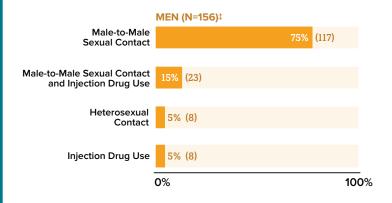
HIV and American Indian/ Alaska Native People

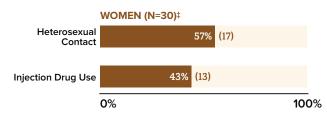


Of the **37,968 NEW HIV DIAGNOSES** in the US and dependent areas* in 2018, less than 1% (186) were among American Indian/Alaska Native (AI/AN) people.

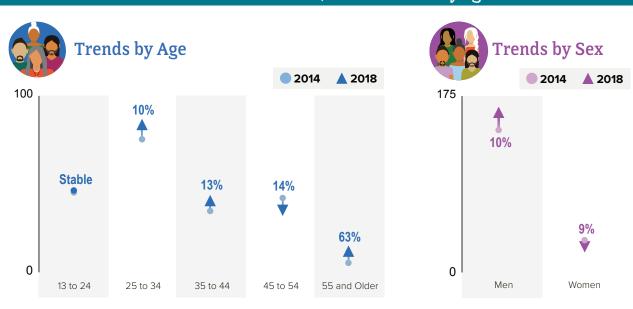
Most new HIV diagnoses were among AI/AN gay and bisexual men.







Though HIV diagnoses increased 6% (from 175 to 186) among AI/AN people overall from 2014 to 2018, trends varied by age and sex.**



- * American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, the Republic of Palau, and the US Virgin Islands.
- [†] The term male-to-male sexual contact is used in CDC surveillance systems. It indicates a behavior that transmits HIV infection, not how people self-identify in terms of their sexuality. This fact sheet uses the term gay and bisexual men to represent gay, bisexual, and other men who reported male-to-male sexual contact.
- Based on sex assigned at birth and includes transgender people.
- * Changes in populations with fewer HIV diagnoses can lead to a large percentage increase or decrease



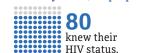
Centers for Disease Control and Prevention National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention

AI/AN people who don't know they have HIV cannot get the care and treatment they need to stay healthy.



At the end of 2018, an estimated 1,173,900 PEOPLE had HIV. Of those, 3,900 were AI/AN people.^{††}

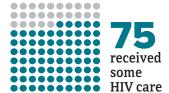






It is important for AI/AN people with HIV to know their status so they can take medicine to treat HIV. Taking HIV medicine every day can make the viral load undetectable. People who get and keep an undetectable viral load (or remain virally suppressed) can stay healthy for many years and have effectively no risk of transmitting HIV to their sex partners.

Compared to all people with diagnosed HIV, Al/AN people have about the same viral suppression rates. More work is needed to increase these rates. For every 100 AI/AN people with diagnosed HIV in 2018: #







For comparison, for every 100 people overall with diagnosed HIV. 76 received some care, 58 were retained in care, and 65 were virally suppressed.

There are several challenges that place AI/AN people at higher risk for HIV.

Unaware of HIV Status



Some AI/AN people are unaware of 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



AI/AN gay and bisexual men may face culturally based stigma and confidentiality concerns that could limit opportunities for education and HIV testing, especially among those who live in rural communities or on reservations.

Difficult to Create Prevention Programs



With hundreds of federally recognized tribes and many different languages, creating culturally appropriate prevention programs for each group can be challenging.

Alcohol and Substance Misuse



Many Al/AN communities have high rates of alcohol and other substance misuse. Alcohol and substance misuse can impair judgment and lead to behaviors that increase the risk of HIV.

How is CDC making a difference for AI/AN people?



Collecting and analyzing data and monitoring HIV trends.



Supporting community organizations that increase access to HIV testing and care.



Conducting prevention research and providing guidance to those working in HIV prevention.



Promoting testing, prevention, and treatment through the Let's Stop HIV Together campaign.



Supporting health departments and communitybased organizations by funding HIV prevention work and providing technical assistance.



Strengthening successful HIV prevention programs and supporting new efforts funded through the Ending the HIV Epidemic initiative.

For more information visit www.cdc.gov/hiv

⁺⁺ In 50 states and the District of Columbia.

[#] In 41 states and the District of Columbia.

For more information about HIV surveillance data and how it is used, read the "Technical Notes" in the HIV surveillance reports at www.cdc.gov/hiv/library/reports/hiv-surveillance.html.