

Applied Demography

Population Association of America – Committee on Applied Demography Newsletter

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Welcome to Austin for PAA 2019!

The Population Association of America's 2019 Conference returns to Texas! The conference has a variety of sessions of interest for Applied Demographers (see the "Applied Demography Sessions at PAA" that follows).

In addition, the Committee on Applied Demography (CAD) invites you to participate in several events - including our own Executive meeting. The conference also provides the opportunity to meet other demographers who share your interests.

*Applied Demography Business Meeting
Wednesday, April 10, 4:30 to 6:00 PM
Room 201, JW Marriot Austin*



The business meeting is open to all, no matter whether you have been involved in applied demography for a day or decades. It is the place to raise ideas and provide suggestions about the CAD's future, including what sessions you would like CAD to sponsor at the 2020 PAA conference in Washington, DC. Feel free to come share what you have done or plan to do in the past or coming year! Like all business meetings, we start with introductions. After introducing yourself, let us know about a project you have completed recently or one you are getting underway.

*Applied Demography Breakfast
Friday, April 12, 7:00 to 8:30 AM
(Lone Star D/E - Level 3)*

This networking event is a great opportunity to see old friends and mingle with people who share your interests. For graduate students and younger professionals who may want to find out more about some of the non-academic career paths in demography, the Applied Demography Breakfast is a great place to strike up a conversation with a professional who has made a career in applied demography.

Applied Demography Breakfast

Friday, April 12, 2019

Before the Friday morning sessions, join us at this year's Applied Demography Breakfast, a long-time PAA tradition! We will have **Dr. Gregg Bell**, Assistant Professor and Senior Data Analyst at the Department of Community and Rural Medicine at the University of Alabama, as our featured speaker. Dr. Bell will discuss the State Data Center Programs.

Applied Demography Sessions at PAA

The sessions outlined below make up this year's "Applied Demography Track" at PAA. Attendance at these sessions is important in allocating slots on next year's PAA program. Please show your support by attending. Last year, most of our sessions were standing room only, let us keep this record going.

Thursday, April 11, 8:30-10:00 AM (Brazos/206 - Level 2)

Session 1: "Balancing Advocacy and Science"

Chair: Susan Brower, State of Minnesota

1. Mary Jo Hoeksema, Population Association of America
2. Alexis Santos-Lozada, Pennsylvania State University
3. Jack DeWaard, University of Minnesota, Twin Cities
4. Joseph Salvo, New York City Department of City Planning

Thursday, April 11, 10:30-12:00 PM (Brazos/206 - Level 2)

Session 25: "Implications of Differential Privacy for Demographic Research"

Chair and Discussant: Wendy D. Manning, Bowling Green State University

1. Steven Ruggles, University of Minnesota
2. Jane Bambauer, University of Arizona, School of Law
3. John Maron Abowd, U.S. Census Bureau
4. Douglas S. Massey, Princeton University
5. Constance F. Citro, The National Academies

Thursday, April 11, 12:30-2:00 PM (Griffin Hall - Level 2)

Poster Session 3: Population, Development, & the Environment; Data & Methods; Applied Demography

Thursday, April 11, 3:00-4:30 PM (Brazos/206 - Level 2)

Session 75: "The Citizenship Question Issue and the 2020 Census: Demographers in the Courtroom"

Chair: Mary Jo Hoekseman, Population Association of America

Discussant: Hansi Wang, NPR

1. John Thompson, Independent Consultant
2. Jennifer Van Hook, Pennsylvania State University
3. William O'Hare, O'Hare Data and Demographic Services, LLC
4. Joseph Salvo, New York City Department of City Planning

Thursday, April 11, 5:00-6:30 PM (Meeting Room 211 - Level 3)

Session 110: "Projecting Fertility in a Time of Demographic Change: Will it Rise?"

Chair: Lila Valencia, University of Texas at San Antonio

Discussant: XiuHong You, University of Texas at San Antonio

1. Adolescent Fertility: A Multi-Temporal Subnational Perspective Across Low- and Middle-Income Countries
2. Reassessment of Fertility Transition in India and Its Future Prospects by Some Modelling Approach
3. North Dakota County Fertility, Oil Prices, and Oil Output
4. Is the Drop in Fertility Due to the Great Recession or a Permanent Change?

