

# HIV/AIDS Epidemiology: What's Faith got to do with it?

Responding to the Call:  
Faith Communities' Response to HIV/AIDS -- A  
Statewide Faith Forum  
April 2008

Punkin Clay Stephens  
Senior Associate

Prevention Sciences and Applied Epidemiology  
AIDS Institute Executive Offices -- NYSDOH

[pcs02@health.state.ny.us](mailto:pcs02@health.state.ny.us) 518-473-8484

# Data Notes

- All HIV/AIDS data are from the Bureau of HIV/AIDS Epidemiology (BHAE), Center for Community Health, NYSDOH, unless otherwise noted
- All HIV/AIDS data are complete through December 31, 2005, unless otherwise noted

# HIV/AIDS Epidemiology

# HIV/AIDS in NYS

- From the beginning of the epidemic through December 31, 2005, 213,932 individuals residing in NYS have been diagnosed with either HIV (41,881) or AIDS (172,051)
  - NY has the highest number of cases among the 37 states with name-based reporting of both HIV and AIDS

# HIV/AIDS in NYS ... 2

- At Year End 2005, 111,597 people are living with HIV (41,881) or AIDS (69,716), the largest population among all states
  - PLWHAs (Persons Living with HIV/AIDS) in NYS represent 17.5% of all persons living with HIV/AIDS in the US

