RACIAL MISCLASSIFICATION AND MORTALITY DISPARITIES

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American Indians/Alaska Natives (AI/ANs) are frequently miscoded as another race on death certificates. Race/ethnicity is often completed by a funeral director based on observation or information from family. This lack of accurate race data results in underestimated mortality rates.

To address this problem, the Northwest Tribal Epidemiology Center partnered with the Seattle Indian Health Board’s (SIHB) Urban Indian Health Institute (UIHI) to evaluate racial misclassification and conduct record linkages with public health datasets. These linkages use lists of known AI/ANs (Northwest Tribal Registry and SIHB AI/AN patient registration) and match them with state data systems in the Pacific Northwest.

A recent linkage conducted with death certificates from the Washington State Department of Health found that 83% of matched records with race information were classified correctly as AI/AN. This record linkage increased case ascertainment of AI/AN deaths by 10%.

Analysis of these corrected rates revealed alarming disparities, especially in intentional injury. AI/ANs had significantly higher rates of suicide and homicide than Whites (Figure 1). AI/AN males bore the burden of intentional injury more heavily than females.

Correct racial classification is a critical factor in achieving accurate mortality surveillance. Record linkages using AI/AN data from urban and tribal areas increase case ascertainment of deaths and highlight important disparities.

Figure 1: Post-Linkage Intentional Injury Mortality By Sex, Washington State, 1990-2009

![Graph showing intentional injury mortality rates by sex and race/ethnicity.](image-url)