

New York City's Syndemic Approach to Addressing HIV, STIs, Mental Health, and Substance Use

U.S. Fast-Track Cities 2025 Summit

Wednesday, September 17, 2025, 9:30 – 10 a.m.

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Bureau of Hepatitis, HIV, and STIs

Envisioning a New York City without transmission or illness related to viral hepatitis, HIV, and STIs



Outline

- Syndemic and Syndemic Approach Defined
- HIV, STIs, Mental Health, and Substance Use and Overdose Deaths in New York City
- Highlights From New York City's Syndemic Approach to Addressing HIV, STIs, Mental Health, and Substance Use
- Best Practice Recommendations
- Questions and Answers

Syndemic and Syndemic Approach Defined

Syndemic and Syndemic Approach Defined

Per HIV.gov, **syndemics** occur when “two or more diseases or health conditions cluster and interact within a population because of social and structural factors, leading to an excess burden of disease and continuing health disparities. Syndemics arise when:

- Two (or more) diseases or health conditions cluster and interact within a population;
- Social and structural factors allow for diseases or health conditions to cluster; and
- The clustering of disease or health conditions results in disease interaction, either biologic or social or behavioral, leading to an excess burden of disease and continuing health disparities.”

Syndemic and Syndemic Approach Defined (cont.)

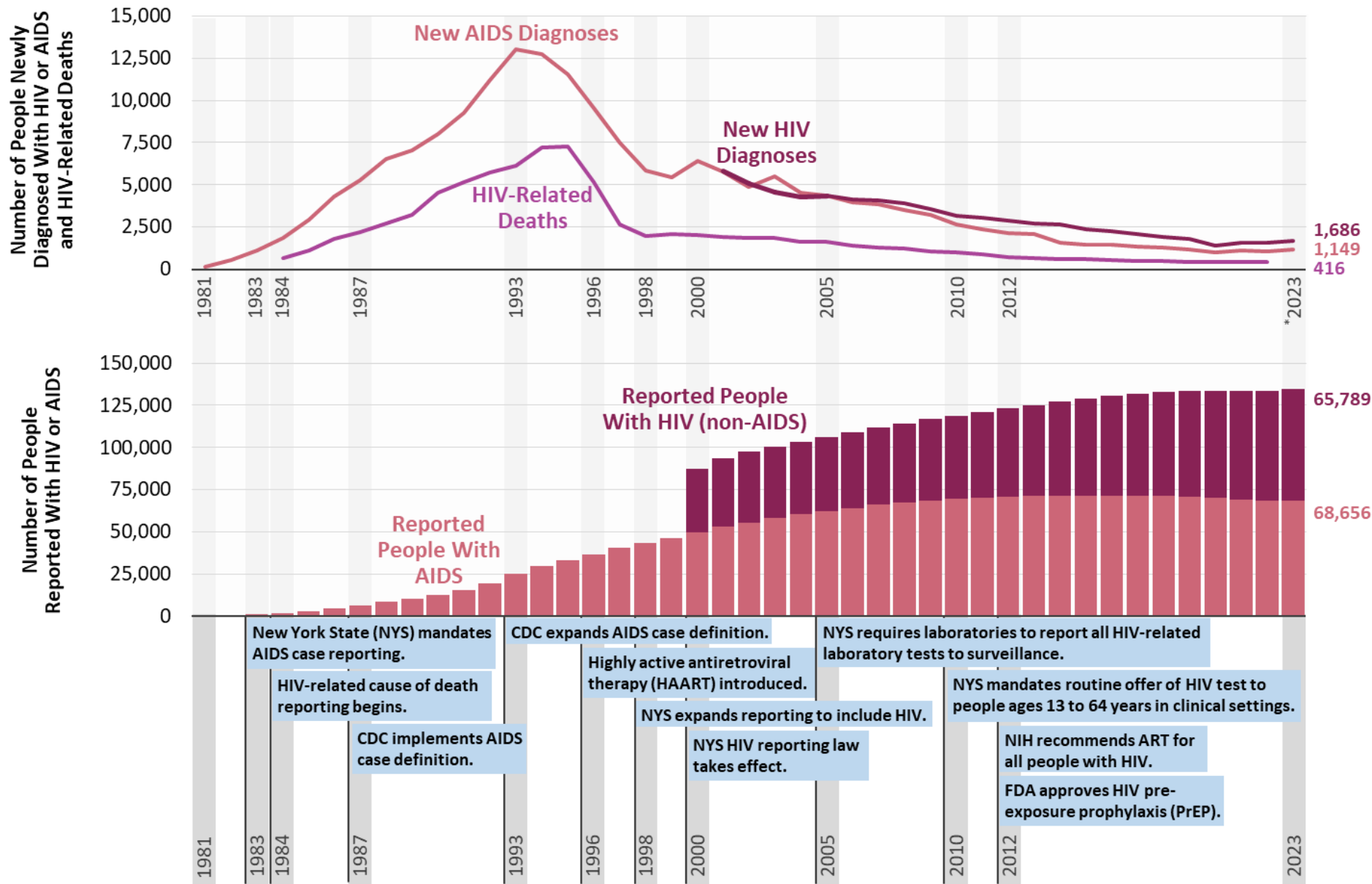
Benefits of taking a syndemic approach include:

