This PhD thesis describes the size and patterns of ethnic inequalities in mortality in the Netherlands and examines the role that socioeconomic status and other factors played in explaining the observed mortality differences. The studied groups include people of Turkish, Moroccan, Surinamese, Antillean/Aruban and Indonesian origin and a number of refugee groups. Together, these groups make up almost 10% of the population of the Netherlands.

Life expectancies in the countries where these migrant groups originate from are substantially lower than in the Netherlands and their socioeconomic positions in the Netherlands are generally lower than that of native Dutch. Yet, we show that most groups had similar or more favourable total mortality rates than the native Dutch population. We describe the compensating age and cause specific death patterns from which these mortality levels result and explain why these findings are unlikely to have been influenced by incomplete registration of mortality.

We show that socioeconomic status played a role in explaining the excess mortality in some groups and that education related selection may have contributed to the reduced levels of mortality in some others. As migrant health does seem to benefit from the favourable socioeconomic, public health and health-care conditions in the Netherlands, but does not (yet) seem to be influenced by the consequences of health damaging behaviours that are associated with prosperity, a difference in timing between the health benefits and the health risks of migration may also explain some of the findings.