

**STATEMENT
OF THE
AMERICAN SOCIOLOGICAL ASSOCIATION
ON**

**The Importance of Collecting Data
and Doing Social Scientific Research on Race**

ABOUT THE AMERICAN SOCIOLOGICAL ASSOCIATION

The American Sociological Association (ASA), founded in 1905, is a non-profit membership association dedicated to serving sociologists in their work, advancing sociology as a scientific discipline and profession, and promoting the contributions and use of sociology to society. As the national organization for 13,000 sociologists, the ASA is well positioned to provide a unique set of benefits to its members and to promote the vitality, visibility, and diversity of the discipline. Working at the national and international levels, the Association aims to articulate policy and implement programs likely to have the broadest possible impact for sociology now and in the future.

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The Importance of Collecting Data and Doing Social Scientific Research on Race

The question of whether to collect statistics that allow the comparison of differences among racial and ethnic groups in the census, public surveys, and administrative databases is not an abstract one. Some scholarly and civic leaders believe that measuring these differences promotes social divisions and fuels a mistaken perception that race is a biological concept. California voters are likely to face a referendum in 2004 to prohibit the collection of racial data by most state government agencies. As the leading voice for 13,000 academic and practicing sociologists, the ASA takes the position that calls to end the collection of data using racial categories are ill advised, although racial categories do not necessarily reflect biological or genetic categories. The failure to gather data on this socially significant category would preserve the status quo and hamper progress toward understanding and addressing inequalities in primary social institutions. The ASA statement highlights significant research findings on the role and consequences of race relations in social institutions such as schools, labor markets, neighborhoods, and health care scholarship that would not have been possible without data on racial categories.

The longstanding debate over racial classification in the United States is certain to generate greater public interest as our population becomes more diverse. The ASA hopes to continue to play a meaningful role in that important dialogue.

The following statement was adopted by the elected Council of the American Sociological Association (ASA) on August 9, 2002, acting on a document prepared by a Task Force of ASA members. Council believes that this statement summarizes the views of sociologists with expertise in matters related to race in America.

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EXECUTIVE SUMMARY

Race is a complex, sensitive, and controversial topic in scientific discourse and in public policy. Views on race and the racial classification system used to measure it have become polarized. At the heart of the debate in the United States are several fundamental questions: What are the causes and consequences of racial inequality? Should we continue to use racial classification to assess the role and consequences of race? And, perhaps most significantly, under what conditions does the classification of people by race promote racial division, and when does it aid the pursuit of justice and equality?

The answers to these questions are important to scientific inquiry, but they are not merely academic. Some scholarly and civic leaders have proposed that the government stop collecting data on race altogether. Respected voices from the fields of human molecular biology and physical anthropology (supported by research from the Human Genome Project) assert that the concept of race has no validity in their respective fields. Growing numbers of humanist scholars, social anthropologists, and political commentators have joined the chorus in urging the nation to rid itself of the concept of race.

However, a large body of social science research documents the role and consequences of race in primary social institutions and environments, including the criminal justice, education and health systems, job markets, and where people live. These studies illustrate how racial hierarchies are embedded in daily life, from racial profiling in law enforcement, to 'red-lining' communities of color in mortgage lending, to sharp disparities in the health of members of different population groups. Policymakers, in fact, have recognized the importance of research into the causes of racial disparities. For example, the 2000 Minority Health and Health Disparities Research and Education Act directed the National Institutes of Health to support continued research on health gaps between racial groups, with the ultimate goal of eliminating such disparities. Moreover, growth among some racial and ethnic groups (notably, Asians and Hispanics) and the diversification of the nation's racial and ethnic composition underscore the need for expanded research on the health and socio-economic status of these groups.

Sociologists have long examined how race—a social concept that changes over time—has been used to place people in categories. Some scientists and policymakers now contend that research using the concept of race perpetuates the negative consequences of thinking in racial terms. Others argue that measuring differential experiences, treatment, and outcomes across racial categories is necessary to track disparities and to inform policymaking to achieve greater social justice.

