

HIV/AIDS among Native Americans in New York

Statistics

- In 2005, Native Americans/American Indians represented 0.3% of all new reported AIDS cases (1).
- Through 2003, 107 AIDS cases have been reported for American Indians and Alaska Natives (AI/AN). Approximately 80% of those cases were reported for AI/AN males (3).
- As of December 31, 2003, 120 AI/ANs were reported living with HIV/AIDS (2).
- Through 2003, 41 AI/ANs with AIDS have died; through 2002, AI/ANs with HIV have died since HIV reporting was implemented in New York in 2000 (2).

Primary Mode of Transmission

- Among the AI/AN AIDS cases reported through 2003, male-to-male sexual contact represented the largest transmission category among males (43%), and heterosexual contact was the leading risk factor for females (45%) (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 (STIs) increase an individual's risk for HIV infection. Currently, STI data for New York is not yet available because a large proportion of the case reports are incomplete. However, New York City's STI data shows that Native females ages 20-29 had disproportionately higher rates of chlamydia and gonorrhea than Native males through 2003 (3).
- Substance abuse increases the likelihood of engaging in risk behaviors. New York is among the states with the highest number of AI/AN admissions to substance abuse treatment centers in 2002 (3). In 2002, 2,664 AI/ANs were admitted to substance abuse treatment centers in New York (4).
- Poverty increases an individual's vulnerability to HIV infection. Approximately 27% of AI/ANs in New York live below the poverty level, compared to 15% of the state's general population (5). Consequently, access to healthcare, HIV testing and prevention services, and education is limited.

Surveillance

- New York implemented confidential name-based HIV reporting in June 2000. The Centers for Disease Control and Prevention (CDC) only includes HIV data from states with mature HIV reporting systems, which are systems that have been in place since 1999. Thus, the CDC annual HIV/AIDS Surveillance Report does not include HIV data from New York (6).
- Because HIV reporting is relatively new in New York, the data does not accurately reflect the current burden of HIV disease among Natives. The data only captures HIV cases from June 2000.

Ryan White CARE Act

- Among the clients served by New York's AIDS Drug Assistance Programs in 2004, only 1% were American Indian or Alaska Native (7). Additionally, less than 1% of all New York clients receiving other Title II services in 2001 were AI/AN (8).

Resources

- New York State Department of Health, HIV/AIDS: <http://www.health.state.ny.us/diseases/aids/index.htm>.
- New York State Department of Health, STDs: <http://www.health.state.ny.us/diseases/communicable/std/index.htm>.
- 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. New York State Department of Health. American Indians/Alaska Natives HIV/AIDS data set, 2003. Bureau of HIV/AIDS Epidemiology. Received August 2005.
3. New York City Department of Health and Hygiene. American Indians/Alaska Natives STD data set, 2003. Sexually Transmitted Diseases. Received 2004.
4. 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.
5. US Census Bureau. Profile of Selected Economic Characteristics: 2000. Available at: http://factfinder.census.gov/servlet/QTable?_bm=y&context=qt®=DEC_2000_SFAIAN_DP3:001|01A&qz_name=DEC_2000_SFAIAN_DP3&-ds_name=DEC_2000_SFAIAN&-CONTEXT=qt&-tree_id=406&geo_id=04000US02&-search_results=01000US&-format=&-lang=en. Accessed October 28, 2005.
6. Centers for Disease Control and Prevention. HIV/AIDS Surveillance Report, 2003 (Vol. 15). Atlanta: US Department of Health and Human Services, Centers for Disease Control and Prevention; 2004.
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.