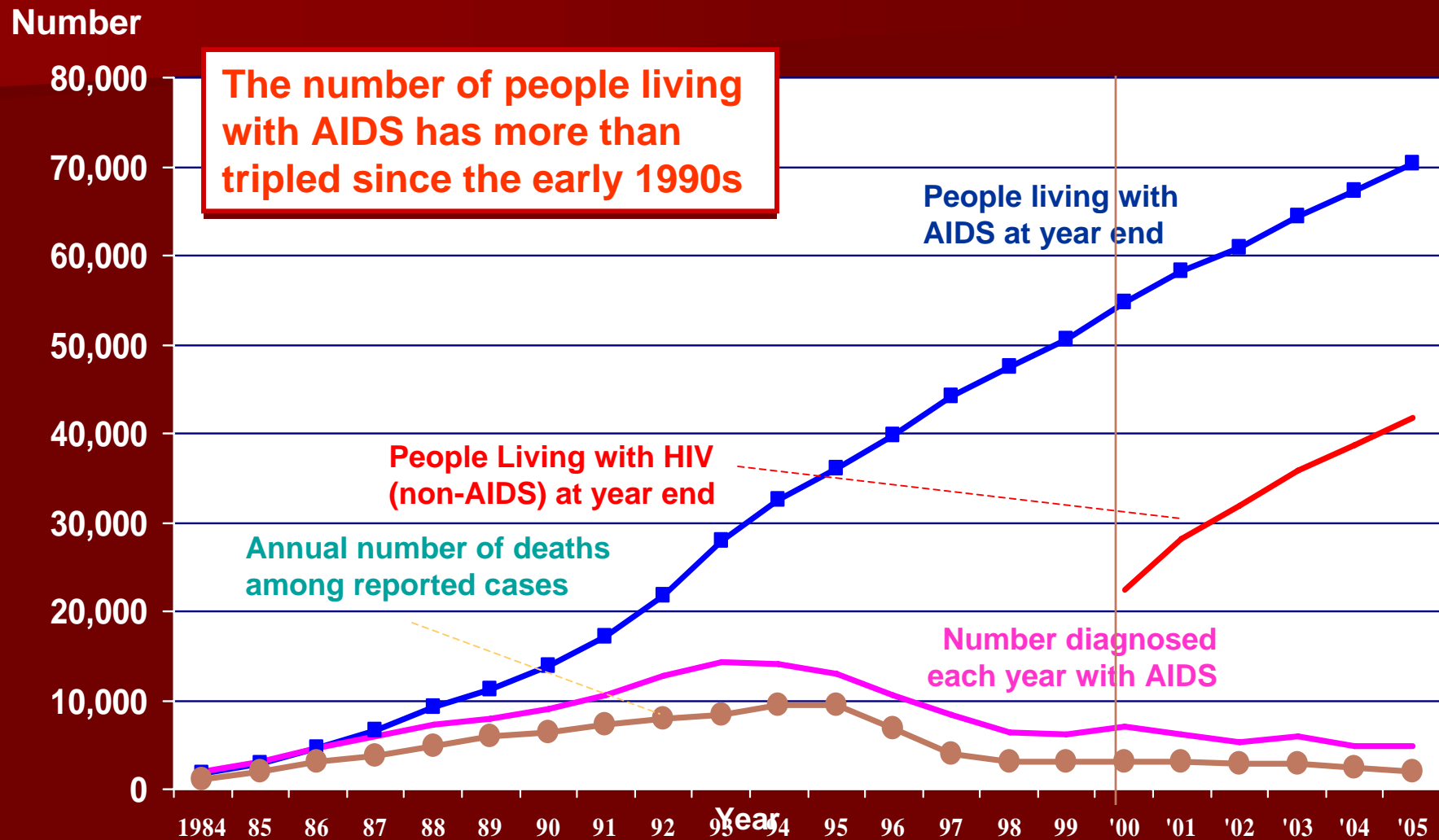
# HIV/AIDS in NYS ... 3

- There have been 102,335 cumulative deaths among individuals previously diagnosed with AIDS while residing in NYS
  - Among All Races and among Whites, HIV/AIDS is the 2<sup>nd</sup> leading cause of death for people ages 25 to 64

# HIV/AIDS in NYS ... 4

- Among Blacks, HIV/AIDS is the #1 leading cause of death for people ages 25 to 44; 3<sup>rd</sup> leading cause for people 45 to 64; and 5<sup>th</sup> leading cause of death for young people ages 20 to 24
