Lew Berman, MS
Special Assistant for Community HANES
NHANES is a combination of, I think, it’s the space shuttle for NASA and the circus. We pull into town for 9 weeks, and you hope for those 9 weeks that the IT runs and it operates and you have no issues. But, much like NASA, we’re running experiments that are vitally important and you’ve gotta keep everything ------ and on time, so it’s an interesting combination of two different worlds, I think. It’s just a lot of fun.

Brenda Lewis
Clinical Laboratory Scientist, DHANES
Every six to eight weeks, you’re travelling from one part of the country to another. You see places in the world where you would never think of going on vacation.

Martin Baum
NCHS Chief Information Officer (1982-2004)
If you look at it, it’s been around for fifty years now. That’s amazing, and it’s gone through many, many iterations.

David. L Larson
Captain, U.S. Public Health Service (AKA Jack of All Trades)
We usually go and talk to the public health people in the area, and some of the county officials, asking them ‘where would they think the best place to have the survey located?’ So there’s a real process that has to go on to try to find a site.

Vera Osidach
Biomedical Engineer, DHANES
So each of our mobile NHANES mobile exam centers is made up of four customized semi-truck trailers, and they have to be parked very specifically. They have to be parked a certain distance apart, and once they’re parked, you can pull out the passageways and connect the entire thing together.

Debra Reed-Gillette, MS
Computer Scientist, DHANES
Basically, if someone is examined in the morning, you have the capability of seeing that data by the afternoon. Almost in real time.

Bob Murphy, MSPH
DHES Division Director (1979-1997)
In one program, we had a hurricane, an earthquake, we had a tornado, an ice storm and a flood, and the program ended up on time and under budget.

Glenn Pinder
I think that the survey, over the years, has developed probably models in ways of going about doing a survey.

Ronette Briefel
The nutrition are critical, not only to the American public, but also to the setting of national standards for food programs, for meals, for looking at obesity trends, for looking at setting nutrition standards for the population.

Clifford L. Johnson, MSPH
DHANES Division Director
We would have never had the ability to continue to monitor trends over time, looking at some of these public health issues that can either only or best be studied using direct physical natures, so unless you have the ability to do that and look at direct physical natures, you just won’t be able to assess those particular public health issues.

[end of section 1]

[section 2]

{title card : “Ain’t no mountain high enough…”}

Clifford L. Johnson, MSPH
DHANES Division Director
The biggest challenge is always just, financially and administratively, it’s always a challenge to keep the survey going. It’s not easy to do. It’s also very hard to meet the needs of so many, if you will, collaborators, customers and users.

Ronette Briefel
I think the biggest challenges were trying to work with Federal agencies and try to prioritize and maximize the content of the survey.

Catherine E. Wotecki
Deputy Director, DHES (1983-1990)
The hardest challenges were finding the time for our really terrific analysts to do the analysis of the survey data.

Brenda Lewis
Clinical Laboratory Scientist, DHANES
One time three people, the whole team, quit after a vacation. No one came back. So, I had to go out there and I was the lab team for a whole stand in New York

**David. L Larson**
*Captain, U.S. Public Health Service (AKA Jack of All Trades)*
There has been times like in New York and they wouldn’t allow us to drive the trailers over this bridge because they felt the bridge was not sturdy enough. So we went and put them on a barge, floated them up to the site and then lifted the trailers off to the site using a crane.

**Martin Baum**
*NCHS Chief Information Officer (1982-2004)*
We didn’t have networks like you do now. You didn’t have Wi-fi. Everything was hard wired, so even though this person had now collected this information on their computer, we were taking disks, floppy disks and transporting them to the office, to the remote office, so it was really rudimentary, but it was ‘state of the art’ at that time. And, of course, things now have changed drastically.

**Glenn Pinder**
And that’s the one thing I think the program does: it does keep learning, and it keeps learning, you know, what’s the best things to do.

**Raynard Kington, MD, PhD**
*DHES Division Director (1999-2001)*
Deputy Director, National Institutes of Health
Between 1994 and 98, the world had changed, and I think, in many ways, it was a harder sell—and this was true across many different studies—that response rates were dropping because the public was becoming more concerned about issues related to privacy, there were more concerns raised in the press about biomedical research in general, and it was just a harder sell. But the staff were great. There was tremendous to the challenge. Everyone saw it as a real challenge.

**Lew Berman, MS**
*Special Assistant for Community HANES*
We have this difficulty with being out in the field, running in three different locations at the same time and, as we like to say, a 7 by 18 operation—we run 18 hours a day, 7 days a week, in 3 different times zones usually. We’re also running pilots for the next 2 year cycle while we’re collecting data, while we’re producing data for the public. So all this work is going on at the same time: trying to produce new components, new software and keeping up the technology. It keeps us busy, grays our hair and we lose a little bit at the end of the day.