- Integrates services despite fragmented health care service delivery system, and the ongoing siloing of public health and health care
- Promotes whole-person approach to care and services
- Improves outcomes across health conditions
- Increases cost-saving and efficiencies
- Enables common drivers and root causes to be understood and, ideally, intervened on
- Increasingly, responsive to federal funding and programming

HIV, STIs, Mental Health, and Substance Use and Overdose Deaths in New York City

HIV in New York City, 2023

History of the HIV Epidemic in New York City



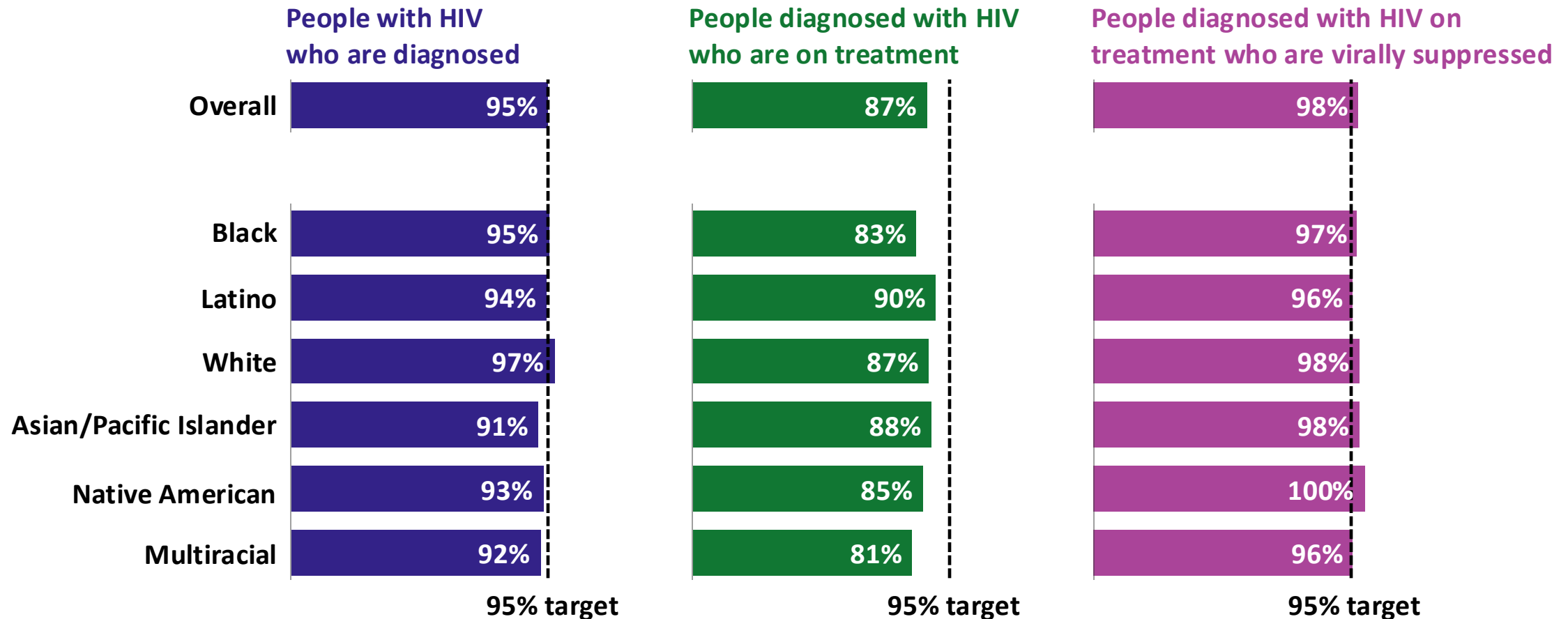
CDC=Centers for Disease Control and Prevention; NIH=National Institutes of Health; FDA=Food and Drug Administration.
Data as reported to the New York City Department of Health and Mental Hygiene by March 31, 2024.
* Data on 2023 deaths are incomplete.

