Racial Equity Data Road Map:
Frequently Asked Questions

The Racial Equity Data Road Map is a tool toward eliminating structural racism. Created by the Massachusetts Department of Public Health, it's a collection of guiding questions, tools, and resources to assist programs in taking concrete steps to better identify, understand, and act to address racial inequities.

Who should use the Racial Equity Data Road Map?

Anyone interested in using data to improve racial equity (in systems and policy) can use the Road Map. This includes, but is not limited to:

- Epidemiologists
- Program staff
- Nonprofit organizations
- State health departments
- Health care systems

Why should I use the Data Road Map?

It is important to examine the role that data can have in perpetuating and failing to address health inequities. The Road Map can help you collect and use data to promote racial equity. The Road Map outlines suggestions and best practices for using data to improve health outcomes by race and ethnicity.

How do I begin using the Data Road Map?

The Road Map has seven sections, which each offer guiding questions, tools, and resources. You can customize your use of the Road Map to best meet the needs of your program. And you can adapt how you use the Road Map depending on your experience with racial equity work, data analysis, and quality improvement.

You don't have to follow the Road Map step-by-step. You can use it in a flexible way to meet your program's needs, based on its goals, structures, and capabilities. There are many entry points to the Road Map, and you can begin at different places. The table below explains the purpose of each section and why you might want to begin with that section.

ROAD MAP SECTION	PURPOSE	WHY TO BEGIN HERE
Section 1: Looking at health issues with a focus on the impact of racism. **See pages 13-16 of the Road Map.**	Describes why issues should be looked at with a racial equity lens and introduces a tool for programs to use in their work.	Begin here if you need help reframing health outcomes by centering racial equity. This section will assist you in thinking about the best ways to address racial inequities focused on structural factors. It introduces the Racial Equity Reframing Tool to help you center racial equity in your work.

ROAD MAP SECTION	PURPOSE	WHY TO BEGIN HERE
Section 2: Determining if program is ready to use data to address racism. **See pages 17-22 of the Road Map.**	Encourages programs to use a self-assessment to better understand which systems are in place to support racial equity work using data.	Begin here if you are trying to find out whether basic systems are in place to support data-driven racial equity work. Use the Racial Equity Program Data Readiness Assessment, which is a program self-assessment. It outlines five standards for program data readiness: 1. Data capacity 2. Performance measurement 3. Data quality 4. Contextualized data 5. Quality improvement
Section 3: Understanding what the data say about differences in health outcomes by race and ethnicity. **See pages 23-28 of the Road Map.**	Describes why it is important to look at data in smaller units, such as race, ethnicity, or zip code, and gives suggestions on how to do this. Provides guidance on comparing data across sub-groups to see whether there are inequities.	Begin here when you are ready to identify inequities within data. Disaggregated data highlight health inequities, so policy and practice can address them. The first step is to break down the data. This will show how health outcomes can be different between racial and ethnic groups or specific communities.
Section 4: Using other sources of data to uncover causes of the differences. **See pages 29-38 of the Road Map.**	Provides suggestions on how to describe data with historical and structural context, with a focus on engaging the community.	Begin here if you have an identified inequity you are trying to address. Learn about using supplemental information gathered from the community (also known as contextualizing data) to understand the root causes of the inequity.

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Section 5: Making plans to act on differences that are unjust or avoidable. **See pages 39-42 of the Road Map.**	Introduces tools to support the process of identifying the most striking inequities and creating a plan to address them.	Begin here when you have identified more than one inequity and need to figure out which one to focus on first.
Section 6: Presenting data in ways that help people make sense of the numbers. **See pages 43-48 of the Road Map.**	Outlines important questions and things to consider in designing materials used to communicate data to key partners.	Begin here when you are ready to share findings and strategies. You can share with partners and community members by developing an "Equity Spotlight." This highlights and frames the inequity. The Equity Spotlight can deepen understanding of racial equity. It can also build buy-in for moving from data to action.
Section 7: Moving from data to action. **See pages 49-56 of the Road Map.**	Describes how to plan, put in place, and monitor the impact of interventions to address inequities.	Begin here if you are ready to carry out activities and assess how well they address an inequity. Activities should be evidence based or informed, tailored to and informed by the people most affected by the inequity, and designed to address the root causes.

What kinds of data can I use with the Road Map?

You can use a variety of data with the Road Map, such as:

- Program data (e.g., data from the Welcome Family home visiting program on pages 36-38 of the Road Map)
- Surveillance data (e.g., COVID-19 pregnancy surveillance)
- Survey data (e.g., Pregnancy Risk Assessment Monitoring System, known as PRAMS, or Behavioral Risk Factor Surveillance System, known as BRFSS)
- Administrative data (e.g., vital records, hospital discharge data)

The data will vary based on the issue you want to address to increase racial equity.

Common individual-level demographic variables that help show how racism impacts health outcomes include:

- Race and ethnicity
- Language
- Place of birth
- Zip code

There are others, too. You can use community-level data to frame findings from analyzing individual-level data. And you can explain how broader oppression contributes to the findings.

Can I use the Road Map if I have missing data and small numbers?

If you do not have race and ethnicity data, you can analyze other measures. These may include country of origin, language, income, education, or zip code. Also consider why the data are missing. You can engage in a quality improvement project to refine your data. See pages 24-25 of the Road Map. With small numbers, patterns or noticeable differences can stand out. You should investigate them further, even if the findings are not statistically significant. In some cases, small numbers may signal a concern, especially if you don't expect any differences. See page 27 of the Road Map.

When the number of people within a group is small, presenting the data may identify individuals. This endangers privacy. The Massachusetts Department of Public Health outlines confidentiality procedures to protect the privacy of personal data. See page 25 of the Road Map.

Programs should also follow their agency's own policies on protecting the privacy and confidentiality of their data.

Can I use the Road Map to address other inequities related to gender, sexual orientation, income/poverty, etc.?

The Road Map can support all sorts of analyses that aim to look at and address inequities. Many of the same tools used to look at inequities by race, can also be used to look at inequities by other factors like poverty, gender, sexual orientation, etc. Focusing on racism is not at the exclusion of other forms of inequity; rather, an explicit focus on racism can also increase one's capacity to address other inequities. Being explicit about the role of racism in public health is key to being able to identify intentional, actionable strategies to promote health and racial equity. See pages 5-6 of the Road Map.

What does it mean to contextualize data?

Contextualizing data means describing the data and the root causes of inequities. It also means explaining connections to oppression (e.g., racism, sexism). Keep in mind both historic and current systems of oppression.

To contextualize data, you must work with community partners and collaborators. You can also look at data on individual and community experience. Doing these things will help you better understand and interpret the data. For resources to assist with contextualizing data, see pages 32-33 of the Road Map.

What does "moving from data to action" mean?

Moving from data to action means using your data to inform ways to address an inequity. It describes planning, putting in place, and tracking activities to respond to inequities. For example, designing a quality improvement project. See pages 49-57 of the Road Map.

Who can I contact for more information about the Road Map?

For more information about the Road Map, email **RESPIT@mass.gov.**