



# Racial Disparities and Disproportionality Index

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Today's emergency punctuates the deep racial and ethnic disparities in our communities and across the country. Efforts to build multi-sector partnerships to create and sustain change grounded in equity have long been hampered by system-level data silos. The lack of multi-sector efforts to collect and analyze data has prevented holistic approaches to meaningfully address the root causes of racialized inequities

To address this critical gap, CSH developed a [Racial Disparities and Disproportionality Index \("RDDI"\)](#) that looks at 16 unique systems and measures whether a racial and/or ethnic group's representation in a particular public system is proportionate to, over or below their representation in the overall population (proportionality) and also allows for the examination of systematic differences between groups and geographies (disparities).

## The Role of Data in Centering Racial Equity

Disaggregating data by race and ethnicity is key for system leaders and practitioners working to center racial equity in critical systems redesign. On average, systems tend to report data on whole populations, which overlooks key nuances in the differences in access, systems flow and outcomes across various population groups which may inadvertently exacerbate existing inequities. Disaggregating data by race and ethnicity helps to:

- call attention to racial trends, disparities and inequities that are masked by aggregated data, and
- allows for improved accountability in programming and policymaking.

Stratified data helps confront the intersectional implications of inequities. Racial equity is both a process and an outcome and must be centered in meaningful systems redesign work. Advancing racial equity means disrupting and dismantling structures that continue to produce inequitable outcomes.

## Interpreting the Racial Disparities and Disproportionality Index

The RDDI determines disproportionality rates by measuring whether a racial group's representation in a particular public system is proportionate to their representation in the overall population.

- An index of 1 signifies equal representation,
- An index below 1 signifies underrepresentation, and
- An index above 1 signifies overrepresentation in a particular system.

In addition, the RDDI provides a standardized comparison between groups. The RDDI also includes a critical element distinguishing it from other standard indices. Whereas most other indices use white populations as the baseline comparison group for all other racial and ethnic groups (e.g., black rates / white rates; Native American rates / white rates, etc.), CSH's index compares each

group to the aggregation of all other groups, and in effect de-centers “whiteness” as the standard from which all other groups are measured. CSH’s Index can be viewed as the “likelihood of one group experiencing an event, compared to the likelihood of another group experiencing that same event.”

## **Systems Included in the RDDI**

The 16 systems analyzed by the RDDI are:

- Chronic Homeless
- Non Chronic Homeless
- Veterans
- Homeless Families
- Child Welfare Involved Families
- Unaccompanied Transition Aged Youth (TAY)
- Justice Involved Transition Aged Youth (TAY)
- Prison
- Jail
- Developmental Disability (DD) Residential
- Developmental Disability (DD) Waitlist (on the waitlist for services)
- Developmental Disability (DD) ICF (in Intermediate Care Facility)
- Mental Health (MH) Institutional (in institutional setting)
- Mental Health (MH) Residential (in residential setting)
- Aging
- Substance Use

## **Limitations**

Historically, data has been used in ways that further entrench racial inequities far more often than it has been used to shed light on or rectify them. Unacknowledged blind spots in datasets, analyses, and interpretations may result in the compounding of inequities, as overlooked populations are left unaccounted for. As with all datasets, the information that the RDDI is modeled on contains limitations, as does the analysis presented here. It is our goal in outlining those limitations to minimize that compounding effect, and to call for the generation of higher quality data that is more sensitive to inequity across systems.

All of the data used in the RDDI is pulled from public data sources, typically from government agencies that administer services and report on the demographics of their recipients. Limitations inherent in this data fit into a few broad categories:

1. Non-comprehensive categorization within systems
2. Inconsistent categorization across systems
3. Scale dependencies in data
4. Inconsistent reporting periods or timeframes

While the background data on state demographics consistently refers to the same source (American Community Survey data), the racial and ethnic categories used in the ACS are not always mirrored in the public datasets that were used to calculate disparity index values for some systems.

As an illustrative example, ACS uses different categories for *Asian* and for *Native Hawaiian or Other Pacific Islander*. Some of the systems we account for in this analysis use broader categories than the ACS, however, resulting in groupings like 'Asian/Pacific Islander'. While it is established that Native Hawaiian people experience poverty at higher rates than Asian Americans, this distinction in experience is lost by grouping these categories together.

## How to Use the Tool

By default, the RDDI shows each system's equity index as part of a stacked bar chart, organized by state. This can be broadly interpreted to show the cumulative disparity on a state by state basis, where larger portions of each stacked bar point to the primary drivers toward each state's cumulative total.

Users can manipulate the data in a variety of ways:

- Hover over a section of the bar chart to see a pop-up detail for any index component
- Click on a state to see the breakdown across systems in the lower half of the visualization
- Use the Race/Ethnicity filter to explore disparity as it pertains to specific groups
- Use the System filter to explore disparity within specific administrative systems
- Click the 'Download' button in the bottom right to export a .jpg or .pdf of your custom view

## Where to next? Using Data to Advance Racial Equity

Data is the guide, not the destination. It is CSH's hope that this tool is used as a guide in service of achieving more equitable outcomes for those most impacted and disproportionately represented across crisis systems. Data matters, but only in service of designing a more just and equitable world.

*Recommended strategies for data-driven approaches to center equity:*

- Use disaggregated data to identify inequities in access, systems flow and disparate outcomes.
- Ground disaggregated data in structural and institutional explanations for how disparities occur.
- Examine and address systemic factors that perpetuate inequitable outcomes.
- Work inclusively with those who are disproportionately impacted to identify and address root causes of inequities.
- Build authentic, fiscally sustainable and long standing cross-sector community partnerships (to include culturally and ethnically specific organizations) to examine opportunities for meaningful data-sharing and coordinated systems of care.
- Apply a targeted universalism framework that utilizes an inclusive process in order to develop strategies designed to achieve equitable outcomes for all and direct policy and systems change.
- Routinely monitor data so that interventions are able to be reoriented/ course-corrected based on outcomes data stratified by race and ethnicity.