

Race and Ethnicity Overview

Why Race and Ethnicity Data are Important

As part of your community assessment, you should review data on race and ethnicity, and plan your interventions and fund-raising strategies accordingly. Minority populations are likely to have cultural differences that affect the ways in which they view food, physical activity, and health. For example, research shows that, in general, African American, Latino and Asian parents are likely to perceive elevated body weight as normal or healthy compared to the existing recommendations for healthy body weight (Wang and Tussing 2004).

In addition to population data, you will also collect health data as part of your community assessment. If this health data has been analyzed by race or ethnicity, it can tell you whether minority populations are facing special challenges best met through tailored interventions. For example, in 2003 in Alabama, 65.9% of white mothers initiated breastfeeding their infants compared to 40.2% of Black and other race mothers (Dagostin and Woolbright 2005). Although the proportion of all mothers initiating breastfeeding has increased over the past several years in Alabama, the gap between white mothers and Black and other race mothers has always existed. Breastfeeding advocates in the state have worked on several interventions targeting Black and African-American women. For example, Children's Health System in Birmingham was chosen as a demonstration site for the National Breastfeeding Awareness Campaign (Campaign). The primary focus of this Campaign was the African-American family. A publication, *An Easy Guide to Breastfeeding for African American Women*, was widely distributed throughout the state. Campaign billboards were placed in strategic locations throughout Alabama. Some of the Campaign's grassroots efforts included training for providers of direct patient care, distribution of educational materials in local health departments, participation in a special event for World Breastfeeding Week at a local health department, and participation in a Health Fair at an African American church. Although the Campaign is over, Alabama hopes to continue focusing on populations that might not have access to accurate breastfeeding information. In addition to the Campaign, the Alabama Department of Public Health has billboards, pamphlets, and posters depicting Black and other race mothers breastfeeding their child.

Special funding opportunities exist for helping minority populations and are available from local, state, and national foundations and from state health departments and federal health agencies. You need to understand your community's race and ethnic composition to present funders with a compelling statement of need.

The racial and ethnic diversity in your community will affect how you plan programs. To be successful, you need to involve people from the cultures in your community in conducting the community assessment and in designing your program.

How to Interpret the Race and Ethnicity Numbers

The primary source for race and ethnicity data is the U.S. Census. For all states and highly-populated areas (e.g. New York City, Phoenix, Arizona or the Cleveland-Akron, Ohio area), the American Community Survey has released annual census data since 2000. For smaller communities you will have to make do with 2000 data. You can find this race and ethnicity data for your community at www.census.gov.

If you are not familiar with the way race and ethnicity data are presented in the census, at first glance it will be confusing. Understanding the difference between race and ethnicity will help. In non-technical terms, race refers to the generally recognized human races, such as Asian, Black, and Caucasian. Ethnicity refers to a cultural group, like Slavic or Hispanic. Starting in 2000, the U.S. Census uses the following seven *race* categories:

- White,
- Black or African American,
- American Indian and Alaska Native,
- Asian,
- Native Hawaiian and Other Pacific Islander,
- Other, and
- Two or more races.

For *ethnicity*, the census has two categories: 1) Hispanic or Latino and 2) Not Hispanic or Latino. In practical terms this means there are Hispanics of the White race, as well as Hispanics of Black or other Races, and there are non-Hispanics of different races. For example, say Friendly County census data reported 50% Whites and 50% Blacks, equaling 100%. It could also have reported 25% non-Hispanic Whites and 75% of Hispanic or Latino Origin. This would mean that 25% of Friendly County's residents are white Hispanics and 50% are Black Hispanics.

In some cases you may want to review changes in ethnic or race composition over time. Perhaps you are making the argument in a grant proposal that the percentage of Hispanics in your community is growing and, therefore, your community needs funding to increase outreach to Hispanics. In reviewing such data you will find a complication caused by the U.S. Census – in 2000 the census changed the standards for collecting information on race and ethnicity. Fortunately, in some reports authors will have kindly converted the pre-2000 data to be compatible with the 2000-and-after data. When data have not been converted for compatibility and you believe you must use both pre- and post-2000 data, it is unlikely that you will have to do conversions yourself. In most cases someone in your county will already have done the work. Check with the health department, city or county offices, or the U.S. census website can help.

Also know that federal health agencies reporting health data by race and ethnicity are implementing the new standards for collecting information on race and

ethnicity. But, agencies are implementing the new standards at different times. If you are using this data be aware of these changes.

As noted above, the U.S. Census uses two ethnic categories – Hispanic or Latino and Not Hispanic or Latino. Many communities in the United States have more ethnic groups than these two, and you may want information on the different ethnic groups in your community. Public agencies in your community and state may have already collected this data. Try the health department, social service agencies, philanthropic foundations, schools, or area colleges and universities.

What to Do in Your Community

- Understand your community's race and ethnicity population data.
- Try and find data and information on the ethnicities in your community other than Hispanic or Latino if you know the other minority populations are present.
- Find health data that are analyzed by race and ethnicity.
- Invite people from the racial and ethnic minority groups in your community to be part of the community assessment team.
- If health disparities exist in your community, consider setting goals and objectives to close these gaps.
- Review the current literature on nutrition, physical activity and health attitudes and behaviors for the races and ethnicities in your community before planning programs. See the "Carrying Out the Interventions – Guidance" section in the Implement the Plan Chapter for additional resources.