New HIV Diagnoses in New York City by Select Demographic Factors, 2023

Among people newly diagnosed with HIV in 2023:

- 42% were **Latino** and 41% were **Black**
- 79% were **men**, 18% were **women**, 3% were **transgender women**, and <1% were **transgender men**
- 69% of people for whom data on transmission category were available were **men who have sex with men**
- 67% were **ages 20 to 39 years**, and 14% were **ages 50 years or older**
- 39% lived in **high or very high poverty ZIP codes** at the time of diagnosis
- 51% of people for whom data on place of birth were available were **born in the U.S.**, and 48% were **born outside the U.S.**

Proportion of People With HIV Meeting UNAIDS 95-95-95 Targets¹ in New York City Overall and by Race or Ethnicity, 2023

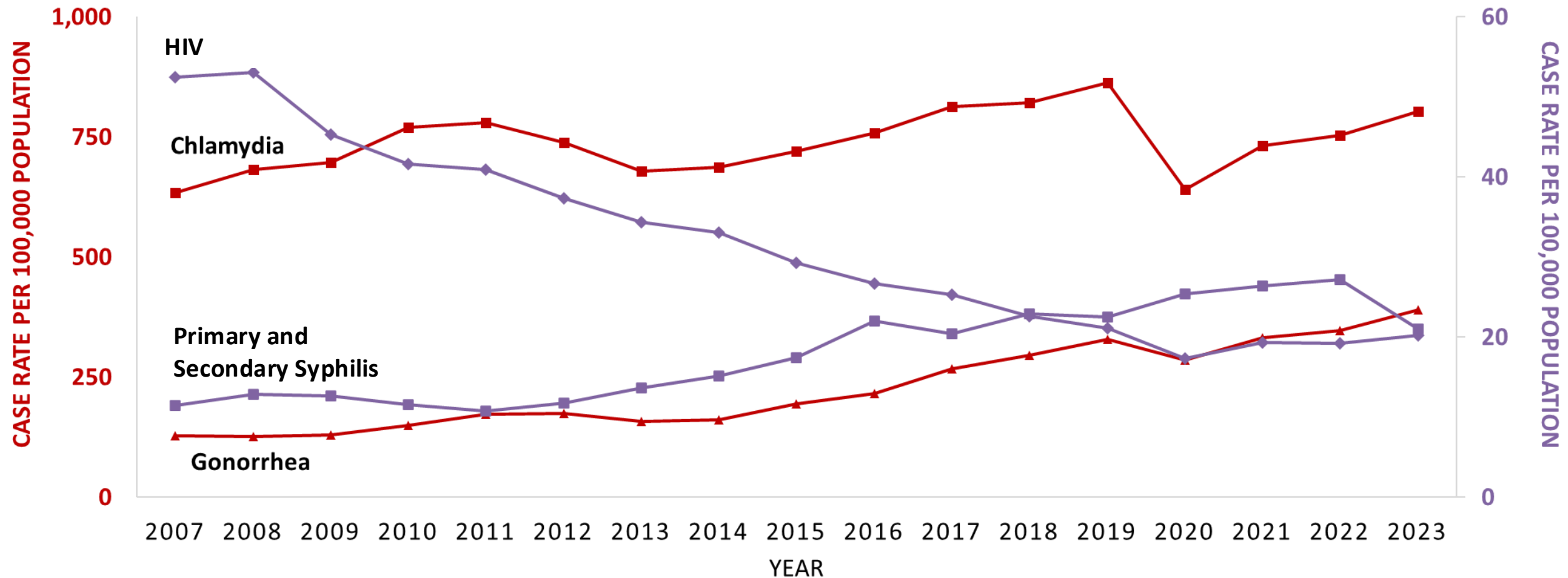


STIs in New York City, 2023

Select STIs in New York City, 2022 and 2023

STI	2022	2023	% Change (2022 vs. 2023)
Primary and Secondary Syphilis	2,300	1,753	↓ 24 %
Latent Syphilis	7,774	7,040	↓ 9 %
Gonorrhea	29,307	32,568	↑ 11 %
Chlamydia	63,842	66,997	↑ 5 %

Reported Chlamydia, Gonorrhea, and Primary and Secondary Syphilis Case Rates and New HIV Diagnosis Rate (Per 100,000) in New York City, 2007-2021



Mental Health in New York City, 2023

Diagnosed Mental Illness and Unmet Need in New York City, 2023

In 2023, the estimated number of adults in New York City diagnosed by a health care professional, by condition, include:



- Schizophrenia, schizoaffective disorder, or psychosis: 72,000 people (1%)
- Bipolar disorder, mania or manic depression: 181,000 people (3%)
- Post-traumatic stress disorder (PTSD): 366,000 people (5%)
- Major depressive disorder (MDD) or severe depression: 732,000 people (11%)
- Anxiety: 1,243,000 people (18%)

In the past year, among adults with a diagnosed mental illness,* 70% have received counseling, medication, or both, and 34% had an unmet need for mental health treatment in the past year.

