

HIV and American Indians and Alaska Natives

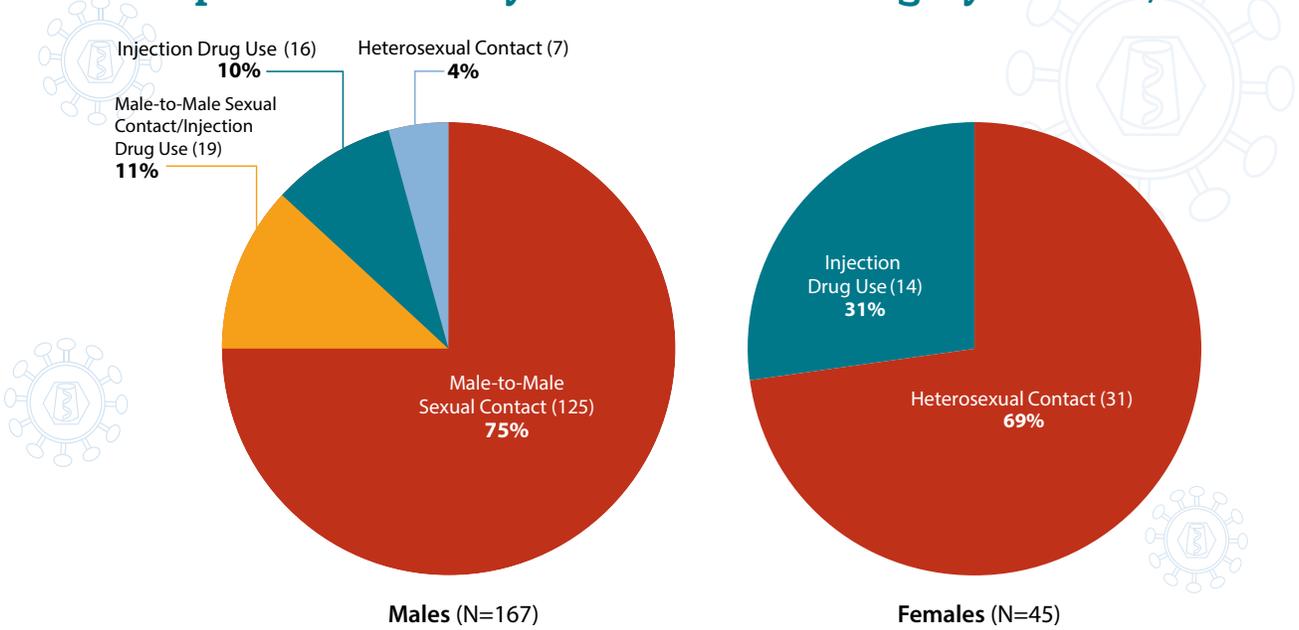
OF THE 38,739 NEW HIV DIAGNOSES IN THE US AND DEPENDENT AREAS* IN 2017:

167 WERE AMERICAN INDIAN/ALASKA NATIVE (AI/AN) MEN

45 WERE AI/AN WOMEN

NEARLY 9 IN 10 AI/AN MEN WHO RECEIVED AN HIV DIAGNOSIS WERE GAY OR BISEXUAL MEN†

New HIV Diagnoses Among American Indians/Alaska Natives in the US and Dependent Areas by Transmission Category and Sex, 2017



HIV Diagnoses From 2010 to 2016:‡

AI/AN overall: **increased 46%**

AI/AN gay and bisexual men:† **increased 81%**

* American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, the Republic of Palau, and the US Virgin Islands.
† Includes infections attributed to male-to-male sexual contact and injection drug use (men who reported both risk factors).
‡ In 50 states and District of Columbia.



Around 1.1 million people have HIV in the US.† People with HIV need to know their HIV status so they can take medicine to treat HIV. Taking HIV medicine as prescribed can make the level of virus in their body very low (called viral suppression) or even undetectable.