- Among Hispanics HIV/AIDS is the #1 leading cause of death for people 25 to 44; 3<sup>rd</sup> leading cause for people 45 to 64; and the 5<sup>th</sup> leading cause of death among children ages 1 to 9

# Trends in HIV and AIDS Cases New York State --- 1984-2005\*



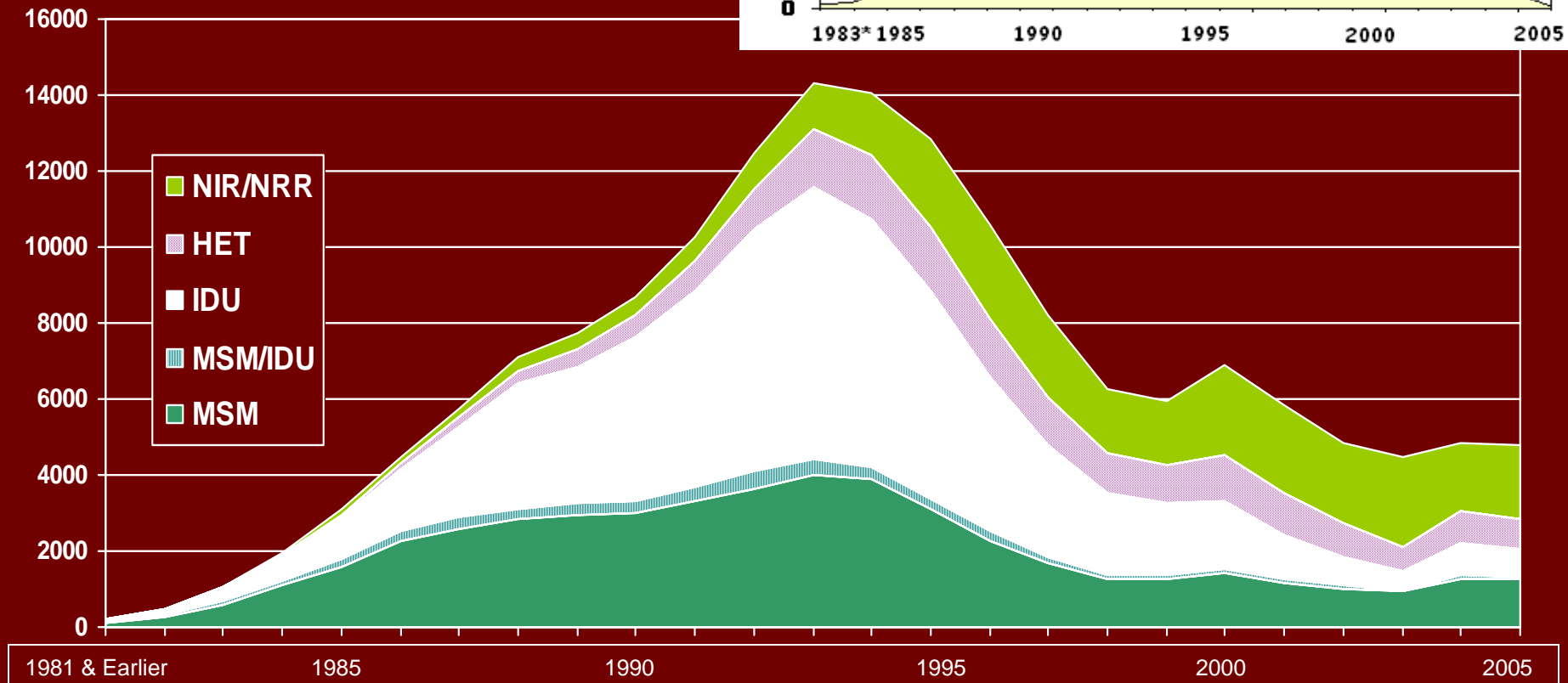
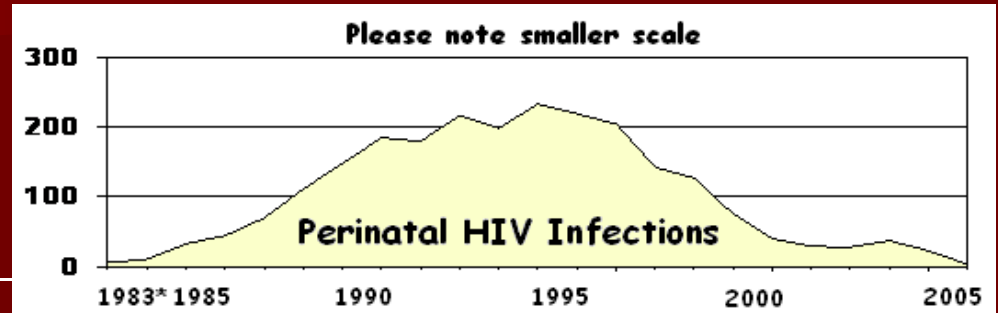
\*Data as reported through February 2007