Substance Use and Overdose Deaths in New York City, 2023

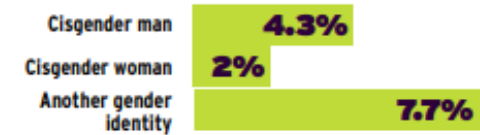
Select Drug Use in New York City, 2023



In 2023, 3.2% of New York City residents reported using drugs other than alcohol or cannabis (and including cocaine, crack, heroin, fentanyl, or methamphetamine) in the past year.

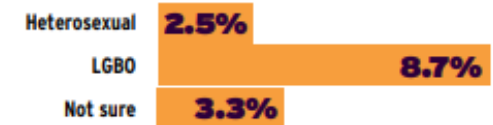
Other Drug Use in the Past Year by Gender Identity

Another gender identity includes transgender man, transgender woman, nonbinary, genderqueer and some other gender identity.
Source: NYC Neighborhood Wellness Survey, 2023



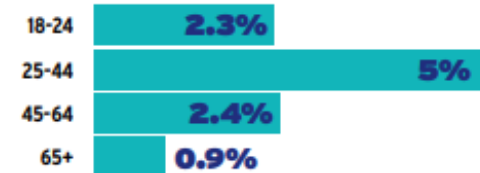
Other Drug Use in the Past Year by Sexual Orientation

The sexual orientations of lesbian, gay, bisexual and another sexual orientation are grouped in the LGBO category.
Source: NYC Neighborhood Wellness Survey, 2023



Other Drug Use in the Past Year by Age Group

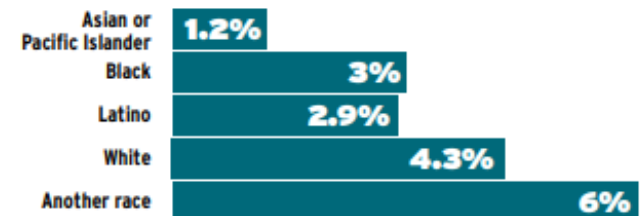
Source: NYC Neighborhood Wellness Survey, 2023



Other Drug Use in the Past Year by Race and Ethnicity

The racial categories of American Indian or Alaska Native and the category of people who identify as multiple races are grouped in the Another race category due to low prevalence estimates for some individual groups. Middle Eastern or North African is grouped with White following U.S. Census guidelines.

Source: NYC Neighborhood Wellness Survey, 2023



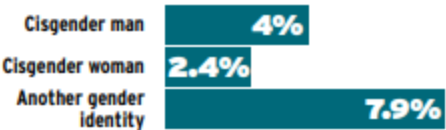
Substance Use Treatment in New York City, 2023



In 2023, 3.2% of New York City residents reported receiving substance use treatment in the past year

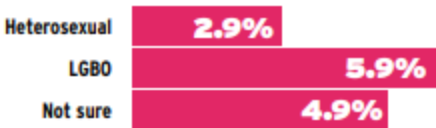
Past-Year Substance Use Treatment Received by Gender Identity

Another gender identity includes transgender man, transgender woman, nonbinary, genderqueer and some other gender identity.
Source: NYC Neighborhood Wellness Survey, 2023



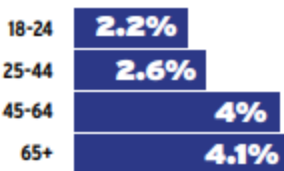
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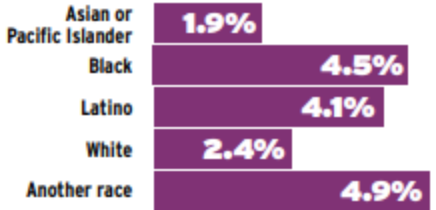
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Past-Year Substance Use Treatment Received by Race and Ethnicity

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Source: NYC Neighborhood Wellness Survey, 2023



