
Ms. Jeri Green

Committee Liaison Officer

Department of Commerce

U.S. Census Bureau

4600 Silver Hill Road, Room 8H182

Washington, DC 20233

National Advisory Committee on Racial, Ethnic, and Other Populations

The undersigned organizations are grateful for the opportunity to address the National Advisory

Committee on Racial, Ethnic, and Other Populations (NAC) on the critical importance of

including the lesbian, gay, bisexual, and transgender (LGBT) community in data collection efforts.

The Census Bureau (Bureau) has taken a leadership role and has been making excellent progress at improving data collection associated with same-sex cohabiting couples. We applaud the Bureau's recent decision to no longer recode same-sex spouses as unmarried partners in public data sources derived from the American Community Survey (ACS) and to include same-sex spouses among federal statistics that identify married couples. We urge the Bureau to build on that progress by immediately updating the "relationship to householder" question on appropriate surveys, developing an inclusive plan to include sexual orientation and gender identity in a broader range of federal data sets, and explicitly including gender identity in its Equal Employment Opportunity (EEO) policy.

I. Changes to the "Relationship to Householder" Question Should Be Implemented

Immediately

We applaud the Bureau's efforts to develop a "relationship to householder" question for surveys like the ACS that will explicitly identify same-sex husbands and wives, same-sex unmarried partners, opposite-sex husbands and wives, and opposite-sex unmarried partners. We understand that these changes will significantly improve the quality of same-sex couple data and, correspondingly, will significantly improve development of policy concerning married same-sex couples and their families. We are grateful for the decision to implement these changes on the Survey of Income and Program Participation and on the Current Population Survey.

However, we are concerned about delays in making these changes to the ACS, and we strongly encourage the Bureau to accelerate their implementation. As the questions have been successfully implemented on other national Census data collection efforts (e.g., Canada, United

Kingdom), and the Bureau has conducted its own study of the question wording, we believe that there is sufficient scientific evidence to support implementing these questions immediately onto the ACS.

II. The Bureau Should Develop a Plan to Include LGBT-Associated Questions in All Federal Data Sources

The Institute of Medicine's 2011 report on LGBT health disparities included a clear call for LGBT inclusions across a wide range of federal data sets focused on health, socio-economic status, and demographics. To date, federal statistical agencies have not developed a coordinated strategy that would move data collection efforts toward full LGBT inclusion. We encourage the Bureau, as the government's lead statistical agency, to show leadership in developing a plan for LGBT inclusion across federal data sources.

The Bureau has shown strong leadership in this area in the past, particularly in its efforts with the

Office of Management and Budget (OMB) to address the challenges associated with same-sex

couple data collection efforts. Already, a sexual orientation measure has been added to the

National Health Interview Survey (NHIS) and a similar measure is scheduled to be added to the

National Crime and Victimization Survey (NCVS). These efforts indicate a positive trend, but,

to date, neither survey includes a gender identity measure. We ask that the Bureau show

leadership and develop an interagency process to achieve full inclusion of sexual orientation and

gender identity measures within major federal surveys. These include the NHIS and the NCVS,

along with the American Community Survey, the Current Population Survey, and the Survey for

Income and Program Participation.

Without Accurate Data, It Is Harder to Respond to the Unmet Needs of the LGBT Population

Much of our knowledge about the family, health, economic, educational, and social status of

people in the United States comes from survey data. The incidence and qualitative experiences of

poverty, illness, unemployment, or income across racial, ethnic, and gender lines are routinely

measured through survey questions. Further, survey data are particularly important for assessing

the need for public policies that address racial, ethnic, gender, age, or group disparities in

important health and social outcomes, and data are necessary to evaluate the impact of those

policies.

However, we have much less information about whether and how life experiences differ by

sexual orientation and gender identity, creating a large scientific gap between what we know in

detail about other populations and what we know about LGBT people.

policy debates have heightened the need for high quality scientific data on the sexual orientation

and gender identity of adults, the aging population, and young people in the United States. In ongoing public discussions about lesbian, gay, bisexual, and transgender policy issues, the practical importance of good data that accurately describe the lives of LGBT people and their families has become increasingly obvious. Discussions of civil rights, program evaluation, public health, and the delivery of human services must rely on sound facts and analyses that come from survey research. But, often those facts are underdeveloped in the context of LGBT-related policy issues because so few surveys include measures of sexual orientation and gender identity that would allow for the identification of LGBT people.

Health, economic, and social surveys have always had to adapt to changing demands and changing times. For example, as family structures have changed, government and private surveys

in the United States have added questions and responses that allow the study of unmarried, cohabiting different-sex couples. Adding sexual orientation and gender identity measures is simply one more adaptation to the changing world that surveys are designed to study, in this case a world with an increasingly visible LGBT population.

