Introduction

Thank you, Mr. Chairman Harkin, Mr. Ranking Member Cochran, and other distinguished members of the Subcommittee, for this opportunity to express support for the National Institutes of Health (NIH), the National Center for Health Statistics (NCHS), and Bureau of Labor Statistics (BLS).

Background on the PAA/APC and Demographic Research

The Population Association of America (PAA) is a scientific organization comprised of over 3,000 population research professionals, including demographers, sociologists, statisticians, and economists. The Association of Population Centers (APC) is a similar organization comprised of 40 universities and research groups that foster collaborative demographic research and data sharing, translate basic population research for policy makers, and provide educational and training opportunities in population studies. Population research centers are located at public and private research institutions nationwide.

Demography is the study of populations and how or why they change. Demographers, as well as other population researchers, collect and analyze data on trends in births, deaths, and disabilities as well as racial, ethnic, and socioeconomic changes in populations. Major policy issues population researchers are studying include the demographic causes and consequences of population aging, trends in fertility, marriage, and divorce and their effects on the health and well being of children, and immigration and migration and how changes in these patterns affect the ethnic and cultural diversity of our population and the nation’s health and environment.

The NIH mission is to support research that will improve the health of our population. The health of our population is fundamentally intertwined with the demography of our...
Recognizing the connection between health and demography, the NIH supports extramural population research programs primarily through the National Institute on Aging (NIA) and the National Institute of Child Health and Human Development (NICHD).

**National Institute on Aging**

According to the Census Bureau, by 2029, all of the baby boomers (those born between 1946 and 1964) will be age 65 years and over. As a result, the population age 65–74 years will increase from 6% to 10% of the total population between 2005 and 2030. This substantial growth in the older population is driving policymakers to consider dramatic changes in federal entitlement programs, such as Medicare and Social Security, and other budgetary changes that could affect programs serving the elderly. To inform this debate, policymakers need objective, reliable data about the antecedents and impact of changing social, demographic, economic, and health characteristics of the older population. The NIA Division of Behavioral and Social Research (BSR) is the primary source of federal support for research on these topics.

In addition to supporting an impressive research portfolio, that includes the prestigious Centers of Demography of Aging and Roybal Centers for Applied Gerontology Programs, the NIA BSR program also supports several large, accessible data surveys. One of these surveys, the Health and Retirement Study (HRS), has become one of the seminal sources of information to assess the health and socioeconomic status of older people in the U.S. Since 1992, the HRS has tracked 27,000 people, providing data on a number of issues, including the role families play in the provision of resources to needy elderly and the economic and health consequences of a spouse’s death. HRS is particularly valuable because its longitudinal design allows researchers: 1) the ability to immediately study the impact of important policy changes such as Medicare Part D; and 2) the opportunity to gain insight into future health-related policy issues that may be on the horizon, such as HRS data indicating an increase in pre-retirees self-reported rates of disability. In 2011, HRS will collect biomarkers, enhancing its ability to track the onset and progression of diseases and conditions affecting the elderly.

Currently, the NIA payline is 9%, and its operating line is flat. As research costs increase, NIA faces the prospect of funding fewer grants to sustain larger ones in its commitment base. With additional support in FY 2011, the NIA BSR program could fully fund its large-scale projects, including the existing centers programs and ongoing surveys, without resorting to cost cutting measures, such as cutting sample size, while continuing to support smaller investigator initiated projects. NIA could also sustain training and research opportunities for new investigators—especially those who received funding from the American Recovery and Reinvestment Act (ARRA).

**Eunice Kennedy Shriver National Institute on Child Health and Human Development**

Since its establishment in 1968, the Eunice Kennedy Shriver NICHD Center for Population Research has supported research on population processes and change. Today, this research is housed in the Center’s Demographic and Behavioral Sciences Branch (DBSB). The Branch encompasses research in four broad areas: family and fertility, mortality and health, migration and population distribution, and population composition. In addition to funding research projects in these areas, DBSB also supports a highly regarded population research infrastructure program and a number of large database studies, including the Fragile Families and
NIH-funded demographic research has consistently provided critical scientific knowledge on issues of greatest consequence for American families: work-family conflicts, marriage and childbearing, childcare, and family and household behavior. However, in the realm of public health, demographic research is having an even larger impact, particularly on issues regarding adolescent and minority health. Understanding the role of marriage and stable families in the health and development of children is another major focus of the NICHD DBSB. Consistently, research has shown children raised in stable family environments have positive health and development outcomes. Policymakers and community programs can use these findings to support unstable families and improve the health and well being of children.

