

CDC Public Health Datasets and Access Guide for Tribes and Tribal Epidemiology Centers

December 30, 2022

Data Subject	Lead CDC Center, Institute, or Office	Data System or Dataset	How To Access the Data
Cross-Cutting Data Library	Centers for Disease Control and Prevention (CDC)	CDC Data and Statistics Cross-agency view of CDC data and statistics and tools for working with the data.	<ul style="list-style-type: none"> Access CDC Data and Statistics to identify data of interest, points of contact, and information on how to access the data.
Cross-Cutting Data Library	Center for Surveillance, Epidemiology, and Laboratory Services (CSELS)	CDC WONDER (Wide-ranging ONline Data for Epidemiologic Research) Menu-driven system that makes a wide array of CDC's information resources available to public health professionals and the public.	<ul style="list-style-type: none"> Access the CDC WONDER site to identify data of interest and information on accessing or requesting specific data.
Health, United States	National Center for Health Statistics (NCHS)	Health, United States Presents an overview of national health trends organized around four subject areas: health status and determinants, utilization of health resources, healthcare resources, and healthcare expenditures and payers. Uses data from a wide variety of sources, even external to CDC. Tables examine long terms trends in health over a wide range of demographic and socioeconomic indicators. Estimates for the American Indian/Alaska Native population are presented where available.	<ul style="list-style-type: none"> Access the Health, United States – Data Finder site for current and recent reports. Drop-down menus allow users to search for tables that have data on specific groups. Access Previous Reports.
Healthy People	National Center for Health Statistics (NCHS)	Healthy People Identifies public health priorities to help individuals, organizations, and communities across the United States improve health and well-being. Healthy People 2030, the initiative's fifth iteration, builds on knowledge gained over the first four decades. NCHS leads measurement of the nation's	<p>Access publicly available data:</p> <ul style="list-style-type: none"> Healthy People 2030 Objectives Healthy People 2020 Disparities Data Healthy People 2020 Progress by Population Group – Choose "Race and



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		progress toward meeting objective targets as well as overarching goals of the Healthy People initiative, which include eliminating disparities and achieving health equity. Healthy People 2030 includes American Indian/Alaska Native in its standard race/ethnicity data template; 163 objectives collect data for this population across approximately 29 mostly federal data systems, and data are shown when they meet applicable presentation standards.	Ethnicity” under the “Group by” column in the chart and then select “Topic Area” in the first column.
National Center for Health Statistics (NCHS) Public-Use Data	National Center for Health Statistics (NCHS)	NCHS Public-Use Data File and Documentation site Provides access to datasets, documentation, and questionnaires from NCHS surveys and data collection systems. Visit the site for a list of available data.	<ul style="list-style-type: none"> • Access data downloading instructions in the “readme” files on the NCHS Public-Use Data File and Documentation site. • Users of NCHS public-use data files must comply with data use restrictions to ensure that the information will be used solely for statistical analysis or reporting purposes.
Antimicrobial Resistance	National Center for Emerging and Zoonotic Infectious Diseases (NCEZID)	National Antimicrobial Resistance Monitoring System (NARMS) Provides 1) antibiotic susceptibility data on enteric pathogens (<i>Salmonella</i> , <i>Shigella</i> , <i>E. coli</i> , <i>Campylobacter</i> , non-cholerae <i>Vibrio</i>); 2) predicted antibiotic resistance based on analysis of whole genome sequence data among isolates sequenced for PulseNet; 3) summaries of the results of testing and predicted determinations for each genus, species, serotype, drug, and drug class; (4) annual	<ul style="list-style-type: none"> • Access data on the NARMS Now: Human Data site. • Email entericbacteria@cdc.gov to request NARMS data that cannot be obtained via CDC NARMS Now. • Some requests may require a Data Use Agreement (DUA).

