

HIV/AIDS

AND

AMERICAN INDIANS/ ALASKA NATIVES



Today there are an estimated **850,000–950,000** HIV-positive individuals living in the United States—the largest number ever—according to the Centers for Disease Control and Prevention. Of these, **180,000–280,000** people do not know they are infected, and thus are suffering from a lack of treatment, while at the same time may be unknowingly spreading the virus. About **225,000** more who do know their status aren't getting the care they need. These numbers will continue to grow unless everyone takes decisive action against the disease.¹

HIV/AIDS is taking a devastating and disproportionate toll on people of color in the United States. Community leaders and organizations can play a critical role in fighting the disease in their neighborhoods, and The Leadership Campaign on AIDS (TLCA) is dedicated to helping them do it.

TLCA: Fighting HIV/AIDS in Communities of Color!

Within the U.S. Department of Health and Human Services, the Office of HIV/AIDS Policy's The Leadership Campaign on AIDS (TLCA) is working externally and internally to support the fight against HIV/AIDS in communities of color. TLCA reaches out to community leaders and local and national organizations to improve education, awareness, and action against the disease. TLCA wants to help minority leaders fight the stigma, fear, and denial that exacerbate the problem, and to help build partnerships that will promote education, prevention, testing, vaccine awareness, and treatment. TLCA also reaches inwardly to help improve the coordination, information-sharing, communication efforts, and effectiveness of the Department's HIV/AIDS initiatives and programs.

Know the facts and Educate, Motivate, and Mobilize against HIV/AIDS!

What We Know:

- A total of **2,875** estimated cases of AIDS among American Indian/Alaska Native (AI/AN) adults and adolescents (81 percent male and 19 percent female) have been diagnosed in the United States since the beginning of the epidemic through 2002. Of those cases, **206** were newly diagnosed in 2002.²
- Like other racial and ethnic groups, the estimated number of AI/AN persons living with AIDS continues to rise, with an approximate **10 percent** increase each year from 1998–2002.³
- A total estimate of **1,795** AI/ANs have been diagnosed with HIV through 2002.^{3*}

Within AI/AN Communities, the Most Common Modes of Transmission of HIV Were:

- **Sixty-six percent** of estimated HIV cases newly diagnosed in 2002 among AI/AN men **13 years and older** were attributed to male-to-male sexual contact.²
- **Seventy percent** of estimated HIV cases newly diagnosed in 2002 among AI/AN women **13 years and older** were attributed to heterosexual contact.²
- **Nineteen percent** of estimated HIV cases newly diagnosed in 2002 among AI/AN men and women were attributed to injection drug use.³

Ten states account for nearly two-thirds of the AI/AN population (OK, CA, AZ, NM, AK, WA, NC, TX, NY, MI). Of these states, eight had reported HIV data to the CDC as of December 2002. However, California and Washington have not reported HIV cases to the CDC, and New York and Texas only recently initiated HIV reporting.²

Major Obstacles in the Fight Against HIV/AIDS in AI/AN Communities Are:

- Frequent misclassification of an individual's ethnicity as Latino, White, or Asian.
- Lack of access to confidential testing and care, and lack of culturally competent health care providers.
- HIV diagnoses that are often made late in the disease's progression.
- People not recognizing themselves or their partners as being at risk of HIV infection.
- Taboos about discussing sexuality, homophobia, and the stigma associated with HIV infection.

Did you know?

- An estimated **886,575** Americans have been diagnosed with AIDS from the beginning of the epidemic through 2002. Of the **42,136** estimated new diagnoses in 2002, **74 percent** were male and **26 percent** were female. Less than **1 percent** were children under 13.³
- **African Americans** account for **39 percent** of total estimated AIDS diagnoses through 2002,³ though they make up only **12.7 percent** of the population.⁴ They also represent an estimated **54 percent** of persons newly diagnosed with HIV in 2002.^{3*}
- **Hispanics** account for **18 percent** of total estimated AIDS diagnoses through 2002,³ though they make up only **13.4 percent** of the population.⁴
- **Women of color** account for **80 percent** of all women estimated to be living with AIDS. Women across racial/ethnic groups most commonly report heterosexual contact or injection drug use as their primary modes of exposure to HIV, while males most commonly report homosexual contact and injection drug use.³

* In the 30 areas with longstanding HIV reporting

The terms "African American" and "Black" are used interchangeably to include those individuals who self-identify as either. The term "Hispanic" includes those individuals who self-identify as "Latino/a" or "Hispanic."

¹ Fleming, P.L., et al., "HIV Prevalence in the United States, 2000," 9th Annual Conference on Retroviruses and Opportunistic Infections, Feb. 24-28, 2002, Seattle, WA, Abstract 11.

² Centers for Disease Control and Prevention, *HIV/AIDS Surveillance Supplemental Report 2002*, Vol. 10, No. 1.

³ Centers for Disease Control and Prevention, *HIV/AIDS Surveillance Report 2001*, Vol. 14.

⁴ U.S. Census Bureau, Population Division. Table NA-EST2002-ASRO-04, National Population Estimates, Characteristics (June 2003).

The Leadership Campaign on AIDS is a program of the Office of HIV/AIDS Policy—202-690-5560—www.hhs.gov

Note: The models shown are for illustrative purposes only.

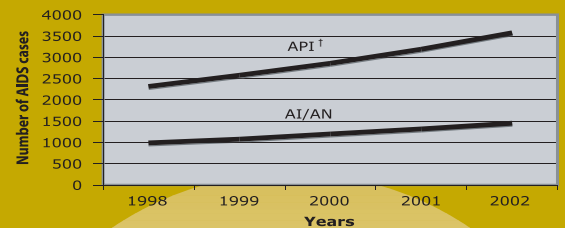


Let's Take Action!

In order to fight against the spread of HIV/AIDS in AI/AN communities, we need to address and better understand the following issues:

- The social, economic, spiritual, and geographic diversity that exists between different AI/AN communities.
- The role traditional health practices can play in HIV prevention, care, and treatment.
- The need to improve surveillance systems for HIV/AIDS with the cooperation of state and territorial health departments, tribally administered health care systems, the Indian Health Service, and the CDC.
- The need to address factors associated with migration and mobility between urban, rural, and reservation communities, which strain social support systems, increase the spread of infection across locations, and pose challenges to maintaining consistent health care.
- Related public health disparities that signal potential risk of HIV infection (e.g., high rates of teen pregnancy, sexually transmitted diseases, and substance or alcohol use/abuse).
- The inclusion of community leadership (including parents, teachers, tribal leaders, etc.) in HIV/AIDS dialogues.

Estimated number of persons living with AIDS, 1998–2002, by race/ethnicity



¹ Asians/Pacific Islanders

To Learn More

- Visit the CDC National Prevention Information Network at www.cdcnpin.org or call 1-800-458-5231.
- Contact the Indian Health Service (IHS) HIV/AIDS Program at 301-443-1289 or e-mail dsimpson@hqe.ihs.gov.
- Contact the National Native American AIDS Prevention Center (NNAAPC) at 510-444-2051 and www.nnaapc.org.
- Call the National AIDS Hotline at 800-342-AIDS (Spanish 800-344-SIDA, TTY 800-243-7889).
 - Call your doctor or other health care provider.
 - Contact your local or state public health department.