



**Selected Indicators from the New Mexico
2008 Racial and Ethnic Health Disparities Report Card**

American Indian Health Disparities In New Mexico

Health Disparities are the differences in health status and the impact of diseases on different race and ethnic population. In order to create awareness of and coordinate efforts to reduce health disparities, the Department of Health has produced for three years, a Racial and Ethnic Health Disparities Report Card. (See <http://www.nmhealth.org/OPMH/DPPR.htm>).

American Indians in New Mexico bear a disproportionate share of poor health status and disease. Of the 20 indicators in the 2008 Racial and Ethnic Health Disparities Report Card, American Indians have the highest (worst) rates on 9 indicators. Consequently, the Department has published for two years a special edition of the report card to focus 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 3-11, the American Indian Health Disparities Report Card list the 9 indicators on which American Indians consistently have the highest disparities. Pages 12-14 list the 3 indicators for which they have the lowest (best) rates in New Mexico.

The indicators for which American Indians have the highest disparities, in order of the disparity, 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*
- Homicide*
- Late or no prenatal care*
- Motor vehicle deaths*
- Youth obesity*
- Pneumonia and influenza deaths
- Youth suicide
- Adults (age 65 +) not receiving a pneumonia vaccination.

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
- Pertussis
- Drug induced deaths

The following pages contain the 12 indicators listed above. Each indicator 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
A	1.0 - 1.4	Little or no disparity.
B	1.5 - 1.9	A disparity exists and should be monitored and may require intervention.
C	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

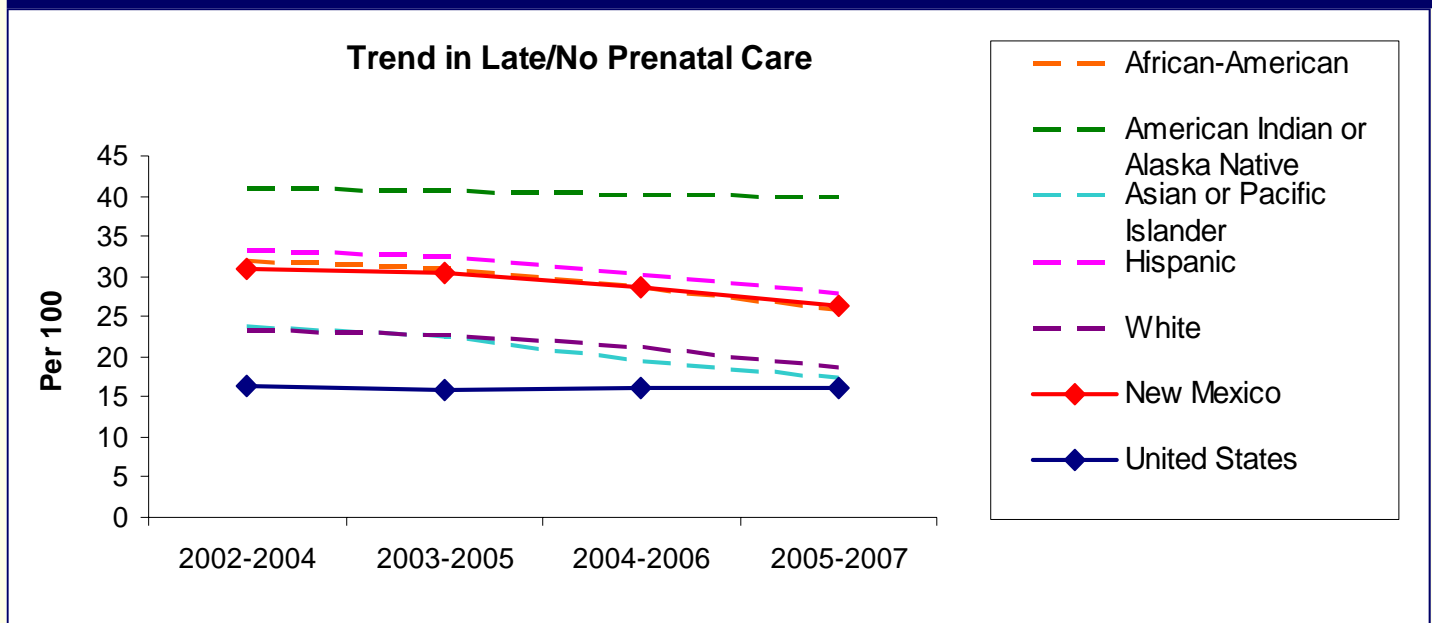
The Health System Effectiveness column reflects how well the health system is doing in eliminating difference among populations by comparing each group to the population with the best rate. The reference group in this column will indicate that it is the population to which all others are compared. Please 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	2005-2007 Rate (per 100)	Disparity Ratio
African American	B	25.7	1.5
American Indian	C	39.8	2.3
Asian/Pacific Islanders	Reference Group	17.3	1.0
Hispanic	B	27.8	1.6
White	A	18.7	1.1

Trend in Prenatal Care by Race



	New Mexico 2005-2007	United States 2005
Total Percent of Births with Late or No Prenatal Care	26.4	16.1