A person with HIV who gets and stays virally suppressed or undetectable can stay healthy and has effectively no risk of transmitting HIV to HIV-negative partners through sex.

What places some AI/AN at higher risk?

- Having another STD increases the risk of getting HIV. AI/AN have the second highest rates of chlamydia and gonorrhea among all racial/ethnic groups.
- An estimated 82% of AI/AN with HIV in 2016 had received a diagnosis. It is important for everyone to know their HIV status. People who do not know they have HIV cannot get the treatment they need and may pass the infection to others without knowing it.
- AI/AN gay and bisexual men may face culturally based stigma and confidentiality concerns that could limit opportunities for education and HIV testing, especially among those who live in rural communities or on reservations.
- It can be difficult to create prevention programs because there are over 560 federally recognized AI/AN tribes, whose members speak over 170 languages.
- Poverty, including limited access to high-quality housing, increases the risk for HIV and affects the health of people who have HIV.
- Alcohol and substance misuse can impair judgment and lead to behaviors that increase the risk of HIV. AI/AN tend to use alcohol and drugs at a younger age, more often, and in higher amounts, compared with other races/ethnicities.

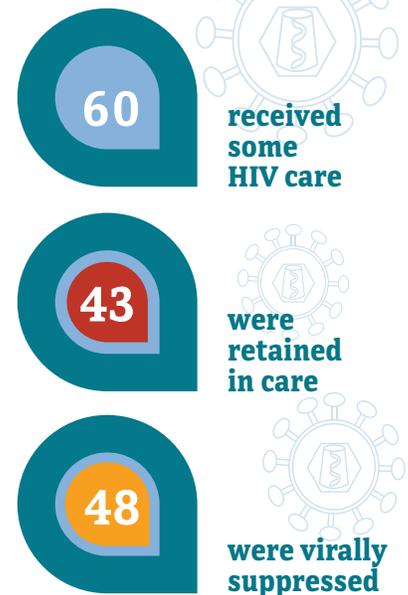
How is CDC making a difference?

- Collecting and analyzing data and monitoring HIV trends among AI/AN.
- Conducting prevention research and providing guidance to those working in HIV prevention.
- Supporting health departments and community organizations by funding HIV prevention work for AI/AN and providing technical assistance.
- Promoting testing, prevention, and treatment through campaigns like *Act Against AIDS*.

AT THE END OF 2016,
AN ESTIMATED
3,600
AI/AN
HAD HIV.†

4 in 5
KNEW THEY HAD THE VIRUS.†

FOR EVERY 100 AI/AN WITH HIV IN 2015:†



Reduce Your Risk



Not having sex



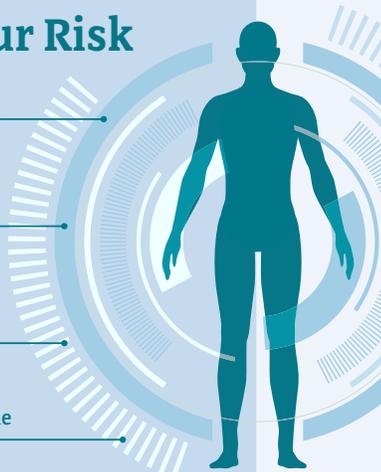
Using condoms



Not sharing syringes



Taking medicine to prevent or treat HIV



HIV IS A VIRUS THAT ATTACKS THE BODY'S IMMUNE SYSTEM.

It is usually spread by anal or vaginal sex or sharing syringes with a person who has HIV. The only way to know you have HIV is to be tested. Everyone aged 13-64 should be tested at least once, and people at high risk should be tested at least once a year. Ask your doctor, or visit gettested.cdc.gov to find a testing site. Without treatment, HIV can make a person very sick or may even cause death. If you have HIV, start treatment as soon as possible to stay healthy and help protect your partners.

For More Information

Call 1-800-CDC-INFO (232-4636)
Visit www.cdc.gov/hiv