[end of section 2]

[section 3]
Jean S. Findlay  
**Chief Survey Operations Branch**  
NHANES Employee from 1969-2001  
I think, at the time, getting the lead out made us all very proud, and it was so enlightening. It made changes.

Bob Murphy, MSPH  
**DHES Division Director (1979-1997)**  
When we got into the lead data, it was stunning. The fact was that the prevalence of high blood lead levels was higher than anyone had anticipated. The lead came out of the gasoline in the US basically because of the HANES data.

Dale Hitchcock  
Looking back on it, I was really shocked that we weren’t collecting smoking data, either in HANES or the health ------- survey at the time because it was basically too political to dabble in. It wasn’t until after we’d been here for a few years, thanks to Ron Wilson and a few folks like that, that we started to collect data on tobacco use.

Catherine E. Wotecki  
**Deputy Director, DHES (1983-1990)**  
Some contributions that have come out of the HANES program, one is the Dietary Reference Intakes that are the basis for so many nutrition policies in the United States from food labeling to the food assistance programs. And these couldn’t be done without the contributions the HANES program makes.

Ronette Briefel  
And certainly today, the HANES program or the HANES data on obesity are what are used by every expert community. In the institute of medicine, it is the tracking as to ‘are we making progress or not?’

Clifford L. Johnson, MSPH  
**DHANES Division Director**  
I think one of the major contributions to public health and to people in a real way was the growth charts, the NCHS growth charts. It’s something that anyone can relate to, because everybody who’s ever had a child knows that their child has been, sooner or later, plotted on the growth chart.

Bob Murphy, MSPH  
**DHES Division Director (1979-1997)**  
The folate data we finally got out, it’s another example of where we’ve affected the whole U.S. population, because now folate is in bread products. It’s in various types of
products at a certain level, and folate levels have actually gone up. The fact is, that was from HANES. It came from HANES.

David. L Larson  
Captain, U.S. Public Health Service (AKA Jack of All Trades)  
The survey itself has gone through a tremendous progress in technology. In fact, when I started in the 70s, everything was done in pencil and paper.

Lew Berman, MS  
Special Assistant for Community HANES  
I think one of the major accomplishments in this time period was taking data from NHANES 3 and producing public data sets in about 3.5 years. And if you look at the continuous HANES, we were able to produce data in 18 months, and now we’re down to about 9 months and eventually we’ll get down, hopefully, to about 6 months, so that cycle of being able to produce very high-quality data in very short time periods, I think that’s probably the most significant achievement with respect to IT.

Debra Reed-Gillette, MS  
Computer Scientist, DHANES  
Now we’re down to the fact that we can get data out in about 6 to 9 months, depending on the data file and whether or not it needs to be sent to a laboratory for processing.

Raynard Kington, MD, PhD  
DHES Division Director (1999-2001)  
When a study’s well run and adequately supported, you can do first-rate science, even in the face of a changing world and changing perceptions in the community. But it requires that you be aggressive and thoughtful and creative, and I think all of those characterize the NHANES staff very well.

[end of section 3]

[section 4]

{title card : “What is your best memory?”}

Lew Berman, MS  
Special Assistant for Community HANES  
Well, personal, private or public?

David. L Larson  
Captain, U.S. Public Health Service (AKA Jack of All Trades)  
The best times I think has always been, just working on HANES. I cannot think of any morning that I have not woken up and been happy to go to work.

Raynard Kington, MD, PhD  
DHES Division Director (1999-2001)
It was a great job. It was a great job for me, maybe because it was never boring. There was always things to do, either on the operations side or the analytic side.

**Glenn Pinder**  
The fact of the matter is, this program is so unique that it’s one of the things, I think, that kept a lot of people staying here for a long, long time.

**Ronette Briefel**  
People were great here. I spent 17 years here. It was the best professional and work experience. It was a real team to planning, working out problems, a lot of opportunity to work with people trained in different backgrounds, different disciplines.

**Debra Reed-Gillette, MS**  
**Computer Scientist, DHANES**  
They are always very competitive when it comes to the picnics and other challenges that don’t have anything to do with our surveys, but those are probably the best memories that I have, of the people working together for a common goal, whether it’s to collect the data or it’s to, actually, do a holiday party, or win the egg toss.