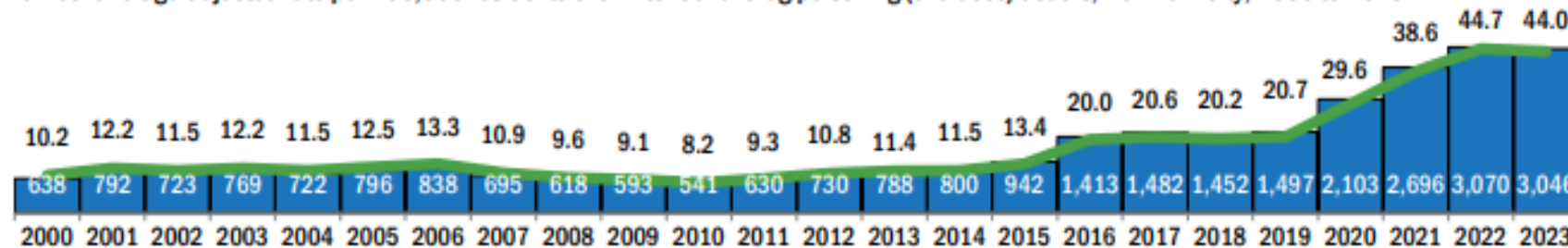
Overdose Deaths in New York City

In 2023, there were 3,046 overdose deaths in New York City, down 1% from 2022. In 2023, overdose deaths remained highest among:

- Black people (1,072 deaths; 64.9 per 100,000), followed by Latino people (1,077 deaths; 56.5 per 100,000)
- People ages 55 to 64 years (897 deaths; 87.9 per 100,000)
- Bronx residents (858 deaths; 78.0 per 100,000)
- Residents of very high poverty neighborhoods (696 deaths; 93.7 per 100,000)

In New York City, rates of overdose death remain stable in 2023

Number and age-adjusted rate per 100,000 residents of unintentional drug poisoning (overdose) deaths, New York City, 2000 to 2023



Sources: NYC Office of Chief Medical Examiner and NYC Department of Health and Mental Hygiene Bureau of Vital Statistics, 2000–2023; 2022 and 2023 data are provisional and subject to change.

Source: Ellenie Tuazon et al., *Unintentional Drug Poisoning (Overdose) Deaths in New York City in 2023*, 142 EPI DATA BRIEF (Oct. 2024), available [here](#).

Highlights from New York City's Syndemic Approach to HIV, STIs, Mental Health, and Substance Use


Launch of Bureau of Hepatitis, HIV, and STIs

In July 2021, the New York City Health Department's Bureau of HIV, nonclinical arm of the Bureau of STI, and Viral Hepatitis Program in the Bureau of Communicable Diseases came together to form the **Bureau of Hepatitis, HIV, and STIs (BHHS)**.

BHHS oversees the City's response to viral hepatitis, HIV, and STIs, working toward the mission of improving the lives of New Yorkers by ending transmission, illness, stigma, and inequities related to viral hepatitis, HIV, and STIs.

BHHS utilizes a syndemic approach, recognizing that HIV, STIs, viral hepatitis, mental health issues, and substance use often cluster and interact within populations because of social and structural factors.

STD Clinics Reimagined as Sexual Health Clinics



NYC Health

Important Notice:
Saturday, March 21, 2015 is the last day to get services at the Chelsea STD Clinic. Starting Tuesday, March 31, services will be available at the Riverside STD Clinic on the Upper West Side.

- The Chelsea STD Clinic at 303 9th Ave. is closing for major, long-term building renovations.
- Services will move to the Riverside STD Clinic, 160 West 100th St. (between Amsterdam and Columbus Aves.), and will be available starting Tuesday, March 31. Hours of operation will not change.
- To find other Health Department STD clinics, visit nyc.gov/health or call 311. For public transportation information, visit www.mta.info/ or call 511.

Aviso importante:
El sábado 21 de marzo de 2015 es el último día para obtener servicios en la clínica de ETS de Chelsea. A partir del martes 31 de marzo, los servicios estarán disponibles en la clínica de ETS de Riverside en Upper West Side.

- La clínica de ETS de Chelsea, ubicada en 303 9th Avenue cerrará por renovaciones mayores de largo plazo en el edificio.
- Los servicios se pasarán a la clínica de ETS de Riverside, 160 West 100th St. (entre Amsterdam Ave. y Columbus Ave.) y estarán disponibles a partir del martes 31 de marzo. El horario de atención será el mismo.
- Para encontrar otras clínicas de ETS del Departamento de Salud, visite nyc.gov/health o llame al 311. Para obtener información sobre el transporte público, visite www.mta.info/ o llame al 511.