^ HIV named reporting began in NYS in 2000

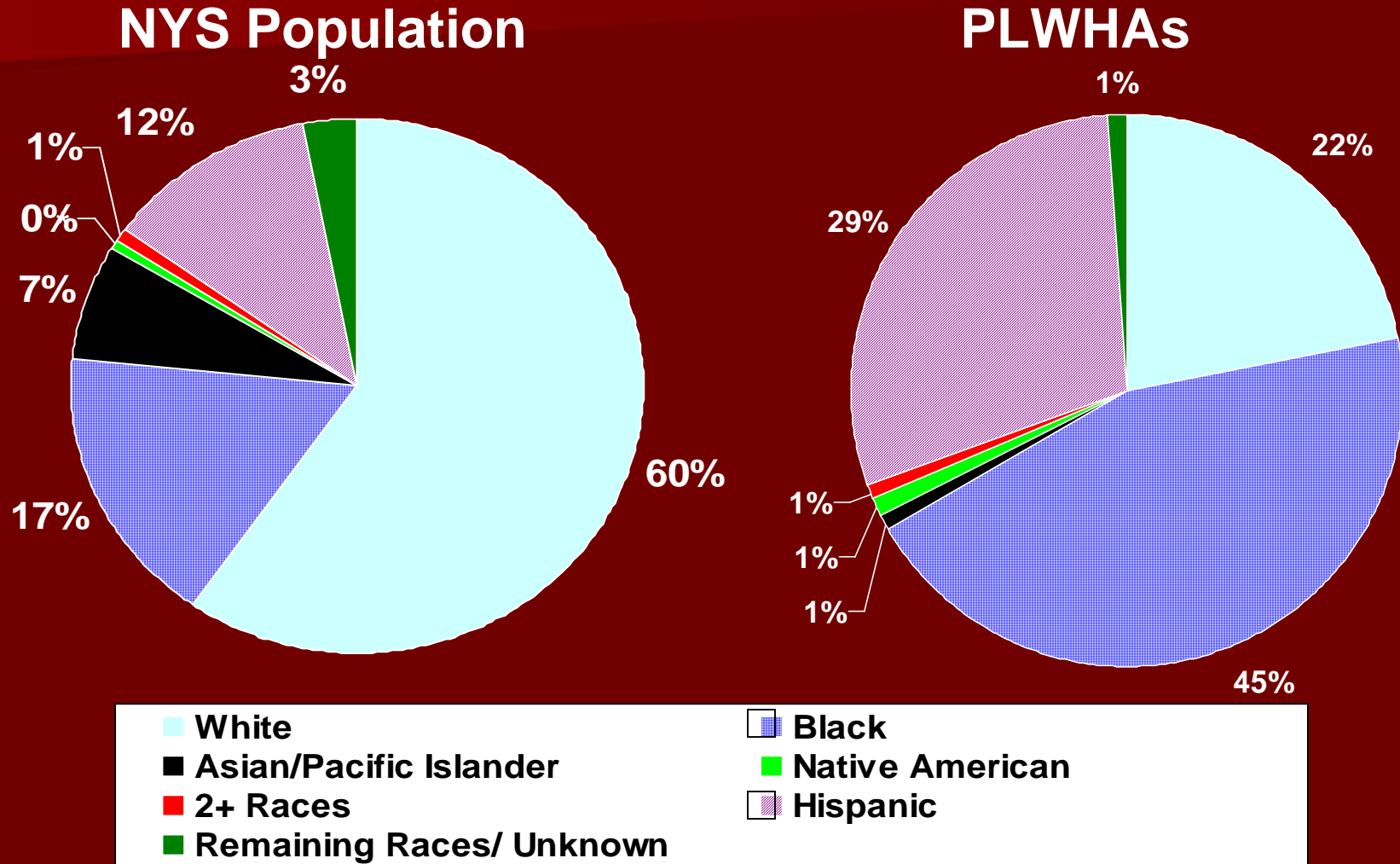
Adapted from NYSDOH/BHAE

# Annual AIDS Cases in NYS 1983\*-2005 by Selected Transmission Risk Categories

*MSM, MSM/IDU, IDU, Heterosexual, NIR/NRR and PEDS (small window)*



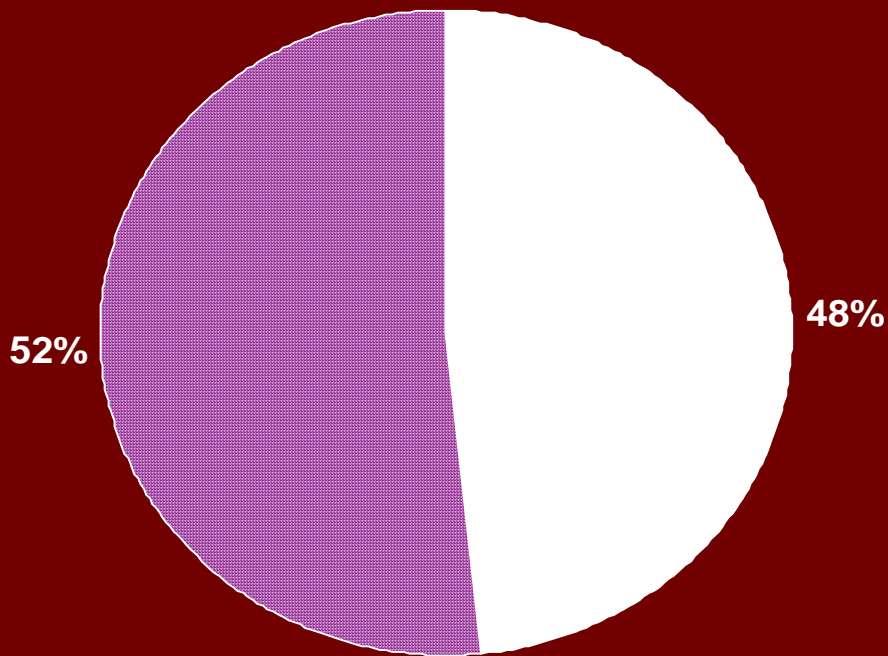
# NYS Population as Compared to PLWHAs by Race/Ethnicity



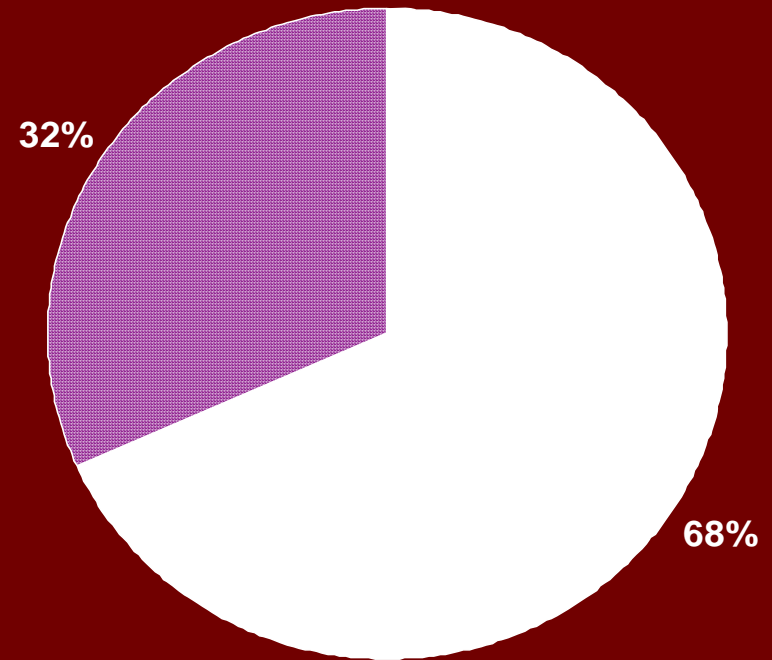
\* Percentages of less than one are presented as zero. The data source for NYS population is Census 2000.

