

## INTRODUCTION

The report *Health Status Profile of American Indians in Arizona: 2016 Data Book* is the annual update of population-level data on trends and patterns in natality and mortality among American Indians who were residents of specified tribal communities on reservations, and those who resided off reservation in Arizona in 2016.

American Indian births are determined by mother's race as indicated on a birth certificate, that is, these are the births to American Indian mothers. American Indian deaths are determined by decedent's race as stated on the death certificate.

The charts and tables comprising the 2016 *Health Status Profile of American Indians in Arizona* are grouped into five major sections:

- 1) a summary risk profile of American Indian residents of Arizona in 2016 on 65 indicators or measures of health status,
- 2) a comparison of American Indians' standing in Arizona with respect to selected health objectives for the years 2010 and 2020,
- 3) a section presenting trend data for 2006-2016 for selected health problems and health risks comparing American Indians to Arizona's entire population,
- 4) a four-part section concerned with the characteristics of American Indian newborns and mothers giving birth,
- 5) a three-part section focused on patterns of cause-specific mortality among American Indians by age group, gender, and place of residence in Arizona in 2016. Beginning with the 2006 report, it also includes additional statistics on "Comparative Cause-Specific Mortality" focused on leading causes of death by gender and residence status on or off reservation, as well as patterns in cancer mortality and proportional mortality from specific unintentional injuries.

These sections are followed by the **Technical Notes**, which provide information about the sources of data and definitions of terms used in the report. The causes of death for 2006-2016 are classified by the Tenth Revision (ICD-10).

Identifying whether the vital events occurring to Arizona's Native American population were to those living on tribal reservations has posed a persistent challenge. Beginning with the first edition of this report published in 1995, vital events occurring on reservation were identified by place of residence. From 2002 - 2009, tribal affiliation combined with a specific place of residence was used in order to distinguish between American Indian residents of specified tribal communities and/or on reservations, and those who resided off reservation. Starting in 2010, the identification of events occurring on or off tribal lands was based solely on whether or not the individual's residence address was within the boundaries of a tribal reservation. While identifying a somewhat smaller number of on-reservation vital events than in previous years, this method provides a stricter definition of whether a specific vital event occurred to a Native American living within the boundaries of a reservation, and is also more reliable and reproducible than the method incorporating both residence address and tribal affiliation to identify on-reservation events. Future editions of the report will also use residence as the sole identifier of on-reservation vital events. **Due to this change in methodology, the counts of vital events occurring on-or-off reservation in 2016 should not be directly compared to on-or-off reservation counts from years prior to 2010, specifically counts in Sections IV and V (excluding Section V Comparative Cause-Specific Mortality).**

The *Health Status Profile of American Indians in Arizona: 2016 Data Book* includes tables where small cells and related totals are suppressed. Using suppression rules similar to those used by the National Center for Health Statistics (NCHS), this report now attempts to maintain the anonymity of the individuals whose vital records are summarized herein. In cell suppression, the first task is primary suppression, or removing non-zero counts in the body of a table that fall below a certain number. Primary cells that were less than six but greater than zero were suppressed and identified with an asterisk (\*). Next, secondary suppression is used to obfuscate the totals or sums with components, or addends that fall below the threshold for primary suppression. These totals are typically reported in the margins of table rows and columns. Column or row totals that contained a non-zero addend less than 6 were rounded to the nearest tens-unit and identified with a dagger (†). In certain cases where these rules would have dictated the rounding of a row or column total but the value of the information contained in the total was identified as important or attainable from other sources, these rules were relaxed and the original value was reported.

*Health Status Profile of American Indians in Arizona* was intended as a data book: a basic reference for some of the most frequently requested vital event statistics. The five sections of the report were computer-generated and contain information with little or no accompanying narrative.

The online versions of the report for 1998–2016 are available at <http://pub.azdhs.gov/health-stats/>