

**Appendix D**

**National Survey of Children's Health  
Longitudinal Cohort (NSCH-LC)  
Public Comment**

**Comment received from Jean Public on 11/21/22:**

i do not approve of spending money on this survey. i think this lying propagandistic cdc tries to find information which backs up what it does, and manipulates the data to do that. i do not trust the cdc being involved in surveys and believe they are in bed with big pharma so that we don't have an independent agency working for the good of the american public, but they are working for the financial good of big pharma and the two are quite different. we pay the salaries in huge sums. we give trillions of dollars to the cdc and they have responded to that largesse with curpidity, criminality and lies. we all need to look much more carefully at what has gone on and is going on at the cdc. they are abusers of animals. i see nothing good at this agency. just horrible criminality imo. this comment is for the public record



January 19, 2023

Carolyn Pickering, Survey Director, National Survey of Children's Health  
U.S. Census Bureau  
4600 Silver Hill Road  
Washington, DC 20233

**Re: Notice of information collection – Agency Information Collection Activities;  
Submission to the Office of Management and Budget (OMB) for Review and Approval;  
Comment Request; National Survey of Children's Health Longitudinal Cohort (NSCH-LC)**

Dear Director Pickering,

The National Partnership for Women & Families is writing to comment on the U.S. Census Bureau's November 21, 2022 "Notice of Agency Information Collection Activities; Submission to the Office of Management and Budget (OMB) for Review and Approval; Comment Request; National Survey of Children's Health Longitudinal Cohort (NSCH-LC)" ("the Notice").

The National Partnership for Women & Families is a non-profit, non-partisan advocacy organization with nearly 50 years of experience promoting fairness in the workplace, reproductive health and rights, access to quality, affordable health care and policies that help women and men meet the demands of their jobs and families. Since our founding as the Women's Legal Defense Fund in 1971, we have fought for every major federal policy advance that has helped women and families. We focus specifically on tackling gender-based barriers, often rooted in longstanding stereotypes and biases, used to limit the opportunities available to women, especially those whose identities are marginalized including women of color, disabled women, caregivers, LGBTQIA+ people and many others. As an organization dedicated to advancing policies that protect women and their families and advance economic and health equity, we are one of the nation's foremost experts on paid leave and its impacts on health and economic security, including in relation to the ongoing impacts of the COVID-19 pandemic. We support the Census Bureau's effort to collect new data through the National Survey of Children's Health Longitudinal Cohort ("NSCH-LC") to assess the impacts of the pandemic on U.S. children, young adults, and their families. A substantial body of research documents the role of paid sick leave and paid family and medical leave policies in supporting infant and child health outcomes, public health and family economic security, including with respect to infectious illness – and also identifies persistent inequities in access to these policies, particularly for women of color. We strongly urge the Census Bureau to include questions and/or responses related to paid leave access and usage in the NSCH-LC questionnaire.

**Paid Leave for Parents and Caregivers Supports Children's Health and Well-Being**

Whether parents and caregivers have access to paid sick leave and paid family and medical leave is an important social determinant of health for children, affecting the ability to seek timely health care and health outcomes as well as families' economic security. Yet at the onset of the pandemic, one in four private-sector workers (25 percent) did not have access to paid sick leave at their job, and one in eight (80 percent) did not have paid family leave for longer-duration care needs.<sup>1</sup> Meanwhile, public health guidance has continually urged parents and caregivers to take actions – including staying home while sick, keeping sick children home from school and day care, and getting vaccinated and boosted – that typically require time away from work.