# NYS Population as Compared to PLWHAs by Gender

## NYS Population



## PLWHAs



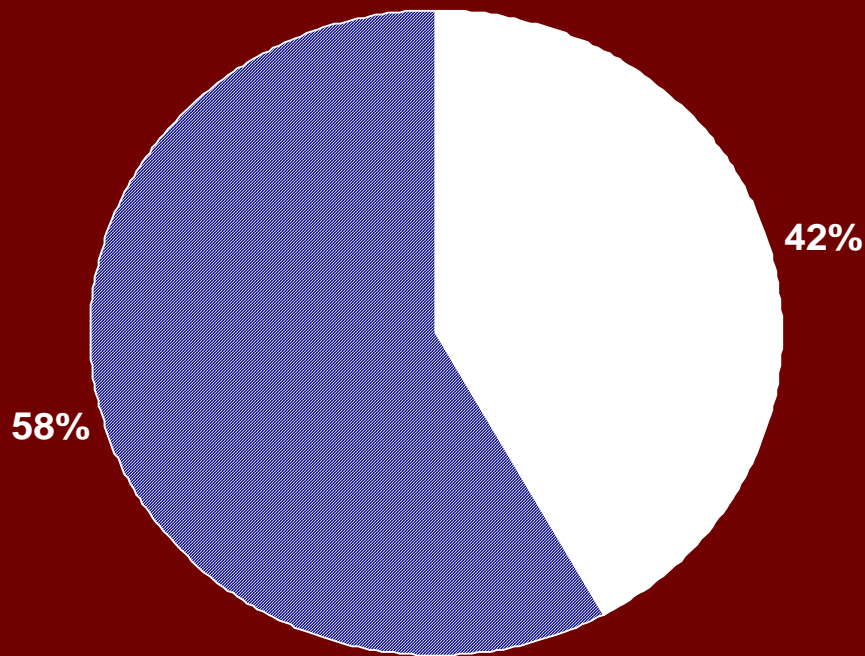
□ Men & Boys

■ Women & Girls

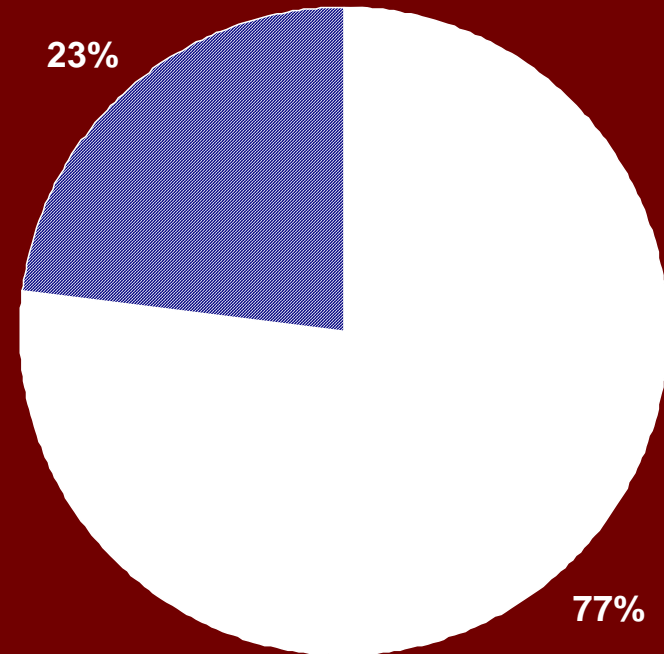
