HIV and Native Hawaiians and Other Pacific Islanders

OF THE 40,324 HIV DIAGNOSES IN 2016:*

54 WERE AMONG NHOPI
45 WERE AMONG NHOPI MEN
9 WERE AMONG NHOPI WOMEN

3 OUT OF 5 NHOPI WHO RECEIVED AN HIV DIAGNOSIS WERE GAY OR BISEXUAL MEN.

HIV Diagnoses Among Native Hawaiians and Other Pacific Islanders by Transmission Category, 2016

Male

- Male-to-Male Sexual Contact (35)
- Male-to-Male Sexual Contact and Injection Drug Use (6)
- Injection Drug Use (1)

Total 45

Female

- Heterosexual Contact (7)
- Injection Drug Use (2)

Total 9

From 2011 to 2015, HIV diagnoses:

- Increased 51% (from 55 to 83) among NHOPI overall
- Increased 50% (from 42 to 63) among NHOPI gay and bisexual men

* HIV diagnoses include the United States and 6 dependent areas. Dependent areas include American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, the Republic of Palau, and the US Virgin Islands.

National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention
Division of HIV/AIDS Prevention
Around 1.1 million people are living with 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 sexually transmitting HIV to HIV-negative partners.

At the end of 2015, an estimated 1,100 NHOPI were living with HIV. 82% had received a diagnosis.

What places some NHOPI at higher risk?

- Limited access to quality health care, language barriers, and lower income and educational levels may place some NHOPI at higher risk for HIV.
- NHOPI cultural customs such as not talking about sex may make it difficult to talk about HIV prevention, such as condom use.
- There are only a few targeted HIV prevention programs and behavioral interventions for NHOPI because of limited research.
- The reported number of HIV cases among NHOPI may be lower than the actual number of cases due to race/ethnicity misidentification.

How is CDC making a difference?

- Collecting and analyzing data and monitoring HIV trends among NHOPI.
- Conducting prevention research and providing guidance to those working in HIV prevention.
- Supporting health departments and community organizations by funding HIV prevention work for NHOPI and providing technical assistance.
- Supporting community organizations that can increase access to HIV testing and care and other services for NHOPI.
- Promoting testing, prevention, and treatment through campaigns like Act Against AIDS.

Visit [www.cdc.gov/hiv](http://www.cdc.gov/hiv) for more information about CDC’s HIV prevention activities among NHOPI.

**FOR EVERY 100 NHOPI WITH HIV IN 2014:**

- 60 received some HIV care
- 43 were retained in care
- 50 were virally suppressed

**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 is living with 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](http://gettested.cdc.gov) to find a testing site. Without treatment, HIV can make a person very sick or may even cause death. If you are living with 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](http://www.cdc.gov/hiv)