HEALTH CARE STAKEHOLDER TALKING POINTS

What is SPD 15

SPD 15 or Statistical Policy Directive No. 15 (SPD 15) from the Office of Management and Budget (OMB) was initially developed in 1977 to provide consistent data on race and ethnicity throughout the Federal Government, including the decennial census, household surveys, and Federal administrative forms.

The goals of SPD 15 are to ensure the comparability of race and ethnicity across Federal datasets and to maximize the quality of these data by providing the format, language, and procedures for collecting the data are consistent.

How does SPD 15 show up in our everyday lives?

SPD 15 shows up in our everyday lives in different ways. From enrollment forms and applications to surveys and intake forms at the doctor's office, wherever you are asked to identify your race and ethnicity, you see SPD 15 in practice.

If you have ever filled in your race and ethnicity on a form, survey, or other document, then you have interacted with SPD 15. The race and ethnicity questions that we see on enrollment forms, clinical intake forms, and applications come directly from SPD 15.

What recent changes have happened to SPD 15? How does this impact me?

In March 2024, after nearly 30 years, OMB revised SPD 15. The revisions to SPD 15 are intended to result in more accurate and useful race and ethnicity data across the Federal government.

The new standards in SPD 15 will go into effect in 2029. Once in effect, there will be some changes in how race and ethnicity are identified:

(1) Currently here are two questions, one for race and one for ethnicity. With the new change the two questions will be combined into one question.

(2) Race categories have expanded to include Middle Eastern/North African as its own standalone race. Additionally, there is the option to choose two or more races for self-identification to reflect heritage and familial lineage.

(3) Under each race category, you will see ethnicities to choose from and have the opportunity to write in your ethnicity if you do not see the ethnicity you identify as.

These changes will allow you to more accurately identify yourself, enabling racial and/or ethnic community members to be more visible in the data collected.

The goal here is to be seen. When you are more visible within data sets, policymakers, health care providers, researchers, and other stakeholders are more likely to create programs and initiatives that take your identity into account much more than before.

How do health care organizations use SPD 15?

Health care organizations use SPD 15 in various ways.
Here are some examples:

CASE MANAGEMENT & CARE COORDINATION

Demographic data is used to improve health outcomes by identifying and coordinating culturally and linguistically appropriate services that support an individual's health and well-being.

IMPROVE POPULATION HEALTH

Detailed demographic data, including race and ethnicity, is necessary to support national reporting of population health outcomes, to improve insights into trends, and identify drivers of outcomes. Population health data has identified profound disparities in care and health outcomes. One such example is the threefold difference in maternal deaths for Black women compared to White women.

HEALTHCARE WORKFORCE

Demographic data also informs how hospitals and other healthcare providers provide culturally competent care. When the health care workforce has a similar racial and ethnic makeup to the communities it serves, providers are more likely to build trust with patients and provide quality care that considers how patients show up in the world. This can lead to greater adherence to medical treatment and improved health outcomes.

Why you should care about SPD 15?

People should care about SPD 15 because it is foundational to federal data collection. From the census to government administered health surveys, SPD 15 enables you to be visible in the data the federal government and other stakeholders collect. Without data standards like SPD 15, individuals who are not squarely aligned within a category can fall through the cracks, leaving them in a challenging position where they are not considered within the data.

Why should your health care provider care about SPD 15?

Health care providers should care about SPD 15 because disaggregating quality measures and health outcomes by race and ethnicity enables providers to identify gaps and disparities that may affect specific populations. Without this detailed data, providers may not see the full picture, which can create barriers to providing high-quality patient care.