

Population Association of America Association of Population Centers

Office of Government and Public Affairs

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February 12, 2019

NICHD Strategic Planning Group

Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD)

Sent via email: NICHDStrategicPlan@nih.gov

To whom it may concern:

On behalf of the Population Association of America (PAA) (www.populationassociation.org) and Association of Population Centers (APC), we are pleased to submit comments on the draft 2020-2024 National Institute of Child Health and Human Development (NICHD) Strategic Plan.

Since the Institute's inception in 1962, NICHD has had a clear mandate to support a robust research portfolio focusing on maternal and child health, the social determinants of health, and human development across the lifespan. Population research, now commonly termed "population science", is cited explicitly in the Institute's authorizing statute as a key tenant of the Institute's broader mandate. Hallmarks of population science are: (i) Reliance on representative population-based samples, as against convenience samples that are a poor basis for setting national health policy and expenditures; (ii) Rigorous examination of how changes in population composition (by age, by geographic location, by wealth and education, by race/ethnicity) affect trends in national health indicators, the prevalence of health, disease, and disability, and the extent to which these are concentrated in certain population sub-groups. The emergence of new health threats, the decline of old health problems, and the extent to which such trends are generalized or confined to certain sub-populations: population science is especially well equipped to provide crucial input to the formulation of health policies and interventions.

Accordingly, over the decades NICHD has supported innovative and influential population science initiatives, including: 1) large-scale longitudinal surveys, with population representative samples, such as the National Longitudinal Survey of Adolescent Health and Fragile Families and Child Well Being Study; 2) a nationwide network of population science research and training centers; 3) numerous scientific research initiatives that have advanced our understanding of specific diseases and conditions, including obesity, autism, and maternal mortality, and, further, how socioeconomic and biological factors jointly determine human health; and, 4) research on the obstacles (economic, sociocultural, programmatic) to effective control of reproduction and the attainment of childbearing goals. In light of the many contributions of population science to the scientific

understanding of health and to the development of efficacious social and health policy, we find it distressing that the draft NICHD 2020-2024 strategic plan does not show more explicit recognition of the payoff from investing in population science research.

There can be little doubt about the continuing need for population science research. The distribution of the U.S. population according to age, region, wealth and education, and race/ethnicity is rapidly changing. Our knowledge of these changes and their implication for human health is due in no small part to rigorous population science research conducted with support from NICHD. No other Institute or Center at the National Institutes of Health (NIH) has the clear legislative mandate to facilitate research on the implications of population change across the entire lifespan, from birth (indeed, pre-conception) to death.

More concretely, we can point to specific locations in the draft plan where explicit attention to population science will significantly enlarge the potential scientific payoff. For example, theme #2, “Setting the Foundation for a Healthy Pregnancy and Lifelong Wellness,” can be expanded to include research on stress and social disparities. Theme #3 has a stated goal “Enable men and women to manage fertility”; with unintended pregnancy rates remaining high in the U.S., there is continuing need for population science investigation of the reasons, undoubtedly multi-faceted, for this undesirable situation. The intent of theme #4, “Identifying Sensitive Time Periods to Optimize Health Interventions,” should be clarified so it captures development across the life course and not just pregnancy. Further, we recommend broadening theme #5 to include as an explicit focal point divergence in fertility timing in early adulthood by socioeconomic status.

Standing back and considering all six themes, we urge NICHD to embrace a more overarching focus on social disparities in health and well-being. Persistent health disparities across the life span remain, with some widening during the past decade, a troubling development that calls for systematic investigation. Population scientists are especially well-equipped, by their disciplinary theory, methods, and training, to conduct empirical research on the nature and sources of persistent and emergent social disparities.

In sum, the draft NICHD 2020-2024 Strategic Plan shows insufficient recognition of the returns from population science research. Population science research is invaluable in producing an accurate profile of the health and well-being of the U.S. population. To be clear: despite the essential contributions of population science research, we are not arguing for population science to become another theme of the Strategic Plan. Instead, as illustrated by the examples in preceding paragraphs, population science can productively contribute to all the themes that have been formulated; that is, our stance is that population science complements other NICHD-supported research. To ensure this occurs, we urge NICHD to extend its investments in large-scale population-representative data collection and in population research centers that serve as crucial hubs for training, data dissemination, and interdisciplinary research projects. And the case for supporting population science research on concrete topics such as the social determinants of health and the discrepancy between reproductive goals and outcomes remains as compelling as in the past six decades of NICHD.

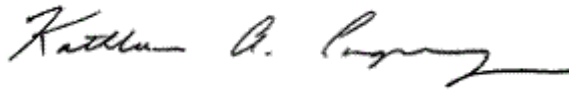
We look forward to a revised version of the Strategic Plan that fully integrates population science in NICHD's priorities for the next five years.

Thank you for considering our views regarding this important matter.

Sincerely,

Handwritten signature of John B. Casterline in black ink.

John B. Casterline
2019 PAA President

Handwritten signature of Kathleen A. Cagney in black ink.

Kathleen A. Cagney
2019 APC President