

HIV/AIDS among Native Americans in Minnesota

Statistics

- In 2005, 1.8% of newly reported AIDS cases were Native Americans/American Indians (1).
- Through 2004, 177 HIV cases (includes cases that have progressed to AIDS) and 103 AIDS cases were reported for American Indians and Alaska Natives (AI/AN) (2).
- As of December 31, 2004, 94 AI/ANs were reported living with HIV/AIDS (2).
- In 2004, the rate of HIV infection among AI/ANs was 2.5 times greater than that of whites (3).

Primary Mode of Transmission

- Among the AI/AN HIV cases reported through 2004, male-to-male sexual contact represented the largest transmission category among males (50%), and heterosexual contact was the leading risk factor among females (44%) (2).

Risk Factors

There are multiple risk factors that contribute to high rates of HIV. Of these, two health risk factors, substance abuse and sexually transmitted diseases, and one general risk factor, poverty, is highlighted, since all three are universally prominent in most AI and AN and communities.

- Sexually transmitted infections increase an individual's risk for HIV infection. In 2004, AI/ANs had the 3rd highest rates of chlamydia and gonorrhea and the 2nd highest rate of syphilis, compared to other racial/ethnic groups (4).
- Substance abuse increases the likelihood of engaging in risk behaviors. Minnesota was among the states with the highest number of AI/AN admissions to substance abuse treatment centers in 2002 (5). In 2002, 2,924 AI/ANs were admitted to substance abuse treatment centers in Minnesota (5).
- Poverty increases an individual's vulnerability to HIV infection. Approximately 29% of AI/ANs in Minnesota live below the poverty level, compared to 8% of the state's general population (6). Consequently, access to healthcare, HIV testing and prevention services, and education is limited.

Surveillance

- Minnesota implemented confidential name-based HIV reporting in October 1985, so it is among the 33 areas whose data is included in the Centers for Disease Control and Prevention's HIV/AIDS Annual Surveillance Report. HIV data from states that implemented confidential name-based HIV reporting after 1999 were excluded from the analysis of HIV/AIDS cases in the most recent report (7).

Ryan White CARE Act

- Among the clients served by Minnesota's AIDS Drug Assistance Program in 2004, 2% were American Indians or Alaska Natives (7). However, in 2001, nearly 5% of all clients receiving other Title II services in Minnesota were Native (7).

Additional Resources

- Minnesota Department of Health. HIV/AIDS Surveillance: <http://www.health.state.mn.us/divs/idepc/diseases/hiv/hivstatistics.html>
- Minnesota Department of Health. STD Statistics and Reports: <http://www.health.state.mn.us/divs/idepc/dtopics/stds/stdstatistics.html>
- National Native American AIDS Prevention Center: www.nnaapc.org; 303-542-2036.

References

1. Kaiser State Health Facts. 50 state Comparisons: Distribution of new AIDS cases by race/ethnicity, 2006. Available at: <http://www.statehealthfacts.kff.org>. Accessed March 16, 2007.
2. Minnesota Department of Health. Native American HIV/AIDS data set, 2004. HIV/AIDS Surveillance System. Received July 2005.
3. Minnesota Department of Health. HIV Surveillance Report, 2004. HIV/AIDS Surveillance System.
4. Minnesota Department of Health. Sexually transmitted disease surveillance report, 2004. STD Surveillance System. Available at: <http://www.health.state.mn.us/divs/idepc/dtopics/stds/stdslides2004.pdf>. Accessed October 28, 2005.
5. Substance Abuse and Mental Health Services Administration. Substance abuse treatment admissions among American Indians and Alaska Natives: 2002. Office of Applied Studies, The DASIS Report, 2005.
6. US Census Bureau. Profile of Selected Economic Characteristics: 2000. Available at: http://factfinder.census.gov/servlet/OTTable?_bm=y&context=qt®=DEC_2000_SFAIAN_DP3:001|01A:&q_r_name=DEC_2000_SFAIAN_DP3&ds_name=DEC_2000_SFAIAN&CONTEXT=qt&tree_id=406&redoLog=true&caller=geoselect&geo_id=04000US27&-search_results=01000US&-format=&-lang=en. Accessed October 28, 2005.
7. NASTAD & Kaiser Family Foundation. National ADAP Monitoring Project: Annual Report, 2005. Available at: <http://www.kff.org/hivaids/upload/National-ADAP-Monitoring-Project-Annual-Report-2005.pdf>. Accessed October 20, 2005.
8. Health Resources and Services Administration. Demographic Characteristics of Clients Receiving Services Funded by Ryan White Care Act Title II Programs 2001 Report. HIV/AIDS Bureau. Available at: http://hab.hrsa.gov/data/hab2001/new_reports.cfm. Accessed October 28, 2005.