



## **Talking Points: Proposition 54 and its Potential Threat to Public Health in California**

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On the October 7, 2003 special statewide recall election, California citizens will be asked to vote on Proposition 54, otherwise known as the Classification by Race, Ethnicity, Color, and National Origin (CRECNO) Initiative. The initiative would ban collecting and using data on race, ethnicity, and national origin by all public agencies in California and by any group that receives state funding. Health-care experts have urged the defeat of the initiative, pointing out that the initiative could cause serious harm to the health of the citizens of California.

Below are talking points that pinpoint issues Californians should consider when thinking about the initiative:

**1. Proposition 54 will obstruct efforts of health professionals to successfully track and treat diseases.**

- A. Different culturally and ethnically determined factors and behaviors influence the way in which people experience illness, adhere to medical advice, and respond to treatment.
- B. Disease patterns vary greatly between racial and ethnic groups:
  - African Americans, Hispanics, and Native Americans experience a 50% to 100% higher burden of illness and mortality due to diabetes than white Americans.
  - Alaska Natives experience the highest rates of colon and rectal cancers.
  - Korean Americans have the highest rates of stomach cancers among U.S. males.
  - Vietnamese American women experience cervical cancer nearly six times more than white women.
- C. By analyzing data on race and ethnicity, researchers have learned that some racial and ethnic groups are more susceptible to diseases, such as breast cancer, diabetes, and sickle-cell anemia. If health professionals were to ignore information on race and ethnicity they would lose the ability to target certain groups with special health-care services and public-health education.

**2. Proposition 54 will thwart efforts to address existing health-care disparities.**

A. There are significant differences in health status and health-care quality between racial and ethnic groups, regardless of insurance status and income:

- Whites are 78 percent more times likely than African Americans to receive some forms of cardiovascular procedures.
- The average waiting time for African-Americans awaiting kidney transplants is almost twice as long as that of white patients.

B. These health-care disparities translate into real health outcomes:

- African-American women are more likely to die of breast cancer than white women (30% vs. 18%).
- The mortality rate for African Americans is approximately 1.6 times that for whites.

C. Collecting data on racial and ethnic health-care disparities is important for understanding the causes and developing strategies to address these disparities.

**3. Proposition 54 will severely impede efforts to conduct research on causes and treatments of diseases.**

A. Proposition 54's supposed medical-research "exemption" is a sham, and will allow researchers and scientists to collect only a fraction of the data they need to protect and improve the health of California citizens. The initiative will allow the collection of information on race, ethnicity, and national origin only from those patients and research subjects who give consent to be involved in controlled medical research experiments.

B. Proposition 54 will forbid public agencies and groups that receive state funding from collecting or analyzing data from surveys, questionnaires, and interviews. This is information that is essential for combating:

- diseases, such as breast cancer, lung cancer, childhood diabetes, and AIDS; and
- public health problems, including teenage smoking, adolescent obesity, and lead poisoning.

C. Diseases afflict racial and ethnic groups differently, and to deny the opportunity to collect data on race, ethnicity, and national origin is to deny California's citizens critical information about their health and well-being and health professionals critical information for treating their patients.

#### 4. Californians Should Vote “No” on Proposition 54.

- A. The Proposition is sponsored by Ward Connerly, a vocally conservative member of the University of California Board of Regents and key figure behind ballot initiatives in California, Washington State, and now in Michigan opposing affirmative action.
- In 1996, Proposition 209 ended California's use of affirmative action in higher education and employment.
  - In 1998, Initiative 200 banned the consideration of race, ethnicity, gender, or national origin in public contracting, employment, and higher education in Washington State.
  - In 2003, on the heels of the U.S. Supreme Court ruling upholding the use of affirmative action, Connerly launched the Michigan Civil Rights Initiative to end racial preferences in that state.
- B. Proposition 54 is strongly opposed by over 50 health-professional organizations, including the Association of American Medical Colleges, the American Heart Association, the American Cancer Society, the California Medical Association, the California Nurses Association, the American Academy of Pediatrics, and Breast Cancer Action as well as former United States Surgeon Generals C. Everett Koop and David Satcher.

*Note:* Information provided by the *California Medical Association*, *Coalition for an Informed California*, *Institute of Medicine Committee on Understanding and Eliminating Racial and Ethnic Disparities in Health Care*, and the *Leadership Conference on Civil Rights* contributed to these talking points.

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The Association of American Medical Colleges’ Division of Community and Minority Programs provides staff support for Health Professionals for Diversity (HPD) Coalition activities. For more information on the HPD Coalition, email [hpd@aamc.org](mailto:hpd@aamc.org), or contact Ruth Beer Bletzinger at (202) 828-0585 or James Beaudreau at (202) 862-6115.