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		reports of resistance trends and generates datasets for research purposes by CDC staff and the worldwide scientific community; and 5) Public-facing tools on the web for querying the data and downloading summary reports and individual isolate data.	<ul style="list-style-type: none"> Depending upon the nature and scope of the request, it can take several weeks to months to provide the data.
Bacteria, Enterics, Amoeba, and Mycotics	National Center for Emerging and Zoonotic Infectious Diseases (NCEZID)	BEAM (Bacteria, Enterics, Amoeba, and Mycotics) Dashboard Interactive tool to access and visualize data from the System for Enteric Disease Response, Investigation, and Coordination (SEDRIC). Provides timely data on pathogen trends and serotype details to inform work to prevent illnesses from food and animal contact. Focused on data for <i>Salmonella</i> bacteria, but will eventually include additional pathogens, antimicrobial resistance data, and epidemiologic data from outbreak investigations. Does not present tribal data separately; however, it does provide access to real-time data for all partners.	<ul style="list-style-type: none"> Access the BEAM (Bacteria, Enterics, Amoeba, and Mycotics) Dashboard. Access Frequently asked questions. Email simso@cdc.gov to request access to additional data.
Babesiosis	Center for Global Health (CGH)	National Surveillance for Babesiosis Contains case patient de-identified data on demographics, illness, and exposures. Cases are reported by state and local jurisdictions. Babesiosis case report form shows more information on the data collected.	<ul style="list-style-type: none"> To request additional data or assistance, fill out the tribal public health data request form. A DUA is required. Average time to provide requested data once a final DUA is received is 7–10 days.
Behavioral Risk Factors	National Center for Chronic Disease Prevention and	Behavioral Risk Factor Surveillance System (BRFSS) System of health-related telephone surveys that collect state data (50 states, District of Columbia, 3	<ul style="list-style-type: none"> Access BRFSS questionnaires, data, and data analysis tools on the BRFSS site.

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	Health Promotion (NCCDPHP)	US territories) about more than 400,000 adult US residents regarding their health-related risk behaviors, chronic health conditions, and use of preventive services.	<ul style="list-style-type: none"> To request additional data or assistance, fill out the tribal public health data request form.
Botulism	National Center for Emerging and Zoonotic Infectious Diseases (NCEZID)	National Botulism Surveillance System Collects reports of all laboratory-confirmed botulism cases in the United States and is continuously monitored for early detection of outbreaks. Demographic (e.g., age, sex, race and ethnicity), clinical (e.g., transmission category, case-patient outcome), laboratory (e.g., laboratory testing method, toxin type), and epidemiologic (e.g., vehicle) data are reported by all 50 states and the District of Columbia.	<ul style="list-style-type: none"> Email botsurveillance@cdc.gov to ask for a data request form. Complete the form and return it to the same email address. Average time to provide the data is 1–3 months, depending on the nature and extent of the request.
Cancer	National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP)	The US Cancer Statistics American Indian and Alaska Native Incidence Analytic Database can be used to describe the incidence of cancer, identify American Indian and Alaska Native populations most affected by cancer, evaluate cancer prevention and screening activities, and assess cancer disparities.	<ul style="list-style-type: none"> Access public use data on the US Cancer Statistics American Indian and Alaska Native Incidence Data site. To request additional data or assistance, fill out the tribal public health data request form.
Childhood Blood Lead	National Center for Environmental Health (NCEH)	Childhood Blood Lead Surveillance System Contains de-identified data received from state and some local health departments on children tested for lead levels in their jurisdictions.	<ul style="list-style-type: none"> Email LPPS@cdc.gov to request data assistance. In some cases, states may have more complete data than CDC. National and state by county data files are available on CDC's website. CDC can also assist with identifying state or local Childhood Lead Poisoning Prevention Program points of contact.

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			<ul style="list-style-type: none"> Average time to provide the data varies depending on the nature and extent of the request.
Cholera and Other Vibrio Illness	National Center for Emerging and Zoonotic Infectious Diseases (NCEZID)	Cholera and Other Vibrio Illness Surveillance (COVIS) Reports data on human infections with pathogenic (illness-causing) species of the family <i>Vibrionaceae</i> , which cause vibriosis and cholera. Data include demographics (e.g., age, sex, race and ethnicity), a description of the person's illness and medical history; recent seafood consumption; recent exposure to bodies of water, raw or live seafood or their drippings, or marine life; and source(s) of seafood consumed. For more information on data collected, see the COVIS report form .	<ul style="list-style-type: none"> Email COVISResponse@cdc.gov to ask for a data request form. Complete and return the form to the same email address. Average time to provide the data is 3–6 months, depending on the nature and extent of the request.
COVID-19	Centers for Disease Control and Prevention (CDC)	CDC COVID Data Tracker Provides COVID-19 data and surveillance data. Frequently Asked Questions: COVID-19 Data and Surveillance	<ul style="list-style-type: none"> Access the CDC COVID Data Tracker. To request additional data or assistance, fill out the tribal public health data request form.
COVID-19	National Center for Emerging and Zoonotic Infectious Diseases (NCEZID)	National Wastewater Surveillance System (NWSS) Coordinates and builds the nation's capacity to track the presence of SARS-CoV-2, the virus that causes COVID-19, in wastewater samples collected across the nation. State, tribal, local, and territorial health departments participating in NWSS submit testing data to CDC. CDC then standardizes and interprets these data and presents them in the COVID Data Tracker. How often sites collect wastewater samples and how	<ul style="list-style-type: none"> Access data on the COVID Data Tracker: Wastewater Surveillance site. Users can view and download data from two public datasets: NWSS Public SARS-CoV-2 Wastewater Metric Data and NWSS Public SARS-CoV-2 Concentration in Wastewater Data.

