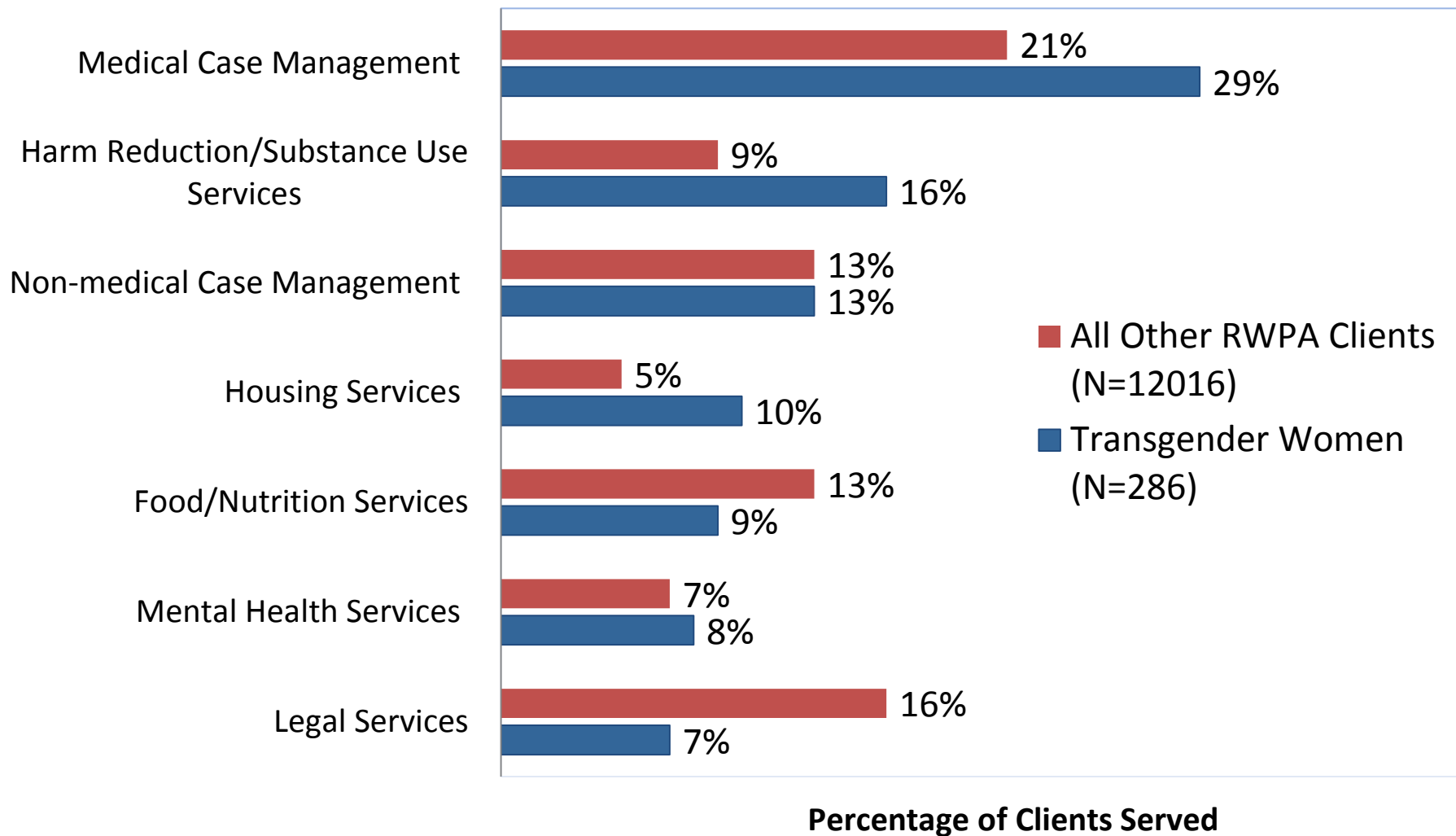
Characteristic	Transgender Women (N=579)		All Other RWPA Clients (N=27,078)		χ^2 p-Value
	N	% ^A	N	% ^A	
Incarceration in the Past 12 Months					
Yes	44	7.6	1270	4.7	0.001
No	522	90.2	25411	93.8	
Viral Load Suppression					
Unsuppressed (>200 copies/mL)	265	45.8	11163	41.2	<.0001
Suppressed (<=200 copies/mL)	212	36.6	12846	47.4	
Mental Health Functioning (SF-12)					
Very Low (MCS score <=37.0)	101	17.4	4101	15.2	0.045
Not Very Low (MCS score >37.0)	190	32.8	9892	36.5	
Recent Hard Drug Use^{B,C}					
Yes	63	10.9	3036	11.2	0.71
No	350	60.5	16042	59.2	
Recent Injection^B					
Yes	47	8.1	588	2.2	<.0001
No	334	57.7	15559	57.5	
Recent Tobacco Use^B					
Yes	233	40.2	8294	30.6	<.0001
No	202	34.9	11209	41.4	

^A Due to unknown or declined responses, percentages may not always appear to add up to 100%

^B In the past 3 months

^C Use of cocaine/crack, heroin, crystal meth, or prescription drugs to get high

RWPA SERVICE UTILIZATION* AMONG TRANSGENDER WOMEN AND AMONG OTHER RWPA CLIENTS, 2013-2015



*Clients can be enrolled in more than one service category at a time

RWPA SERVICE UTILIZATION AMONG TRANSGENDER WOMEN BY AREA OF SERVICE NEED, 2013-2015

Service Need Area	Transgender Women (N=286)			
	Had Need		Had Service (among those with the need)	
	N	%	N	%
Food/Nutrition Services	261	91.3	41	15.7
Harm Reduction Services	65	22.7	13	20.0
Mental Health Services	84	29.4	27	32.1
Housing Services	161	56.3	56	34.8

Definition of Need:

1. Food/nutrition services: very low income (<=130% of Federal Poverty Level) or food insufficiency
2. Harm reduction services: recent hard drug use
3. Mental health services: low mental health functioning (mental component summary score <=37.0 on the SF-12 functional health assessment)
4. Housing services: unstable housing (homelessness or transitional/temporary housing)

Note: Service = receipt of at least one service in the service category shown, within 6 months (before or after) the assessment indicating the need.

TRANSGENDER ORGANIZATIONAL SUPPORT RFP RELEASED

- Collaborative programs
- Transgender Organizational Support
- Transgender Organizational Capacity Building Assistance
- CAB required
- Bidder's conference: 3/29 from 1pm to 4pm
 - Cicutelli Associates, 505 8th Avenue, Yellow Room

ACKNOWLEDGEMENTS

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