The American Sociological Association (ASA), an association of some 13,000 U.S. and international sociologists, finds greater merit in the latter point of view. Sociological scholarship on "race" provides scientific evidence in the current scientific and civic debate over the social consequences of the existing categorizations and perceptions of race; allows scholars to document how race shapes social ranking, access to resources, and life experiences; and advances understanding of this important dimension of social life, which in turn advances social justice. Refusing to acknowledge the fact of racial classification, feelings, and actions, and refusing to measure their consequences will not eliminate racial inequalities. At best, it will preserve the status quo.

The following statement sets forth the basis for ASA's position, and illustrates the importance of data on race to further scientific investigation and informed public discourse. ASA fully recognizes the global nature of the debate over race, racial classification, and the role of race in societies; this statement focuses attention on the treatment of race in the United States and the scholarly and public interest in continuing to measure it.

RACIAL CLASSIFICATIONS AS THE BASIS FOR SCIENTIFIC INQUIRY

Race is a complex, sensitive, and controversial topic in scientific discourse and in public policy. Views on race and the racial classification system used to measure it have become polarized. In popular discourse, racial groups are viewed as physically distinguishable populations that share a common geographically based ancestry. "Race" shapes the way that some people relate to each other, based on their belief that it reflects physical, intellectual, moral, or spiritual superiority or inferiority. However, biological research now suggests that the substantial overlap among any and all biological categories of race undermines the utility of the concept for scientific work in this field.

How, then, can it be the subject of valid scientific investigation at the social level? The answer is that social and economic life is organized, in part, around race as a social construct.

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Sociological analysis of the family provides an analogue. We know that families take many forms; for example, they can be nuclear or extended, patrilineal or matrilineal. Some family categories correspond to biological categories; others do not. Moreover, boundaries of family membership vary, depending on a range of individual and institutional factors. Yet regardless of whether families correspond to biological definitions, social scientists study families and use membership in family categories in their study of other phenomena, such as well-being. Similarly, racial statuses, although not representing biological differences, are of sociological interest in their form, their changes, and their consequences.

¹ The federal government defines race categories for statistical policy purposes, program administrative reporting, and civil rights compliance, and sets forth minimum categories for the collection and reporting of data on race. The current standards, adopted in October 1997, include five race categories: American Indian or Alaska Native; Asian; Black or African American; Native Hawaiian or Other Pacific Islander; and White. Respondents to federal data collection activities must be offered the option of selecting one or more racial designations. Hispanics or Latinos, whom current standards define as an ethnic group, can be of any race. However, before the government promulgated standard race categories in 1977, some U.S. censuses designated Hispanic groups as race categories (e.g., the 1930 census listed Mexicans as a separate race).

THE SOCIAL CONCEPT OF RACE

Individuals and social institutions evaluate, rank, and ascribe behaviors to individuals on the basis of their presumed race. The concept of race in the United States—and the inevitable corresponding taxonomic system to categorize people by race—has changed, as economic, political, and historical contexts have changed (19). Sociologists are interested in explaining how and why social definitions of race persist and change. They also seek to explain the nature of power relationships between and among racial groups, and to understand more fully the nature of belief systems about race—the dimensions of how people use the concept and apply it in different circumstances.

SOCIAL REALITY AND RACIAL CLASSIFICATION

The way we define racial groups that comprise "the American mosaic" has also changed, most recently as immigrants from Asia, Latin America, and the Caribbean have entered the country in large numbers. One response to these demographic shifts has been the effort (sometimes contentious) to modify or add categories to the government's official statistical policy on race and ethnicity, which governs data collection in the census, other federal surveys, and administrative functions. Historically, changes in racial categories used for administrative purposes and self-identification have occurred within the context of a polarized biracialism of Black and White; other immigrants to the United States, including those from Asia, Latin America, and the Caribbean, have been "racialized" or ranked in between these two categories (26).