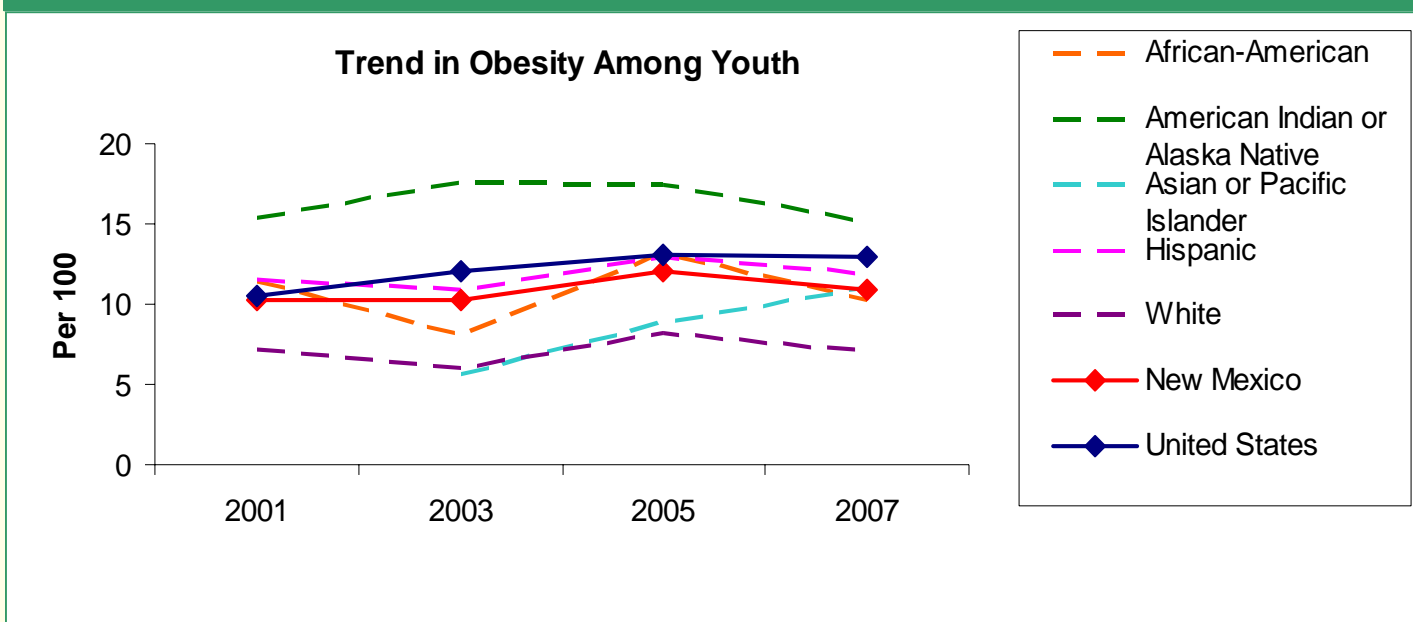
Note:

- 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 and the disparity between them and the reference group (Asians/Pacific Islanders) is increasing.

Obesity Among Youth

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

Trend in Obesity Among Youth by Race/Ethnicity



Rate Per 100 Obesity Among Youth by Gender

Population	Total	Female	Male
New Mexico 2007	10.9	6.0	15.5
United States 2007	13.0	9.6	16.3

Note:

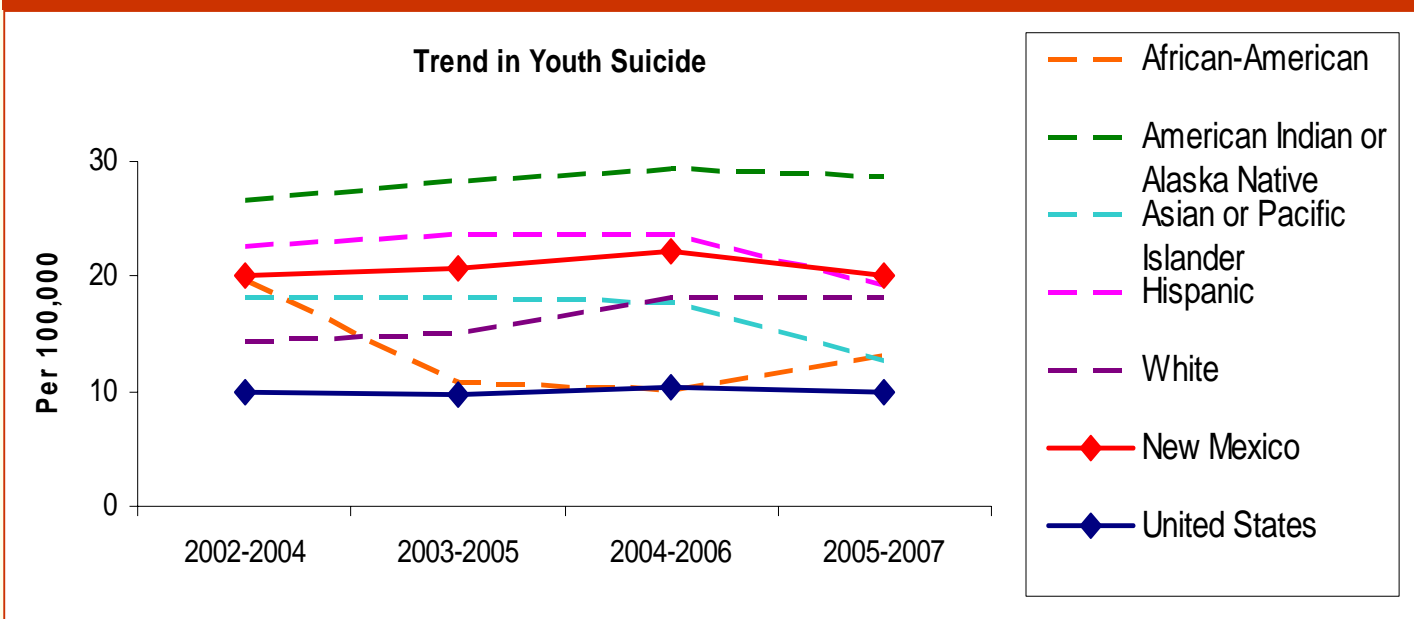
- Although the New Mexico rate remains below the United States rate, American Indian youth have the highest rate of being overweight in New Mexico and consistently have a rate higher than the rates for New Mexico and the United States.

