



# STDs in American Indians and Alaska Natives MISSISSIPPI

## State Population & AI/AN, 2000

Population Group	Male	Female	Total	%
AI/AN	1,443	1,601	3,044	0.2
State	657,000	730,351	1,387,351	100.0

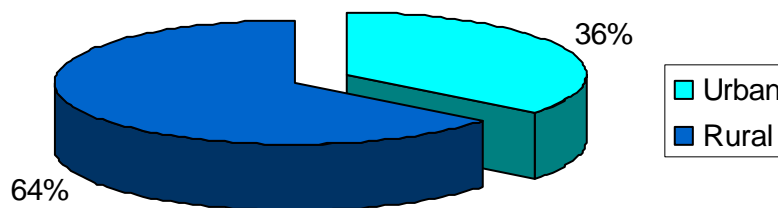
\* American Indian population figures based on affiliation with American Indian alone and in combination with other races.

Mississippi STD Program Website: <http://www.msdh.state.ms.us/index.htm>

CDC Project Area



## Mississippi Urban and Rural AI/AN Populations, 2000



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 Mississippi- specific STD rates and percentages for the AI/AN population.

### Mississippi Chlamydia New Cases, 2005

Population Group	Male	Female	Total	%	Rate per 100,000
AI/AN	23	121	144	0.6	1,118.9
State	4,584	16,684	21,268	100.0	731.2

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

### Mississippi Gonorrhea New Cases, 2005

Population Group	Male	Female	Total	%	Rate per 100,000
AI/AN	12	24	36	0.5	279.7
State	2,937	4,234	7,171	100.0	246.5

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

### Mississippi P&S Syphilis New Cases, 2005

Population Group	Male	Female	Total	%	Rate per 100,000
AI/AN	0	0	0	0.0	0.0
State	37	12	49	100.0	1.7

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](http://www.jsi.com)) in conjunction with the Northern Plains Tribal Epidemiology Center (605-721-1922, [www.aatchb.org/epi](http://www.aatchb.org/epi))

## Mississippi HIV New Cases

*Data is not available at this time*

## Mississippi AIDS New Cases, 2004

Population Group	Male	%	Female	%	Total	%	Rate per 100,000
AI/AN	0	0.0	1	0.7	1	0.2	16.1
State	334	100.0	145	100.0	479	100.0	20.2

*Source: CDC HIV/AIDS Surveillance Supplemental Report, AIDS Cases by Geographical Area of Residence and Metropolitan Statistical Area of Residence 2004. Rate calculated on American Indian alone affiliation.*

## Mississippi Hepatitis New Cases

*Data is not available at this time*

### Select Mississippi Demographics

#### Births

2005	Number of Births	%	% of Births to Mothers <19	% w/ <12 yrs education (2004)	% Unmarried Mothers
AI/AN	3,574	8.3	15.2	43.8	0.4
State	43,321	100.0	9.6	23.8	45.0

*Source: Mississippi Department of Health, National Vital Statistics System*

#### Economics

2005	Median Household Income (USD)	% Below Poverty Level
AI/AN	29,469	n/a*
State	32,938	4.7

*Source: US Census Bureau*

#### Education

2004-2005	Enrollment % (K-12)	Actual Enrollment (K-12)	Dropout Rate % (2000-2001)
AI/AN	0.2	852	3.9
State	100.0	495,376	4.6

*Source: National Center for Education Statistics*

### Resources/ Potential Partners/ Special Issues

**Mississippi Tribes:** There is one federally-recognized tribe in Mississippi: the Mississippi Band of Choctaw Indians, 101 Industrial Road, Choctaw, MS 39350 (601) 656-5251, <http://www.choctaw.org/>. The Grand Village Natchez Indian Tribe is a non-recognized tribe. (400 Jefferson Davis Boulevard, Natchez, MS 39120, (601) 446-6502, [www.mdah.state.ms.us/hprop/gvni.html](http://www.mdah.state.ms.us/hprop/gvni.html).)

**Tribal Health Programs:** Choctaw Tribal Health, 101 Industrial Road, Choctaw, MS 39350, (601) 389-6200.

**Urban Health Programs:** Not available.

**IHS Health Programs:** Nashville Area Indian Health Service, 711 Stewarts Ferry Pike, Nashville, TN 37214-2634, (615) 467-1500.

**Inter-Tribal Health Programs:** Not available.

**Indian Health Boards:** United South & Eastern Tribes, 711 Stewarts Ferry Pike, Nashville, TN 37214, (615) 872-7900, <http://usetinc.org/>.

**IHS Tribal Epidemiology Centers:** United South & Eastern Tribes, 711 Stewarts Ferry Pike, Nashville, TN 37214, (615) 872-7900, <http://usetinc.org/>.

**Tribal Colleges:** Not available.

**State Health Native American Liaison:** Office of Health Disparities Elimination, Mississippi Department of Health, 570 East Woodrow Wilson Drive, Jackson, MS 39216, 601-576-7400

**Special Issues:**

- Tribal Health Departments are not required to report STDs, thus creating an undercount in the statistics.
- 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.

*\* data not available at this time*