



American Indian Health Disparities In New Mexico
From The 2009 Racial and Ethnic
Health Disparities Report Card

Acknowledgements

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Major Sources of Data

New Mexico Data

Birth System:

Bureau of Vital Records and Health Statistics, Epidemiology and Response Division

Death System:

Bureau of Vital Records and Health Statistics, Epidemiology and Response Division

Behavioral Risk Factor Surveillance System (BRFSS):

Survey Unit, Epidemiology and Response Division

Youth Risk and Resiliency Survey (YRRS):

Survey Unit, Epidemiology and Response Division and Public Education Department

Infectious Disease Surveillance:

Bureau of Infectious Disease Epidemiology, Epidemiology and Response Division and Sexually-Transmitted Disease Program, Public Health Division

United States Data

Centers for Disease Control and Prevention (CDC), National Center for HIVAIDS, Viral Hepatitis, STD and TB Prevention

Births: CDC, National Center for Health Statistics, National Vital Statistics System: http://www.cdc.gov/nchs/births.htm

Deaths: CDC, National Center for Health Statistics, National Vital Statistics System; http://www.cdc.gov/nchs/deaths.htm; http://wonder.cdc.gov; http://www.cdc.gov/injury/wisqars/index.html

BRFSS: http://apps.nccd.cdc.gov/brfss/index.asp

YRBS: http://www.cdc.gov/HealthyYouth/yrbs/index.htm

American Indian Health Disparities In New Mexico

Health Disparities are the differences in health status and the impact of diseases on different racial and ethnic populations. In order to create awareness of health disparities and support efforts to reduce them, the Department of Health has produced the Racial and Ethnic Health Disparities Report Card. (See http://www.nmhealth.org/dpp/dppr.htm).

American Indians in New Mexico bear a disproportionate share of poor health status and disease. Of the 20 indicators in the 2009 Racial and Ethnic Health Disparities Report Card, American Indians have the highest (worst) rates on 7 indicators. Consequently, the Department has published for two years a special edition of the report card that focuses on American Indian health in the hope that public and private partners will join us in identifying the factors that contribute to the disproportionate burden of disease experienced by American Indians in New Mexico and help us to identify successful strategies to reduce this burden.

On pages 3-9 of this report, is information on 7 indicators on which American Indians consistently have the highest (worst) disparities. On pages 10-11 is information on the 2 indicators for which American Indians have the lowest (best) rates in New Mexico.

The indicators for which American Indians have the highest disparities, include indicators relating to getting a healthy start in life, practicing healthy behaviors and avoiding violence. Indicators for which the rates for American Indians are two or more times higher than the rates of the group with the best rates are indicated by an asterisk (*):

- Deaths related to alcohol*
- Deaths due to diabetes*
- Late or no prenatal care*
- Motor vehicle deaths*
- Youth obesity*
- Youth suicide*
- Pneumonia and influenza deaths

The indicators for which American Indians have the lowest (best) rates relate to chronic conditions and risky behaviors:

- Receiving recommended services for individuals with diabetes
- · Drug induced deaths

The following pages contain the 9 indicators listed above. Each indictor will have the five major population groups in New Mexico listed, a grade for how effective the health system is in eliminating the disparity, the rate for each group, and a disparity ratio indicating how each population group compares to the group with the best rate (the reference group). Additionally, accompanying each table is a graph depicting the trends by population group and the trend lines for New Mexico and the United States. Following the table and graph are some bullet points describing the ranking of American Indians on the indicators.

Understanding the Report Card

	LEGEND			
Health System Effectiveness	Disparity Ratio	Meaning/Interpretation		
Α	1.0 - 1.4	Little or no disparity.		
В	1.5 - 1.9	A disparity exists and should be monitored and may require intervention.		
С	2.0 - 2.4	The disparity requires intervention.		
D	2.5 -2.9	Major interventions are needed.		
F	>=3.0	Urgent interventions are needed.		
Reference Group		The group with the best rate (and 20 or more cases). It is the group to which all other groups are compared and therefore will not receive a rating.		
Not Enough Data		Groups with less than 20 events during time period. Disparity ratios and ratings are not calculated for populations with less than 20 events.		