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		<p>frequently data are reported to CDC varies by health department.</p> <p>NWSS Data Collation and Integration for Public Health Event Response (DCIPHER) data are available to tribes and Tribal Epidemiology Centers (TECs) upon explicit permission from participating tribes and approval to access the DCIPHER system.</p>	<ul style="list-style-type: none"> Email NWSS@cdc.gov to request additional data and for access to the DCIPHER system. Users must sign the DCIPHER Rules of Behavior and NWSS non-disclosure agreement (NDA), and only the data from each jurisdiction (tribe) is available to that jurisdiction (tribe). Data can be made available immediately after that if the requestor already has DCIPHER access. Several working days are needed to provide access to the DCIPHER system. TECs can request access to the tribal data by filling out the tribal public health data request form. CDC will contact the participating tribe(s) for which data are requested to determine whether the tribe(s) give permission to provide the data to a TEC or TECs.
Chronic Disease	National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP)	<p>Leading Indicators for Chronic Diseases and Risk Factors website</p> <p>Provides data that can be sorted on indicator, state/national comparisons, and “breakout category,” which includes demographics.</p>	<ul style="list-style-type: none"> Access the Leading Indicators for Chronic Diseases and Risk Factors website. Visit Getting Started video guides for interacting with the data.
Cyclosporiasis	Center for Global Health (CGH)	<p>National Surveillance for Cyclosporiasis</p> <p>Contains case patient de-identified data on</p>	<ul style="list-style-type: none"> Email data requests to cyclospora@cdc.gov.

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		demographics, illness, and exposures. Cases are reported by state and local jurisdictions.	<ul style="list-style-type: none"> • A DUA is required. • Average time to provide data is 7–10 days.
Environmental Health	National Center for Environmental Health (NCEH)	Environmental Public Health Tracking Network (EPHTN) Brings together health data and environmental data from national, state, and city sources and provides supporting information to make the data easier to understand. The Tracking Network has data and information on environments and hazards, health effects, and population health.	<ul style="list-style-type: none"> • Access the Environmental Public Health Tracking Network site. The site provides downloadable datasets, including topic-specific data dashboards such as the Environmental Justice Dashboard and Heat and Health Tracker. On Tracking’s Data Explorer, a “Tribal Area” points of interest layer is available to add to any data query alongside the environmental and health outcome data. • To request additional assistance, fill out the tribal public health data request form.
Firearm Injury	National Center for Injury Prevention and Control (NCIPC)	Firearm Injury Surveillance Through Emergency Rooms (FASTER) Program FASTER data are collected from a subset of 10 jurisdictions contributing data to the National Syndromic Surveillance Program (NSSP), which collects data from about 71% of the nation’s emergency departments in near real-time through the BioSense Platform.	<ul style="list-style-type: none"> • Email fasternofo@cdc.gov to request access to FASTER data. • A DUA is needed with each jurisdiction that provided the requested data to CDC, which CDC can facilitate.
Foodborne, Waterborne, and Enteric Disease Outbreaks	National Center for Emerging and Zoonotic Infectious Diseases (NCEZID)	National Outbreak Reporting System (NORS) Receives data on all foodborne and waterborne disease outbreaks and enteric disease outbreaks from other sources. For more information on data collected, see the NORS reporting forms .	<ul style="list-style-type: none"> • Access the NORS data and NORS Dashboard. • To request additional data, email NORSAdmin@cdc.gov and ask for a