重要通知：
2015 年 3 月 21 日週六是切爾西 STD 診所 (Chelsea STD Clinic) 提供服務的最後一天。從 3 月 31 日週二開始，將於上西城的河濱 STD 診所提供服務。

- 位於 303 9th Avenue 的切爾西 STD 診所將因重大的長期大樓整修而關閉。
- 服務地點將遷移至河濱 STD 診所，地址：160 West 100th St. (介於 Amsterdam 與 Columbus Ave. 之間)，將從 3 月 31 日週二開始提供服務。上班時間將維持不變。
- 若要搜尋其他的衛生局 STD 診所，請造訪 nyc.gov/health 或致電 311。關於大眾運輸系統資訊，請造訪 www.mta.info/ 或致電 511。

In spring 2015, the New York City Health Department announced the closure of the Chelsea STD Clinic, one of the **City's nine STD Clinics** offering low- to no-cost STI and HIV testing and STI treatment. At the time, in New York City:

- 1 in 42 MSM attending STD Clinics were diagnosed with HIV within a year¹
- 1 in 15 MSM (1 in 7 Black MSM) diagnosed with anorectal chlamydia and/or gonorrhea in STD Clinics were diagnosed with HIV within a year
- 1 in 20 MSM diagnosed with primary or secondary syphilis were diagnosed with HIV within a year

STD Clinics Reimagined as Sexual Health Clinics (cont.)

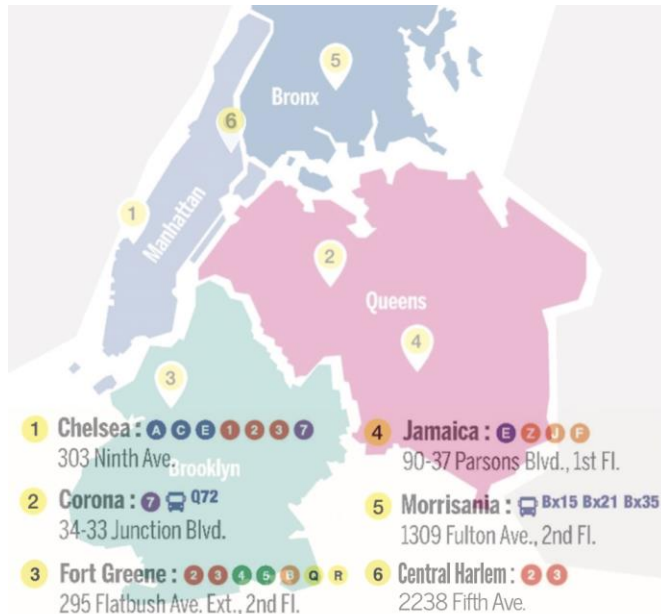
Following widespread media coverage of the clinic closure and protests by ACT UP, Treatment Action Group, and other activists and advocates, the City announced new funding to expand and enhance all STD Clinics, including a \$26.3 million overhaul of the Chelsea STD Clinic.

In March 2018, the Chelsea STD Clinic reopened as the Chelsea Sexual Health Clinic, featuring expanded hours, extensive renovations, and state-of-the-art service enhancements, including HIV treatment initiation, PrEP and emergency PEP, and quick start contraception.



STD Clinics Reimagined as Sexual Health Clinics (cont.)

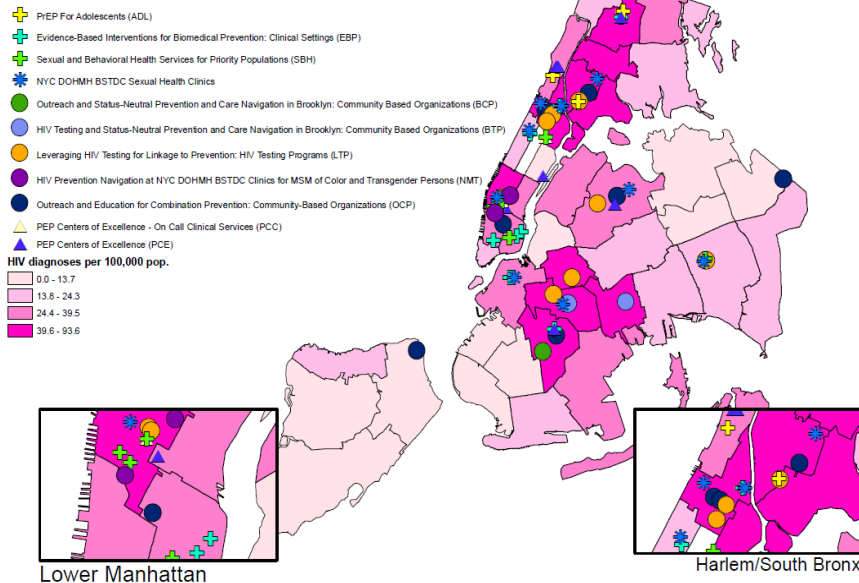
Today, the **City's six Sexual Health Clinics** offer low- to no-cost sexual and reproductive health services. Anyone 12 years or older can receive services, regardless of immigration or insurance status. Services include:



- **STI services:** evaluation for signs and symptoms, testing, treatment, doxy PEP
- **HIV services:** testing and evaluation, treatment initiation, emergency PEP, PrEP initiation and counseling
- **Vaccination services:** mpox, hepatitis A and B, meningitis, HPV
- **Behavioral health services:** social work services, crisis counseling, substance use screening
- **Reproductive health services:** contraception,* emergency contraception, pregnancy testing, options counseling, medication abortion**

PlaySure Network

PlaySure Network Sites



In 2016, the New York City Health Department launched **PlaySure Network** for HIV prevention, a citywide network of HIV testing sites, community-based organizations, and clinics working to promote patient-specific approaches to sexual health and HIV prevention, increase access to PrEP and emergency PEP, and link people who test positive for HIV to care. Select programs included:


- PEP Centers of Excellence
- NYC PEP Hotline
- PrEP for Adolescents clinical sites
- Status Neutral Care Coordination

PlaySure Network 2.0

In 2021, the New York City Health Department launched **PlaySure Network 2.0**, a citywide network of 18 agencies funded to provide a comprehensive package of HIV, sexual health, and supportive services in clinical and nonclinical settings using a one-stop shop model. PlaySure Network 2.0 providers offer:

- Universal HIV testing
- PrEP and emergency PEP
- Immediate initiation of HIV treatment and HIV primary care
- STI testing and treatment
- Outreach and navigation services
- Mental health, substance use, and other supportive services

Syringe Service Programs

Your Guide to Syringe Service Programs in New York City	Program	Phone	Website	
	BOOM!Health	718-292-7718	boomhealth.org	BX
	Bronx Móvil*	917-200-0358	bronxmovil.org	
	St. Ann's Corner of Harm Reduction	718-585-5544	sachr.org	
	After Hours Project	718-249-0755	afterhoursproject.org	BK
	Family Services Network of New York	347-770-9911	fsnny1.org	
	VOCAL-NY	718-802-9540	vocal-ny.org	
	Alliance for Positive Change	212-645-0875	alliance.nyc	MN
	Harlem United	212-289-2378	harlemunited.org	
	Housing Works	212-677-7999	housingworks.org	
	Positive Health Project	212-465-8304	housingworks.org	
	Safe Horizon—Streetwork	646-602-6404	safehorizon.org	
	OnPoint NYC (East Harlem)	212-828-8464	onpointnyc.org	
	OnPoint NYC (Washington Heights)	212-923-7600	onpointnyc.org	QNS
	AIDS Center of Queens County*	718-896-2500	acqc.org	
	Community Health Action of Staten Island	718-808-1815	chasiny.org	SI


*Mobile or weekend services only. Call program for hours of operation, location and services.


The New York City Health Department funds 15 **syringe service programs (SSPs)** citywide, which provide free and sterile syringes and other safer use equipment, overdose prevention and harm reduction education, fentanyl and xylazine test strips and naloxone, wound care, buprenorphine treatment and other onsite medical care, and referrals to other services.


BHHS has worked to ensure SSPs offer HIV, syphilis, and hepatitis C testing and counseling; care coordination and referrals to other services; safer sex education; and free safer sex products.

What Do Syringe Service Programs Do?


A syringe service program (SSP) provides immediate services for people who use drugs. SSP services include:


 Access to safer drug use and safer sex supplies

 Hepatitis care coordination and treatment counseling


 Access to naloxone


 Safer drug use and health education


 Hepatitis C and HIV testing


 Care coordination and referrals to other services

Safety Tips:

**Fentanyl,** a drug stronger than heroin, has been found in heroin, cocaine, crack, methamphetamine, ketamine and pills from nonmedical sources.

**Get naloxone.** Leave it out when you use. Naloxone is a medication that can reverse an overdose from fentanyl, heroin and other opioids.

**Avoid mixing drugs.** Using different drugs together, including alcohol, increases your risk of overdose. If you do mix drugs, go slow.

**Use with others** and take turns, or have someone check on you.

For more information, go to nyc.gov/health and search for **prevent overdose**.