Health System Effectiveness

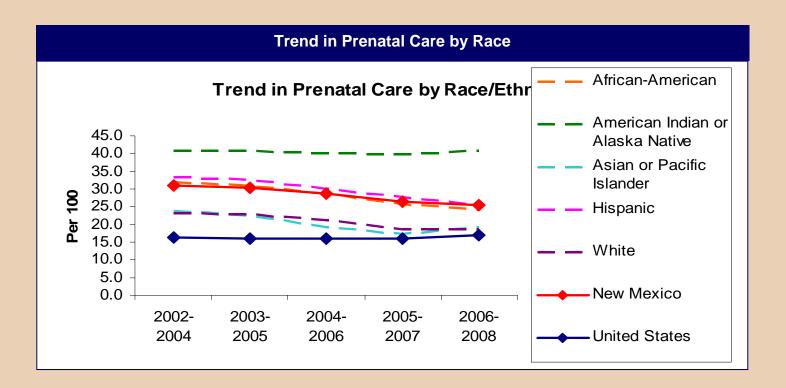
The Health System Effectiveness column reflects how well the health system is doing in eliminating the differences between populations by comparing each group to the population with the best rate. The reference group in this column will indicate that it is the population to which all others are compared. Please note that ratings are only related to the differences among populations (disparity ratio) and are not an indication of how well or poorly New Mexico, overall, is doing in relation to the indicators.

Indicators For Which American Indians Have the Worst Rates

Prenatal Care - Late or No Care (Care beginning after the 3rd month of pregnancy or no care during pregnancy)

Race/Ethnicity	Health System Effectiveness	2006-2008 Rate (per 100)	Disparity Ratio
African American	Α	24.1	1.3
American Indian	С	40.9	2.2
Asian/Pacific Islanders	Α	19.1	1.0
Hispanic	Α	25.6	1.4
White	Reference Group	18.7	1.0

- The New Mexico rate of women receiving late or no care is much higher than the national rate.
- American Indian women consistently have the highest rate.



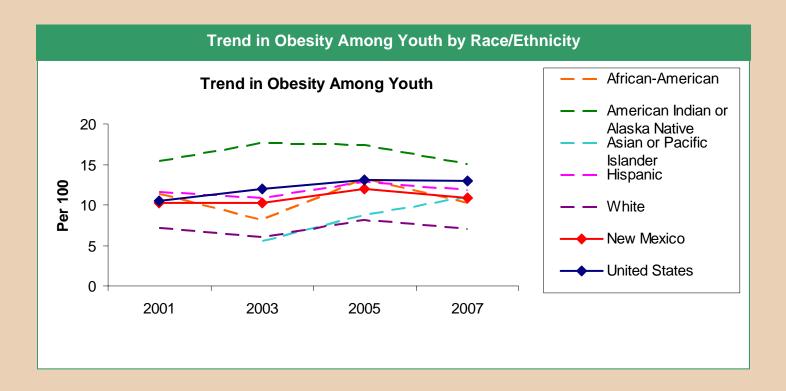
	New Mexico 2006-2008	United States 2006
Total Percent of Births with Late or No Prenatal Care	25.4	16.8

Obesity Among Youth

Race/Ethnicity	Health System Effectiveness	2007 Rate (per 100)	Disparity Ratio
African American	В	10.3	1.5
American Indian	С	15.1	2.2
Asian/Pacific Islanders	В	11.0	1.6
Hispanic	В	11.9	1.7
White	Reference Group	7.0	1.0

Note:

• Although the New Mexico rate remains below the United States rate, American Indian youth have the highest rate of being overweight in New Mexico and consistently have a rate higher than the rates for New Mexico and the United States.



