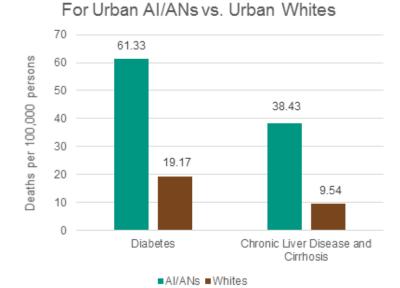
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The American Journal of Public Health recently published an article titled "Causes and Disparities in Death Rates Among Urban American Indian and Alaska Native Populations, 1999-2009."1 The Urban Indian Health Institute's past Scientific Director, Leslie Phillips PhD, coauthored the article along with researchers at the Centers for Disease Control and Prevention (CDC). While there have been several studies to demonstrate disparities between urban American Indian and Alaska Native (AI/AN) populations and urban non-AI/AN populations, this is likely an underestimate of the true severity of the situation, in large part due to racial misclassification.^{1,2}

Among urban Al/ANs, the top five leading causes of death were heart disease, followed by

cancer and unintentional injury, diabetes, and finally chronic liver disease and cirrhosis.1 All five causes were significantly higher among urban Al/ANs in comparison to their White counterparts. For example, urban Al/ANs died from diabetes and chronic liver disease and cirrhosis at three and four times the rate of urban Whites, respectively.2 And while urban Al/AN individuals' access to some health care resources that decrease mortality may be better than for rural AI/ANs, it is still poorer access than their White counterparts. Moreover, once the data is stratified further by age group and sex, the inequity between urban AI/ANs



Mortality Rates from Diabetes and

Chronic Liver Disease and Cirrhosis

and urban Whites substantially increases, especially in men and women less than 50 years of age.

The primary causes of death were similar among urban and rural AI/AN persons; however, lower death rates for most conditions existed among urban AI/AN populations. Furthermore, the authors suggested that by providing information on the leading causes of death, we could identify areas of focus in order to further collaborate with various individuals and organizations to develop and implement culturally tailored programs and interventions.¹

The full report is available on the American Journal of Public Health website.1

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