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The Undetectables



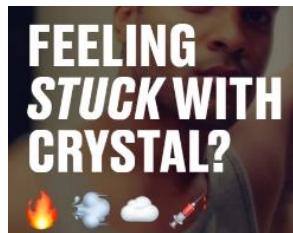
The New York City Health Department's **Undetectables** is an HIV antiretroviral treatment support model combining anti-stigma health marketing with a toolkit of evidence-based adherence supports, including client-centered care planning, directly observed therapy, and financial incentives for clients achieving viral suppression.



Crystal Meth Harm Reduction Services

The New York City Health Department's **Crystal Meth Harm Reduction Services** program includes **Re-Charge**, an HIV status neutral, sex-positive, and nonjudgmental harm reduction program for MSM and transgender people who have sex with men, and who use crystal meth. Agencies offer:

- Outreach via drop-in groups, street and non-traditional outreach, and social media outreach
- Individual and group counseling
- Supportive services
- Initial medical visit, vaccination, STI treatment, PrEP and emergency PEP, psychiatric visit, and medication assisted treatment
- Linkage to benefits and entitlements



Ryan White Part A Harm Reduction, Mental Health, and Supportive Services

The New York City Health Department's **Ryan White Part A program** funds organizations citywide to deliver an array of services, including through the:

- **Harm Reduction Program**, which provides screening for substance use and assessing treatment needs; individual and group counseling; auricular acupuncture, overdose prevention and other health education; and linkage and referral to supportive services
- **Mental Health Program**, which provides individual and group counseling; psychiatric care; Seeking Safety services to address trauma, PTSD, and drug use; and HIV prevention and treatment counseling
- **Support for Transgender, Intersex, Gender Nonconforming, and Nonbinary People**, which provides individual counseling to support mental health and coping skills; family and group counseling; HIV prevention and treatment counseling; and linkage and referral to gender-affirming health care and supportive services

Viral Hepatitis Initiative



Hep C Peer Navigation at Syringe Exchange Programs

The New York City Health Department funds 13 harm reduction programs to support part-time peers or full-time patient navigators to conduct outreach, health education, and coordinate access to harm reduction and hepatitis C testing and treatment.



Check Hep C Patient Navigation Program

The New York City Health Department funds 12 health centers and hospitals to support full-time patient navigators to coordinate care for people with chronic hepatitis C to get cured, including referrals to SSPs and other harm reduction services.



Respectful and Equitable Access to Comprehensive Healthcare (REACH) Program

The New York City Health Department funds Mount Sinai to coordinate a patient-centered, harm reduction approach to primary care for people who use alcohol and other drugs, and for people with hepatitis C.

Hepatitis Clinical Exchange

Health Care Practice Facilitation

The New York City Health Department partners with health centers and substance use treatment programs on quality improvement interventions, and partnered with NASTAD to develop Integration of Hepatitis C Telemedicine at Substance Use Treatment Programs: An Implementation Guide.

Community Engagement



New York Knows is a partnership between the New York City Health Department and community-based organizations, community health centers, hospitals, colleges and universities, faith-based organizations, and businesses to provide voluntary HIV testing to all New Yorkers, routinize HIV testing in health care, identify people with HIV who are undiagnosed and link them to care, and connect people at risk of HIV to PrEP and other prevention services. In 2019, *New York Knows* announced an expanded focus to include other STIs and hepatitis C.



The **Sexual Health Advisory Group (SHAG)** brings together sexual health stakeholders in New York City, including community-based organizations, health care providers, and community members. The SHAG was formerly known as the Syphilis Advisory Group (SAG), and in 2017, SAG members opted to expand the group's focus beyond disease prevention to incorporate sexual health and wellness more broadly. The SHAG meets quarterly to discuss various topic areas in sexual health, such as reproductive health, HIV prevention, and sex work.

Best Practices for Adopting a Syndemic Approach

Best Practices for Adopting a Syndemic Approach

- **Ensure syndemic approach is embedded within every aspect of work** (e.g., jurisdictional planning, program planning, technical assistance and quality management following program implementation, strategic communications, policy advocacy, community engagement)
- **Identify champions in local and/or state government** to ensure ongoing investment in syndemic programming and services
- **Partner with STI, mental health, and substance use stakeholders**, not only within health departments but among provider and community partners
 - Partnership activities should span needs assessments, jurisdictional planning, program planning and implementation, program evaluation, strategic communications (e.g., health promotional materials, social marketing campaigns), policy advocacy

Questions and Answers

Contact Information

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