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# COVID-19 and Systemic Racism Threaten the 2020 Census

[Health Equity](#)

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**Update:** On Oct. 13, [the Supreme Court ruled](#) that the Trump administration can end the 2020 census on Oct. 15, overturning a lower court ruling that would have required the Census Bureau to continue counting through the end of the month. This ends a census count that has been marred by the COVID-19 pandemic, an eviction crisis and political influence. By ending the count early and committing to delivering results by Dec. 31, the Census Bureau is all but guaranteed to provide an inaccurate count of some of the country's most hard-to-reach and vulnerable populations.

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Once per decade, the Constitution mandates that every person in the United States be counted, only once, and in the right place. An accurate count is essential to understanding the United States' population and allocating resources that reflect its needs.

The 2020 census, however, is currently navigating multiple unmatched crises: from the COVID-19 pandemic to unprecedented political influence, there is real reason to be concerned about who will be included in the final tally and who won't. [As of early September](#), 20-30 million households have yet to be counted with only a few weeks left before all data collection ends. While conducting an accurate census may seem like a low priority compared to other national crises, make no mistake: the reverberations of an inaccurate count will continue to affect children's and families' health for the next 10 years.

## Census data and health equity

Before we get into the challenges of the 2020 census, it's important to understand [just why census data are so important](#). The findings from the census play a vital role in determining how trillions of federal dollars are allocated each year. A miscount of the population could misalign federal spending with the on-the-ground reality of the population's need for federal resources. The affected programs could include those that support direct health care access such as Medicaid, as well as those that address social determinants of health, such as Head Start, Women, Infants, and Children (WIC), foster care and grants to local education agencies. These programs address many of the social factors that underlie children's health; funding cuts mean that critical services won't reach those who rely on them.

Unfortunately, there is a long history of purposefully undercounting minority populations in the census. For more than 100 years, the Three-Fifths Compromise mandated that the government systematically undercount all enslaved persons. Though no longer intentional, the legacy of undercounting minority populations lives on; [findings from the 2010 census show](#) that White populations were over-counted by 0.8%, while Black and Hispanic populations were undercounted by 2.1% and 1.5%, respectively. Minority children outside of cities are [even more likely to be undercounted](#): in 1990, almost 1 in 5 Hispanic children in rural areas were missed by the census.

Undercounting can occur for a variety of reasons, such as residence in informal housing, nonresponse to census follow-up efforts or living at an address not included in census records. This "[hard-to-count](#)" population, however, disproportionately includes low-income households, non-English speakers, those living in rural areas, renters, and racial and ethnic minorities. Many of the same factors that contribute to undercounting in the

census—poverty, housing instability—are also associated with countless adverse health outcomes that are public health priorities. If the census doesn't accurately capture population counts, then states with the most need won't receive sufficient federal resources for programs that support health equity.

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## **COVID-19 throws off the census timeline**

The 2020 census is being carried out under truly unprecedented circumstances and those continuing to collect data in spite of these challenges are doing deeply valuable work. The COVID-19 pandemic began to disrupt day-to-day life this spring right as the census began. Even in a normal year, the census requires a staggering amount of infrastructure and logistical coordination; pivoting those resources in real time during a pandemic is a challenge never before undertaken.

In a typical year, the Census Bureau sends out paper copies of its questionnaire to every household in the U.S., and then later on follows up in person with those households it has yet to hear from. By sending census takers out into communities across the country, the Bureau works to ensure that even the "hard to count" communities are captured. This includes communities of color, immigrant communities and rural areas. In a typical year, Census door-knockers start in April and finish up by July.

With lockdowns happening across the country this spring, the Census Bureau was forced to put all of its in-person enumeration activities on hold. By late July, census door-knockers (in masks and at a safe distance) had returned and were fanning out to neighborhoods across the country. The deadline for the Census Bureau to complete its follow-up efforts was initially extended to October 31, with final census results due to the White House in April 2021. At a time when tens of millions of Americans are at risk of housing insecurity, this extra time would allow the Census Bureau to make sure every effort was made to contact households and to process and accurately tabulate the data it collected.

In spite of the extenuating circumstances, however, it was abruptly announced in late summer that census follow-up efforts would instead end by September 30, even though tens of millions of households have yet to be counted. Prematurely ending data collection will allow the Census Bureau to deliver final results by the original deadline of December 31.

This has been roundly [criticized by four former Census Bureau directors](#), who feel that ending data collection early is likely to result in underrepresentation of "hard-to-count" households. These concerns were echoed by more than [900 national, state and local advocacy groups](#) who fear that a rushed 2020 census will result in communities most in need losing out on federal resources that improve quality of life. Finally, these fears were validated by [the Census Bureau itself](#), which indicated that the compressed timeline will "reduce accuracy" and "create risk for serious errors not being discovered in the data."

## **Political influence over the census**

By law, census results must be completed by December 31 so that population counts for each state can be used to determine the number of congressional representatives apportioned to each state. For this reason, the census has always had political implications, but the Trump administration in particular has exhibited [a pattern](#) of attempting to use the 2020 census for political gain. For example, until the effort was [struck down by courts](#), the administration had [stated](#) its intent to exclude undocumented immigrants from population counts for the first time ever, a move which would have severely undercounted the population in parts of the country that tend to support Democrats. Furthermore, by requiring that census results be finalized by December 31, 2020, instead of April 2021, House apportionment is guaranteed to occur under the current administration. Though undocumented immigrants are still included in the census results, the premature end to data collection will still undermine efforts to accurately count this and other "hard-to-count" groups.

We must recognize the systemic racism and political interests that are driving these pivotal decisions, and the ways in which those interests will continue to undermine health equity for children and families in the coming

decade. States with larger uncoun­ted popu­la­tions (i.e. those with more peo­ple of color, more peo­ple living below the pov­er­ty line and larger un­doc­u­mented im­mi­grant popu­la­tions) will re­ceive fewer fed­er­al re­sources for pro­grams that are crit­i­cal to child and fam­ily health. Those un­coun­ted by the cen­sus are not polit­i­cal ab­strac­tions; they are chil­dren and fam­ilies who will be at high­er risk of food in­se­cu­rity and lack of ac­cess to health care be­cause they were un­coun­ted. They will also be less likely to have their voices and their needs re­pre­sented in fed­er­al gov­ern­ment.

Rep­re­sen­ta­tion in the cen­sus is the con­sti­tu­tion­al right of every per­son living in the United States. Though a pan­dem­ic out­side of any­one’s con­trol has made an ac­cu­rate count more chal­leng­ing, the de­ci­sions guid­ing the Cen­sus Bu­reau’s tim­e­line and pro­cess are very much un­der the fed­er­al gov­ern­ment’s con­trol. In light of the down­stream ef­fects that an in­ac­cu­rate cen­sus will cre­ate, our ef­forts to im­prove health equity for chil­dren and fam­ilies will only be­come more nec­es­sary in the com­ing de­cade.

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