April 12, 2023
The Honorable Shalanda Young, Director
Office of Management and Budget
Executive Office of the President
725 7th St., NW
Washington, DC 20503

Submitted via Regulations.gov

RE: OMB-2023-0001, Initial Proposals for Updating OMB’s Race and Ethnicity Statistical Standards

Dear Director Young:

Families USA (FUSA) is a leading national voice for health care consumers, dedicated to the achievement of high quality, affordable health care and improved health for all. We seek to make concrete and tangible improvements to the health and health care of the nation — improvements that make a real difference in people’s lives. In all of our work, we strive to address inequities faced by consumers of our health care system, but this is not possible without high-quality, representative data of all communities within the United States. We applaud the Office of Management and Budget’s (OMB) efforts to improve the 1997 Statistical Policy Directive No. 15 and are grateful for the opportunity to comment on the changes proposed by the Federal Interagency Technical Working Group on Race and Ethnicity Standards.

It is only through the collection of comprehensive race and ethnicity information that we can fully recognize important health needs and health inequities faced by populations across the U.S. and develop more effective and community focused solutions. We are encouraged the Administration is taking steps to update these important standards as they are critical to advancing health and health equity for all.

Families USA has taken this opportunity to comment on and provide recommendations to a number of OMB’s proposed changes.

1. The Use of a Combined Race and Ethnicity Question

Families USA supports the collection of both race and ethnicity information using one combined question. To further promote the accurate collection and reporting of race and ethnicity information and in particular to avoid the undercounting of certain demographic groups, we support combining the collection of race and ethnicity into a single question.

Since 1997, OMB data standards have required federal offices collect self-response data about race and ethnicity in two separate questions.¹ This has been shown to lead to confusion and the undercounting of

certain racial and ethnic groups, since many individuals consider their race and ethnicity as one and the same.2

When the 2020 Census separately asked respondents about their race and ethnicity, over 3 million Hispanic individuals were undercounted.3 One in every seven individuals who filled out the 2020 census selected the “some other race” category. Many of these were Hispanic individuals who considered their race as Hispanic and therefore had no option that truly represented them under the race specific question.4 By asking about race and ethnicity separately, the 2020 Census inadvertently obscured the identities of many Hispanic people and impacted the reliability of a critical data source used to recognize community needs and allocate resources.5

While it should be recognized that combining the race and ethnicity question will not entirely solve the problem of undercounting,6 Families USA supports this proposed change as an important step in remedying the barriers faced in collecting demographic data that truly represents the diversity of this country.

2. Addition of the MENA Category

Families USA supports the addition of a Middle Eastern and North African (MENA) category to the OMB Race and Ethnicity Statistical Standards. For too long people of MENA descent have been underrepresented in federal race and ethnicity data collection, frequently being grouped into the White category.7 Research shows that when given the option, MENA individuals overwhelmingly choose the MENA category over White identification.8,9 While additional research should be conducted on the best

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2 For example, according to one study, 67% of Hispanic respondents stated that being Hispanic was part of their racial identity. See, Parker et al. “Chapter 7: The Many Dimensions of Hispanic Racial Identity.” Pew Research Center's Social & Demographic Trends Project. Pew Research Center, May 10, 2022. https://www.pewresearch.org/social-trends/2015/06/11/chapter-7-the-many-dimensions-of-hispanic-racial-identity/


6 The undercounting of racial and ethnic groups is often the result of a combination of circumstances including but not limited to: mistrust or fear of the government, housing instability, a lack of proficiency in English, and differences in perceptions of race and ethnicity in comparison to researchers and data collectors. Cohn, D’Vera et al. “Key Facts about the Quality of the 2020 Census.” Pew Research Center, June 8, 2022. https://www.pewresearch.org/fact-tank/2022/06/08/key-facts-about-the-quality-of-the-2020-census/#:-text=There%20was%20a%20record%20undercount%20in%202010. See also, James, Cara et al. “Modernizing Race and Ethnicity Data in Our Federal Health Programs.” Commonwealth Fund, October 26, 2021. https://www.commonwealthfund.org/blog/2021/modernizing-race-and-ethnicity-data-our-federal-health-programs.


way to represent the various groups under the MENA category, the evidence shows that a majority of individuals in this group do not consider themselves to be White and are often not be perceived as White by others. Continuing to aggregate MENA individuals with Whites may hide important health and health care experiences and inequalities that are unique to MENA populations. Therefore, Families USA supports the addition of the MENA category to the OMB Race and Ethnicity Statistical Standards.

We also encourage OMB to explore additional strategies to addressing barriers faced by diverse communities when self-reporting demographic information. There are a number of persistent barriers to accurately collecting demographic information, such as housing insecurity, language accessibility, and privacy concerns. For instance, one in five Arab Americans lack full English-speaking proficiency, which is associated with undercounting in federal surveys. In order to guarantee that Federal data collection efforts, such as the U.S. Census, are accessible to all Americans, these barriers need to be addressed.