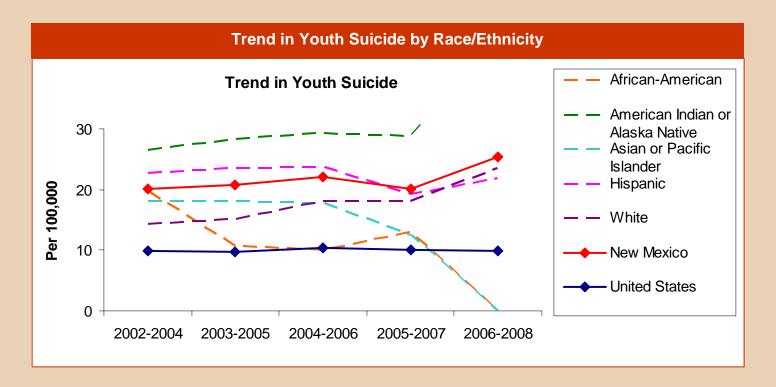
Rate Per 100 Obesity Among Youth by Gender						
Population Total Female Male						
New Mexico 2007	10.9	6.0	15.5			
United States 2007	United States 2007 13.0 9.6 16.3					

Youth Suicide

Race/Ethnicity	Health System Effectiveness	2006-2008 Rate (per 100,000)	Disparity Ratio
African American	Not Enough Data	* 38.2	Not Enough Data
American Indian	С	43.6	2.0
Asian/Pacific Islanders	Not Enough Data	* 5.8	Not Enough Data
Hispanic	Reference Group	22.0	1.1
White	Α	23.5	1.0

^{*} Rate based on less than 20 events and may fluctuate greatly from year to year.

- The New Mexico rate is more than double the United States rate.
- American Indians continue to have the highest rate; However, all groups except Asians/Pacific Islanders have rates above the national rate.



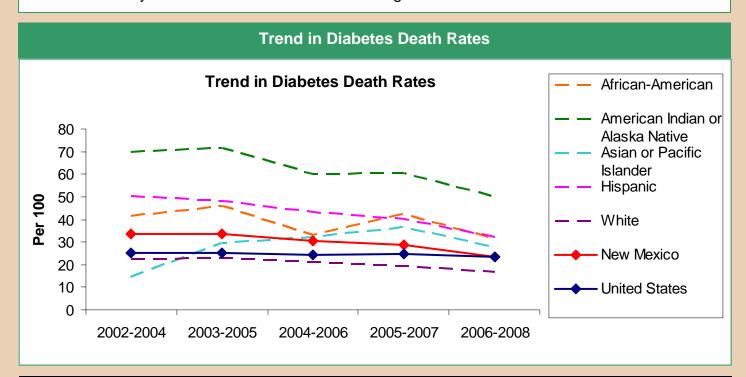
Youth Suicide Rate Per 100,000 by Gender				
Population Total Female Male				
New Mexico 2006-2008	25.4	6.5*	44.0	
United States 2005	9.9	3.2	16.2	

Diabetes Deaths

Race/Ethnicity	Health System Effectiveness	2006-2008 Rate (per 100,000)	Disparity Ratio
African American	В	31.4	1.9
American Indian	F	49.9	3.0
Asian/Pacific Islanders	Not Enough Data	* 27.9	Not Enough Data
Hispanic	В	32.4	1.9
White	Reference Group	16.8	1.0

^{*} Rate based on less than 20 events and may fluctuate greatly from year to year.

- New Mexico's diabetes death rate is similar to that of the United States.
- American Indians have the highest death rate over 3 times that of whites and 50% higher than that of Hispanics. The high death rate is particularly perplexing since American Indians are more likely to receive recommended screenings.



Diabetes Death Rates Per 100,000 by Gender				
Population Total Female Male				
New Mexico 2006-2008	23.4	24.8	22.1	
United States 2006	23.3	27.4	20.1	

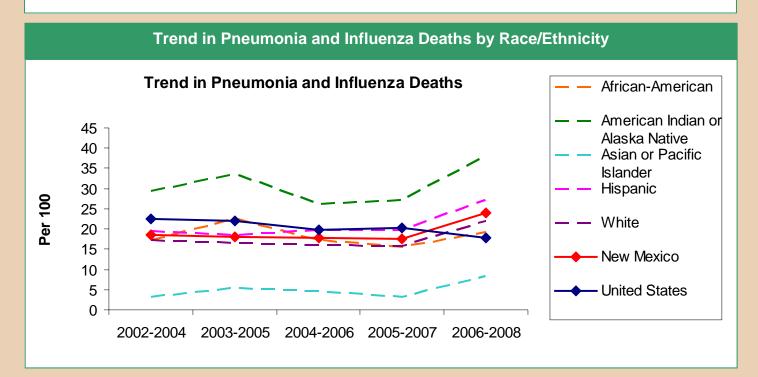
Pneumonia and Influenza Deaths

Race/Ethnicity	Health System Effectiveness	2006-2008 Rate (per 100,000)	Disparity Ratio
African American	Not Enough Data	* 19.4	Not Enough Data
American Indian	В	38.2	1.7
Asian/Pacific Islanders	Not Enough Data	* 8.3	Not Enough Data
Hispanic	Α	27.3	1.2
White	Reference Group	22.0	1.0

^{*} Rate based on less than 20 events and may fluctuate greatly from year.

