



STDs in American Indians and Alaska Natives NORTH CAROLINA

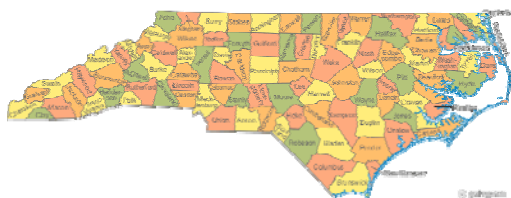
State Population & AI/AN, 2000

Population Group	Male	Female	Total	%
AI/AN	64,551	67,185	131,736	1.6
State	3,942,695	4,106,618	8,049,313	100.0

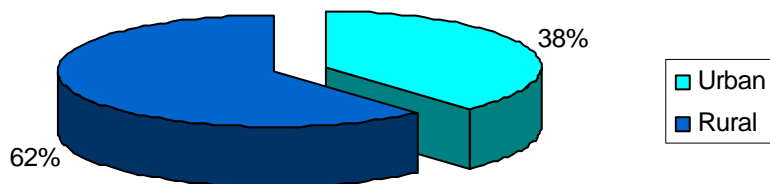
* American Indian population figures based on affiliation with American Indian alone and in combination with other races.

North Carolina STD Program Website: <http://www.epi.state.nc.us/epi/hiv/surveillance.html>

CDC Project Area



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

North Carolina Chlamydia New Cases, 2005

Population Group	Male	Female	Total	%	Rate per 100,000
AI/AN	41	424	465	1.5	411.9
State	5,481	25,702	31,183	100.0	359.1

Source: North Carolina Department of Health and Human Services. Rate calculated on American Indian alone affiliation.

North Carolina Gonorrhea New Cases, 2005

Population Group	Male	Female	Total	%	Rate per 100,000
AI/AN	77	121	198	1.3	175.4
State	7,529	7,546	15,075	100.0	173.6

Source: North Carolina Department of Health and Human Services. Rate calculated on American Indian alone affiliation.

North Carolina P&S Syphilis New Cases, 2005

Population Group	Male	Female	Total	%	Rate per 100,000
AI/AN	0	3	3	1.1	2.8
State	216	58	274	100.0	3.2

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)

North Carolina HIV and HIV with AIDS New Cases, 2005

Population Group	Male	%	Female	%	Total	%	Rate per 100,000
AI/AN	12	0.9	10	2.0	22	1.2	20.6
State	1,308	100.0	498	100.0	1,806	100.0	21.1

Source: North Carolina Profiles for HIV/STD Prevention and Care Planning, 2006. Rate calculated on American Indian alone affiliation.

North Carolina Hepatitis New Cases, 2005

Data is not available at this time

Select North Carolina Demographics

Births

2004	Number of Births	%	% of Births to Mothers <19	% w/ <12 yrs education	% Unmarried Mothers
AI/AN	1,577	1.3	18.4	31.0	56.9
State	119,847	100.0	11.6	22.8	36.9

Source: CDC National Vital Statistics System

Economics

2005	Median Household Income (USD)	% Below Poverty Level
AI/AN	30,780	18.0
State	40,729	11.7

Source: US Census Bureau

Education

2005-2006	Enrollment % (K-12)	Actual Enrollment (K-12)	Dropout Rate %
AI/AN	0.7	10,027	8.37
State	100.0	1,378,306	5.04

Source: Public Schools for North Carolina, Data and Statistics

Resources/ Potential Partners/ Special Issues

North Carolina Tribes: For a listing and contact information of the tribes in North Carolina please see: <http://www.doa.state.nc.us/cia/tribes.pdf>.

Tribal Health Programs: Cherokee Co Health Clinic, Hospital Road, Cherokee, NC 28718, (828) 497-7460; Cherokee Indian Hospital Authority, Hospital Road, Cherokee, NC 28718, (828) 497-9163; CIHA Murphy Health Clinic, West Highway 129, 2 miles 1st road on right ½ mile, Andrew, NC 28719; Unity Healing Center, PO Box C201, Cherokee, NC 28719, (800) 322-6166.

Urban Health Programs: None available.

IHS Health Programs: Nashville Area Indian Health Service, 711 Stewarts Ferry Pike, Nashville, TN 37214, (615) 467-1538.

Inter-Tribal Health Programs: None 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: None available.

State Health Native American Liaison: North Carolina Office of Minority Health and Health Disparities, Barbara Pullen-Smith, Department of Health and Human Services, 1931 Mail Service Center, Raleigh, NC 27699, (919) 431-1613.

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.