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Plain Language Summary

Mortality among immigrants in England & Wales by major cause of death

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ONS Longitudinal Study project 0301579

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Key points:

- Previous studies have found that people who move to a new country tend to have lower death rates than the native population there. But it is also known that people from different countries can have higher risk of specific diseases, e.g., people from South Asia have higher genetic risk of developing cardiovascular disease (CVD)
- By using a large sample from the ONS LS and looking at cause of death over a 40 year period from 1971-2011, the authors were able to look more closely at the risks for different immigrant groups
- The results show that the overall pattern of lower mortality for migrants hides a more complicated picture, with some populations at higher risk of death from specific types of disease
- These findings are important because they show that health risks vary among different groups of immigrants in the population
- Public health campaigns may need to be targeted more carefully to reach specific at-risk groups

There is a body of evidence indicating that immigrants - people who move to a new country - tend to have lower death rates than the native population in the new location. This is known as the “migrant mortality advantage”. To date research on this effect has focussed on overall mortality (including all causes of death), however it is clear that people from different parts of the world have higher risks for certain diseases. For example, it has been found that Caribbeans who move to the UK have a lower risk of dying from heart disease compared to the UK-born population, but have a higher risk of dying from stroke. Similarly people from South Asian countries moving to the UK have a higher risk of death from Cardiovascular Disease (CVD). This raises the question of whether the “migrant mortality advantage” found for overall deaths is actually hiding important variations in death risks depending on the country of origin. For example, it might be that there are groups of immigrants who have relatively high risk of dying from a specific disease, despite their overall death rates being lower than the native population.

In order to investigate this the researchers used the ONS Longitudinal Study, which takes data from the England and Wales Census and links it to birth, death and health data. This anonymous information can then be used to explore patterns over time. For this study, information from the Census at 1971, 1981, 1991, 2001 and 2011 was used. People aged between 20 and 86 years who were born outside of the country were compared with people of a similar age who were born in England and Wales. For each person who died during the 40 years from 1971-2011, the cause of death was noted. In total, just under 600,000 people were included in the analysis.

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The results show that the low rates of overall mortality in immigrants was mostly due to low death rates from chronic diseases, especially cancer, and low risk of death from respiratory infections. There were variations however. Non-western immigrants (those not from English-speaking countries or Western Europe) had a higher risk of dying from infectious diseases compared to people born in England and Wales. People from South Asian countries had very low death rates due to cancer, but had a high risk of death from CVD.

People from Scotland, Northern Ireland or the Republic of Ireland had higher rates of overall mortality compared to the English and Welsh-born population and higher death rates for most specific causes of death. It seems that those who migrate only a short distance do not show the same health advantage as those moving to the UK from countries further away.

Looking at causes of death over time supported the idea that immigrants face different types of health benefits and risks at different parts of their life. For example, people moving to England - particularly those from non-Western countries - have a reduced risk of dying from infections when they first arrive in the UK, due to access to better quality health care. However over time immigrants often adapt to the culture and health behaviours of the native population, such as heavy drinking, smoking or eating fast-food. Wallace and Kulu found evidence of the effects of this, with the risks of dying from chronic diseases such as cancer rising over time for immigrants towards the level of the England and Wales population.

This study is an important first step in exploring in more detail the main health risks for different ethnic populations moving to the UK. The results suggest that public health campaigns may need to be tailored differently for specific populations; for example, the genetic pre-disposition of people from South Asia to develop CVD means they are at particular risk once they adopt unhealthy Western lifestyles, and so they may benefit from more targeted health advice which highlights their increased risk.

LINKS

Original Paper:

Wallace, M. & Kulu, H. (2015) Mortality among immigrants in England and Wales by major causes of death, 1971-2012: A longitudinal analysis of register-based data. *Social Science & Medicine*, 147(December), 209-221

Further information about the ONS LS:

<https://www.ucl.ac.uk/celsius>

Further information about CALLS Hub:

www.calls.ac.uk

This summary written by Fiona Cox, CALLS Hub, 6 April 2018

