## HIV and American Indians and Alaska Natives

## **HIV DIAGNOSES IN 2016:**

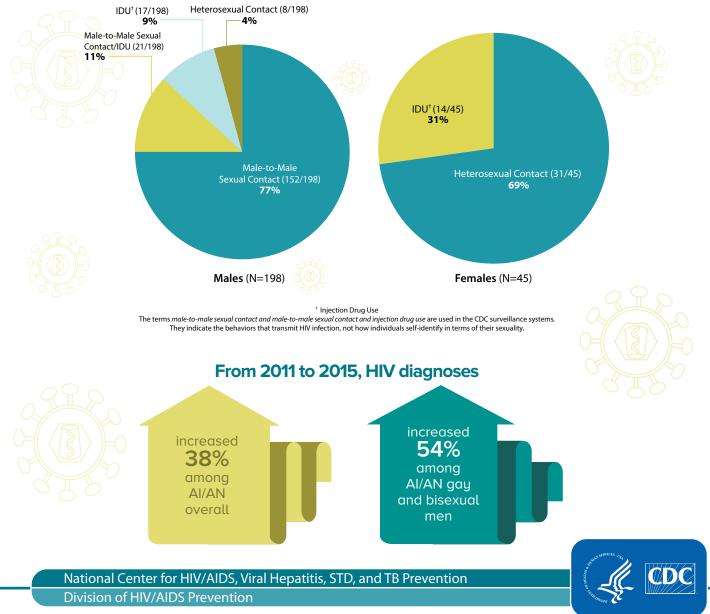
198 AMERICAN INDIAN/ALASKA NATIVE (AI/AN) MEN

45 AI/AN WOMEN

NEARLY 8 IN 10 AI/AN MEN WHO RECEIVED AN HIV DIAGNOSIS WERE GAY OR BISEXUAL MEN

AI/AN HAD THE 4TH HIGHEST RATE OF HIV DIAGNOSES AMONG ALL RACES/ETHNICITIES.

### HIV Diagnoses Among American Indians/Alaska Natives in the US by Transmission Category and Sex 2016



Around 1.1 million people are living with HIV in the US. People living 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 living 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.



Unfortunately, thousands of Americans still die each year from HIV. In 2015, 53 Al/AN died from HIV disease.

#### What places some AI/AN at higher risk?

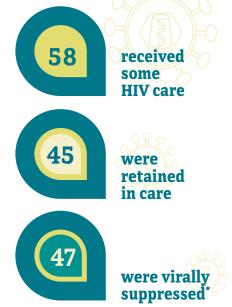
- Having another STD increases the risk of getting HIV. AI/AN have the second highest rates of chlamydia and gonorrhea among all racial/ethnic groups.
- An estimated 81% of Al/AN living with HIV in 2015 had received a diagnosis. It is important for everyone to know their HIV status. People who do not know they have HIV cannot get the treatment they need and may pass the infection to others without knowing it.
- Stigma, fear, discrimination, and homophobia may place many Al/AN at higher risk for HIV, especially 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 living with HIV.
- Alcohol and substance misuse can impair judgment and lead to behaviors that increase the risk of HIV. Al/AN tend to use alcohol and drugs at a younger age, more often, and in higher amounts, compared with other races/ethnicities.

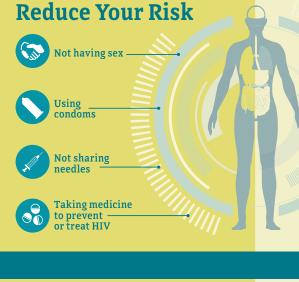
#### How is CDC making a difference?

- 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.
- Working with the Indian Health Service (IHS) to strengthen its support for HIV activities, including HIV testing capacity.
- Promoting testing, prevention, and treatment through campaigns like *Act Against AIDS*.

\* People living with HIV who take HIV medicine as prescribed and get and stay virally suppressed have effectively no risk of sexually transmitting HIV to HIV-negative partners. AT THE END OF 2015, AN ESTIMATED **3,500** AI/AN WERE LIVING WITH HIV.

# FOR EVERY 100 AI/AN LIVING WITH HIV IN 2014:





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

It is usually spread by anal or vaginal sex or sharing needles 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** 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