3. Adoption of the detailed race and ethnicity categories as the default standard

Families USA supports using the detailed race and ethnicity categories as the default standard for Federal data collection with flexibility to revert to using the minimum race and ethnicity categories in select circumstances. Detailed and disaggregated data provides governments and other key stakeholders with the best information for supporting communities, directing advocacy, and addressing health inequities. The current minimum race and ethnicity standards use mega categories that often encompass multiple racial and ethnic populations and are therefore too broad and run the risk of hiding critical disparities among racial and ethnic populations and sub-populations. For example, there are 574 federally recognized Indian Nations within the U.S., that are ethnically, culturally, and linguistically diverse. Grouping all Indian Nations under one racial category – American Indian and Alaskan Native – erases the nuances and inequities unique to individual tribes. Among Asian Americans, a lack of disaggregation in Federal data collection often obscures the challenges facing many Asian American communities, and contributes to the model minority myth. Asian American populations and sub-populations are some of the most economically diverse and divided racial groups. Therefore, when they are represented as one category within race and ethnicity data, important disparities unique to certain sub-populations are hidden, resulting in a failure to recognize sub-populations that may be in need of

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8851556/#:~:text=People%20of%20Middle%20Eastern%20and,seen%20by%20others%20as%20White.
10 Ibid.
11 Ibid.
resources.\textsuperscript{19} For example, Indian Americans, one of the largest populations of Asian Americans in the U.S., have one of the highest median household incomes and education rates among Asian American groups.\textsuperscript{20} When grouping Indian Americans with smaller Asian American groups, such as Mongolians who make up less than 1\% of the total U.S. Asian population, the more general or aggregated data acts to obscure the differences between groups.\textsuperscript{21} When it comes to health disparities, a lack of desegregated data can result in oversight of major healthcare disparities. For example, the uninsured rate for Mongolian non-elderly people living in the U.S. is 32\%, markedly higher than the 5\% uninsured rate of non-elderly Indians living in the U.S. and the 7\% uninsured rate for all Asians, illustrating how aggregate data can misrepresent sub-populations.\textsuperscript{22}

While Families USA supports the use of detailed race and ethnicity categories as the default standard, we also recognize there are situations where the drawbacks of using more disaggregated data collection methods outweigh the benefits. For instance, collecting race and ethnicity information through more detailed and disaggregated categories may risk revealing respondent identities, particularly among smaller populations.\textsuperscript{23} Due to this concern, among others, we recommend OMB require the use of the detailed race and ethnicity categories in a way that provides Federal agencies with limited flexibility to revert to the minimum categories in certain circumstances.

a. **Improvements to the detailed race and ethnicity question.** There are a number of limitations associated with the detailed race and ethnicity category that may result in respondent confusion and reduce the quality of the data collected. We have developed the following recommendations to improve the detailed race and ethnicity question:

i. **Families USA urges OMB to clarify, streamline, and simplify the Combined Question with Minimum and Detailed Categories.** The current formatting and instructions for the proposed combined question present a few key drawbacks that may impact response rates and the quality of the collected data. One drawback is the lack of clear instructions for situations when respondent(s) are unable to provide more detailed race and ethnicity information beyond selecting a broad race and/or ethnicity category. For the detailed category, respondents are instructed to “Select all that apply AND enter additional details in the spaces below.” These instructions suggest that for every broad race or ethnicity selected, participants must select a corresponding country-specific ethnicity. We are concerned that this may create confusion for participants who identify with countries outside of their relative race and ethnic categories or participants who are unaware of their country-specific ethnic background. For example, an Afro-Latino individual from Colombia may check off both the Hispanic or Latino and Black or African American Categories as well as the Colombian category in the detailed section below the Hispanic category. This individual may not identify with any country-specific

\textsuperscript{19} Ibid.
\textsuperscript{21} Ibid
ethnicity within the *Black or African American* category, but the instructions indicate they would need to provide details within that category as well. This can be remedied through additional clarification in the instructions or the inclusion of an *Unknown* or *Not Applicable* category.

ii. **Families USA encourages OMB to include an American Descendant of Slavery (ADOS) or American Freedman Option within the Black or African American Category.** Descendants of enslaved Americans are rarely identified within race and ethnicity data collection efforts despite evidence that ADOS communities experience significant inequities in health, education, and poverty levels.\(^{24,25}\) Comprehensive identification of descendants of enslaved people is critical to better understanding the generational impact of chattel slavery on the health and well-being of Black Americans and inform equitable policy responses that better support ADOS communities.

Families USA is encouraged by OMB’s recent efforts to improve the 1997 Statistical Policy Directive No. 15. Strengthening Federal data standards on the collection of race and ethnicity information is critical to improving our understanding of the health and health care needs and inequities among diverse communities across the United States. It is through this improved understanding that effective and equitable policy solutions can be enacted to ensure every American has access to good health and health care regardless of who they are, what they look like, and where they live.

Thank you for considering these comments, please contact Staci Lofton, slofton@familiesusa.org if you have any questions.

Sincerely,

Frederick Isasi, JD, MPH  
Executive Director  
Families USA