Although racial categories are legitimate subjects of empirical sociological investigation, it is important to recognize the danger of contributing to the popular conception of race as biological. Yet refusing to employ racial categories for administrative purposes and for social research does not eliminate their use in daily life, both by

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individuals and within social and economic institutions. In France, information on race is seldom collected officially, but evidence of systematic racial discrimination remains (31, 10). The 1988 Eurobarometer revealed that, of the 12 European countries included in the study, France was second (after Belgium) in both anti-immigrant prejudice and racial prejudice (29). Brazil's experience also is illustrative: The nation's then-ruling military junta barred the collection of racial data in the 1970 census, asserting that race was not a meaningful concept for social measurement. The resulting information void, coupled with government censorship, diminished public discussion of racial issues, but it did not substantially reduce racial inequalities. When racial data were collected again in the 1980 census, they revealed lower socio-economic status for those with darker skin. (38).

THE CONSEQUENCES OF RACE AND RACE RELATIONS IN SOCIAL INSTITUTIONS

Although race is a social construct (in other words, a social invention that changes as political, economic, and historical contexts change), it has real consequences across a wide range of social and economic institutions. Those who favor ignoring race as an explicit administrative matter, in the hope that it will cease to exist as a social concept, ignore the weight of a vast body of sociological research that shows that racial hierarchies are embedded in the routine practices of social groups and institutions.

Primary areas of sociological investigation include the consequences of racial classification as:

- **A sorting mechanism for mating, marriage and adoption.**
- **A stratifying practice for providing or denying access to resources.**
- **An organizing device for mobilization to maintain or challenge systems of racial stratification.**
- **A basis for scientifically investigating proximate causes.**

Race as a sorting mechanism for mating, marriage, and adoption-----

Historically, race has been a primary sorting mechanism for marriage (as well as friendship and dating). Until anti-miscegenation laws were outlawed in the United States in 1967, many states prohibited interracial marriage. Since then, intermarriage rates have more than doubled to 2.2 percent of all marriages, according to the latest census information (14, 28). When Whites (the largest racial group in the United States) intermarry, they are most likely to marry Native Americans/American Indians and least likely to marry African Americans. Projections to the year 2010 suggest that intermarriage and, consequently, the universe of people identifying with two or more races is likely to increase, although most marriages still occur within socially designated racial groupings (7).

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Race as a stratifying practice-----

Race serves as a basis for the distribution of social privileges and resources. Among the many arenas in which this occurs is education. On the one hand, education can be a mechanism for reducing differences across members of racial categories. On the other hand, through "tracking" and segregation, the primary and secondary educational system has played a major role in reproducing race and class inequalities. Tracking socializes and prepares students for different education and career paths. School districts continue to stratify by race and class through two-track systems (general and college prep/advanced) or systems in which all students take the same courses, but at different levels of ability. African Americans, Hispanics, American Indians, and students from low socioeconomic backgrounds, regardless of ability levels, are over-represented in lower level classes and in schools with fewer Advanced Placement classes, materials, and instructional resources (11, 13, 20, 23).

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Race as an organizing device for mobilization to maintain or challenge systems of racial stratification-----

Understanding how social movements develop in racially stratified societies requires scholarship on the use of race in strategies of mobilization. Racial stratification has clear beneficiaries and clear victims, and both have organized on racial terms to challenge or preserve systems of racial stratification. For example, the apartheid regime in South Africa used race to maintain supremacy and privilege for Whites in nearly all aspects of economic and political life for much of the 20th century. Blacks and others seeking to overthrow the system often were able to mobilize opposition by appealing to its victims, the Black population. The American civil rights movement was similarly successful in mobilizing resistance to segregation, but it also provoked some White citizens into organizing their own power base (for example, by forming White Citizens' Councils) to maintain power and privilege (2, 24).