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		NORS is making updates in late 2022 that will include the addition of two high-level tribal health-related questions: 1) whether exposures occurred on tribal land (based on census bureau boundaries) and 2) how many cases visited an Indian Health Service or tribal facility.	<p>data request form. Complete and send the form back to the same email address.</p> <ul style="list-style-type: none"> Average time to provide the data is 2–4 weeks, depending on the nature and extent of the request.
Gonorrhea	National Center for HIV, Viral Hepatitis, STD, and TB Prevention (NCHHSTP)	<p>Gonococcal Isolate Surveillance Project (GISP) Monitors antibiotic resistance trends in <i>Neisseria gonorrhoeae</i> bacteria. In GISP, <i>N. gonorrhoeae</i> specimens are collected each month from the first 25 men who attend STD clinics in selected US cities and have also been diagnosed with urethral gonorrhea. Participating regional laboratories test the specimens for resistance to select antibiotics. The results of these tests are then transmitted to CDC, where they are collated and analyzed. Data available: aggregate and line list data. Of note, in GISP during 2019–2020, the percentage of GISP participants identifying as Alaska Native or Native American was 0.75% and 0.29%, respectively.</p>	<ul style="list-style-type: none"> To request additional assistance, fill out the tribal public health data request form. Depending on the complexity of the data request, it may take several months to obtain the necessary reviews and approvals and to process data requests.
Hantavirus	National Center for Emerging and Zoonotic Infectious Diseases (NCEZID)	<p>National Hantavirus Surveillance Registry Contains surveillance data for confirmed hantavirus cases from 1993 to present. More information on what data are collected by states is shown on the Hantavirus Case Report Form.</p> <p>Data does not contain reference to tribal community. Often the only variable that references tribal member is the race variable categorizing a case as “American Indian or Alaska Native.”</p>	<ul style="list-style-type: none"> Access the Reported Cases of Hantavirus Disease page. Access high-level information on the Reported Cases of Hantavirus Disease site. For additional data, email a data request to spather@cdc.gov. CDC receives data only at the state level. Contact your local or state health

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			<p>department for information about hantavirus disease cases in your area.</p> <ul style="list-style-type: none"> • A DUA is not required; however, CDC has to contact the jurisdiction(s) that provided the data to request approval of data release. • Average time to provide the data varies depending on the nature and extent of the request.
Healthcare Safety	National Center for Emerging and Zoonotic Infectious Diseases (NCEZID)	<p>National Healthcare Safety Network (NHSN) Provides data needed to identify problem areas, measure progress of prevention efforts, and ultimately eliminate healthcare-associated infections (HAIs). Allows healthcare facilities to track blood safety errors and important healthcare process measures such as healthcare personnel influenza vaccine status and infection control adherence rates.</p> <p>Serves over approximately 25,000 medical facilities tracking HAIs. Current participants include acute care hospitals, long-term acute care hospitals, psychiatric hospitals, rehabilitation hospitals, outpatient dialysis centers, ambulatory surgery centers, and nursing homes, with hospitals and dialysis facilities representing the majority of facilities reporting data.</p>	<ul style="list-style-type: none"> • Access NHSN Reports. • To request additional assistance, fill out the tribal public health data request form.
Hepatitis	National Center for HIV, Viral Hepatitis,	Viral Hepatitis Surveillance	<ul style="list-style-type: none"> • Access Viral hepatitis surveillance reports.

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	STD, and TB Prevention (NCHHSTP)	<p>Includes case-based surveillance for acute hepatitis A; acute, chronic and perinatal hepatitis B; and acute, chronic, and perinatal hepatitis C.</p> <p>More information on what data are collected by states is shown on the Viral Hepatitis Case Report Form. (This form was finalized in September 2013 to serve as a guide for surveillance and is based on Council of State and Territorial Epidemiologists recommendations) and the Viral Hepatitis Case Record Form (National Electronic Telecommunications System for Surveillance).</p>	<ul style="list-style-type: none"> To request additional data or assistance, fill out the tribal public health data request form. Other data available upon request include (1) Limited de-identified line level data, releasable in compliance with the Assurance of Confidentiality covering these data and (2) Custom data requests can be fulfilled if permissible and based on data re-release agreements with each state, and guidance/assistance with data use and interpretation, on suggested uses.
HIV/AIDS	National Center for HIV, Viral Hepatitis, STD, and TB Prevention (NCHHSTP)	<p>National HIV/AIDS Surveillance</p> <p>Includes case-based surveillance and longitudinal data collection for cases meeting the HIV case definition, including birth/death certificate data, laboratory reports and other relevant data</p> <p>For additional allowable (based on data re-release agreements with each state) a data request form can be request from the branch chief. Data available at national, state, and county (with some restrictions) levels and includes diagnoses, prevalence, care outcomes, social determinants of health, etc.</p>	<ul style="list-style-type: none"> Access HIV Surveillance reports and data tables. To request additional data or assistance, fill out the tribal public health data request form. Custom data requests can be fulfilled if permissible and based on data re-release agreements with each state, and guidance/assistance with data use and interpretation, on suggested uses.
HIV/AIDS	National Center for HIV, Viral Hepatitis, STD, and TB	<p>National HIV Behavioral Surveillance (NHBS)</p> <p>Provides bio-behavioral surveillance data among persons at high risk for HIV infection.</p>	<ul style="list-style-type: none"> Access reports, publications, and informatics under each population section from the NHBS homepage.

