## **PUBLIC SUBMISSION**

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Division of Vital Statistics Proposal for Access to Restricted

Comment On: CDC-2025-0013-0001

Division of Vital Statistics Proposal for Access to Restricted 2025-10903

**Document:** CDC-2025-0013-0002 Comment from Su, Jessica

### **Submitter Information**

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### **General Comment**

I am writing as an academic researcher to express my strong support for continued access to restricted-use data for the National Center for Health Statistics (NCHS). I am an assistant professor of Sociology at UNC-Chapel Hill and a faculty fellow at the Carolina Population Center. As a user of these data in both previous and ongoing projects, I can attest to their critical importance for producing policy-relevant research that improves the health of people across the United States.

My research relies on data collected by NCHS to examine fertility and family formation in the United States. U.S. fertility rates have declined steadily, yet most Americans still hope and plan to have children. This suggests that many are unable to fulfill their fertility goals and highlights a need to identify the factors that constrain or support childbearing. Fertility decisions in the United States are shaped not only by individual preferences but also by the broader structural context in which families live and work. To evaluate these dynamics, my work links county-level economic data from federally-funded sources such as the U.S. Census and Department of Labor with nationally representative fertility data from the National Survey of Family Growth (NSFG).

For example, one of my past studies evaluated how local labor market conditions are associated with intended and unintended pregnancies. I found that women living in areas with high unemployment rates had a lower risk of unintended pregnancy, which has important implications for reproductive health and demographic trends.

I recently obtained approval through the NCHS to begin a new project, which will evaluate how local child care costs influence both actual fertility behavior and future childbearing goals. For example, this study will examine whether parents respond to high child care costs by having fewer children, by strategically spacing births to spread out the costs, or by adjusting their future childbearing goals.

These projects illustrate how the data linkages facilitated by the NCHS multiply the analytic power of each dataset, yielding insights that could not be uncovered from any one source in isolation. They also significantly enhance the return on investment for federal data collection efforts. Each dataset represents a substantial investment by the U.S. government and American taxpayers, and these creative linkages ensure that the data are used to their fullest potential. By granting access to qualified researchers outside of NCHS, the agency enables the data to be applied in innovative and unanticipated ways, extending research in directions that might not otherwise be explored.

I urge the OMB and NCHS to continue supporting this data infrastructure. Providing secure access to restricted-use data is essential for achieving the purpose of NCHS, which is to "collect, analyze, and share data and statistics to guide programs and policies that improve the health of people across the United States." (https://www.cdc.gov/nchs/about/index.html). The restricted-use access process is appropriately stringent. It ensures that researchers meet high standards for protecting confidentiality while enabling scientific inquiry. Ensuring continued access to restricted-use data for qualified researchers is essential for uncovering evidence on issues that matter deeply to U.S. families, such as child care, reproductive health, and economic security.

Thank you for the opportunity to comment. Jessica Houston Su, Ph.D.

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**Document:** CDC-2025-0013-0003 Comment from Anonymous

### **Submitter Information**

Name: Anonymous Anonymous

### **General Comment**

#### CDC-2025-0013-0001 2025-0013

The proposal for access to the Vital statistics and information may be needed to provide healthcare needs based on the data collected. The internal use of data may provide more insight for other research purposes, as well as a better understanding of previous medical treatments and environmental factors of impact.