\* US Census 2000

# NYS Population as Compared to PLWHAs by Geography

**NYS Population\***



**PLWHAs**



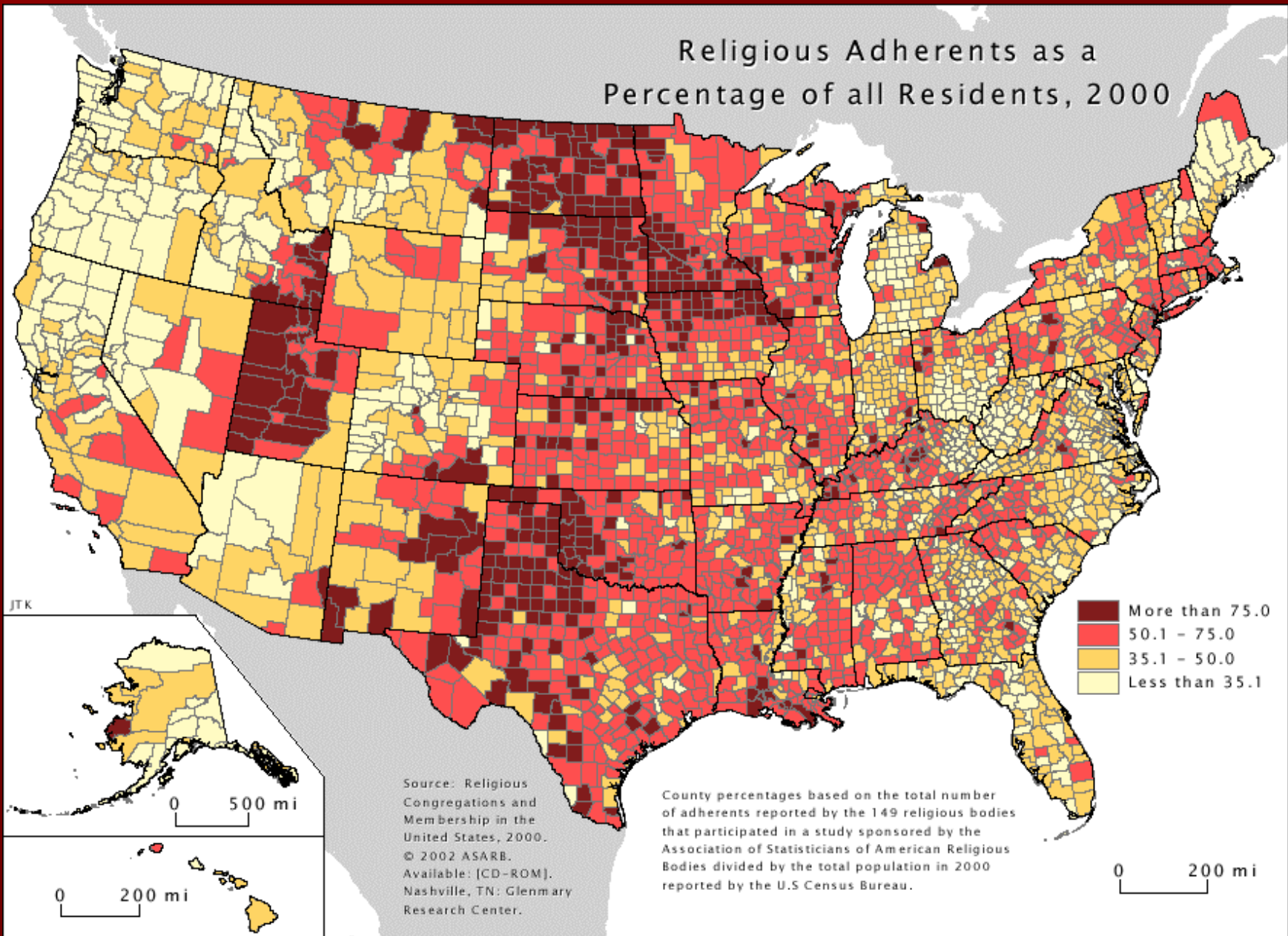
□ NYC

■ Rest of State

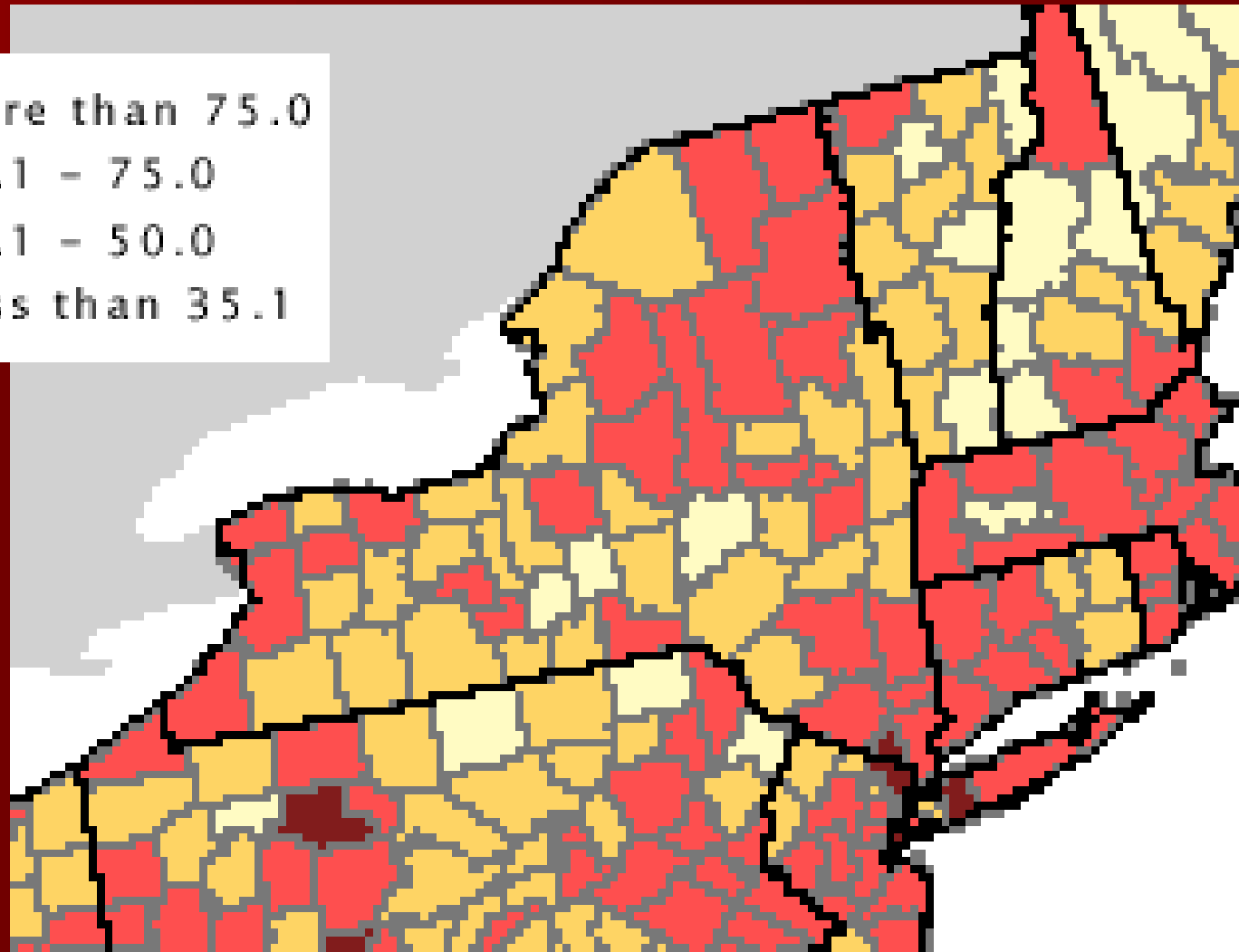