Youth Suicide

Race/Ethnicity	Health System Effectiveness	2005-2007 Rate (per 100,000)	Disparity Ratio
African American	Not Enough Data	* 13.0	Not Enough Data
American Indian	B	28.8	1.6
Asian/Pacific Islanders	Not Enough Data	* 12.6	Not Enough Data
Hispanic	A	19.7	1.1
White	Reference Group	18.2	1.0

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

Trend in Youth Suicide by Race/Ethnicity



Youth Suicide Rate Per 100,000 by Gender

Population	Total	Female	Male
New Mexico 2005-2007	20.1	6.2	33.1
United States 2005	10.0	3.5	16.2

Note:

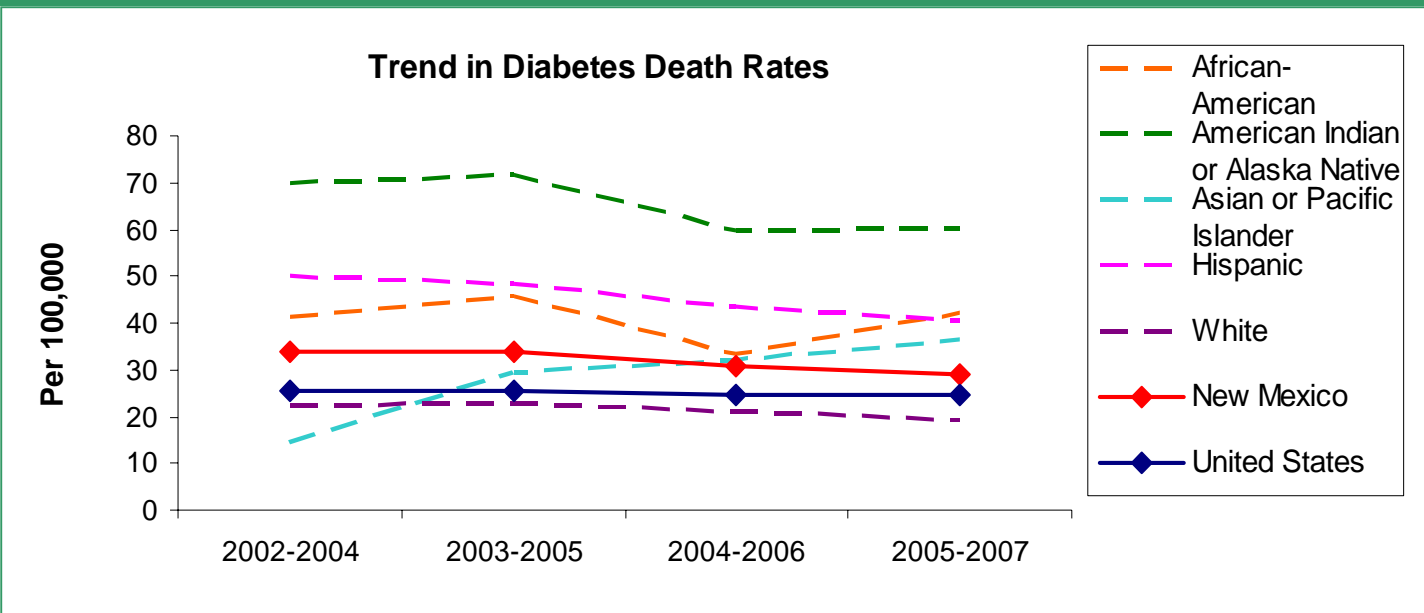
- The New Mexico rate is more than double the United States rate.
- American Indians continue to have the highest rate but all groups have rates above the national rate.

Diabetes Deaths

Race/Ethnicity	Health System Effectiveness	2005-2007 Rate (per 100,000)	Disparity Ratio
African American	Not Enough Data	*42.4	Not Enough Data
American Indian	F	60.4	3.1
Asian/Pacific Islanders	Not Enough Data	* 32.2	Not Enough Data
Hispanic	C	40.4	2.1
White	Reference Group	19.5	1.0

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

Trend in Diabetes Death Rates



Diabetes Death Rates Per 100,000 by Gender

Population	Total	Female	Male
New Mexico 2005-2007	28.9	26.6	31.8
United States 2005	24.6	21.6	28.4

Note:

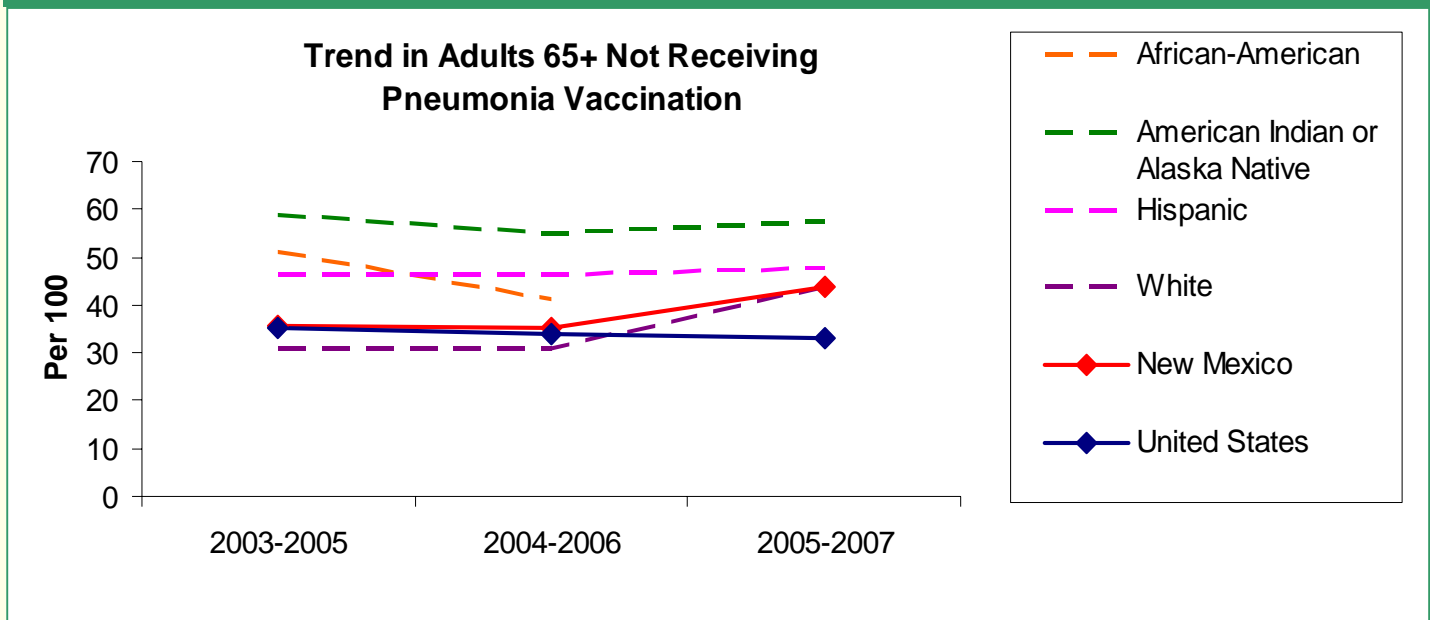
- New Mexico's Diabetes Death Rate is higher than that of the United States.
- American Indians have the highest death rate - over 3 times that of whites and nearly 50% higher than that of Hispanics. The high death rate is particularly perplexing since American Indians are more likely to report receiving the recommended diabetes management services. See page 12.

Not Had Pneumonia Vaccination (Adults 65+)

Race/Ethnicity	Health System Effectiveness	2005-2007 Rate (per 100)	Disparity Ratio
African American	Not Enough Data	*	Not Enough Data
American Indian	A	57.5	1.3
Asian/Pacific Islanders	Not Enough Data	*	Not Enough Data
Hispanic	A	47.5	1.1
White	Reference Group	30.8	1.0

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

Trend in Adults 65+ Not Receiving Pneumonia Vaccination by Race/Ethnicity



Rate of Not Receiving Pneumonia Vaccination by Gender

Population	Total	Male	Female
New Mexico 2005-2007	45.1	44.3	46.2
U.S. 2006	33.1	31.6	34.8

Note:

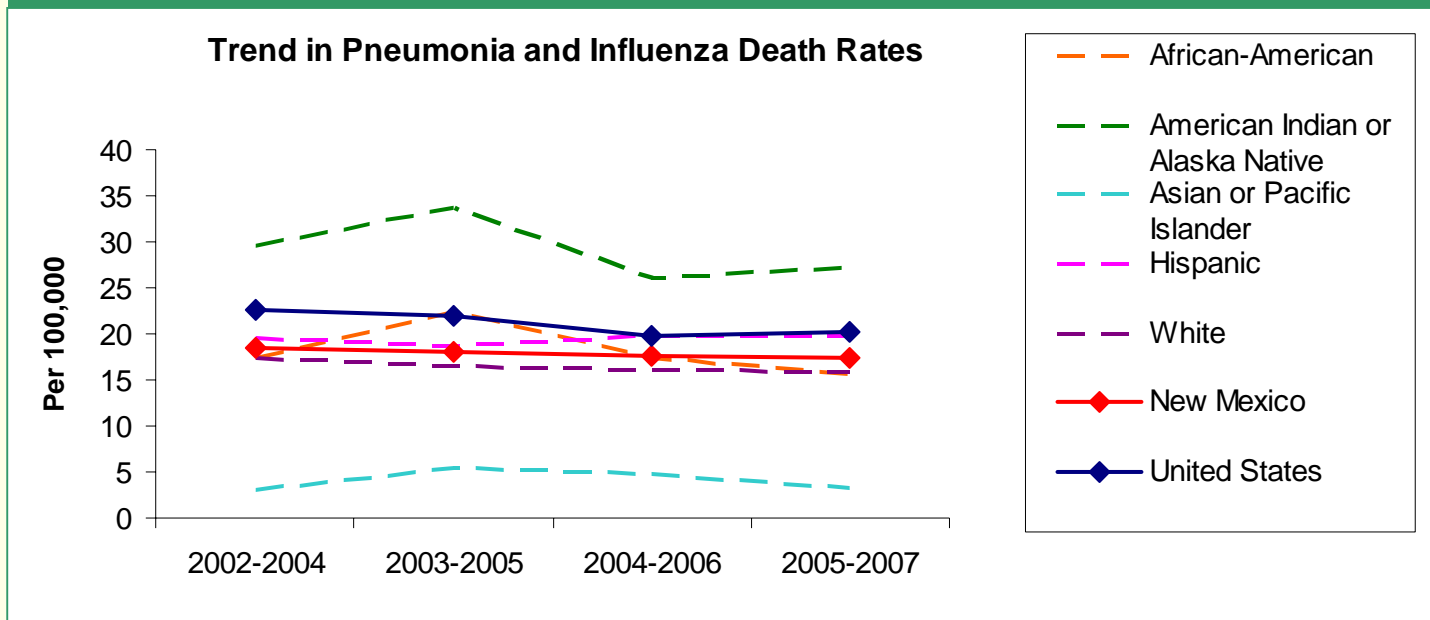
- American Indian elders are the least likely of all groups in New Mexico to report receiving a vaccination against pneumonia. Over half the American Indian population age 65 and older has not received this important prevention. Consequently, it is not surprising that American Indians also have the highest death rates due to pneumonia and influenza.