Note:

• American Indians consistently have the highest rate of deaths due to pneumonia and influenza.



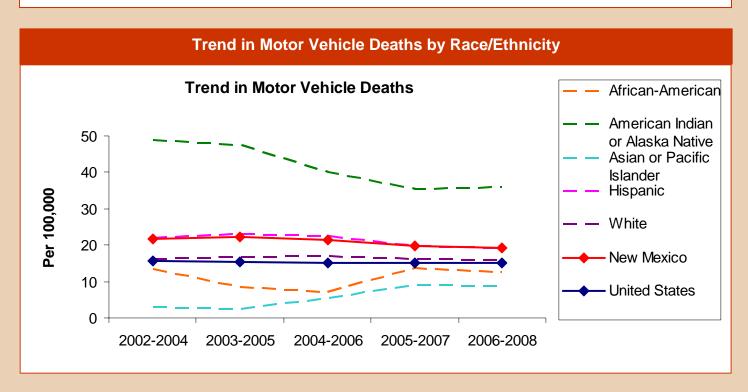
Pneumonia and Influenza Deaths Per 100,000 by Gender				
Population Total Female Male				
New Mexico 2006-2008	24.0	23.1	24.7	
United States 2005	17.8	15.5	21.2	

Motor Vehicle Deaths

Race/Ethnicity	Health System Effectiveness	2006-2008 Rate (per 100,000)	Disparity Ratio
African American	Not Enough Data	* 12.6	Not Enough Data
American Indian	С	36.1	2.3
Asian/Pacific Islanders	Not Enough Data	* 8.9	Not Enough Data
Hispanic	Α	19.3	1.2
White	Reference Group	15.9	1.0

^{*} Rate based on less than 20 events and may fluctuate greatly from year to year.

- Motor vehicle deaths include deaths to pedestrians struck by motor vehicles.
- The New Mexico rate is higher than the national rate.
- Although declining, the motor vehicle death rate for American Indians remains more than twice the rate for Whites.



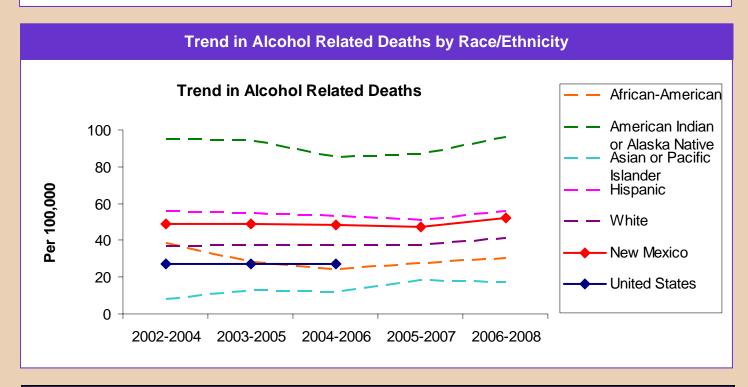
Motor Vehicle Death Rates Per 100,000 by Gender				
Population	Total	Female	Male	
New Mexico 2006-2008	19.9	11.6	26.8	
United States 20056	15.0	8.8	21.4	

Alcohol Related Deaths

Race/Ethnicity	Health System Effectiveness	2006-2008 Rate (per 100,000)	Disparity Ratio
African American	Reference Group	20.6	1.0
American Indian	F	96.1	3.1
Asian/Pacific Islanders	Not Enough Data	* 17.5	Not Enough Data
Hispanic	В	56.1	1.9
White	Α	41.5	1.4

^{*} Rate based on less than 20 events and may fluctuate greatly from year to year.