Friday, April 12, 8:15-9:45 AM (Lone Star A - Level 3)***Session 123: “Flash Session: Geospatial Analysis in Applied Demography”****Chair: Malia Jones, University of Wisconsin-Madison**Discussant: Malia Jones, University of Wisconsin-Madison*

1. The Discrepancy of Fertility Recuperation from the Great Recession: The Geographic and Occupational Characteristics in the United States
2. Population Projections for U.S. Counties by Age, Sex, and Race Controlled to the Shared Socioeconomic Pathways
3. Using Ternary-Balance Schemes to Visualize Family-Planning Indicators Jointly for All Countries
4. Visualizing the Effects on Children of Changes in the Public Charge Rule
5. Mapping Education and Health Infrastructure of Aspirational Districts in India
6. Mortality Estimates for Small Areas in Argentina, 2009-2011
7. A Geographic Analysis of Characteristics Allocation in the 2010 Census

Friday, April 12, 10:15-11:45 AM (Lone Star A - Level 3)***Session 146: “Data Visualizations, Open Source, and Other Tools of Applied Demography”****Chair: Malia Jones, University of Wisconsin-Madison**Discussant: Tom E. Godfrey, Decision Demographics*

1. Displaying Nonlinear Age-Period-Cohort Patterns on Lexis Plots.
2. Calculating Fertility and Childhood Mortality Rates from Survey Data using the DHS.Rates R Package
3. Building Contextual Data from Online Sources
4. Geofaceting: Align Small-Multiples for Regions in a Spatially Meaningful Way
5. DAPPS: A New Tool for Demographic Analysis and Population Projections
6. The Good, The Bad and the Ugly: The Power of Good Design in Visualizing Demographic Data
7. Database Design and Data Visualization for Demographic Data

Saturday, April 13, 9:15-10:45 AM (Meeting Room 202 - Level 2)***Session 214: “2020 Census Data Product Plan”****Chair: Jason Devine, U.S. Census Bureau*

1. Obtaining User Data Feedback - Marc J. Perry
2. 2020 Census Data Products - Rachel Marks
3. ACS Data Products - Jennifer M. Ortman
4. Schedule, Disclosure, Dissemination Platform - Cynthia Hollingsworth

Proposed Changes in Immigration Policy Put Children at Risk of Losing Health Insurance*Beth Jarosz, Population Reference Bureau*

Many children may lose public health insurance and nutrition assistance benefits under proposed changes to U.S. immigration policy.

Under current policy, any foreign national may be designated a “public charge” if more than half of his or her household’s income is from certain government sources, such as Supplemental Security Income or cash assistance from the Temporary Assistance for Needy Families program. Historically, health benefits such as Medicaid, the Children’s Health Insurance Program (CHIP), and health subsidies under the Affordable Care Act were specifically excluded from public charge evaluations, as were nutrition assistance programs such as the Supplemental Nutrition Assistance Program (SNAP). Any immigrant who has been designated a public charge may be prevented from changing status (such as converting from a nonimmigrant student visa to legal permanent resident status), denied citizenship, or, in rare cases, deported. [1]

A recent policy proposal seeks to broaden the list of programs that would be considered in public charge evaluations to include public health insurance such as Medicaid and CHIP, and public nutrition assistance such as SNAP. [2]

If the proposed rule goes into effect, a noncitizen child's participation in public health and nutrition assistance programs could lead to a public charge determination. The effect on dependent citizen children is unclear, but community groups are already noting a "chilling effect" in public program enrollment among citizen children of noncitizen parents.

Working with the Lucile Packard Foundation for Children's Health and the Children's Partnership, PRB estimated the number of children who would be at risk under the proposed new policy. PRB also produced estimates for California counties using data from the American Community Survey (ACS).

To evaluate the at-risk population, we used data from the ACS for the years 2014 to 2016. We grouped children ages 0 to 17 into four categories based on both child and parent citizenship status (child and parent(s) citizens, child citizen living with noncitizen parent(s), child citizen not living with either parent, child noncitizen). We identified child noncitizen as the primary at-risk category, and child citizen living with noncitizen parent(s) as the category at risk of a chilling effect. We then determined whether each child was listed as participating (at the time of the survey) in Medicaid, CHIP, and other means-tested public health insurance programs. We cross-tabulated participants by the child and parent citizenship risk categories.