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Race and ethnicity as a basis for the scientific investigation of proximate causes and critical interactions-----

Data on race often serve as an investigative key to discovering the fundamental causes of racially different outcomes and the "vicious cycle" of factors affecting these outcomes. Moreover, because race routinely interacts with other primary categories of social life, such as gender and social class, continued examination of these bases of fundamental social interaction and social cleavage is required. In the health arena, hypertension levels are much higher for African Americans than other groups. Sociological investigation suggests that discrimination and unequal allocation of society's resources might expose members of this racial group to higher levels of stress, a proximate cause of hypertension (40). Similarly, rates of prostate cancer are much higher for some groups of men than others. Likewise, breast cancer is higher for some groups of women than others. While the proximate causes may appear to be biological, research shows that environmental and socio-economic factors disproportionately place at greater risk members of socially subordinated racial and ethnic groups. For example, African Americans' and Hispanics' concentration in polluted and dangerous neighborhoods result in feelings of depression and powerlessness that, in turn, diminish the ability to improve these neighborhoods (35, 40, 41). Systematic investigation is necessary to uncover and distinguish what social forces, including race, contribute to disparate outcomes.

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RESEARCH HIGHLIGHTS: RACE AND ETHNICITY AS FACTORS IN SOCIAL INSTITUTIONS

The following examples highlight significant research findings that illustrate the persistent role of race in primary social institutions in the United States, including the job market, neighborhoods, and the health care system. This scientific investigation would not have been possible without data on race.

Job Market-----

Sociological research shows that race is substantially related to workplace recruitment, hiring, firing, and promotions. Ostensibly neutral practices can advantage some racial groups and adversely affect others. For example, the majority of workers obtain their jobs through informal networks rather than through open recruitment and hiring practices. Business-as-usual recruitment and hiring practices include recruiting at predominantly White schools, advertising only in suburban newspapers, and employing relatives and friends of current workers. Young, White job seekers benefit from family connections, studies show. In contrast, a recent study revealed that word-of-mouth recruitment through family and friendship networks limited job opportunities for African Americans in the construction trades. Government downsizing provides another example of a "race neutral" practice with racially disparate consequences: Research shows that because African Americans have successfully established employment niches in the civil service, government workforce reductions displace disproportionate numbers of African American-and increasingly, Hispanic-employees. These and other social processes, such as conscious and unconscious prejudices of those with power in the workplace, affecting the labor market largely explain the persistent two-to-one ratio of Black to White unemployment (4, 5, 9, 15, 32, 39, 42, 43).

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Neighborhood Segregation-----

For all of its racial diversity, the highly segregated residential racial composition is a defining characteristic of American cities and suburbs. Whites and African Americans tend to live in substantially homogenous communities, as do many Asians and Hispanics. The segregation rates of Blacks have declined slightly, while the rates of Asians and Hispanics have increased. Sociological research shows that the "hyper-segregation" between Blacks and Whites, for example, is a consequence of both public and private policies, as well as individual attitudes and group practices.

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Sociological research has been key to understanding the interaction between these policies, attitudes, and practices. For example, according to attitude surveys, by the 1990s, a majority of Whites were willing to live next door to African Americans, but their comfort level fell as the proportion of African Americans in the neighborhood increased. Real estate and mortgage-industry practices also contribute to neighborhood segregation, as well as racially disparate homeownership rates (which, in turn, contribute to the enormous wealth gap between racial groups). Despite fair housing laws, audit studies show, industry practices continue to steer African American homebuyers away from White

neighborhoods, deny African Americans information about available loans, and offer inferior property insurance.

Segregation profoundly affects quality of life. African American neighborhoods (even relatively affluent ones) are less likely than White neighborhoods to have high quality services, schools, transportation, medical care, a mix of retail establishments, and other amenities. Low capital investment, relative lack of political influence, and limited social networks contribute to these disparities (1, 6, 8, 9, 17, 21, 22, 25, 30, 35, 36, 37, 42, 44).

Health-----

Research clearly documents significant, persistent differences in life expectancy, mortality, incidence of disease, and causes of death between racial groups. For example, African Americans have higher death rates than Whites for eight of the ten leading causes of death. While Asian-Pacific Islander babies have the lowest mortality rates of all broad racial categories, infant mortality for Native Hawaiians is nearly three times higher than for Japanese Americans. Genetics accounts for some health differences, but social and economic factors, uneven treatment, public health policy, and health and coping behaviors play a large role in these unequal health outcomes.

