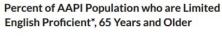
Diverse Elders and the Necessity of Disaggregated Data Collection

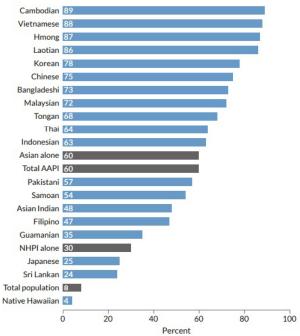
What do we mean by disaggregated data?

Instead of using one overarching category to collect data on diverse communities – i.e. "Latino" or "LGBT," – we encourage policymakers, advocates, and healthcare providers to disaggregate this data in order to collect more detailed information on population subgroups.

Why do we need to collect disaggregated data about diverse elders?

The absence of specific sub-categories for race, ethnicity, and LGBT status has meant that many diverse elders have fallen through the cracks. For example, the National Asian Pacific Center on Aging has advocated for the collection of data on 44 unique Asian American and Pacific Islander (AAPI) subgroups in the United States. There are vast differences between AAPI subgroups in terms of English proficiency, health disparities, access to services, and poverty levels. Similarly, there are 567 different American Indian tribes in the United States, each with different cultures, languages, and needs. **But we won't know these variations, or how to best address them, if we aren't capturing the data.**

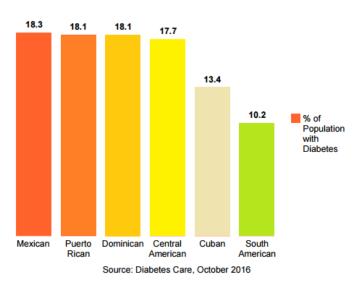






Source: U.S. Census Bureau, 2009-2011 ACS, 3-Year Estimates

Diabetes In Latino/a Populations



What do budget cuts mean for disaggregated data collection?

Census 2020 is in danger of being underfunded, with no LGBT questions or disaggregated race/ethnicity data, and millions of diverse older adults, including American Indian and Alaska Native Elders; Asian American, Pacific Islander, and Native Hawaiian Elders; Black and African American Elders; Hispanic and Latino Elders; and LGBT Elders could be missed. Efforts to remove questions about sexual orientation and gender identity from federal aging surveys have been challenged by groups like Services and Advocacy for GLBT Elders (SAGE). We refuse to be made invisible by lack of funding.