We estimate that nearly 180,000 noncitizen children in California would be at risk of losing their health insurance coverage—mostly Medicaid or CHIP—under the new rule. An additional 1.6 million citizen children of noncitizen parents in California could also be at risk. While Los Angeles County accounts for the largest number of at-risk children (more than 50,000 noncitizen children and 530,000 citizen children of noncitizen parents), concentrations are highest in Central California. In Monterey and San Benito counties, more than one-third of all children are at risk (3 percent of children are noncitizens who participate in Medicaid, CHIP, or other means-tested public health insurance, and 31 percent are citizen children of noncitizen parents who participate in public health insurance programs).

For more information, and for analysis of effects on SNAP participation, see:

<https://www.prb.org/proposed-changes-in-immigration-policy-put-children-at-risk-of-losing-health-insurance/>

References:

- [1] Krista Perreira, Hirokazu Yoshikawa, and Jonathan Oberlander, "A New Threat to Immigrants' Health - The Public-Charge Rule," *The New England Journal of Medicine* 379, no. 10 (2018): 901-903.
- [2] Homeland Security Department, Notice of Proposed Rule, "Inadmissibility on Public Charge Grounds," Federal Register 83, no. 196 (Oct. 10, 2018): 51114.

Make North Carolina Count!

In order to Make NC Count! North Carolina Governor Roy Cooper established the State Complete Count Commission in October 2018. A website has been created: www.census.nc.gov to promote the census and support local complete count committees and the statewide complete count commission.

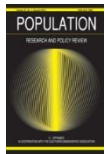


**MAKE NC
COUNT**
C E N S U S 2 0 2 0



Look Into North Carolina!

The North Carolina Office of State Budget and Management (NC OSBM) has just released a new version of *LINC – Look Into North Carolina* – a database that reports demographic and statistical information for the state of North Carolina, its counties and cities/towns. The online open data system compiles data from a range of state and federal agencies and provides historic data to as far back as 1969 and projected and forecasted data for up to twenty years beyond today. The new LINC includes the ability to download various datasets as well as visualize demographic, socioeconomic and other data using graphs, charts and maps. Registered users will receive notifications of dataset updates and have the ability to save their own visualizations. See: <https://linc.osbm.nc.gov/>



POPULATION RESEARCH AND POLICY REVIEW CALL FOR PROPOSALS: SPECIAL ISSUE 2020

[Deadline: June 1, 2019](#)

Population Research and Policy Review (PRPR) welcomes proposals for its Special Issue 2020. *PRPR* intends to publish one Special Issue (SI) each year. This SI will include around five empirical papers together with an introductory editorial that provides a more overarching (theoretical) synthesis of the individual contributions.

Submission of proposals

The proposal for the SI should be made by the expected guest editor(s) and submitted to the editors-in-chief of *PRPR* (Kara Joyner kjoyner@bgsu.edu and Corey Sparks: corey.sparks@utsa.edu). The proposal must include:

- the title of the special issue
- the names and affiliations of the guest editor(s)
- the names and affiliations of the contributing authors
- a one page summary of the theme, overarching aim, timeliness and innovativeness of the SI for publication in *PRPR*. It should be shown that the different papers fit together as a coherent SI.
- all titles and (half page) abstracts of the SI paper contributions

If you have any further queries, please contact *PRPR* editors-in-chief Kara Joyner and Corey Sparks.

The Contribution of Demography to Achieving Health for All in Ghana

James F. Phillips, Columbia University

Ayaga A. Bawah, University of Ghana

Four decades ago at this time, global health leaders assembled in Alma Ata, Soviet Union, to develop a consensus on primary health care. Generating the phrase “*Health for All by the Year 2000*,” the Alma Ata Accord shifted national health development priorities from investment in tertiary facility based services to a focus on community-based primary health care (World Health Organization 1978). Although Ghana immediately adopted the Alma Ata agenda as national policy, “*Health for All*” was a distant dream for most Ghanaians as the year 2000 approached. A national debt crisis required severe budget cuts that prevented investment in community health post infrastructure and worker deployment. The imposition of hospital user fees reduced the affordability of care, amplifying the detrimental effects of service remoteness.

