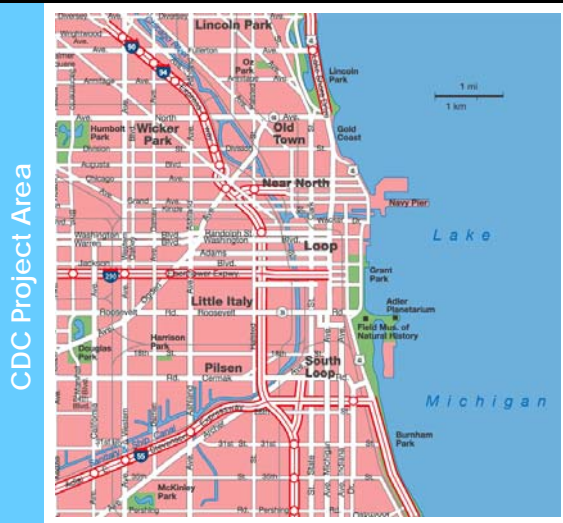




STDs in American Indians and Alaska Natives CHICAGO

Chicago STD Program Website:
<http://egov.cityofchicago.org/city/webportal/>



Metro Population & AI/AN, 2000

Population Group	Male	Female	Total	%
AI/AN	10,136	10,762	20,898	0.7
City	1,405,107	1,490,909	2,896,016	100.0

AI/AN population data includes those with two or more races in combination with AI/AN.
 Source: US Census Bureau

STDs in the AI/AN Population

National STD rates among AI/ANs are 2 to 6 times higher than rates for whites. In some states with AI/AN populations over 20,000, gonorrhea and syphilis rates are twice as high as among other ethnic groups. Below find Chicago-specific STD rates and percentages for the AI/AN population.

Chicago Chlamydia New Cases, 2005

Population Group	Male	Female	Total	%	Rate per 100,000
AI/AN	7	28	35	0.2	608.0
City	6,339	16,514	22,853	100.0	804.0

Source: CDC Data Request. Rate calculated on American Indian alone affiliation.

Chicago Gonorrhea New Cases, 2005

Population Group	Male	Female	Total	%	Rate per 100,000
AI/AN	6	5	11	0.1	191.1
City	4,709	5,179	9,888	100.0	347.9

Source: CDC Data Request. Rate calculated on American Indian alone affiliation.

Chicago P&S Syphilis New Cases, 2005

Population Group	Male	Female	Total	%	Rate per 100,000
AI/AN	0	0	0	0.0	0.0
City	380	38	418	100.0	14.7

Source: CDC Data Request. Rate calculated on American Indian alone affiliation.

*The term AI/AN is used in the text to refer to the American Indian and Alaska Native population

This Fact Sheet was developed by JSI Research & Training Institute (303-262-4300, www.jsi.com) in conjunction with the Northern Plains Tribal Epidemiology Center (605-721-1922, www.aatchb.org/epi)

Chicago City HIV New Cases, 2004

Population Group	Male	%	Female	%	Total	%	Rate per 100,000
AI/AN	n/a*	n/a	n/a	n/a	n/a	n/a	n/a
City	930	100.0	303	100.0	1,233	100.0	43.1

Source: Chicago STD/HIV/AIDS Surveillance Report, Winter 2006. Rate calculated on American Indian alone affiliation.

Chicago Metro AIDS New Cases, 2004

Population Group	Male	%	Female	%	Total	%	Rate per 100,000
AI/AN	2	0.2	1	0.3	3	0.2	n/a
City	1,154	100.0	340	100.0	1,494	100.0	52.2

Source: HIV/AIDS Surveillance Supplemental Report, Volume 12, Number 2. Rate calculated on American Indian alone affiliation.

Chicago Hepatitis New Cases

Data is not available at this time

Select Chicago Demographics

Births

Metro 2002	Number of Births	%	% of Births to Mothers <19	% w/ <12 yrs education	% Unmarried Mothers(2000)
AI/AN	50	0.1	4.0	n/a	50.7
City	47,967	100.0	9.1	n/a	51.4

Source: CDC 2002 Vital Statistic of the United States Series, Vital Statistics Illinois-2001, American Indian Health Services Need Assessment Study: Chicago Metropolitan Region (2004) Loyola University, Chicago

Economics

Metro 2005	Median Household Income (USD)	% Below Poverty Level (2000)
AI/AN	37,198	18.0
City	54,709	10.6

Source: US Census Bureau, American Indian Health Services Need Assessment Study: Chicago Metropolitan Region (2004) Loyola University, Chicago

Education

City 2006-2007	Enrollment % (K-12)	Actual Enrollment (K-12)	Dropout Rate % (2004-2005)
AI/AN	0.2	854	n/a
City	100.0	426,812	12.3

Source: Illinois State Board of Education, Chicago Public Schools Office of Research, Evaluation, and Accounting

Resources/ Potential Partners/ Special Issues

Urban Health Programs: American Indian Health Service of Chicago, Inc. 4081 N. Broadway, Chicago, IL 60613, (773)-883-9100, www.aihschicago.org; St. Augustine's American Indian Drop-In Center (Bo-Sho-Ne-Gee) 4420 N. Broadway, Chicago IL, 60640, (773) 878-1066; American Indian Center of Chicago, 1630 W. Wilson Ave., Chicago, IL 60640, (773) 275-5871, <http://www.aic-chicago.org/>.

IHS Health Programs: Bemidji Area Indian Health Service, 522 Minnesota Avenue, NW, Room 117, Bemidji, MN 56601, (218) 444-0471.

Inter-Tribal Health Programs: American Indian Health Service of Chicago, Inc. 4081 N. Broadway, Chicago, IL 60613, (773)-883-9100, www.aihschicago.org.

Indian Health Boards: Oneida Tribe of Wisconsin, Bemidji Area Representative, PO Box 365, Oneida, WI 54155, (920) 869-2711; National Indian Health Board, 101 Constitution Ave. N.W., Suite 8-B02, Washington, DC 20001, (202) 742-4262, <http://www.nihb.org>.

IHS Tribal Epidemiology Centers: USET Tribal Epidemiology Center United South and Eastern Tribes, Inc., 711 Stewarts Ferry Pike, Suite 100 Nashville, TN 37214. (615) 872.7900, <http://www.usetinc.org/defaultpage.cfm?ID=41>; National Epi Program, Indian Health Service, 5300 Homestead Blvd, NE, Albuquerque, NM 87110, (505) 248-4132.

City, County, State Health Native American Liaison: Center for Minority Health Services, Illinois Department of Public Health, 535 West Jefferson, 5th FL, Springfield, IL 62761, (217) 782-4977.

Special Issues:

- AI/ANs are often misclassified in race/ethnicity STD data. This misclassification increases with lower percentage of AI/AN ancestry.
- One needs to also consider the common mobility/migration of AI/ANs from reservation setting to other areas and back again.
- Like many other tight-knit communities, confidentiality can be difficult to maintain in AI/AN communities, especially in rural areas. This can be a barrier to testing, discussing sexual practices, obtaining treatment, or buying condoms in local stores.
- AI/AN prevention services are severely underfunded, and those that exist may not reach those at most risk.
- Urban American Indians are affiliated with multiple Indian Nations and/or tribes resulting in potentially different cultural implications for prevention planning.

* data not available at this time