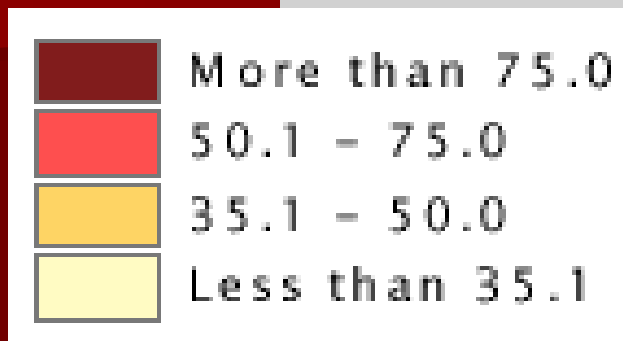
\* US Census 2000

# Faith and Numbers

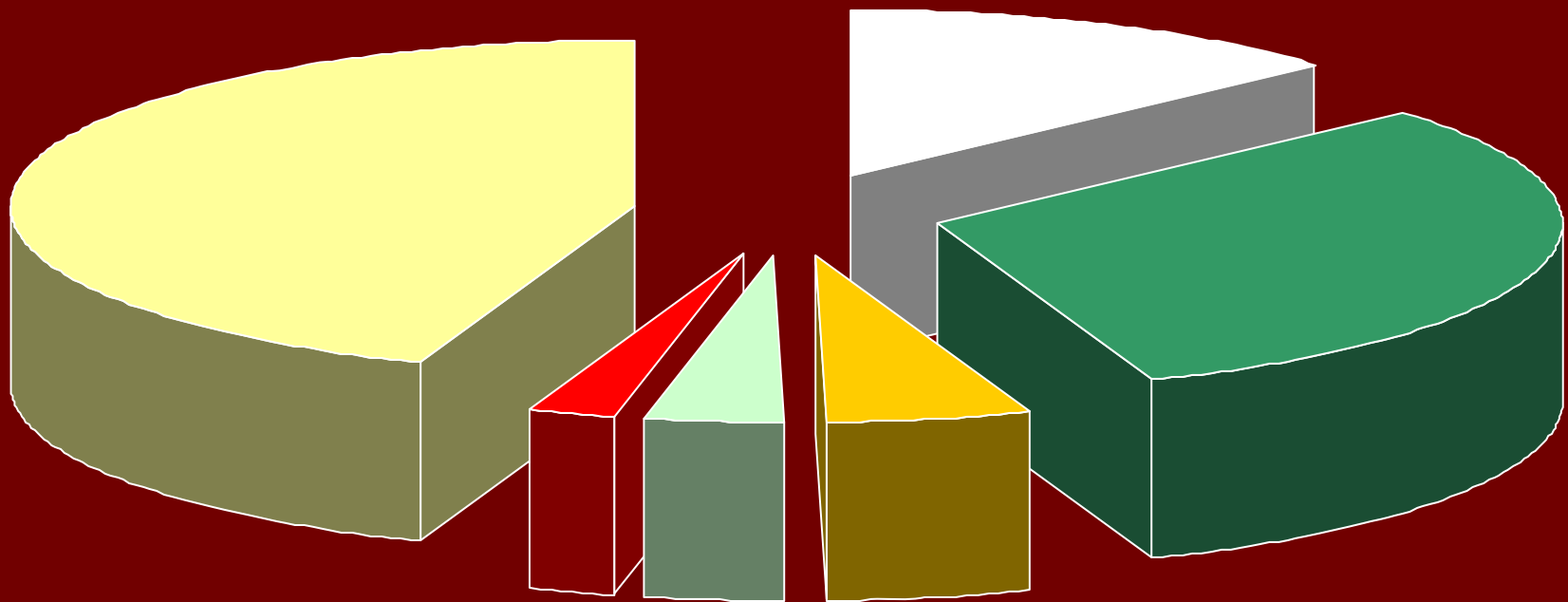
## Religious Adherents as a Percentage of all Residents, 2000