Pneumonia and Influenza Deaths

Race/Ethnicity	Health System Effectiveness	2005-2007 Rate (per 100,000)	Disparity Ratio
African American	Not Enough Data	* 15.7	Not Enough Data
American Indian	B	27.2	1.7
Asian/Pacific Islanders	Not Enough Data	* 3.3	Not Enough Data
Hispanic	A	19.7	1.2
White	Reference Group	15.8	1.0

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

Trend in Pneumonia and Influenza Deaths by Race/Ethnicity



Pneumonia and Influenza Deaths Per 100,000 by Gender

Population	Total	Female	Male
New Mexico 2005-2007	17.5	15.1	20.6
United States 2005	20.3	17.9	23.9

Note:

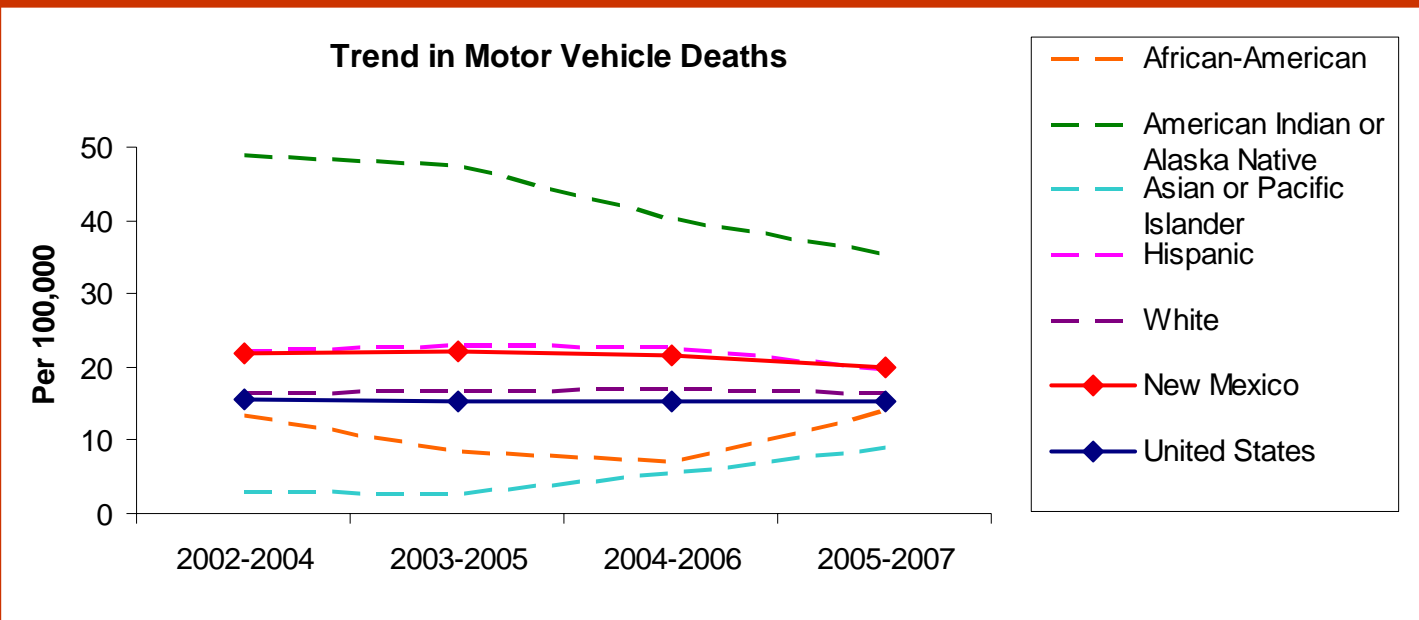
- American Indians consistently have the highest rate of deaths due to pneumonia and influenza .

Motor Vehicle Deaths

Race/Ethnicity	Health System Effectiveness	2005-2007 Rate (per 100,000)	Disparity Ratio
African American	Not Enough Data	* 13.8	Not Enough Data
American Indian	C	35.4	2.2
Asian/Pacific Islanders	Not Enough Data	* 9.0	Not Enough Data
Hispanic	A	19.8	1.2
White	Reference Group	16.3	1.0

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

Trend in Motor Vehicle Deaths by Race/Ethnicity



Motor Vehicle Death Rates Per 100,000 by Gender

Population	Total	Female	Male
New Mexico 2005-2007	19.9	12.1	27.8
United States 2005	15.2	8.9	21.7

Note:

