

Disaggregation of Middle Eastern and North African (MENA) as a racial category: Improving data equity in the 2023 Community Health Equity Survey (CHES)

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Background

1.06% of the US population and 1.62% of the MA population identified as Middle Eastern or North African (MENA) alone or in combination with other racial categories in the 2020 Census. 1 and ethnic-religions. Immigrants from MENA countries, including Lebanon, Syria, Egypt, Morocco, Iraq, Jordan, Palestine, Yemen, Tunisia, Algeria, Libya, and many Gulf countries, came to the U.S. over the course of four waves.²

Historical and geopolitical events have both driven MENA immigration waves and resulted in reactive U.S. immigration policies that have perpetuated Islamophobia. Systems of oppression like Islamophobia drive social determinants of health and drive health inequities. U.S. naturalization laws and court cases that prioritized citizenship of certain groups, including the guidance to categorize MENA residents as 'White'. MENA residents have never had a dedicated race or ethnicity category on the U.S. Census and have been expected to utilize other racial categories.

Census race and ethnicity data are used to determine state congressional redistricting plans, monitor access to home mortgage loans, and assist minority business development⁴, making true representation of citizens' identities vital to ensuring equitable distribution of resources that contribute directly to health. Population level surveys are important tools to assess health outcome burden and identify inequities within and across populations and along the health equity pathway. The 2023 Community Health Equity Survey (CHES) was conducted to better understand the health-related needs facing Massachusetts (MA) residents and how systems of oppression contribute to inequities along the pathway to health.



SCAN ME

Watch and learn more about **CHEI's Racial Justice Framing** including the **CHEI Health** Inequities **Pathway**

First Wave: 1870s-1924 (~110,000 people)

Second Wave: 1948 to early 1960s (~80,000 people)

Third Wave: 1965 to 1990s (~400,000 people)

Fourth Wave: 2000s to Present

MIDDLE EASTERN/NORTH AFRICAN U.S. IMMIGRATION WAVES AND SELECT POLICIES

Racism is... A system of advantage based on race David Wellman

1915: Dow v. United States

An appeals judge rules that Syrians should be classified as 'white persons', allowing Arab Christians to be granted U.S. citizenship⁵

1977: Statistical Policy Directive 15

The Office of Management and Budget (OMB) classifies descendants from Middle East and North Africa as "White" 6

1997: Revisions to the Standards

OMB states that further research is needed to determine the best way to improve data on MENA population group⁷

2023: Revisions to OMB Statistical Policy Directive No. 15

OMB adds 'MENA' as new minimum reporting category and removes references to MENA from 'White' category.6

Methods

The 2023 CHES was a non-probabilistic population-based

- characteristics of respondents identifying as MENA to the

CHES Race/Ethnicity Question

- ☐ Asian
- ☐ Hispanic or Latine/a/o
- (specify below)
- White
- Not sure

survey of MA residents aged 14+ administered July - Nov 2023 in 11 languages. In response to national dialogue and analysis of previous surveys, MENA was added as a response option in the survey's combined race/Hispanic ethnicity question. We compared:

 The unweighted distribution of demographic full CHES sample.

 Health-related indicators for those who self-identified as MENA to those who identified as other racial groups.

We calculated prevalence rates by race/ethnicity group and prevalence rate ratios with 95% confidence intervals (CIs) weighted to the Massachusetts distribution of age, race/ethnicity, education, and gender. Prevalence rate ratio estimates were considered statistically significant if the 95% CI did not include 1.0.

What is your race or ethnicity? Select all that apply.

☐ American Indian or Alaska Native (specify below)

- ☐ Black or African American
- ☐ Middle Eastern or North African ■ Native Hawaiian or Pacific Islander
- ☐ Other (specify below)
- ☐ Prefer not to answer

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SCAN ME Learn more about CHES 2023 Background & Resources, including a copy

of the full survey

Compared to the full sample, the percentage of MENA respondents identifying as women was lower (59.1% vs 73.0%) and the percentage who preferred a language other than English (36.7% vs 14.3%) and who were born outside the U.S. (34.4% vs 15.3%) were higher.