Socio-economic circumstances are the strongest predictors of both life span and freedom from disease and disability. Unequal life expectancy and mortality reflect racial disparities in income and incidence of poverty, education and, to some degree, marital status.

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Many studies have found that these characteristics and related environmental factors such as over-crowded housing, inaccessibility of medical care, poor sanitation, and pollution adversely impact life expectancy and both overall and cause-specific mortality for groups that have disproportionately high death rates.

Race differences in health insurance coverage largely reflect differences in key socio-economic characteristics. Hispanics are least likely to be employed in jobs that provide health insurance and relatively fewer Asian Americans are insured because they are more likely to be in small low-profit businesses that make it hard to pay for health insurance. Access to affordable medical care also affects health outcomes. Sociological research shows that highly segregated African American neighborhoods are less likely to have health care facilities such as hospitals and clinics, and have the highest ratio of patients to physicians. In addition, public policies such as privatization of medicine and lower Medicaid and Medicare funding have had unintended racial consequences; studies show a further reduction of medical services in African American neighborhoods as a result of these actions.

Even when health care services are available, members of different racial groups often do not receive comparable treatment. For example, African Americans are less likely to receive the most commonly performed diagnostic procedures, such as cardiovascular and orthopedic procedures. Institutional discrimination, including racial stereotyping by medical professionals, and systemic barriers, such as language difficulties for newer immigrants (the majority of whom are from Asia and Latin America), partly explain differential treatment patterns, stalling health improvements for some racial groups.

All of these factors interact to produce poorer health outcomes, indicating that racial stratification remains an important explanation for health disparities (3, 12, 16, 18, 21, 27, 33, 34, 40, 41).

SUMMARY: THE IMPORTANCE OF SOCIOLOGICAL RESEARCH ON RACE

A central focus of sociological research is systematic attention to the causes and consequences of social inequalities. As long as Americans routinely sort each other into racial categories and act on the basis of those attributions, research on the role of race and race relations in the United States falls squarely within this scientific agenda. Racial profiling in law enforcement activities, "redlining" of predominantly minority neighborhoods in the mortgage and insurance industries, differential medical treatment, and tracking in schools, exemplify social practices that should be studied. Studying race as a social phenomenon makes for better science and more informed policy debate. As the United States becomes more diverse, the need for public agencies to continue to collect data on racial categories will become even more important. Sociologists are well qualified to study the impact of "race"—and all the ramifications of racial categorization—on people's lives and social institutions. The continuation of the collection and scholarly analysis of data serves both science and the public interest. For all of these reasons, the American Sociological Association supports collecting data and doing research on race.

As long as Americans routinely sort each other into racial categories and act on the basis of those attributions, research on the role of race and race relations in the United States falls squarely within this scientific agenda.