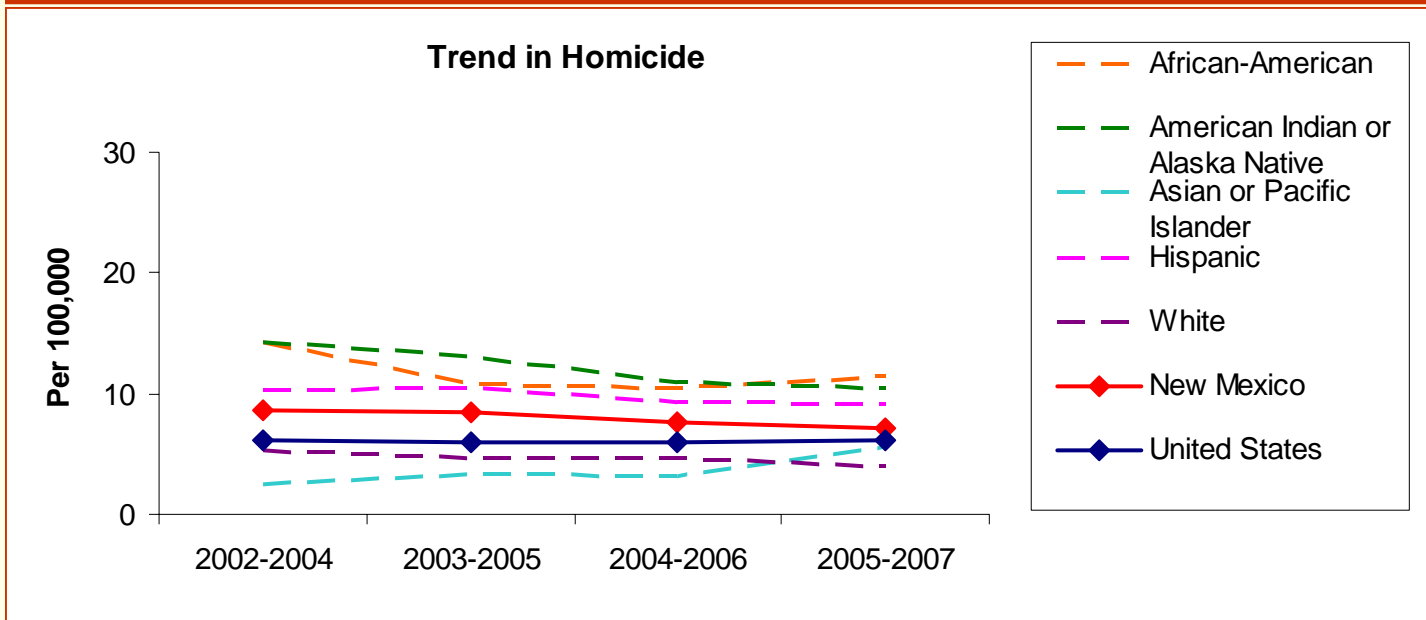
- Motor vehicle deaths include deaths to pedestrians struck by motor vehicles.
- The New Mexico rate is higher than the national rate.
- Although declining, the motor vehicle death rate for American Indians remains more than twice the rate for whites.

Homicide

Race/Ethnicity	Health System Effectiveness	2005-2007 Rate (per 100,000)	Disparity Ratio
African American	Not Enough Data	* 11.4	Not Enough Data
American Indian	D	10.4	2.7
Asian/Pacific Islanders	Not Enough Data	* 5.6	Not Enough Data
Hispanic	C	9.1	2.3
White	Reference Group	3.9	1.0

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

Trend in Homicide Rates by Race/Ethnicity



Homicide Rate Per 100,000 by Gender

Population	Total	Female	Male
New Mexico 2005-2007	7.2	3.1	11.4
United States 2005	6.1	2.5	9.6

Note:

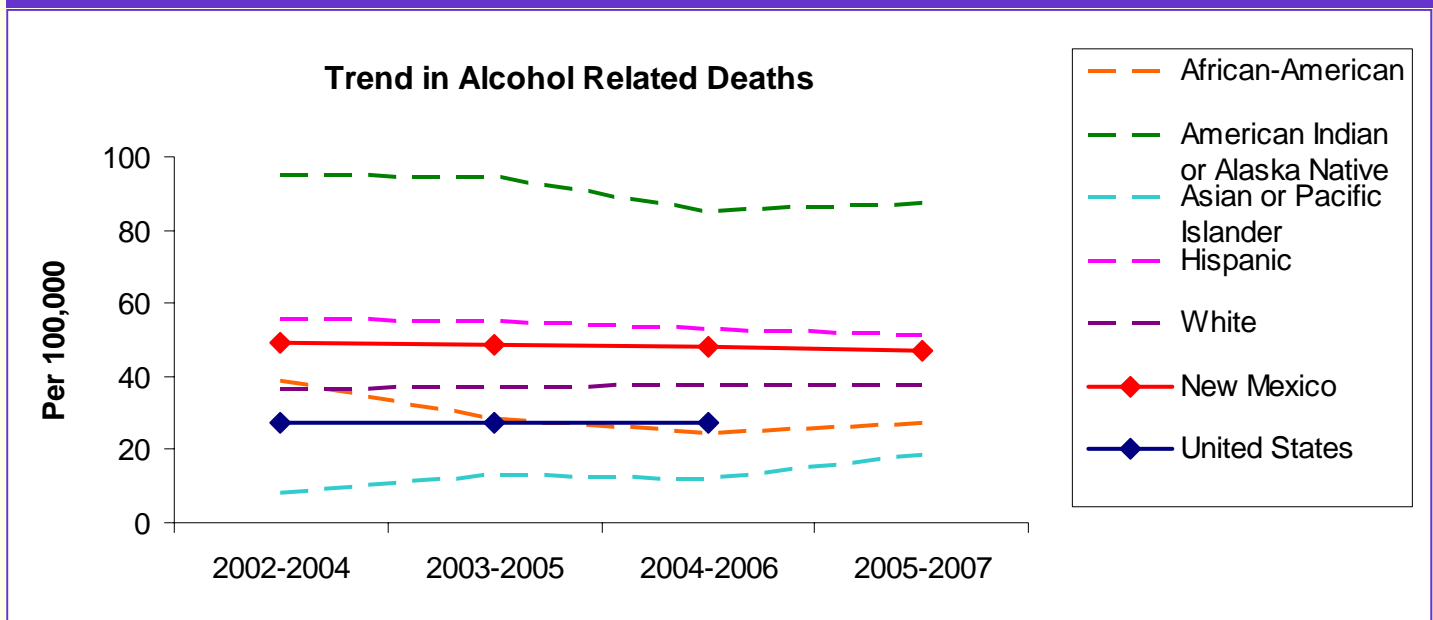
- Although decreasing, the New Mexico homicide rate is higher than the national rate.
- The Hispanic and American Indian homicide rates are twice that of Whites.

