The most recent national data\* suggests that rates of HIV have increased among American Indians and Alaska Natives. Sadly, they have among the lowest rates of survival after diagnosis of HIV infection and classification as AIDS. This is a result of not being tested for early detection and intervention.

It’s important to know that the national data reported by the U.S. Centers for Disease Control and Prevention does not include all Native HIV data. There are different reporting practices for different tribes and their health services. For this reason, it is likely that the actual infection rates are even higher and survival rates are even lower than reported.

Early HIV diagnosis helps people stay healthy and live longer. It also helps prevent the spread of HIV to others in our community. If you are HIV negative and sexually active, consider PrEP.

Health care providers can help improve community health by:
- Talking to patients about HIV.
- Offering testing.
- Expanding access to testing.
- Educating about PrEP.
- Being proactive in HIV treatment and prevention.

What We Know

From 2009 through 2013, the CDC’s annual estimated number of diagnoses of HIV infection for American Indians and Alaska Natives increased. For most other racial and ethnic groups the rate of new infections decreased or did not change (rates also increased for Asians).

- 9.4 rate of infection for American Indians/Alaska Natives
- 12.7 rate for Native Hawaiians/other Pacific Islanders

Progression from HIV infection to AIDS has stabilized or even decreased from 2009 to 2013 for Native communities. Early detection helps!

When There is Exposure: PrEP and PEP

Help prevent further infection. Pre-Exposure Prophylaxis (PrEP) can help reduce HIV transmission among people who are HIV negative but may have an ongoing substantial risk of HIV infection. Post-Exposure Prophylaxis (PEP) can help those who may have a single exposure to HIV.