One of the most important programs the NICHD DBSB supports is the Population Research Infrastructure Program (PRIP). Through PRIP, research is conducted at private and public research institutions nationwide. The primary goal of PRIP is “to facilitate interdisciplinary collaboration and innovation in population research, while providing essential and cost-effective resources in support of the development, conduct, and translation of population research.” Population research centers supported by PRIP are focal points for the demographic research field where innovative research and training activities occur and resources, including large-scale databases, are developed and maintained for widespread use.

With additional support in FY 2011, NICHD could restore full funding to its large-scale surveys, which serve as a resource for researchers nationwide. Furthermore, the Institute could apply additional resources toward improving its funding payline, which has been as low as the 10th percentile prior to the recent infusion of ARRA funds. Additional support could be used to support and stabilize essential training and career development programs necessary to prepare the next generation of researchers and to support and expand proven programs, such as PRIP.

**National Center for Health Statistics**

Located within the Centers for Disease Control (CDC), the National Center for Health Statistics (NCHS) is the nation’s principal health statistics agency, providing data on the health of the U.S. population and backing essential data collection activities. Most notably, NCHS funds and manages the National Vital Statistics System, which contracts with the states to collect birth and death certificate information. NCHS also funds a number of complex large surveys to help policy makers, public health officials, and researchers understand the population’s health, influences on health, and health outcomes. These surveys include the National Health and Nutrition Examination Survey (NHANES), National Health Interview Survey (HIS), and National Survey of Family Growth. Together, NCHS programs provide credible data necessary to answer basic questions about the state of our nation’s health.

Despite recent steady funding increases, NCHS continues to feel the effects of long-term funding shortfalls, compelling the agency to undermine, eliminate, or further postpone the collection of vital health data. For example, in 2009, sample sizes in HIS and NHANES were cut, while other surveys, most notably the National Hospital Discharge Survey, were not fielded. In 2009, NCHS proposed purchasing only “core items” of vital birth and death statistics from the
states (starting in 2010), effectively eliminating three-fourths of data routinely used to monitor maternal and infant health and contributing causes of death. Fortunately, Congress and the new Administration worked together to give NCHS adequate resources and avert implementation of these draconian measures. Nonetheless, the agency continues to operate in a precarious state.

The Administration recommends NCHS receive $161.9 million in FY 2011. PAA and APC, as members of The Friends of NCHS, support the Administration’s request. The increased funding will be used to support a number of initiatives, including: 1) restore the National Health Interview Survey to 87,000; 2) fund 12 months of vital statistics data collection; and 3) implement re-engineered web-based birth certificate data in 6 states and 4 territories and 4) phase in electronic death certificate registration in states willing to enter a cost-sharing arrangement with the agency.

**Bureau of Labor Statistics**

During these turbulent economic times, data produced by the Bureau of Labor Statistics (BLS) are particularly relevant and valued. PAA and APC members have relied historically on objective, accurate data from the BLS. In recent years, our organizations have become increasingly concerned about the state of the agency’s funding.

We are pleased the Administration has requested BLS receive a total of $645 million in FY 2011. According to the agency, this funding level would enable BLS to improve the Consumer Expenditure Survey and reduce variance in the Consumer Price Index. Also, BLS could improve data used to measure occupational wage and employment growth and identify trends policymakers need to understand the turbulent labor market. Finally, the agency could support its work on developing an alternative poverty measure.

**Summary of Fiscal Year 2011 Recommendations**

As members of the Ad Hoc Group for Medical Research, PAA and APC are asking Congress to provide NIH with an appropriation of $35 billion in FY 2011—$3 billion more than the Administration’s request. Although the Administration’s request for NIH reflects inflation, we feel NIH needs additional support to sustain the new research capacity created by ARRA.

PAA and APC, as members of the Friends of NCHS, ask that NCHS receive $161.9 million in FY 2011. This funding is needed to maintain and improve the nation’s vital statistics system and to sustain and update the agency’s major health survey operations.

Finally, we ask you to support the Administration’s request, $645million, for the Bureau of Labor Statistics, in FY 2011.

Thank you for considering our requests and for supporting federal programs that benefit the population sciences.