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	Prevention (NCHHSTP)	<p>Surveillance is conducted in rotating, annual cycles in three different populations at increased risk for HIV: 1) gay, bisexual, and other men who have sex with men (known as the MSM cycle); 2) persons who inject drugs (known as the PWID cycle); and 3) heterosexually active persons at increased risk for HIV infection (known as the HET cycle).</p> <p>Data collection instruments for NHBS are available at Methods and Questionnaires (cdc.gov)</p> <p>Data are published in annual reports summarizing key outcomes.</p>	<ul style="list-style-type: none"> Email nhbs@cdc.gov to request custom data requests for aggregated results or to request access to restricted use datasets.
HIV/AIDS	National Center for HIV, Viral Hepatitis, STD, and TB Prevention (NCHHSTP)	<p>Medical Monitoring Project (MMP) Provides data on persons with diagnosed HIV, including interview and medical record abstraction data.</p> <p>Data collection instruments</p>	<ul style="list-style-type: none"> Access HIV Surveillance Reports. Email custom data requests to MMP@cdc.gov. The process will include completing a concept proposal form. MMP staff are available to provide technical assistance in requesting, analyzing, and interpreting MMP data.
HIV, STDs, Hepatitis, and TB	National Center for HIV, Viral Hepatitis, STD, and TB Prevention (NCHHSTP)	<p>NCHHSTP AtlasPlus Allows users to interactively create customized tables, maps, and charts using nearly 20 years of CDC's surveillance data on HIV, viral hepatitis, STDs, and TB. Also provides access to indicators on social determinants of health, allowing users to view social and economic data in conjunction with surveillance data for each disease. Provides charts, maps, and tables functions and allows viewing data by year, geography, and demographics.</p>	<ul style="list-style-type: none"> Access the NCHHSTP AtlasPlus site. FAQs, technical notes, and a glossary are available on the site homepage. To request additional data or assistance, fill out the tribal public health data request form.

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Influenza (Flu)	National Center for Infectious and Respiratory Diseases (NCIRD)	Influenza Hospital Surveillance Network (FluSurv-Net) Provides data on hospitalization rates associated with flu. A minimum set of data on all identified flu cases includes age, sex, race and ethnicity, surveillance site, date of hospital admission, and positive influenza test result/date. Hospitalization rates are calculated as the number of residents of a defined area who are hospitalized with a positive influenza laboratory test divided by the total population within the defined area. FluSurv-NET collects data on American Indian or Alaska Native race, Indian Health Service insurance coverage, and patient-level census-tract data.	<ul style="list-style-type: none"> Access data, including rate data by race/ethnicity and some clinical and demographic data, on FluView Interactive (updated weekly). Email yta8@cdc.gov to request other data. Average time to provide the data is 1–4 months from approval, depending on the nature and complexity of the request, and some requests may require a data use agreement. A DUA is required.
Injury	National Center for Injury Prevention and Control (NCIPC)	WISQARS™ An interactive database that provides fatal and nonfatal injury, violent death, and cost of injury data. Researchers, the media, public health professionals, and the public can use WISQARS™ data to learn more about the public health and economic burden associated with unintentional and violence-related injury in the United States.	<ul style="list-style-type: none"> Access WISQARS data. Access WISQARS™ Help Using Injury Data. To request additional assistance, fill out the tribal public health data request form.
Laboratory-based Enteric Disease Surveillance (LEDS)	National Center for Emerging and Zoonotic Infectious Diseases (NCEZID)	Laboratory-based Enteric Disease Surveillance (LEDS) system Collects data on <i>Salmonella</i> , <i>Shigella</i> , and Shiga toxin-producing <i>E. coli</i> (STEC) infections. Data include demographic information about the ill person (age, sex, state of residence), and details about the organism causing the specific infection.	<ul style="list-style-type: none"> Email phlissupport@cdc.gov to ask for a data request form. Complete and return the form to the same email address. Average time to provide the data is 1–3 months, depending on the nature and extent of the request.

