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May 26, 2023

Ms. Sheleen Dumas
Department PRA Clearance Officer
Office of Chief Information Officer
Commerce Department
Washington, DC 20230

Submitted via [reginfo.gov](https://www.reginfo.gov)

Re: Agency Information Collection Activities; Submission to the Office of Management and Budget (OMB) for Review and Approval; Comment Request; Household Pulse Survey (OMB Control Number 0607- 1013, Document Number 2023-08953)

I am writing from First Focus on Children in response to the request for comment on the Federal Register Notice regarding proposed changes to the U.S. Census Bureau Household Pulse Survey for Phase 3.9. We appreciate the opportunity to comment on these proposed revisions.

First Focus on Children is a bipartisan child advocacy organization dedicated to making children and families the priority in federal policy and budget decisions. As advocates for children, we are committed to ensuring that all children have an equal chance for success. We know that access to frequent and timely data is critical to achieving this goal by informing decision-making on policies and programs that serve and support children and their families.

For the past three years, the Census Household Pulse survey has been critical to understanding the repercussions of the COVID-19 public health crisis on child health and economic stability, including the impact of relief measures included in the American Rescue Plan Act and other legislation passed by Congress. The Household Pulse Survey continues to be an important tool to gauge how children and their families are faring, and we support including questions that provide additional detail as to how households with children, especially households of color, continue to disproportionately experience material hardship and income volatility.

We offer the following comments in response to the changes outlined in the Federal Register for Phase 3.9 of the Household Pulse Survey:

Child Care

We are very concerned by the proposal to eliminate the Household Pulse Survey questions regarding child care arrangements for families, and we urge you to maintain and add to the existing child care questions. Despite the COVID-19 public health emergency being lifted, the child care sector has not recovered even to the precarious place it was prior to the pandemic. Child care employment remains 5.1 percent lower than it was before the pandemic and has not recovered like other sectors have. There are currently 54,000 fewer early educators in the

child care system, straining an already-stretched sector and causing reduced access to care for children and their families.¹

Much of the nearly \$50 billion in emergency COVID-19 funding made available for the child care system, which reached more than 80 percent of licensed providers and stabilized care for up to 9.6 million children, is set to expire at the end of Fiscal Year 2023.² Child care is also threatened with across-the-board discretionary spending cuts. These threats and loss of funding at a time when the child care sector has yet to fully recover from the pandemic, could be devastating for children and families.

Data that demonstrates families' experiences accessing child care is more vital and relevant to families' lives than ever, and we urge you to continue tracking this information in the Household Pulse Survey.

In addition to the existing three questions on child care (CCARE1, CCARE2, and CCARE3), new questions should be added that ask if disruptions in child care arrangements have impacted respondents' ability to work; if the price respondents pay for child care has increased; and if and why respondents have had to change child care providers. Child care should also remain an option in question EMP4 that asks for the reasons respondents have not worked for pay in the last week. The question should ask if respondents have worked fewer hours in addition to not worked at all.

Youth Mental Health

We are also very concerned by the proposal to eliminate questions on children's mental health and behaviors in the survey. The current statistics on youth mental health are astounding. Roughly 42 percent of high school students felt so sad or hopeless almost every day for at least two weeks in a row that they stopped participating in their usual activities.³ One in ten high school students attempted suicide one or more times during the past year.⁴ Typically 11 years pass between the onset of symptoms in children and adolescents and when they first receive treatment.⁵ Nationwide, more than 60 percent of children who experience a severe depressive episode do not receive treatment.⁶

Our nation's youth mental health crisis existed before COVID-19, but the pandemic exacerbated it. Collecting data by every means possible on the state of our youth's mental health is vital, and we ask you to continue this important work in the Household Pulse Survey. In addition to question HLTH14 that is already included in the survey, we ask you to add a question about the ability of children and families to access mental health services in a timely manner through a variety of providers (schools, counselor, psychiatrist, peer support, and others.)

Medicaid

We are pleased to see the questions related to individual Medicaid coverage and believe those questions should remain in the survey tool. However, we strongly recommend that additional questions be asked to determine status around children's health coverage in the household.

¹ "Child Care Sector Jobs," Center for the Study of Child Care Employment. May 8, 2023.

<https://csce.berkeley.edu/publications/brief/child-care-sector-jobs-bls-analysis/>

² "ARP Child Care Stabilization Funding State and Territory Fact Sheets," Office of Child Care, Administration for Children and Families. <https://www.acf.hhs.gov/occ/map/arp-act-stabilization-funding-state-territory-fact-sheets>

³ "Youth Risk Behavior Survey Data Summary & Trends Report," Centers for Disease Control and Prevention, February 2023. https://www.cdc.gov/healthyyouth/data/yrbs/yrbs_data_summary_and_trends.htm

⁴ Ibid. 3

⁵ U.S. Surgeon General Issues Advisory on Youth Mental Health Crisis Further Exposed by COVID-19 Pandemic.

