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Avoidable mortality among First Nations adults in Canada: A cohort analysis

According to an analysis of linked census and mortality data, during the 1991-to-2006 period, First Nations adults had more than twice the risk of dying from avoidable causes compared with non-Aboriginal adults.

The study examined avoidable mortality among a cohort of 61,220 First Nations and 2,521,285 non-Aboriginal people aged 25 to 74 who responded to the 1991 Census and were followed up for mortality to 2006.

Avoidable mortality refers to deaths that potentially could have been averted through effective prevention, public health policies, and/or provision of timely and adequate health care. Avoidable mortality includes deaths from causes with well-established and modifiable risk factors, such as unintentional and intentional injuries, and deaths that potentially could have been averted by screening, early detection and successful treatment, such as those from tuberculosis, pneumonia and female breast cancer. In Canada, avoidable mortality represents 70% of all deaths before age 75.

Compared with non-Aboriginal cohort members, First Nations men were twice as likely to die from avoidable causes and First Nations women, 2.5 times as likely. The age-standardized avoidable mortality rate per 100,000 person-years at risk for First Nations men was 679.2, while it was 337.6 for non-Aboriginal men. The rate was 453.2 for First Nations women, compared with 183.5 for non-Aboriginal women. The disparity was more evident among younger age groups.

For certain avoidable causes, the risk of death for members of the First Nations cohort was more than five times as high as that of their non-Aboriginal counterparts. First Nations men were more likely than non-Aboriginal men to die from alcohol and drug use disorders and from unintentional injuries. First Nations women's risk of death was high compared with that of non-Aboriginal women for alcohol and drug use disorders, diabetes mellitus and infections.

When differences in educational attainment and income were taken into account, the elevated risks of avoidable mortality among First Nations adults were reduced by 47% for men and 32% for women, suggesting that these socioeconomic variables are important in explaining the disparity.

Note to readers

Data are from the 1991-to-2006 Canadian Census Mortality and Cancer Follow-up Study. Data from a 15% sample of 1991 Census respondents aged 25 or older were linked to the Canadian Mortality Database (June 4, 1991 to December 31, 2006). This study examines avoidable mortality among 61,220 First Nations and 2,510,285 non-Aboriginal adults aged 25 to 74.

Cohort members were defined as First Nations if they reported any of the following: 1) single North American Indian ancestry; 2) registered Indian status under the Indian Act; 3) membership in an Indian band / First Nation.



The article "[Avoidable mortality among First Nations adults in Canada: A cohort analysis](#)" is available in the August 2015 online issue of *Health Reports*, Vol. 26, no. 8 (**82-003-X**) from the *Browse by key resource* module of our website under *Publications*.

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A second article, "[Bisphenol A and child and youth behaviour: Canadian Health Measures Survey 2007 to 2011](#)," is also available in this issue of *Health Reports*.

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