References

1. Alba, Richard D., John R. Logan, and Brian J. Stults. 2000. "The Changing Neighborhood Contexts of the Immigrant Metropolis." *Social Forces* 79:587-621.
2. Bloom, Jack M. 1987. *Class, Race and the Civil Rights Movement*. Bloomington, IN: Indiana University Press.
3. Bobo, Lawrence D. 2001. "Racial Attitudes and Relations at the Close of the Twentieth Century," Pp. 264-201, in *America Becoming: Racial Trends and Their Consequences*, vol. 2, edited by Neil J. Smelser, William J. Wilson, and Faith Mitchell. Washington, DC: National Research Council.
4. Bobo, Lawrence D., Devon Johnson, and Susan Suh. 2002. "Racial Attitudes and Power in the Workplace: Do the Haves Differ from the Have-Nots?" Pp. 491-522, in *Prismatic Metropolis: Inequality in Los Angeles*, edited by Lawrence D. Bobo, Melvin J. Oliver, James H. Johnson, Jr., and Abel Valenzuela Jr. New York, NY: Russell Sage Foundation.
5. DiTomaso, Nancy. 2000. "Why Anti-Discrimination Policies Are Not Enough: The Legacies and Consequences of Affirmative Inclusion—For Whites." Presented at the 95th annual meeting of the American Sociological Association, August 16, Anaheim, CA.
6. Drier, Peter, John Mollenkopf, and Todd Swanstrom. 2001. *Place Matters: Metropolitcs in the 21st Century*. Lawrence, KS: University of Kansas Press.
7. Edmonston, Barry, Sharon M. Lee, and Jeffrey Passel. (in press). "Recent Trends in Inter marriage and Immigration, and Their Effects on the Future Racial Composition of the U.S. Population," in *The New Race Question*, edited by Joel Perlmann and Mary C. Waters. New York, NY: Russell Sage Foundation.
8. Farley, Reynolds. 1996. *The New American Reality: Who We Are, How We Got Here, Where We Are Going?* New York, NY: Russell Sage Foundation.
9. Farley, Reynolds, Sheldon, Danzinger, and Harry Holzer. 2001. *Detroit Divided*. New York, NY: Russell Sage Foundation.
10. Galap, Jean. 1991. "Phenotypes et Discrimination des Noirs en France: Question de Methode." *Intercultures* 14 (Juillet): 21-35.
11. Hallinan, Maureen T. 2001. "Sociological Perspectives on Black-White Inequalities in American Schooling." *Sociology of Education* (Extra Issue 2001): 50-70.
12. Hayward, Mark D, Eileen M. Crimmins, Toni P. Miles, and Yu Yang. 2000. "Socioeconomic Status and the Racial Gap in Chronic Health Conditions." *American Sociological Review* 65: 910-930.
13. Heubert, Jay P., and Robert M. Hauser, eds. 1999. *High Stakes: Testing for Tracking, Promotion, and Graduation*. Washington, DC: National Research Council.
14. Jones, Nicholas A., and Amy Symens Smith. 2001. *The Two or More Races Population 2000: Census 2000 Brief*. U.S. Bureau of the Census (November). Retrieved June 19, 2002, (<http://www.census.gov/population/www/cen2000/briefs.html>.)
15. Kirshenman, Joleen, and Kathryn M. Neckerman. 1992. "We'd Love to Hire Them, But...: The Meaning of Race for Employers," Pp. 203-234, in *The Urban Underclass*, edited by C. Jencks and P. Peterson. Washington, DC: The Brookings Institution.

References (cont.)

16. Klinenberg, Eric. 2002. *Heat Wave: A Social Autopsy of Disaster in Chicago*. Chicago, IL: University of Chicago Press.
17. LaVeist, Thomas. 1992. "The Political Empowerment and Health Status of African Americans: Mapping a New Territory." *American Journal of Sociology* 97: 1080-1095.
18. LaViest, Thomas A., C. Diala, and N.C. Jarrett. 2000. "Social Status and Perceived Discrimination: Who Experiences Discrimination in the Health Care System and Why?," Pp. 194-208, in *Minority Health in America*, edited by Carol J.R. Hogue, Martha A. Hargraves, and Karen Scott-Collins. Baltimore, MD: Johns Hopkins University Press.
19. Lee, Sharon M. 1993. "Racial Classifications in the U.S. Census: 1890-1990." *Ethnic and Racial Studies* 16: 75-94.
20. Lucas, Samuel Roundfield. 1999. *Tracking Inequality: Stratification and Mobility in American High Schools*. New York, NY: Teachers College Press.
21. Massey, Douglas S. 2001. "Residential Segregation and Neighborhood Conditions in U.S. Metropolitan Areas," Pp. 391-434, in *America Becoming: Racial Trends and Their Consequences*, vol. 1, edited by Neil J. Smelser, William J. Wilson, and Faith Mitchell. Washington, DC: National Research Council.
22. Massey, Douglas S., and Nancy Denton. 1993. *American Apartheid: Segregation and the Making of the Underclass*. Cambridge, MA: Harvard University Press.
23. Mikelson, Roslyn A. 2002. "What Constitutes Racial Discrimination in Education? A Social Science Perspective." Prepared for workshop on Measuring Racial Disparities and Discrimination in Elementary and Secondary Education, National Research Council Committee on the National Statistics Center for Education, July 2002. For a grant from the Ford Foundation and National Science Foundation.
24. Morris, Aldon D. 1986. *The Origins of the Civil Rights Movement: Black Communities Organizing for Change*. New York, NY: The Free Press.
25. Oliver Melvin L., and Thomas J. Shapiro. 1995. *Black Wealth? White Wealth?: A New Perspective on Racial Inequality*. New York, NY: Routledge.
26. Omi, Michael. 2001. "The Changing Meaning of Race." Pp 243-263, in *America Becoming: Racial Trends and Their Consequences*, edited by Neil J. Smelser, William J. Wilson, and Faith Mitchell. Washington, DC: National Academy Press.
27. Quadagno, Jill. 2000. "Promoting Civil Rights through the Welfare State: How Medicare Integrated Southern Hospitals." *Social Problems* 47: 68-89.
28. Qian, Zhenchao. 1997. "Breaking the Racial Barriers: Variations in Interracial Marriage Between 1980 and 1990." *Demography* 34: 263-276.
29. Quillian, Lincoln. 1995. Prejudice as a Response to Perceived Group Threat: Population Composition and Anti-Immigrant and Racial Prejudice in Europe. *American Sociological Review* 60: 586-611.
30. Rankin, Bruce H., and James M. Quane. 2000. "Neighborhood Poverty and Social Isolation of Inner-City African American Families." *Social Forces* 79: 139-164.