Table 1: Demographic₁ characteristics of MA respondents, 18 years or older, who responded to the survey and those who identified as Middle Eastern or North African (MENA)

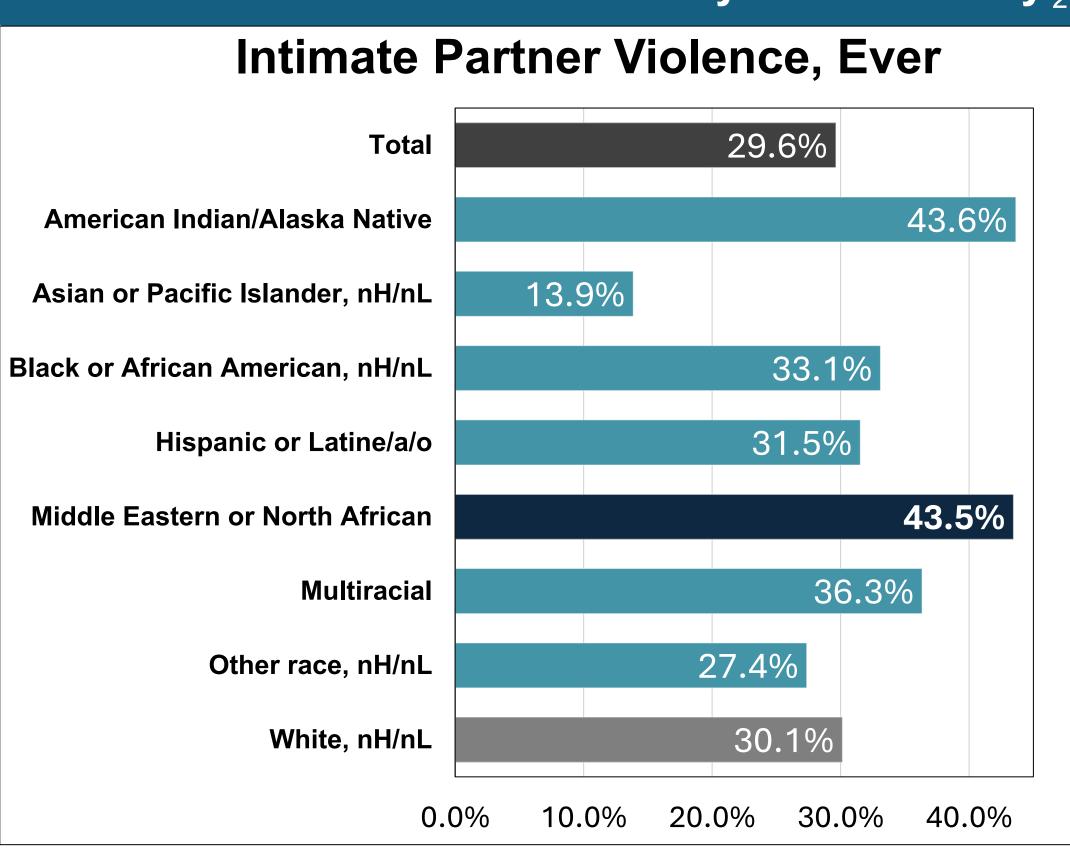
Category	Characteristic	Full Sample (N=18379)		MENA (N=161)	
		n	%	n	%
Age	14-17	2073	11.3%	43	26.7%
	18-59	10487	57.1%	100	62.1%
	60+	5819	31.7%	18	11.2%
Gender Identity	Woman, girl, female	12864	72.9%	91	59.1%
	Man, boy, male	4137	23.4%	44	28.6%
Preferred Language	English	15282	84.0%	94	58.4%
	Language Other Than English	2608	14.3%	59	36.7%
Nativity	Not born in the US	2811	15.3%	55	34.4%
	Born in the US	15323	83.6%	101	63.1%
Education (18 +)	Less Than High School	841	5.3%	11	9.4%
	High School/GED	1325	8.3%	5	4.3%
	Some College	1674	10.5%	14	12.0%
	Bachelor's Degree	4365	27.3%	27	23.1%
	Graduate Degree	5921	37.0%	55	47.0 %
	Graduate Degree	J3Z I	37.070	J J J	147.0 /0