**Jean S. Findlay**  
**Chief Survey Operations Branch**  
Our branch, I was in the health observation field operations branch, and these two gentlemen were in the psychological statistics branch across the hall, and we all had lunch together. In fact, we were a group called—and I have a picture of this, of you all—called “Friendly Findlay and the Statisticians,” a rock band.

**Vera Osidach**  
**Biomedical Engineer, DHANES**  
It’s always a fun story, always an adventure on the road with NHANES. There’s always something to tell. People who’ve worked on NHANES for a while could probably write very entertaining books, because something is always happening that you wouldn’t really expect.

**Bob Murphy, MSPH**  
**DHES Division Director (1979-1997)**  
I still don’t remember hiring a Yes-Person. There were no people who would just take what I thought and say “What a wonderful idea!” No. Always discussion. Always discussion, and always better, always better.

**Martin Baum**  
**NCHS Chief Information Officer (1982-2004)**  
I think, probably one of the best memories is when, I think it was Dave who said to me, “You really don’t understand this unless you go out and take an exam.” And it was going
through that exam that was an eye-opener. One, I had never realized how tight the trailers were.

**Dale Hitchcock**  
Eddie was sort of our media advisor. I remember one thing he would tell me to do was “make sure you’re wearing calf-high stockings when you’re on television because otherwise your socks are gonna fall down and you’ll look funny when you cross your legs. That sort of thing. I took his advice, I didn’t know what I was doing. I went out and bought stockings like that and darn if I wasn’t on television, this thing starts sliding down my leg and I said “Oh geez!” you know.

**Catherine E. Wotecki**  
**Deputy Director, DHES (1983-1990)**  
I think my most cherished memory was what a fabulous team we had. Everybody was just so enthused about the work we were doing.

**Clifford L. Johnson, MSPH**  
**DHANES Division Director**  
What makes it really special is the people, and I think that’s because people who really want to make a difference and do well are attracted to be part of this program, even one time in their life. Many people come and go and don’t stay there as long as I have. I’m one of the few crazies that stay that many years, but people come and go and all of them have made a difference if you look back over time.

[end of section 4]

[section 5]

{title card : “What do you wish for NHANES on its 50th?”}

**Clifford L. Johnson, MSPH**  
**DHANES Division Director**  
That it keeps going, that there’s another 50 years and that 50 years from now, what I would say about those brilliant people who, in 1957 and eight, planned this survey in such a way that we’re still using almost all of the same techniques and procedures, we just became more sophisticated—that 50 years from now people will be saying “We’re still doing the same thing that Cliff and his staff did at this point in time, but just using new technologies and new information.

**Glenn Pinder**  
As I’m sure I hope that—everybody who was ever involved with the survey hopes it can go on because there certainly has been a tremendous amount of good.

**David L. Larson**
Captain, U.S. Public Health Service (AKA Jack of All Trades)
My birthday wish for the next survey is that we have all new trailers.

Brenda Lewis
Clinical Laboratory Scientist, DHANES
That we get new lab trailers.

Lew Berman, MS
Special Assistant for Community HANES
Birthday wish for our 50th. Well, endless amounts of money, so we can continue data collection, and I think, on a personal level, I’d really like to see NHANES doing, having a much broader and bigger vision for what we can do.

Dale Hitchcock
I would like to see HANES well-funded, and I think we may see that.

Martin Baum
NCHS Chief Information Officer (1982-2004)
My wish is what they, and when I left they had really begun to accomplish, and that was publishing data within six months.

Bob Murphy, MSPH
DHES Division Director (1979-1997)
I think, just for my happy birthday type of thing to HANES, I think the current staff needs to be congratulated for carrying on the rich tradition that’s been established.

Catherine E. Wotecki
Deputy Director, DHES (1983-1990)
The Spanish have a toast that’s “Health, wealth, happiness, and the time to enjoy them,” so for HANES on it’s 50th birthday, I would say maintain the focus on health, I would hope and wish that you have the funding to continue this outstanding program, that you have a happy team as we were, and the time in which to do all this important work.

Jean S. Findlay
Chief Survey Operations Branch
I’d certainly like it to continue, as always, cause I think it’s such valuable information.

Ronette Briefel
I wish that HANES could have ample funding so that the actual survey could collect the information it needs and get the information out without always being concerned about is there going to be ample funding to keep the survey in the field every year.

Raynard Kington, MD, PhD
DHES Division Director (1999-2001)
You get the recommendation that you deserve, for being an integral, necessary part of the biomedical and public health infrastructure of this country. And that means having commitment of support from this country to this resource.

Debra Reed-Gillette, MS
Computer Scientist, DHANES
Happy birthday, NHANES. Fifty more, definitely fifty more years.