References (cont.)

31. Raveau, F., B. Kilborne, L. Frere, J. M. Lorin, and G. Trempe. 1976. "Perception Sociale de la Couleur et Discrimination." *Cahiers d'Anthropologie* 4: 23-42.
32. Reskin, Barbara F. 1998. *The Realities of Affirmative Action in Employment*. Washington, DC: The American Sociological Association.
33. Rogers, Richard, Robert Hummer, Charles B. Nam, Kimberly Peters. 1996. "Demographic, Socioeconomic, and Behavioral Factors Affecting Ethnic Mortality by Cause." *Social Forces* 74: 1419-1438.
34. Ross, Catherine E. and John Mirowsky. 2001. "Neighborhood Disadvantage, Disorder, and Health." *Journal of Health and Social Behavior* 42: 258-276.
35. Sampson, Robert J., Gregory D. Squires, and Min Zhou. 2001. *How Neighborhoods Matter: The Value of Investing at the Local Level*. Washington, DC: The American Sociological Association.
36. Schuman, Howard, Charlotte Steeh, Lawrence Bobo, and Maria Kryson. 1997. *Racial Attitudes in America*. 2 ed. Cambridge MA: Harvard University Press.
37. Squires, Gregory D., and Sally O'Connor. 2001. *Color and Money: Politics and Prospects for Community Reinvestment in Urban America*. Albany, NY: SUNY Press.
38. Telles, Edward. 2002. "Racial Ambiguity among the Brazilian Population." *Ethnic and Racial Studies* 25: 415-441.
39. Waldinger, Roger. 1996. *Still the Promised City? African-Americans and New Immigrants in Postindustrial New York*. Cambridge, MA: Harvard University Press.
40. Williams, David R. 2001. "Racial Variations in Adult Health Status: Patterns, Paradoxes, and Prospects," Pp. 371-410 2 in *America Becoming: Racial Trends and Their Consequences*, vol. 2, edited by Neil J. Smelser, William J. Wilson, and Faith Mitchell. Washington, DC: National Research Council.
41. Williams, David R. and Chiquita Collins. (in press). "Racial Residential Segregation: A Fundamental Cause of Racial Disparities in Health." *Public Health Reports*.
42. Wilson, William J. 1996. *When Work Disappears: The World of the New Urban Poor*. New York, NY: Alfred A. Knopf, Inc.
43. Woo, Deborah. 2000. *Glass Ceilings and Asian Americans: The New Face of Workplace Barriers*. Walnut Creek, CA: AltaMira Press.
44. Yinger, John. 1995. *Closed Doors, Opportunities Lost*. New York, NY: Russell Sage Foundation.

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