In response to these challenges, the Ministry of Health launched a micro-pilot project in 1994 for developing community health strategies. The approach that emerged was tested as a byan experiment of the Navrongo Health Research Centre in northern Ghana that was conducted over the 1996 to 2003 period (Binka et al. 1995). Its design was configured to resolve debate about the relative demographic impact of volunteer-based services versus services provided by paid professional community nurses. Some international agencies advocated the deployment of volunteers as a low cost expedient for achieving Health for All (UNICEF Bamako Initiative monitoring unit 1988), while others advocated the deployment of well-trained professional community nurses (WHO Study Group on Community Health Workers and World Health Organization 1987). Navrongo research resolved debate by showing that no health benefits were associated with deploying volunteers, while the survival benefits of nurse deployment were immediate and pronounced. Long term effects of nurse deployment eventually produced a 70 percent childhood mortality, demonstrating that community nurse deployment was a feasible means of achieving Millennium Goal 4 (Phillips, Bawah, and Binka 2006).

Fertility effects were also evident, with results that also addressed policy debate. The social context of Navrongo was profoundly pronatalist, with pervasive and robust high fertility norms (Adongo et al. 1997). Some international observers questioned the feasibility of achieving results with service approaches in such settings while others held the view that contraceptive distribution could address need in such settings. Both perspectives were challenged by Navrongo results: When nurses were deployed to visit households and dispense methods, their services had no fertility impact (Debpuur et al. 2002). Gender norms and social customs prevented women from implementing their reproductive preferences even when supplies were conveniently available (Bawah et al. 1999). However, if volunteers were deployed to engage men in discussion of the benefits of contraception, this support permitted women to respond to nurse deployment by adopting contraception. Fertility declined by one birth (15 percent) in five years relative to levels observed in comparison areas. This impact was sustained over time (Phillips et al. 2012).

When preliminary Navrongo results were disseminated to policy makers in Ghana, the feasibility of scaling up project strategies was widely debated. In response to this controversy, a replication trial was conducted in Nkwanta District in north eastern part of Ghana. When Nkwanta results reproduced Navrongo impact, and its strategies were further successfully tested and disseminated, the Navrongo service model was adopted as a national policy known as the Ghana Community-based Health Planning and Services (CHPS) initiative.

Challenges arose as scale-up progressed, however. Monitoring generated evidence that achieving “Health for All” would require nearly five decades if 2008 rates of implementation were allowed to continue without reform. To diagnose organizational implications of this problem, an appraisal of CHPS was convened in 2009, generating recommendations that were tested over the 2010 to 2015 period in a demographic plausibility trial of systems reforms (Awoonor-Williams et al. 2013). Trial results showed that strategies for accelerating scale-up of CHPS worked (Awoonor-Williams, Phillips, and Bawah 2016) and that improved CHPS coverage saved childhood lives (Bawah et al. 2017). Current trial and experimentation is testing means of replicating these proven reforms at scale (Phillips et al. 2018).

Partnership of demography with policy making has thus been critical to two decades of primary health care systems development (Awoonor-Williams, Phillips, and Bawah 2017). A sequence of trials evaluated with sound demographic research have identified ways to avoid pitfalls, clarify problems, and define effective directions when reform was needed. Monitoring data on trends in CHPS coverage suggest that evidence-driven reform is successfully accelerating the expansion of CHPS implementation. Within the next two years, Ghana is poised to achieve *Health for All* at last.

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Upcoming Events

2019 ACS Data Users Conference, May 14-15 (American University, Washington, DC)

<https://acsdatacommunity.prb.org/p/conferences>

The Population Reference Bureau (PRB) is organizing the conference in partnership with the U.S. Census Bureau and with guidance from an ACS Data Users Group Steering Committee.