- The New Mexico rate for alcohol-related deaths is 70% higher than the national rate.
- American Indians continue to have the highest alcohol-related death rate in New Mexico-over 70% higher than that of the group with the next highest rates-Hispanics.



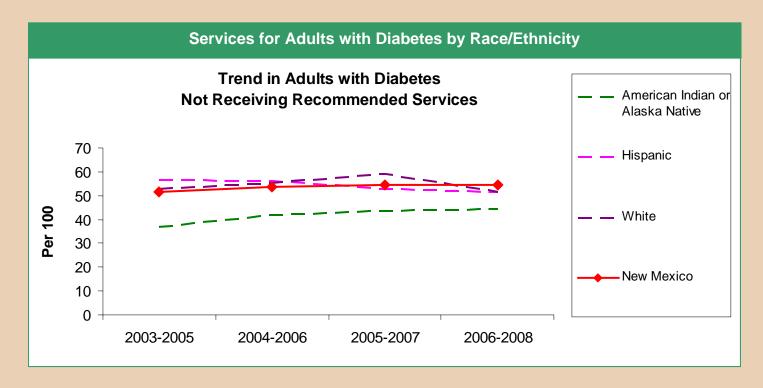
Alcohol Related Death Rates by Gender				
Population	Total	Female	Male	
New Mexico 2006-2008	52.0	30.9	74.3	
United States 2004 (latest available data)	27.3	14.3	41.5	

Adults with Diabetes Not Receiving All Recommended Diabetes Preventive Services

Race/Ethnicity	Health System Effectiveness	2006-2008 Rate (per 100)	Disparity Ratio	
African American	Not Enough Data	*	Not Enough Data	
American Indian	Reference Group	44.3	1.0	
Asian/Pacific Islanders	Not Enough Data	*	Not Enough Data	
Hispanic	Α	51.4	1.2	
White	Α	54.2	1.3	

^{*} Proportions based on less than 50 interviews and are not presented.

- Recommended services are lab work (two A1C tests), a foot exam and a dilated eye exam.
- American Indians are more likely to receive recommended services than are Hispanics and Whites but American Indians also have a higher death rate from diabetes.



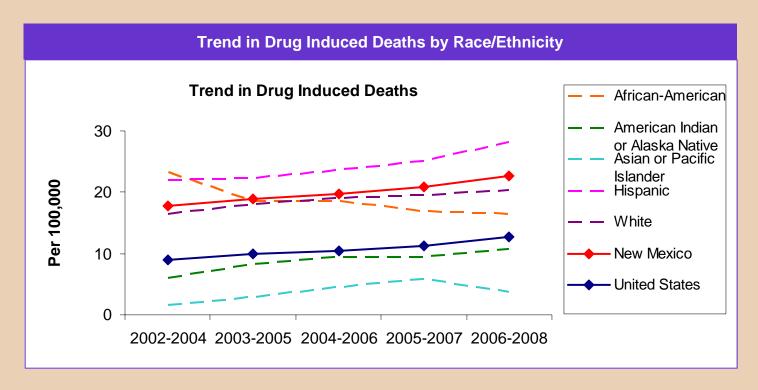
Rate Per 100 of New Mexicans Not Receiving Diabetes Preventive Services by Gender				
	Total Male Female			
New Mexico 2005-2007	51.6	49.9	53.2	
United States	Data not available			

Drug Induced Deaths

Race/Ethnicity	Health System Effectiveness	2006-2008 Rate (per 100,000)	Disparity Ratio
African American	В	16.4	1.5
American Indian	Reference Group	10.8	1.0
Asian/Pacific Islanders	Not Enough Data	* 3.7	Not Enough Data
Hispanic	D	28.2	2.6
White	В	20.4	1.9

^{*} Rate based on less than 20 events and may fluctuate greatly from year to year.

- New Mexico has been among the top 3 states for drug-induced deaths since 1989.
- American Indians have one of the lowest rates in New Mexico and serve as the reference group to which all others are compared.



Drug Induced Death Rates per 100,000 by Gender				
Population	Total	Female	Male	
New Mexico 2006-2008	22.7	15.5	30.0	
United States 2006	12.7	9.0	16.4	



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