

HIV/AIDS among Native Americans in North Carolina

Statistics

- In 2005, Native Americans/American Indians represented 1.3% of all new AIDS reported cases (1).
- Through 2004, 106 HIV cases and 120 AIDS cases have been reported for American Indians and Alaska Natives (AI/AN) (1).
- As of December 31, 2004, 166 AI/ANs were reported living with HIV/AIDS (2).
- Through 2004, 12 AI/ANs with HIV and 48 AI/ANs with AIDS have died (2).

Primary Mode of Transmission

- Among the AI/AN HIV/AIDS cases reported through 2004, male-to-male sexual contact and injection drug use represented the largest transmission categories among males, and heterosexual contact was the leading risk factor among females. A large proportion of the AI/AN HIV/AIDS cases were ages 20-39 (68%) (2).

Additional 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.

- In 2004, American Indians and Alaska Natives had the 2nd highest rates of gonorrhea and syphilis and the 3rd highest rate of chlamydia in North Carolina. The rate of syphilis for AI/ANs was more than 18 times greater than that of whites. AI/AN females have considerably higher rates of chlamydia and gonorrhea than that of AI/AN males (3).
- Substance abuse increases the likelihood of engaging in risk behaviors. Among those receiving treatment for substance abuse in North Carolina, AI/ANs represented 2% of all admissions in 2001 (4).
- Poverty increases an individual's vulnerability to HIV infection. Approximately 21% of AI/ANs in North Carolina live below the poverty level, compared to 12% of the state's general population (5). Consequently, access to healthcare, HIV testing and prevention services, and education is limited.

Surveillance

- North Carolina is among the 33 areas whose data is included in the Centers for Disease Control and Prevention's HIV/AIDS Annual Surveillance Report, because the state has been reporting HIV by name since February 1990. HIV data from states that implemented confidential name-based HIV reporting after 1999 are excluded from the analysis of HIV/AIDS cases (6).

Ryan White Care Act

- Although Natives have disproportionately high rates of HIV disease in North Carolina, they only represented 1% of all AIDS Drug Assistance Program clients in 2004 (7). Furthermore, only 1% of clients receiving other Title II services were AI/AN in 2001 (8).

Additional Resources

- North Carolina Department of Health and Human Services, HIV/STD Prevention and Care <http://www.epi.state.nc.us/epi/hiv/>.
- National Native American AIDS Prevention Center: www.nnaapc.org; 303-542-2036.

References

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