Collecting more high-quality data on the disparities associated with LGBT status and other social, economic, and health concerns of LGBT communities is essential if federal, state, local, and nonprofit agencies are to adequately serve this population. The Bureau's inclusion of new response categories to the "relationship to householder" question in the ACS and other surveys has provided decision-makers with strong data about the presence and needs of same-sex couples in the United States. However, the question is limited in scope. We still know far too little about the presence and needs of lesbian, gay, bisexual, and transgender people that do not have a

partner or do not live with a partner. The crucial first step in building this knowledge is adding sexual orientation and gender identity survey measures that can help characterize the needs of LGBT respondents to publically-funded population surveys.

The National Strategy for Suicide Prevention recognizes LGBT populations as being at a higher risk for suicidal behavior than the general population, and recommends improved data collection as a measure to help reduce this health disparity. Additionally, the importance of data collection is recognized in the Affordable Care Act, which prioritizes data collection and directs the U.S. Secretary of Health and Human Services to collect a range of data on the health disparities associated with race, ethnicity, sex, disability status, and primary language, as well as any other factors deemed relevant to reducing disparities. In June 2011, Secretary Sebelius drew on this authority in the new LGBT Data Progression Plan, which commits the Department of Health and

Human Services to developing sexual orientation and gender identity questions for federally supported health surveys. This plan recognizes that, like other underserved populations such as communities of color and rural populations, LGBT individuals are more likely to be uninsured and report poorer health outcomes than the general population.

Other federal sources such as the Institute of Medicine, Healthy People 2020, the Substance Abuse and Mental Health Services Administration, and the National Healthcare Disparities Report indicate that LGBT individuals and their families are disproportionately likely to live in poverty, to be uninsured, and to face substantial barriers to quality health care, including refusals of care, substandard care, inequitable policies and practices, and exclusion from health outreach or education efforts.

III. The Bureau Should Explicitly Include Gender Identity Among the Protections in Its Equal Employment Opportunity Policy

We encourage the Bureau to update its Equal Employment Opportunity (EEO) policy to explicitly include gender identity. The Office of Personnel Management (OPM) explicitly forbids agencies from discriminating in employment on the basis of gender identity. The Office states that "sex" as a basis of discrimination includes gender identity.ii

issued operational guidance requiring every agency to "ensure that agency specific plans are in compliance with laws, rules, and regulations that make it unlawful for agencies to discriminate for or against an applicant or employee based on race, color, religion, sex (including pregnancy or gender identity), national origin, age, disability, sexual orientation or any other prohibited basis."iii We strongly urge the Bureau to adopt a policy that mirrors the OPM guidance, stating clearly that discrimination on the basis of sex (including gender identity) is prohibited.

We appreciate the Census Bureau's strong leadership on LGBT issues, as well as its decision to

introduce a revised "relationship to householder" question on appropriate surveys. We

encourage the Bureau to build on that leadership through adoption of the recommendations

included in this comment. If the Census Bureau or the National Advisory Committee has any

questions about the content of this comment, please contact Meghan Maury, Policy Counsel at

the National Gay and Lesbian Task Force, at (202) 639-6322, or by email at

mmaury@thetaskforce.org.

Sincerely,

National Gay and Lesbian Task Force

Advocates for Youth

American Civil Liberties Union

Anti-Defamation League

Bend the Arc: A Jewish Partnership for Justice

Center for Black Equity

CenterLink: The Community of LGBT Centers

Consortium of Higher Education LGBT Resource Professionals

Family Equality Council

Forward Together

Gay & Lesbian Advocates and Defenders (GLAD)

Gay, Lesbian, and Straight Education Network (GLSEN)

GLMA: Health Professionals Advancing LGBT Equality

Harvey Milk Foundation

Human Rights Campaign

L.A. Gay & Lesbian Center

Lambda Legal

LGBT Center of Raleigh

Long Island Gay and Lesbian Youth

The Long Island GLBT Community Center

Long Island GLBT Services Network

Marriage Equality USA

Memphis Gay and Lesbian Community Center

Movement Advancement Project

National Center for Lesbian Rights

National Center for Transgender Equality

National Coalition of Anti-Violence Programs

National Gay & Lesbian Chamber of Commerce

National Minority AIDS Council

Pacific Pride Foundation

Pride Center of Staten Island

Q Center - Oregon

Services and Advocacy for GLBT Elders (SAGE)

Services and Advocacy for GLBT Elders – Long Island

Sexuality Information and Education Council of the U.S. (SIECUS)

Transgender Education Network of Texas

The Trevor Project

Williams Institute, UCLA School of Law

Young Invincibles

7 Rivers LGBT Resource Center

i Sexual orientation and gender identity are different aspects of an individual's identity. Transgender people, like

anyone else, may be gay, straight, bisexual, or any other sexual orientation. The discriminatory treatment that some

ii Diversity & Inclusion Reference Materials, supra note 53. iii U.S. Office of Personnel Management, Guidance for Agency-Specific Diversity and Inclusion Strategic Plans 6

(2011).