

Issues Related to “Race” and “Ethnic” Groups in Washington State: Guidelines for Data Analysis and Reactions to Race BRFSS Module

Mod: Juliet VanEenwyk, State Epidemiologist – Non-Infectious Conditions, Washington State Department of Health; Lillian S. Bensley, Psychosocial Epidemiologist, Washington State Department of Health

© 2009 Washington State Journal of Public Health Practice. All Rights Reserved.

Abstract: Background: People of different “races” and “ethnic” groups differ in health status. Grouping people of diverse backgrounds into specific “races” and “ethnicities” may mask important inequities. Additionally, little attention has been paid to experiences of racism in Washington State. This talk will 1) provide information from the Washington State Department of Health’s updated “Guidelines for Using Racial and Ethnic Groups in Data Analyses” and 2) report on experiences of racism in Washington. Methods: 1) We assessed the numbers of persons and differences in health indicators among “race” and “ethnic” groups using as fine a level of detail as possible for birth and death certificates and the Behavioral Risk Factor Surveillance System (BRFSS). 2) We used the “reactions to race” module from the 2004 BRFSS to assess perception of poorer treatment in general and in health care settings, and related emotional upset and physical symptoms, by race and ethnicity defined as how others usually viewed the respondent. Results: 1) Although often reported as one group, Asians and Native Hawaiians or Other Pacific Islanders show large differences on important health indicators. There are also differences for some health indicators among Asian subgroups. 2) About one-quarter of non-Hispanic blacks and almost 20% of Hispanics reported poorer treatment in general due to race; fewer respondents reported poorer treatment in health care settings, but disparities persisted. Conclusions: Providing meaningful data by “race” and “ethnic” group can be challenging due to lack of clear cut groupings and small numbers of respondents in some groups. We recommend working with stakeholders to best understand how to present health data for subpopulations in Washington and to obtain additional perspective on experiences of racism.