Mortality of indigenous populations in Latin America

Bernardo Lanza Queiroz
Universidade Federal de Minas Gerais / Brazil
lanza@cedeplar.ufmg.br
Main issue and objectives

• Analyses of Indigenous peoples’ health in Latin America have long been impeded by low coverage and deficient quality of population registries,
• as well as difficulties associated with ethnic and racial identification from health information sources;
• Brazilian case is illustrative, with demographic and health information sources about the Indigenous population having increased since the 1990s;
• Specially, after the national census and the principal health information systems began collecting data using the category “Indigenous” (indígena)
The use of census data

• research uses data on household mortality derived from the 2010 Brazilian National Demographic Census;
  • Ongoing 2022 census include the same question, but reference period was extended, covering from January 2019 to July 2022;

• Data on sex and age of the deceased were also collected

• no information was collected on the color or race of the individual who died;

• But, one innovation in the 2010 Census was the application of the question about color or race to all households and all persons, rather than to a sample
Our alternative

- different classification typologies of Indigenous households were compared:
  - (1) households with at least one Indigenous resident;
  - (2) households with more than half Indigenous residents;
  - (3) households with all Indigenous residents;
  - (4) head of household classified as Indigenous

- Methodology
  - First step is to evaluate the completeness of enumeration of death records, using Death Distribution Methods
  - Second: deal with small numbers
    - Alternative is to use Topals smoothing procedure
    - Or more complex Bayesian methods.
Results – I

1a) Mulheres

1b) Homens

- Indígenas
- Não indígenas

Idade
Results – II

1) the mortality curves presented here show that Indigenous population were consistently at the most disadvantaged end of a marked gradient of ethnic-racial inequality in Brazil;

2) Mortality rates were also systematically higher than the rest of the Brazilian population independently of sex, age, and geopolitical region
Discussion

• lack of information about Indigenous peoples has slowly and imperfectly improved in Brazil over the last several decades due to advanced analyzes based on national health information systems;

• Census data presents some limitations for characterizing mortality levels
  • underestimation of mortality in single person households in which the resident died
  • Underenumeration of events (memory problems)
  • No information on race/ethnicity of deceased

• But, provides an opportunity to study mortality differentials across sub-groups – compared to surveys an advantage is the sample size;

• Overall message is the importance to strength CRVS systems
Thank you