

Because facts matter.

Date: February 15, 2013

To: Rep. Mitch Greenlick, Chair; Rep. Alisa Keny-Guyer, Vice-Chair; Rep. Jim

Thompson, Vice-Chair; Members of House Health Care Committee,

Oregon Legislative Assembly

From: Janet Bauer, Policy Analyst

Re: HB 2134, Standards for Collection of Demographic Data

I write in support of HB 2134, a bill to establish meaningful, uniform data collection standards for Oregon's human services programs. Oregon Center for Public Policy urges the committee to approve this bill with the "-1" amendment.

Quality demographic information is important for designing human services that advance health and create opportunity for all Oregonians. The Oregon Health Authority and the Department of Human Services typically collect demographic information about those being served and those who might need assistance. Unfortunately, problems with the quality and availability of race and ethnicity data prevent a full assessment of whether programs are serving all Oregonians equitably and effectively.

A recent Oregon effort to use available racial and ethnic information to assess human services programs illustrates the problem. The <u>State of Equity Report, Phase 1</u>, which summarizes that investigation, found that limitations in the availability and quality of data hampered program assessment in Oregon. These limitations included:

<u>Variability in data guidelines</u>. The study found that while divisions appeared to conform to the race and ethnicity data collection guidelines used by the federal Office of Management and Budget, Oregon's efforts to expand beyond them lacked uniformity. For instance, some divisions asked individuals identifying as multi-racial to describe a "primary" race, while others asked for ancestry or heritage information. Still other divisions categorized such individual's race as "other," "refused" or "unknown." In addition, some divisions gathered "preferred language" data, while others did not.

<u>Data not collected</u>. Despite having guidelines for data collection, some divisions did not collect program participant data by race and ethnicity consistently, resulting in some data sets having a large number of "missing" race data.

<u>Inaccessible data</u>. *The State of Equity Report* found that not every division could generate common program evaluation data by race and ethnicity as requested because some data systems did not permit creation of all of the necessary race

categories, such as non-Latino race groups. These problems caused many gaps in the analysis. For instance, it meant that the Seniors and People with Disabilities Division could not provide data by race and ethnicity for three of the six requested "Key Performance Measures" (KPMs) — the standardized, publicly vetted measures periodically reported to the legislature. Specifically, it could not determine the share of seniors and adults with disabilities by race and ethnicity who were re-abused within 12 months. Related to another measure, it could not determine by race and ethnicity the percent of people receiving services who were working in an integrated employment setting.

Other divisions may have possessed the requested data but did not have the resources to produce the associated report. This suggests that the design of some data system did not allow administrators to reasonably access important program information. This problem prevented the Children, Adults and Families Division from providing information by race and ethnicity on the percent of TANF cases not returning to the program within 18 months of exit. It was also unable, within its budget, to describe by race and ethnicity the timeliness and permanency of child reunifications or the timeliness of foster care-related adoptions.

The cumulative impact of these difficulties was substantial. Of the race and ethnicity assessments requested of the Oregon Health Authority and Department of Human Services for the *State of Equity Report* analysis, just 62 percent were filled. One division provided information on only a third of the measures requested.

To conclude, Oregon's human services programs lack adequate, uniformly applied standards for data collection that permit important and meaningful program analysis. HB 2134 with the -1 amendment directing OHA and DHS to develop uniform standards for collecting data by race, ethnicity and preferred spoken and written language would help ensure the state serves all Oregonians effectively.

Thank you for your consideration of this important legislation. Please feel free to contact me with any questions at 503-873-1201.