HHS.com, December 7, 2021. <https://www.hhs.gov/sites/default/files/surgeon-general-youthmental-health-advisory.pdf>

⁶ Youth Ranking 2022. Mental Health America. <https://www.mhanational.org/issues/2022/mental-healthamerica-youth-data>

Medicaid coverage applies on an individual basis. Asking whether one person in the household has Medicaid does not mean the rest of the family has Medicaid coverage. As currently written, the questions fail to ascertain whether any children in the household have had health coverage during the period of the survey whether through Medicaid or other means. It also does not reveal how many children in the household have health coverage; whether they have lost coverage completely or have transitioned between Medicaid and the Children's Health Insurance Program (CHIP) or even a parent's employer-sponsored insurance plan; and why they lost the coverage or transitioned to another form.

Asking questions to understand trends in children's coverage is extremely important in general, but even more so now as states are currently undergoing the process of what has become known as the Medicaid "unwinding". During the COVID-19 pandemic, Congress provided additional Medicaid funding to states based on meeting several requirements, including a continuous coverage requirement that prohibited states from terminating a child or parent's Medicaid coverage during the COVID-19 public health emergency (PHE). With the Consolidated Appropriations Act, 2023, Congress delinked the continuous coverage requirements from the end of the PHE and set April 1, 2023 as the date when states can begin unwinding. This means that states can disenroll children and families from Medicaid and CHIP who no longer qualify and resume the state's normal course of annual Medicaid and CHIP eligibility reviews. While this might seem like a simple return to normal operating procedure for state Medicaid agencies, if they do not proceed with caution millions of people will unnecessarily lose coverage. In fact, children are at the greatest risk of losing coverage. Of the more than 41 million children covered by Medicaid and CHIP,⁷ it is estimated that nearly 7 million could lose coverage.⁸ Of these 7 million, nearly 74 percent will actually still be eligible for Medicaid or CHIP but will have lost coverage unnecessarily due to administrative issues.⁹ Understanding children's current health coverage status and their health coverage status moving forward will help determine the best course of action for ensuring all children can have access to stable, comprehensive coverage following the COVID-19 pandemic and ahead of any future pandemics.

Vaccines

We are concerned about the proposal to eliminate the question regarding families' intent to vaccinate their children against COVID-19, and we urge you to continue collecting this information. It is still important to understand the data behind families' vaccination decisions. Childhood vaccination rates against COVID-19 remain concerningly low and varied, with state-specific rates ranging from three percent to 97 percent for first doses.¹⁰ We continue to see drops in childhood immunization rates of vaccine-preventable illnesses. Nationwide, 28 percent of adults said in 2022 that parents should not have to vaccinate their children in order to attend public school even if this poses health risks to other children, an increase from 16 percent in 2019. Just 71 percent of adults say that children should be vaccinated against measles, mumps, and rubella in order to attend public school, down from 82 percent in 2019.¹¹ We must understand why these choices are being made in order to protect children and public health and to avoid crises in vaccine-preventable illnesses.

⁷ Centers for Medicare & Medicaid Services (CMS), January 2023 Medicaid and CHIP Enrollment Trends Snapshot, *available at* <https://www.medicare.gov/medicaid/national-medicare-chip-program-information/downloads/january-2023-medicare-chip-enrollment-trend-snapshot.pdf>.

⁸ Families USA, First Focus on Children, UnidosUS, The Looming Equity Crisis in Children's Health Care: Federal and State Action is Needed to Prevent Millions of Children from Losing Medicaid, *available at* https://firstfocus.org/wp-content/uploads/2022/07/Report_the_looming_equity_crisis_in_childrens_health_care.pdf.

⁹ HHS Assistant Secretary for Planning and Evaluation – Office of Health Policy, Unwinding the Medicaid Continuous Enrollment Provision: Projected Enrollment Effects and Policy Approaches, *available at* <https://aspe.hhs.gov/sites/default/files/documents/a892859839a80f8c3b9a1df1fcb79844/aspe-end-mcaid-continuous-coverage.pdf>.

¹⁰ "Children and COVID-19 Vaccination Trends," American Academy of Pediatrics. May 3, 2023. https://downloads.aap.org/AAP/PDF/Child%20Vaccinations%20Report%20US%20Cumulative%20and%20Weekly%205.3.2023.pdf?_ga=2.10693172.1605528154.1685070112-373671795.1685070112

¹¹ Lunna Lopes et. al. "KFF COVID-19 Vaccine Monitor: December 2022," Kaiser Family Foundation, December 2022. <https://www.kff.org/coronavirus-covid-19/poll-finding/kff-covid-19-vaccine-monitor-december-2022/>

Thank you for the opportunity to submit a comment. Please do not hesitate to contact Averi Pakulis at averip@firstfocus.org or Abuko Estrada at abukoc@firstfocus.org for additional information.

Sincerely,

A handwritten signature in blue ink that reads "Bruce Lesley". The signature is written in a cursive style with a prominent underline under the word "Lesley".

Bruce Lesley
President, First Focus on Children