Paid sick leave allows working parents to take time off for their own or a family member's illness or injury or routine or preventive health care without losing a job or paycheck. Compared to working parents with paid sick leave, those without are nearly twice as likely to report sending a sick child to school or child care, and 2.5 times as likely to report taking a child or family member to the emergency room because they were unable to take time off during their normal job hours.<sup>2</sup> Children whose parents have paid sick leave are more likely to receive preventive health care – specifically, they are 13 percent more likely to receive a flu vaccine and 13 percent more likely to have an annual checkup, compared to children whose parents do not have paid sick leave.<sup>3</sup> Children whose mothers lack paid sick leave are also less likely to receive routine well-child checkups, dental care and flu shots.<sup>4</sup> Workers without paid sick leave – particularly those with low incomes – are also more likely to report delaying or forgoing medical care,<sup>5</sup> and workers who lack paid sick leave are less likely to be able to afford health care goods and services, more likely to incur high medical expenses and more likely to have a family income below the poverty threshold than those who have paid sick leave.<sup>6</sup>

Paid family and medical leave provides working parents with longer durations of paid time for their own or a family member's serious health condition, including pregnancy and child birth, or to bond with a newborn, newly adopted or foster child. For young children, paid leave provides time to establish a strong bond with parents during the first months of life, increases rates and duration of breastfeeding,<sup>7</sup> supports fathers' involvement in care,<sup>8</sup> improves rates of on-time vaccination,<sup>9</sup> reduces infant hospital admissions,<sup>10</sup> including for respiratory illness such as RSV,<sup>11</sup> and reduces probabilities of having ADHD, hearing problems or recurrent ear infections.<sup>12</sup> Paid leave may also help prevent child maltreatment by reducing risk factors, such as family and maternal stress and depression.<sup>13</sup> In states with paid leave programs, parents reported that their paid leave improved their ability to arrange child care.<sup>14</sup> State paid leave programs improve the labor force participation of family caregivers,<sup>15</sup> reduce the likelihood that new mothers would fall into poverty and increase household incomes,<sup>16</sup> and mean working people are significantly less likely to use SNAP or other public support programs in the year after a child's birth.<sup>17</sup>

### **Policymakers Need Better Data on Gaps in Access to Paid Leave During the Pandemic**

As noted above, access to paid sick leave and paid family and medical leave are known factors affecting the health care utilization and vaccination rates of children and their parents and caregivers, as well as other health and economic outcomes. Including paid leave-related measures on the NSCH-LC is necessary to ensure the survey meets its goal of identifying key risk and protective factors for children, young adults and their families.

The COVID-19 pandemic has heightened policymakers' and the public's attention to paid leave as a policy with potential to protect public health. In April 2020, the United States implemented its first-ever national paid sick and family leave program in April 2020, on a temporary basis, as part of the Families First Coronavirus Response Act,<sup>18</sup> and since 2020 numerous states and localities have enacted or expanded paid sick leave mandates and paid family and medical leave programs to cover emergency health and care needs<sup>19</sup> as well as on a permanent basis.<sup>20</sup> Yet despite these efforts, as of 2022, 23 percent of private-sector workers remained without paid sick leave and 76 percent without paid family leave,<sup>21</sup> and this policy issue remains one of high interest and relevance to a wide range of stakeholders in government agencies, community groups and the general public.

### **Suggested Improvements to the Questionnaires**

We recommend the following changes to the proposed survey questionnaires in order to provide improved data relevant to paid leave. This added information will be a small burden, but given the importance of this issue for the federal government and policymakers, the benefits of collecting information about paid leave and its effects on children's and family's health and wellbeing far outweigh this small burden. The question numbers referenced below are based on the forms LC1, LC2 and LC3, and LC4 as published by the Office of Management and Budget on February 14, 2022.<sup>22</sup>

First, in order to identify whether lack of time off from work has been a barrier for survey respondents' ability to access health care for a child:

- In forms LC1, LC2 and LC3, under "Section G: COVID-19 Pandemic," question G31 ("Did any of the following reasons contribute to this child not receiving needed health services?"), add the response "There were problems with getting time off work"
- In form LC4, under "Section F: COVID-19 Pandemic," question F25 ("Did any of the following reasons contribute to this person not receiving needed health services?") add the response "There were problems with getting time off work"

Second, in order to collect data on utilization of paid and unpaid leave:

- In form LC1, under "Section G: COVID-19 Pandemic," question G45 ("DURING THE PANDEMIC, did you or another parent or primary caregiver experience any of the following changes in employment?"), add the responses, "Took unpaid leave" and "Took paid leave"
- In form LC2 and LC3, under "Section G: COVID-19 Pandemic," question G65 ("DURING THE PANDEMIC, did you or another parent or primary caregiver experience any of the following changes in employment?"), add the responses, "Took unpaid leave" and "Took paid leave"
- In form LC4, under "Section F: COVID-19 Pandemic," question F47 ("DURING THE PANDEMIC, did this person experience any of the following changes in employment?"), add the responses "Took unpaid leave" and "Took paid leave"
- In form LC4, under "Section F: COVID-19 Pandemic," question F62 ("DURING THE PANDEMIC, did you or another parent or primary caregiver experience any of the

following changes in employment?"), add the responses "Took unpaid leave" and "Took paid leave"

Third, in order to collect data on access to paid leave at a job:

- In form LC1, LC2 and LC3, under "Section F: Child's Caregivers - About You," for individuals who answer "Employed full-time" or "Employed part-time" to question F12 ("Which of the following best describes your current employment status?"), add the following question and answers:
  - "At your job, is paid sick leave available if you need it?"
  - "Yes"
  - "No"
  - "Not sure"
- In form LC1, LC2 and LC3, under "Section F: Child's Caregivers - Other Parent or Primary Caregiver," for individuals who answer "Employed full-time" or "Employed part-time" to question F27 ("Which of the following best describes this caregiver's current employment status?"), add the following question and answers:
  - "At this caregiver's job, is paid sick leave available if needed?"
  - "Yes"
  - "No"
  - "Not sure"
- In form LC4, under "Section E: This Person's Parents or Previous Primary Caregivers - About You," for individuals who answer "Employed full-time" or "Employed part-time" to question E12 ("Which of the following best describes your current employment status?"), add the following question and answers:
  - "At your job, is paid sick leave available if you need it?"
  - "Yes"
  - "No"
  - "Not sure"
- In form LC4, under "Section E: This Person's Parents or Previous Primary Caregivers - Other Parent or Previous Primary Caregiver," for individuals who answer "Employed full-time" or "Employed part-time" to question E27 ("Which of the following best describes this parent or previous primary caregiver's current employment status?"), add the following question and answers:
  - "At this parent or previous primary caregiver's job, is paid sick leave available if needed?"
  - "Yes"
  - "No"
  - "Not sure"
- In form LC4, under "Section C: This Person's Schooling and Activities," for individuals who answer "Employed full-time" or "Employed part-time" to question C6 ("Which of the following describe this person's CURRENT employment situation?"), add the following question and answers:
  - "At this person's job, is paid sick leave available if needed?"
  - "Yes"

- "No"
- "Not sure"

Thank you for the opportunity to submit this comment. If you have any questions, please do not hesitate to contact Jessica Mason, Senior Policy Analyst (jmason@nationalpartnership.org) or Sharita Gruberg, Vice President for Economic Justice (sgruberg@nationalpartnership.org).

Sincerely,  
The National Partnership for Women & Families

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  - 22 Office of Information and Regulatory Affairs, Office of Management and Budget. (2022, February 14). *Cognitive Testing of the 2023 National Survey of Children's Health*. Retrieved 12 January 2023, from [https://www.reginfo.gov/public/do/PRAViewWC?ref\\_nbr=201909-0607-0028&icID=251581](https://www.reginfo.gov/public/do/PRAViewWC?ref_nbr=201909-0607-0028&icID=251581) See file names "2023 NSCH-LC1 Cognitive Interviewing\_OMB\_v2.pdf," "2023 NSCH-LC2\_LC3 Cognitive Interviewing\_OMB\_v2.pdf," and "2023 NSCH-LC4 Cognitive Interviewing\_OMB\_v2.pdf"