# Affiliated in NYS -- 2000



# Distribution of Affiliation in NYS



■ Not Affiliated ■ Protestant ■ Jewish ■ Muslim ■ Buddhist ■ Catholic

# HIV and Faith Research

# Religiousness and Spirituality Among HIV-Infected Americans

KA Lorenz, RD Hayes, MF Shapiro, PD Cleary, and NS Wenger  
Journal of Palliative Medicine, Vol. 8, No. 4, 2005

- Among the 2,266 participants in a nationally representative cohort, 80% reported a religious affiliation
  - 65% affirmed (**belief in the tenets**) of that religion
  - 85% agreed that spirituality was “somewhat” or “very” important in their lives
  - 72% indicated that they “sometimes” or “often” rely on religious or spiritual means when making a decision and 65% when confronting problems
  - Women, People of Color, and older patients were more religious and spiritual
  - Residents of other than the West were more religious and spiritual
  - Clinical stage was not associated with religiousness or spirituality

# Spirituality and Religion in Patients with HIV/AIDS

S Cotton, CM Puchalski, SN Sherman et al.

Journal of General Internal Medicine, 2006;21:S14–20

- 450 patients from 4 clinical sites were surveyed over 12-18 months to assess changes in levels of spirituality and psychosocial measures
  - Demographics: 86% male; 55% People of Color
  - 80% indicated a specific religious preference; 9% were nonspecific; and 11% had no preference
  - 23% attended services weekly
  - 32% prayed or meditated daily
  - 75% stated that their illness had strengthened their faith at least a small amount
  - More patients held to positive than negative (32% vs. 10%) religious/spiritual coping strategies

# Changes in Religiousness and Spirituality Attributed to HIV/AIDS: Are There Sex and Race Differences?

S Cotton, J Tsevat, M Szaflarski et al.

Journal of General Internal Medicine, 2006;21:S14–20

- In an effort to describe changes in religiousness and spirituality among PLWHAs and to determine the effects of gender and race on such changes, 347 participants were surveyed
  - 25% reported feeling alienated by a religious group since their HIV/AIDS diagnosis
  - 10% changed their place of worship because of HIV/AIDS

# Changes in Religiousness and Spirituality ... 2

- 50% believed that their religiousness/spirituality helped them to live longer
- Fewer Whites than Blacks (37% vs. 52%) reported becoming more spiritual since their diagnosis
- Fewer Whites than Blacks (41% vs. 68%) believed that their religiousness/spirituality helped them live longer
- More Whites than Blacks (44% vs. 21%) felt alienated from religious communities
- There were no differences by gender in any of the previous comparisons

# Acronyms

- PLWHA Person Living With HIV/AIDS; also PLWH and PLWA for persons living with HIV or AIDS, respectively
- MSM Men who have Sex with Men
- IDU Injection Drug User
- MSM/IDU Men who have Sex with Men and also Inject Drugs
- HET Heterosexual
- Blood Blood-related Transmission (Transfusion, Blood Products)
- NIR/NRR/Unk NIR = No Identified Risk; NRR = No Risk reported; Unk = Unknown
- PEDS Pediatric (Ages 0 through 12)
- MTCT Mother-To-Child-Transmission
- Cumulative All cases of a disease diagnosed within a set time period; in HIV/AIDS is often used to describe all cases from the beginning of the epidemic through a specific date
- CDC Centers for Disease Control and Prevention
- SEP Syringe Exchange Program
- ESAP Expanded Syringe Access Program

# Contact Information

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