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		These data are reported to CDC by state, local, and territorial public health laboratories.	
Listeria	National Center for Emerging and Zoonotic Infectious Diseases (NCEZID)	<p>National Listeria Surveillance Collects reports of laboratory-confirmed cases of human listeriosis in the United States.</p> <p>Demographic, clinical, laboratory, and epidemiologic data are collected using a standardized, extended questionnaire.</p>	<ul style="list-style-type: none"> Email listeria@cdc.gov to ask for a data request form. Complete and return the form to the same email address. Average time to provide the data is 1–3 months, depending on the nature and extent of the request.
Monkeypox	National Center for Emerging and Zoonotic Infectious Diseases (NCEZID)	<p>Monkeypox 2022 Outbreak Cases and Data Provides Monkeypox case counts and trends, laboratory test result data, and vaccine administration data.</p>	<ul style="list-style-type: none"> Access Monkeypox downloadable datasets. To request additional data or assistance, fill out the tribal public health data request form.
National Health and Nutrition Examination Survey	National Center for Health Statistics (NCHS)	<p>National Health and Nutrition Examination Survey (NHANES) Examines a nationally representative sample of about 5,000 persons each year. These persons are located in counties across the country, 15 of which are visited each year.</p> <p>Interview includes demographic, socioeconomic, dietary, and health-related questions. The examination component consists of medical, dental, and physiological measurements, as well as laboratory tests administered by highly trained medical personnel.</p>	<ul style="list-style-type: none"> Access the NHANES public dashboard. To request additional data on American Indian/Alaska Native populations, submit a research proposal through the CDC Research Data Centers. NCHS provides a list of restricted variables by NCHS survey. Email rdca@cdc.gov for assistance in accessing restricted NCHS data. From the time that a proposal is submitted to the RDC to physically accessing the data, researchers can expect the process to take 11–19 weeks.

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National Health Interview Survey	National Center for Health Statistics (NCHS)	National Health Interview Survey (NHIS) Provides data on a broad range of health topics collected through personal household interviews, including data to track health status, healthcare access, and progress toward achieving national health objectives. See the NHIS Data, Questionnaires and Related Documentation for information on data collected.	<ul style="list-style-type: none"> Access the NHIS public dashboard on the Interactive Summary Health Statistics for Adults website. To request additional data on American Indian/Alaska Native populations, submit a research proposal through the CDC Research Data Centers (RDCs). NCHS provides a list of restricted variables by NCHS survey. Email rdca@cdc.gov for assistance in accessing restricted NCHS data. Researchers can expect to access the data approximately 11–19 weeks after submitting the proposal to the RDC.
National Intimate Partner and Sexual Violence	National Center for Injury Prevention and Control (NCIPC)	National Intimate Partner and Sexual Violence Survey (NISVS) Provides data on sexual violence (SV), stalking, and intimate partner violence (IPV), including lifetime and 12-month experiences of SV, stalking, and IPV at the national and state level; associated health impacts; and age of first victimization of SV, stalking, and IPV. Also provides data from a 2010 oversample of American Indian/Alaska Native persons. These data include tribal affiliation (if provided by the respondent). Data were collected by CDC on behalf of the National Institute for Justice. Data	<ul style="list-style-type: none"> Access data at National Intimate Partner and Sexual Violence Survey (NISVS) Series website (umich.edu). Request restricted data by clicking on the “access restricted data” button for each survey and follow the page instructions.

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		were collected simultaneously with the general population data.	
Typhoid and Paratyphoid Fever	National Center for Emerging and Zoonotic Infectious Diseases (NCEZID)	<p>National Typhoid and Paratyphoid Fever Surveillance System (NTPFS) Collects data on human cases of typhoid and paratyphoid fever. State and local health officials use a standard report form to report detailed epidemiologic information on laboratory-confirmed cases, including patient demographic and clinical information, typhoid vaccination status, and travel history.</p>	<ul style="list-style-type: none"> Email entericfever@cdc.gov and ask for a data request form. Complete and send the form back to the same email address. Average time to provide the data is 1–3 months, depending on the nature and extent of the request.
Violent Death	National Center for Injury Prevention and Control (NCIPC)	<p>National Violent Death Reporting System (NVDRS) Tracks and monitors violent deaths (suicides, homicides, legal intervention deaths, unintentional firearm deaths, and deaths of undetermined intent). All 50 states, the District of Columbia, and Puerto Rico participate in NVDRS.</p> <p>Provides a de-identified, multi-state, case-level dataset comprising hundreds of unique variables. The database includes short narratives to describe the circumstances related to violent deaths, including descriptions from law enforcement and coroner/medical examiner investigative reports.</p> <p>While tribal affiliation is not available, NVDRS does collect information on race and ethnicity. Currently, data is available for 2003–2020.</p>	<ul style="list-style-type: none"> Email nvdrs-rad@cdc.gov to ask for data access request documents and forms. Complete and return the forms as instructed. Requestors must prepare and submit a proposal for review. To request access to the NVDRS RAD, the primary investigator must meet all of the following criteria: <ul style="list-style-type: none"> - Have a master's degree or higher; - Hold a research position or faculty appointment at a research organization, government agency, or institution of higher education. This includes research foundations or grant-making organizations. - Agree to comply with NVDRS RAD security, confidentiality, and data protection requirements, as outlined during the review process