Alcohol Related Deaths

Race/Ethnicity	Health System Effectiveness	2005-2007 Rate (per 100,000)	Disparity Ratio
African American	Reference Group	27.5	1.0
American Indian	F	87.2	3.2
Asian/Pacific Islanders	Not Enough Data	* 18.7	Not Enough Data
Hispanic	B	51.2	1.9
White	A	37.5	1.4

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

Trend in Alcohol Related Deaths by Race/Ethnicity



Alcohol Related Death Rates by Gender

Population	Total	Female	Male
New Mexico 2005-2007	47.1	25.7	69.9
United States 2004 (latest available data)	27.3	14.3	41.5

Note:

- 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.

Indicators For Which American Indians Have the Best Rates

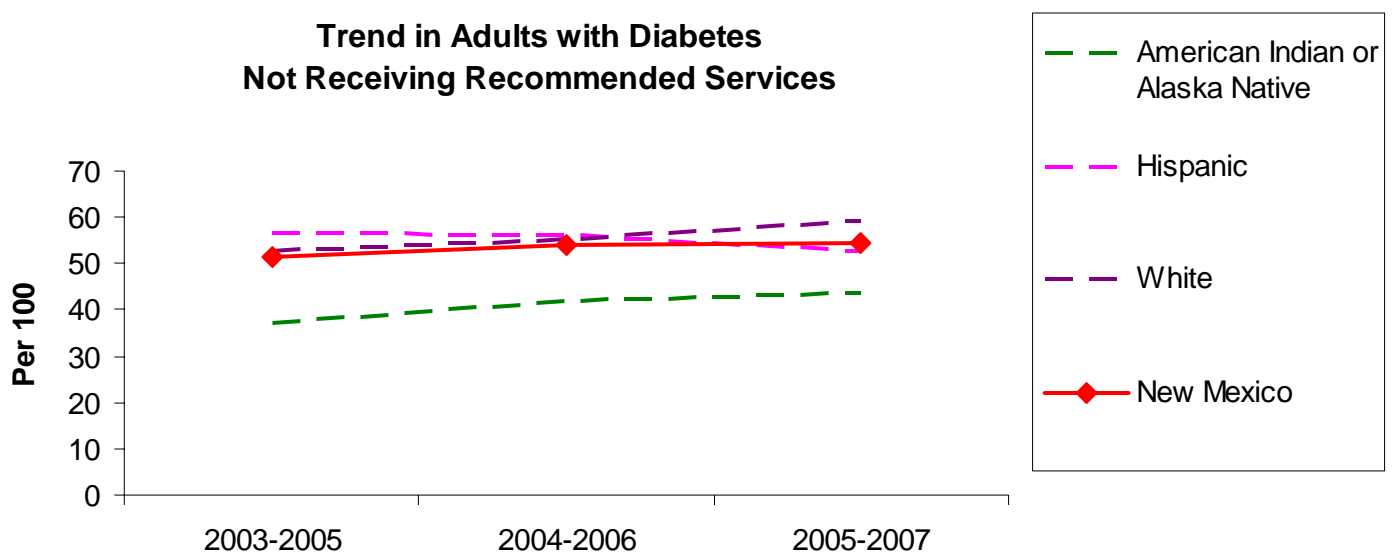
Adults with Diabetes Not Receiving All Recommended Diabetes Preventive Services

Race/Ethnicity	Health System Effectiveness	2005-20067 Rate (per 100)	Disparity Ratio
African American	* Not Enough Data	*	Not Enough Data
American Indian	Reference Group	43.8	1.0
Asian/Pacific Islanders	* Not Enough Data	*	Not Enough Data
Hispanic	A	52.9	1.2
White	A	59.1	1.3

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

Services for Adults with Diabetes by Race/Ethnicity

Trend in Adults with Diabetes Not Receiving Recommended Services



Rate Per 100 of New Mexicans Not Receiving Diabetes Preventive Services by Gender

	Total	Male	Female
New Mexico 2005-2007	54.3	55.4	53.2
United States	Data not available		

Note:

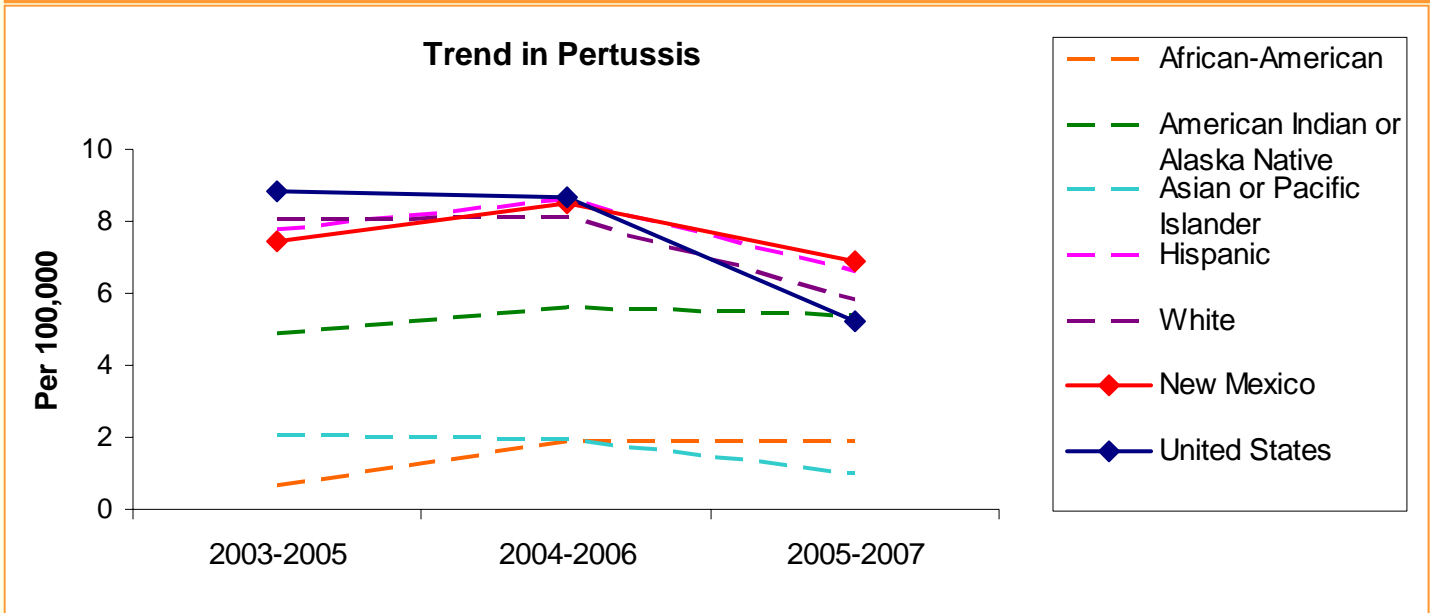
- Recommended services are lab work (two A1C tests), a foot exam and a dilated eye exam.
- American Indians are more likely to receive recommended services than are Hispanics and Whites but American Indians also have a higher death rate from diabetes. See page 6.