Stats for America Conference, June 3rd (U.S. Labor of Statistics, Washington, DC)

<https://www.eventbrite.com/e/stats-for-america-conference-tickets-59167179627>

In a world that has become flush with data, what are the unique advantages of these public data assets? This event will feature panel discussions between users and producers, demonstrations of data presentation, an interactive exhibition for media and agencies to interact, and discussion of current issues relating to federal statistics.

Inequality trends around the Mediterranean

Deadline for Submitting Proposals: April 22nd, 2019

<https://www.lisdatacenter.org/news-and-events/call-for-proposals-inequality-trends-around-the-mediterranean/>

LIS and the ERF are pleased to announce a call for proposals on "Inequality trends around the Mediterranean." Selected authors will present their papers during ERF-LIS first conference by November 2019. Interested researchers are invited to submit their proposals by April 22, 2019.

Applied Demography on Social Media



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/KIDSCOUNT
/PopAssoc



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@SDA_Demography
@prbdata
@uscensusbureau
@urbandata
@ipums
@copafsK
@APDUorg
@aecfkidscount
@pewresearch
@allthingscensus



/uscensusbureau
/prbnet
/AECCaseyFound



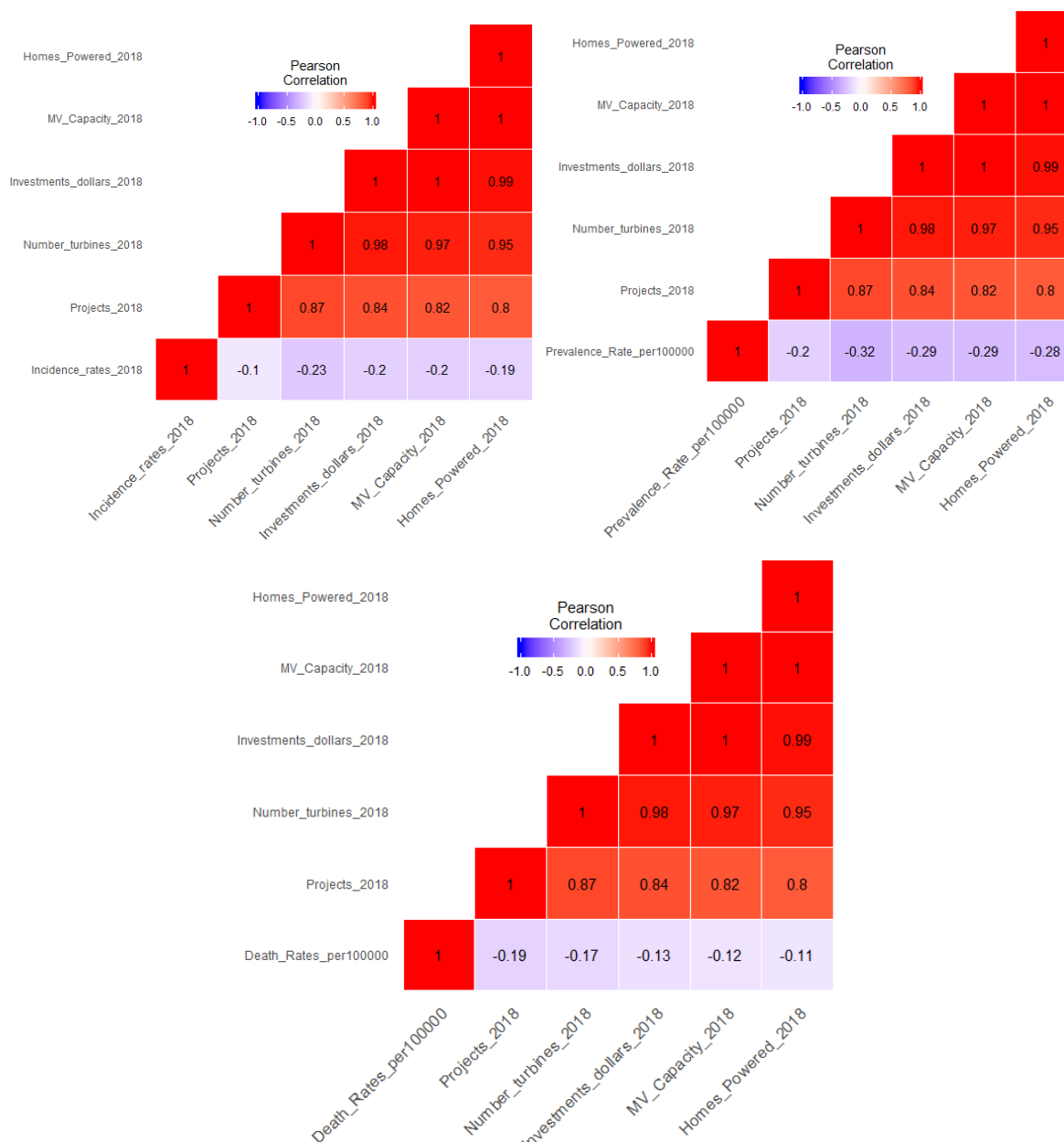
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Wind Energy Indicators not correlated with Cancer Rates in the United States: A state-level analysis