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			<p>- Local, county, state, and federal government employees, regardless of degree or research position, are also eligible to apply for the NVDRS RAD.</p> <ul style="list-style-type: none"> On average, data request proposals are reviewed within 4–6 weeks. Upon receipt of response to reviews/feedback, data access is provided within 1–5 business days.
Pregnancy Risk Assessment	National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP)	<p>Pregnancy Risk Assessment Monitoring System (PRAMS)</p> <p>Provides data on maternal health behaviors and experiences before, during and shortly after pregnancy. Includes data on American Indian and Alaska Native populations. Several PRAMS grantees also specifically sample American Indian/Alaska Native populations for PRAMS surveillance.</p>	<ul style="list-style-type: none"> Fill out the PRAMS Proposal data request form, which is available on the PRAMS data request site. The site also provides instructions on how to submit the data request form. A signed Data Sharing Agreement (DSA) is required with any data request. Instructions for completing the DSA are on the data request site. Average time to provide the data is 1–2 months, depending on the nature and extent of the request.
Rocky Mountain Spotted Fever (RMSF)	National Center for Emerging and Zoonotic Infectious Diseases (NCEZID)	<p>RMSF Prevention Program</p> <p>Includes program indicators such as prevention services, capacity surveys. Relevant tribes and TECs are already included in reports and findings via the RMSF coalition. All reports and program findings are available to relevant tribal partners.</p> <p>RMSF Clinical Studies (2002–2011)</p>	<ul style="list-style-type: none"> Access RMSF Epidemiology and Statistics. Data summaries and reports are provided as soon as they are available to relevant tribes and TECs.

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		<p>Provides medical chart abstractions on RMSF cases and non RMSF hospitalized controls. Findings have been shared with tribal partners and published in the peer reviewed literature. All data belong to the individual tribes, but de-identified data could be shared with TEC at the direction of both tribes.</p> <p>RMSF Long Term Sequela Study Includes medical chart abstractions, patient interviews and neurological exams for selected patients. Findings have been shared with relevant tribes and are awaiting IHS approval for publication in the peer reviewed literature. De-identified data belong to the tribes but could be shared with TECs at the direction of participating tribes.</p> <p>RMSF Rodeo Study, KAB Surveys, Tick Burden, and Project Enrollment Data Findings have been shared with tribal leaders and published in the peer reviewed literature. Data belong to the tribe but could be shared with TECs at the direction of the tribe.</p> <p>Ecological data in tribal communities highly endemic for RMSF. Data include ticks tested for <i>Rickettsia</i>, canine seroprevalence studies etc. Data are collected with tribal permission for relevant communities. Data summaries are shared with relevant tribes when they become available. This data could be shared with relevant tribes by request within 30 days.</p>	<ul style="list-style-type: none"> • All data from tribal-specific studies belong to the individual tribe(s), but de-identified data can be shared with TECs at the direction of participating tribes. • A DUA is required. • To request additional data or assistance, fill out the tribal public health data request form. • De-identified data could be provided to participating tribes by request within 1 week.

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Sexually Transmitted Diseases (STDs)	National Center for HIV, Viral Hepatitis, STD, and TB Prevention (NCHHSTP)	<p>Nationally Notifiable Disease Surveillance System (NNDSS) Provides case-based surveillance data for nationally notifiable sexually transmitted diseases (syphilis, chlamydia, gonorrhea, and chancroid).</p> <p>The NETSS Implementation Plan contains the procedures and record layouts that must be used by state and local health departments to electronically report cases of nationally notifiable STDs to CDC via the National Electronic Telecommunication System for Surveillance (NETSS).</p> <p>The STD and congenital syphilis message mapping guides (MMGs) outline the requirements for electronically reporting cases of nationally notifiable STDs in the Health Level 7 (HL7) format.</p> <p>Additional aggregate data are available at the national, state, and county levels (based on data re-release guidelines with CSTE) can be made available through custom data requests.</p>	<ul style="list-style-type: none"> • Access aggregate data published annually in the STD surveillance report. • Email std_surv_inquiry@cdc.gov to request data release guidelines and custom data request forms. • Dependent on intricacies of the data request, aggregate data are usually available within 2 weeks on average.
Sexually Transmitted Diseases (STDs)	National Center for HIV, Viral Hepatitis, STD, and TB Prevention (NCHHSTP)	<p>STD Surveillance Network (SSuN) Provides enhanced behavioral, demographic, and clinical information on gonorrhea cases reported to state and local health departments; provide information on patients presenting for care in specialty STD clinical settings; and explore innovative strategies to improve STD surveillance nationwide. Aggregate and line list data are available.</p>	<ul style="list-style-type: none"> • Email requests for a data dictionary and data request template to SSUN_TA@cdc.gov. • Requests for data require a specific analysis plan and identification of variables of interest. Analytic proposals require approval of the Principal