Pertussis (Whooping Cough)

Race/Ethnicity	Health System Effectiveness	2005-2007 Rate (per 100,000)	Disparity Ratio
African American	Not Enough Data	*1.9	Not Enough Data
American Indian	Reference Group	5.4	1.0
Asian/Pacific Islanders	Not Enough Data	*1.0	Not Enough Data
Hispanic	A	6.6	1.2
White	A	5.8	1.1

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

Pertussis Trend by Race/Ethnicity



Pertussis Rate by Gender			
Population	Total Per 100,000	Female	Male
New Mexico 2005-2007	6.9	7.8	6.0
United States 2006	5.2	5.9	4.5

Note:

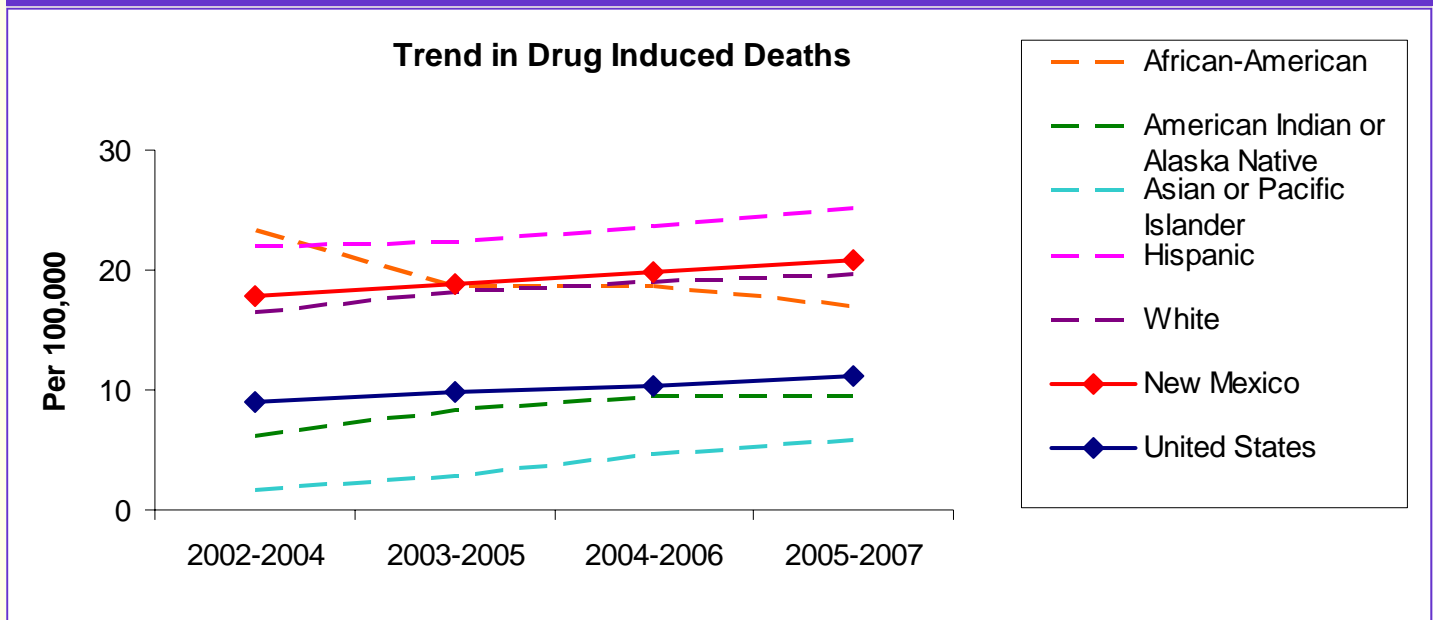
- The New Mexico rate has gone from having a Pertussis rate lower than the national rate to having a higher rate than the national rate. American Indians have one of the lowest rates in New Mexico and serve as the reference group to which other groups are compared.

Drug Induced Deaths

Race/Ethnicity	Health System Effectiveness	2005-2007 Rate (per 100,000)	Disparity Ratio
African American	B	17.0	1.8
American Indian	Reference Group	9.5	1.0
Asian/Pacific Islanders	Not Enough Data	* 5.8	Not Enough Data
Hispanic	D	25.1	2.6
White	C	19.6	2.1

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

Trend in Drug Induced Deaths by Race/Ethnicity



Drug Induced Death Rates per 100,000 by Gender

Population	Total	Female	Male
New Mexico 2005-2007	20.8	13.8	27.9
United States 2005	11.2	8.1	14.4

Note:

- 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.



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