Alexis R. Santos-Lozada, Pennsylvania State University

The following correlation plots were produced using [RStudio](#) and the [ggplot2](#) and [reshape](#) libraries. Data from the State Cancer Profiles published by the National Cancer Institute and Wind Energy Indicators by the [American Wind Energy Association](#) are used to explore the state-level correlations between cancer incidence, prevalence, and mortality, and five wind energy indicators.

Sample code to produce these figures is available via my [GitHub Repository](#).



Results: Wind Energy Indicators are not correlated with any of the three cancer indicators included in the analysis.

Repository: https://github.com/alexisrsantos/WindTurbines_cancer



Assistant Research Professor/Research Associate in Applied Demography

The Population Research Institute at Pennsylvania State University seeks a Research Associate in Applied Demography. With support from Penn State, PRI is helping to lead a new initiative to develop the Pennsylvania Population Network (PPN) – a coalition of related research centers and resources from across the Pennsylvania State University.

The PPN provides analyses focused on the role of population structure and change on health outcomes that can inform decision making by stakeholders in Pennsylvania and beyond. We are seeking a highly qualified applied demographer who can take a lead role in research and coordinate graduate internships across participating centers and programs. We seek candidates with strong motivation, ability to conduct research with a proven track record, excellent project management, written and oral communication skills and the ability to effectively interact with and mentor graduate students.

Candidates must have a Ph.D. in Demography, Geography, Sociology or related field. Strong data analysis skills are required. Experience in spatial modeling, GIS, complex and multi-level data is preferred. The initial appointment will be for one-year, but renewable for additional years pending funding availability.

Applications must be submitted electronically and include a cover letter, CV and the names, addresses and email contact information for three professional references. The review of applications begins on 4/15/2019 and will continue until the position is filled. Contact Dora Hunter, PRI Project Manager (email: dmh63@psu.edu). Members of the Population Research Institute will be attending PAA!

Committee on Applied Demography Officers

The Committee recommends sessions and events for PAA's annual meeting, and serves as the primary conduit between PAA members who practice applied demography and the larger PAA organization.

Jason Devine, U.S. Census Bureau(CHAIR): *first year of term*

Susan Brower, Minnesota State Demographer: *year 1, second term*

Mathew Hauer, University of Georgia: *year 3, first term*

Sarah Burgoyne, Senior Demographer at Nielsen: *year3, first term*

Malia Jones, Applied Population Laboratory, University of Wisconsin–Madison: *year 2, first term*

Vacant: _____

The CAD chair serves one four-year term while the other committee members serve a three-year appointment which can be renewed once for an additional three years.



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EDITORIAL INFORMATION

Readers are encouraged to suggest topics and to respond to articles in *Applied Demography* with letters to the editor. Please address all correspondence to the CAD Newsletter Editor: Alexis R. Santos-Lozada ars39@psu.edu

PAA members who wish to subscribe to *Applied Demography* will automatically become members of the Applied Demography subgroup until their current subscription expires. To continue membership in the Applied Demography subgroup (and continue receiving *Applied Demography*), please check the “AD Membership” option when renewing your PAA membership online. The publication of articles in this newsletter does not constitute an endorsement of the opinions expressed on them.

The newsletter will be available online to all subscribers; no printed version will be mailed.

Applied Demography is published by the Committee on Applied Demography.