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			<p>Investigators in each site contributing data.</p> <ul style="list-style-type: none"> The current protocols are provided on the SSuN website. Of note, during 2020–2021, the percentage of all gonorrhea cases in participating SSuN jurisdictions identifying as Alaska Native/Native American was 0.38% and 0.40%, respectively. Depending on the complexity of the data request, it may take several months to obtain the necessary reviews and approvals and to process data requests.
Social Vulnerability	Agency for Toxic Substances and Disease Registry (ATSDR)	CDC/ATSDR Social Vulnerability Index (SVI) Uses 15 US census variables to help identify communities that may need support before, during, or after disasters.	<ul style="list-style-type: none"> Access the CDC/ATSDR SVI Data and Documentation Download site. Email svi_coordinator@cdc.gov for data assistance.
Tuberculosis	National Center for HIV, Viral Hepatitis, STD, and TB Prevention (NCHHSTP)	National Tuberculosis (TB) Surveillance System (NTSS) and linked National Tuberculosis Molecular Surveillance Center (NTMSC) data Provide case-based surveillance data and related genotypic data for verified cases of tuberculosis.	<ul style="list-style-type: none"> Access aggregate data published annually in the TB surveillance report. To request additional data or assistance, fill out the tribal public health data request form.

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			<ul style="list-style-type: none"> Additional aggregate data or limited de-identified line level data are available in compliance with the Assurance of Confidentiality covering these data. Depending on the complexity of the data request, several months may be required to obtain the necessary reviews and approvals and to process data requests.
VaxView	National Center for Infectious and Respiratory Diseases (NCIRD)	VaxView Provides vaccination coverage data for all ages. Data views include ChildVaxView, SchoolVaxView, TeenVaxView, AdultVaxView, FluVaxView, and COVIDVaxView.	<ul style="list-style-type: none"> Access the VaxView website for data descriptions, data, visualization tools, and user guides. To request additional data or assistance, fill out the tribal public health data request form.
Vital Statistics	National Center for Health Statistics (NCHS)	National Vital Statistics System (NVSS) Provides data on births and deaths in the United States. The Vital Statistics Rapid Release program provides access to the timeliest vital statistics for public health surveillance, through releases of 1) Quarterly Provisional Estimates, 2) Vital Statistics Rapid Release Reports, 3) focused surveillance activities, and 4) state and national provisional control counts of births, deaths and infant deaths based on a current flow of vital statistics data from state vital records offices.	<ul style="list-style-type: none"> Access the NCHS Public Data Dashboards. For access to additional restricted data, which may include additional data on American Indian/Alaska Native populations, follow the instructions at Restricted-Use Vital Statistics Data site. Allow 4–6 weeks for processing of data requests.
Youth Risk Behaviors	National Center for HIV, Viral Hepatitis, STD, and TB	Youth Risk Behavior Surveillance System (YRBSS) Monitors six categories of health-related behaviors that contribute to the leading causes of	<ul style="list-style-type: none"> Access YRBSS data and documentation. Data available: full survey data, annual datasets, Combined YRBS middle

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	Prevention (NCHHSTP)	<p>death and disability among youth and adults, including:</p> <ul style="list-style-type: none"> • Behaviors that contribute to unintentional injuries and violence • Sexual behaviors related to unintended pregnancy and sexually transmitted diseases, including HIV infection • Alcohol and other drug use • Tobacco use • Unhealthy dietary behaviors • Inadequate physical activity • Obesity • Asthma • Other health-related behaviors • Sexual identity and sex of sexual contacts <p>YRBSS is a system of surveys. It includes 1) a national school-based survey conducted by CDC and 2) state, territorial, tribal, and local surveys conducted by state, territorial, and local education and health agencies and tribal governments.</p>	<p>school datasets, and Combined YRBS high school datasets.</p> <ul style="list-style-type: none"> • Use the YRBSS Data Request Form to request state, district, territory, or tribal government data files not available on the website. • Learn more about Data Availability and Requesting YRBSS Data Files.