We Need More Inclusive and Timely Data to Inform Equitable Policy

When the COVID-19 pandemic hit, we realized two things: One, the most historically excluded and marginalized groups in our society, such as women of color and women in low-paid jobs, were likely going to get hit the hardest and be left out of the recovery responses again. And two, the pandemic was exacerbating longstanding inequities that have been perpetuated throughout history.

We measured the effects of the pandemic on women in real-time, which led to the Time’s Up Measure Up Data & Storytelling Dashboard. However, in building this tool we found a number of data gaps that prevented us from telling the full, intersectional story of this moment. As we started collecting data, we saw clearly that the foundation of our pre-COVID society was built like a house of cards: precarious and haphazardly. Our society has been established on generations of sexist and racist institutions, norms, and policy choices that systematically limit women’s power and devalue the work women do. Social hierarchies created on identity-based differences are perpetuated by keeping women from accessing power — whether economic, social, cultural, or political. In order to undo these power structures, we first need to improve the data we have on how people of different identities are experiencing this moment. After all, we can’t change what we don’t measure.

Drawing on lessons learned while creating the Time’s Up, Measure Up Data & Storytelling Dashboard, below are three necessary areas for data improvement for federal agencies to create appropriate policy interventions:
Axes of diversity and their intersections.

One of the goals of Time’s Up Measure Up, is to collect information and measure disparities for women of different identities, including intersectional identities (e.g., racial identity, gender identity, sexual orientation, disability, immigration status, etc). An example of this commitment can be seen below in the “Multiple Job Holders” metrics disaggregated by gender, race, and year. Many national surveys like the American Community Survey (ACS), Current Population Survey (CPS), and Behavioral Risk Factor Surveillance System (BRFSS) do collect information on race, ethnicity, age, gender, disability status, marital status, income, and family size. However the categories we use to collect this information often inappropriately conflate groups with vastly different experiences. For example, “Asian” is used as a catch-all to describe those with heritage in dozens of countries, but within subgroups of Asian American and Pacific Islander women, the pay gap compared to every dollar paid to white, non-Hispanic men ranges from 52 cents to 121 cents.

Breakdown by Race & Gender.

This chart displays trends in multiple job holders by combined gender, race, and ethnicity and by time period. Nationally in 2020, 4.42% of the employed white male population held more than one job, including at least one wage or salary job. By comparison, the female population group with the highest rate of multiple job holders was the Black or African American female population, where 5.77% of those employed held more than one job.

Additionally, the majority of publicly released estimates and statistics from these surveys do not report information for multiple axes of identity in combination with the social and economic factors that are of interest to researchers, and information at the intersection of these identities is rarely if ever reported.
Adequate sample size.

One of the biggest barriers to truly understanding women’s experiences during the pandemic is survey sample size. Given enough time and resources, researchers can generate estimates for different identity groups. However, for an estimate to accurately represent the total population of a given area, an adequate number of people must be surveyed in order to protect the privacy of individuals and provide enough statistical rigor to draw a meaningful conclusion. Groups that constitute a small proportion of the total population in a state often end up with missing data in these large national surveys because they don’t talk to enough people of each group. For example, a single year of CPS data for the “Multiple Job Holders” metric in the Data & Storytelling Dashboard is calculated from a total sample of nearly 600,000 unique surveys; however because of how the data are collected, more than 1 out of every 5 groupings of state, gender, and race/ethnicity could not be displayed because there were too few respondents in those categories. Native Americans had more than 75% of their data points redacted because of this data deficiency. However an easy solution exists for this problem. Federal surveys simply need to reach out to more people in these smaller population groups to get accurate estimates for them. This is an additional cost for the surveys, but well worth it to have inclusive data that can be helpful in crafting policy.

Data timeliness.

Lots of data exist that can help us better understand the factors holding women back right now. However, it takes a year or longer for these data to be publicly reported and available for analysis so real-time analysis and policy responses are not possible. In some cases, we identified useful data points but they weren’t available for the last few years so we had to exclude them from the final list. For example, data on incarceration rates were available by race and gender, but were at least 5 years out of date. Many of the most widely used government datasets have not yet released 2020 data, so we can’t say with accuracy the effects the pandemic had on different groups of women. One example, seen below, shows maternal mortality broken down by race with the most recent publicly available data from 2019. Older data also makes it more difficult to understand if new policies are working as intended. It will take us years to recover from the effects of the pandemic, so we will continue to report and update these data indicators, but real time data would allow us to make a stronger argument for the importance of structural changes—such as developing a care infrastructure and eradicating structural racism—in this crisis moment.

We know that those at the intersection of multiple marginalized identities are even more vulnerable, so accurate data for these groups is of vital importance.
Data-driven policy is an important way of ensuring that those who need help, receive it. A recent Request for Information from the Office of Management and Budget shows that the current administration understands the need for accurate, timely, and disaggregated data. The data we are currently using to drive most of our state and federal policies don’t provide enough visibility into who is struggling and what supports could help them thrive. As we continue to face intertwined health, economic, and racial justice crises, we must acknowledge that if we want to move towards a more equitable future, inclusive data must be at the foundation of these policies.

This chart displays trends in maternal mortality by combined race and ethnicity and by time period. In 2015-2019, the race/ethnicity group with the highest rate of maternal mortality nationally was the Black or African American population, with 48.82 deaths related to pregnancy or childbirth per 100,000 live births. The race/ethnicity group with the lowest rate of maternal mortality was the Asian population, with 13.73 maternal deaths per 100,000 live births.

A data-driven future.

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