

# HANDLING CHALLENGING RESPONSES TO RACE AND ETHNICITY QUESTIONS

Patients may appear uncomfortable, have concerns, or seem angry when asked to self-report their race, ethnicity, and language (REAL) choices. Use this job aid to help you form an appropriate response for these difficult situations.

## Challenging Response to Hispanic/Latino Origin (Ethnicity) Question

### Your Suggested Response

### Consider...

I'm an American citizen.

Thank you for your response. Since this is a part of your medical record, we prefer that you tell us your choice so it is accurate and complete. Would you like to share if you are of Hispanic or Latino origin?

Health care is specific for each individual. The more we understand about each patient, the better care we can offer. The more we understand our patients, the better we can prepare to provide them with the services they need and want.

Can't you tell?

Sometimes I think I can, but we are required to ask. When you choose, I know I'm entering the correct information.

Guessing a patient's REAL data just by looking does not allow the patient to make his or her own choice. It also increases data errors. Always increase the accuracy of REAL by asking the patient to self-identify.

Is this some immigration question?

No, it's not. We only share information within our health care organization and with providers involved with your care. Your personal health information will be shared outside of this facility only with your permission and in accordance with state and federal privacy laws.

Patients that are not from the United States may feel uncomfortable with REAL questions. The suggested response may help ease their mind.

For each scenario above, if the patient still appears uncomfortable or does not want to respond...

It's no problem. I will put down that you don't want to answer at this time.

The patient might not want to respond now, but might do so later in the appointment or during a subsequent visit. Until they are comfortable, stay calm and code them as "declined."

Reference: Health Research & Education Trust. A Toolkit for Collecting Race, Ethnicity and Language from Patients. January 1, 2007. <http://www.hret.org/resources/1914710936>. Accessed August 2014.

**Challenging Response  
to Race Question**

**Your Suggested Response**

**Consider...**

I'm human. Race is not important.

Yes, we are all human. But the more we know about you, the better quality care we can provide you. Would you like to provide more detail about your racial background?

There are many conditions that are associated with specific patient groups, such as diabetes, high blood pressure, and sickle cell disease. The more we know about our patients, the better prepared we are to provide them with high-quality care based on their individual needs.

Can't you tell?

Well, we are required to report what the patient tells us, and not guess. We really want to make sure that what we put in your medical record is based on your choice. Would you like to tell me your choice?

It is important that we give patients the opportunity to choose the REAL data that will go into their medical record. While you may look at a patient and think you know what they are, you don't know their choice unless you ask them.

I was born in Vietnam, but we moved here when I was very young. I feel I'm both American and Vietnamese.

I understand. I see that Vietnamese Americans fall into the category of Asian. So if it's OK with you, I'll note that in your record. (This answer is for hospitals that do not have specific or granular categories in their registration system.)

If your system allows more specific or granular race categories, check Vietnamese, if the patient agrees. If your system uses only the five main categories, check Asian. It is recommended you inform the patient of how you will code their response, so they won't be surprised if they see their medical record.

If the patient still appears uncomfortable or does not want to respond...

I will put down that you don't want to answer at this time, which is fine.

The patient might not want to respond now, but might do so later in the appointment or during a subsequent visit.

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