August 7, 2018

Ms. Jennifer Jessup  
Departmental Paperwork Clearance Officer  
Department of Commerce  
Room 6616  
14th and Constitution Avenue, NW  
Washington, DC 20230


Dear Ms. Jessup,

Trust for America’s Health (TFAH) thanks you for the opportunity to respond to the request for input on the 2020 Census proposed information collection. TFAH is a non-profit, non-partisan public health policy, research and advocacy organization dedicated to promoting optimal health for every person and community and makes the prevention of illness and injury a national priority.

America’s future depends on the health of our children. As prevention and equity are major priorities for us, we are deeply concerned about the potential issue of a net undercount of young children in the next Census and the impact that it would have on their health.

We submit these comments to identify the features of the proposed questionnaire and implementation process for the Decennial Census that could affect that undercount. As discussed below, we:

- Approve of the proposal by the Census Bureau to update the language on the primary solicitation materials that most households will receive in 2020 to “…all adults, children, and babies living or staying at this address,” instead of “…everyone living or staying at this address”;
- Urge that the Census Bureau remove the citizenship status question because of its likelihood of significant reduction in the number of young children that will be counted and its subsequent negative impact on their health; and
- Request that the Census Bureau revamp its communications research and outreach to include special attention to the undercount of young children.

According to the U.S. Census Bureau, the 2010 Census missed nearly one in ten children aged 0-4, or about 2 million children. The net young child undercount (after accounting for duplications) was nearly 5 percent, or almost one million children.1 Young children had by far the worst undercount of any age group, and the children that are missed most often are children of color.2 Thus, children who are already disproportionately low-income, experiencing poor health...
outcomes, and lacking health and other support services are less likely to get their legally obligated share of federal and state dollars and adequate services in their communities.

Young children are generally undercounted for a plethora of reasons, which can compound to exacerbate the seriousness of this problem:

- Almost 4.5 million children under age five live in hard-to-count neighborhoods, such as “neighborhoods where poverty is high and where multi-unit building and rental housing are more common.”
- Some young children may go uncounted because they live in large households. In 2010, nearly a quarter of young children lived in households of six or more people.
- Some young children have complicated living arrangements, moving often among various relatives or caregivers. Young children in complex households may be left off the Census questionnaires because respondents are uncertain whether to include a young child as a household resident.
- Language barriers also contribute to the undercount of young children in households. In 2010, one-quarter of young Latino children lived in a linguistically isolated household where adults had difficulty speaking English.

The potential for undercount of young children can have several serious consequences for the health of these children. Undercounts affect the allocation of more than $800 billion in federal funds allocated to states and localities based on the Census data. Programs serving children that could be affected include the Child Care and Development Block Grant (CCDBG); Head Start; Title I grants to local education agencies; Special Education Grants (IDEA); the Children’s Health Insurance Program (CHIP); the Women, Infants, and Children (WIC) Special Supplemental Nutrition Program; and many others. Children also benefit from programs that serve adults as well as children that might be affected such as Medicaid and Section 8 Housing.

The consequences of an undercount have far-reaching consequences. For example, if many young children are missed, communities will not know which areas need to build schools or add classrooms, leading to overcrowded classrooms and a lower quality of education for all children who live in areas with many uncounted children.

State and local governments often decide where to build health centers and provide other medical resources based on the number and distribution of people, particularly those who are low-income, in a community, with new centers being built or old ones being closed. An undercount of young children could mean inadequate medical resources in the community. Businesses also use Census data for planning where to put new enterprises; if a local community is undercounted, that may result in, for example, no business being willing to start a grocery store there and people having less access to healthy food.

The risk of a significant young child undercount in the 2020 Decennial Census is even greater with the addition of a question on citizenship, which could mean that millions of immigrant families may be afraid to respond at all. Before the citizenship question was added, Census staff were warning that the charged political environment would make it harder to persuade people to
fill out the Census. If the Census form asks about citizenship status, that effect will be much stronger.

The likely reduced response rate from the proposed citizenship question will create a severe, negative effect on programs vital to children and families. Any child living in an area with high numbers of immigrants could suffer because the area will not get the resources it deserves.

While these reasons are unique to the health of children, there are other reasons to remove the citizenship question. The question is untested, so we have no idea how families will interpret it and how that will affect their reporting on young children. For example, at the June 2018 Census Bureau’s National Advisory Committee meeting it was revealed that some members of Native American tribes might inaccurately report themselves as noncitizens because they consider themselves citizens of their tribe. Including the question risks providing misleading and inaccurate data.

As a non-profit health-oriented organization, we use Census data to assess the well-being of children and identify policy changes to improve the health of those children. We know that others involved in crafting health policy also need reliable, useful, objective data about our nation’s people, housing, economy, and communities.

For all the reasons detailed above, we believe it is critical that the Census questionnaire and collection procedures are designed to ensure a full and fair count of young children. Thank you for the opportunity to comment. If you have any questions, please contact Jack Rayburn, TFAH’s Senior Government Relations Manager, at (202) 864-5942 or jrayburn@tfah.org.

Sincerely,

John Auerbach
President and Chief Executive Officer

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9 MEMORANDUM FOR Associate Directorate for Research and Methodology (ADRM), https://www2.census.gov/cac/nac/meetings/2017-11/Memo-Regarding-Respondent-Confidentiality-Concerns.pdf.