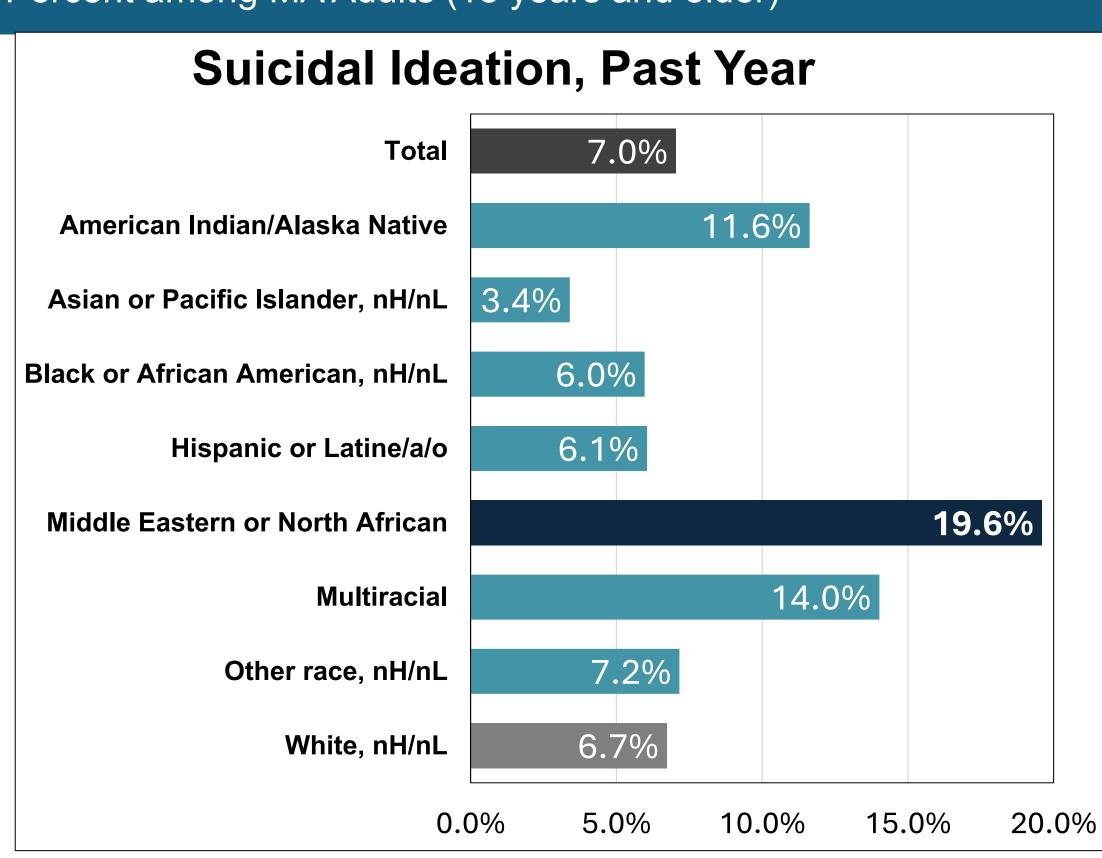
Results

Compared to White, non-Hispanic/non-Latine (nH/nL) adult respondents, MENA adult respondents were:

- 1.44 times as likely to have ever experienced intimate partner violence (95% CI [1.26,1.65]), and
- 2.67 times as likely to report suicidal ideation in the past year (95% CI [2.08,3.43]); 19.6% reported past year suicidal ideation, the highest percentage among any race/ethnicity group.

Health Outcomes by Race/Ethnicity 2 – Percent among MA Adults (18 years and older)





₁ Listed n and % may not total sample size/100% due to unreported 'prefer not to answer' or 'other' response options. Ns and % are unweighted.

₂ To allow for report of data on racialized groups often underrepresented in datasets, respondents identifying as AI/AN or MENA were assigned to these groups, regardless of other selected identities.

Conclusions

MENA residents have unique experiences, influenced by historical context and systems of oppression that would otherwise be obscured in other race/ethnicity categories in the absence of equity-centered data collection practices. By including a MENA response option and disaggregating analyses by MENA identity, CHES 2023 highlights:

- The imperative that the use of standardized race/ethnicity categories reflect the unique identities, lived experiences, and strengths of all residents
- The need for equity-centered data collection and analysis to inform action to address the social and structural drivers that impact the health and well-being of MENA residents along the health inequities pathway

Acknowledgements

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