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November 25, 2024

Dr. Lanikque Howard, Director
Office of Community Services
Administration for Children and Families
U.S. Department of Health & Human Services
330 C Street SW
Washington, DC 20201

Re: Proposed Information Collection Activity; Diaper Distribution
Demonstration and Research Pilot Beneficiary Survey (Office of
Management and Budget No. 0970-0531)

Dr. Howard,

On behalf of the National Community Action Partnership (NCAP), thank you for the opportunity to provide public comments on the proposed information collection for the Diaper Distribution Demonstration and Research Pilot (DDDRP), as outlined in the Federal Register on September 27, 2024.¹

NCAP serves as the national membership association and hub that links over 1,000 Community Action Agencies (CAA) and State Associations across the country.² Our mission is “*To ensure the causes and conditions of poverty are effectively addressed and to strengthen, promote, represent, and serve the Community Action Network.*”³ NCAP is the national center for training and innovation within the CAA Network and serves as a trusted convener, trainer, and resource for local agencies and state/regional associations. With over 120 years of combined experience at the local, state, and national levels, our staff are national experts in Community Action issues, priorities, and mission alignment.

¹ Office of Community Services, Administration for Children and Families, U.S. Department of Health and Human Services, "Proposed Information Collection Activity; Diaper Distribution Demonstration and Research Pilot," *Federal Register* 89, no. 187 (September 27, 2024): 66475,

<https://www.federalregister.gov/documents/2024/09/27/2024-22132/proposed-information-collection-activity-diaper-distribution-demonstration-and-research-pilot>.

² *About Us*, Community Action Partnership, <https://communityactionpartnership.com/about-us/> (last visited Sept. 16, 2019).

³ *Mission & Promise*, Community Action Partnership, <https://communityactionpartnership.com/mission-and-promise/> (last visited Sept. 16, 2019).

The DDDRP, launched by the Office of Community Services (OCS) in partnership with the Office of Planning, Research, and Evaluation (OPRE), addresses diaper need while promoting economic security. This initiative funds Community Services Block Grant (CSBG) State Associations, CAAs, tribal organizations, diaper banks, and other community partners to distribute diapers along with holistic wraparound supports, such as job training, education, and childcare. The program also includes an evaluation to assess its impact on key outcomes, including improvements in diaper security, child health, caregiver employment, and overall family well-being. OCS has awarded DDDRP to a total of four cohorts of state and local entities since 2022, with the first cohort now operating in a supplementary award period.

Our comments will focus on the utility, quality, and clarity of the information to be collected, as well as the burden of the proposed data collection. Our input is based on feedback gathered from meetings with DDDRP grantees, participation in the OCS listening session on November 7, 2024, and a survey distributed to grantees and participating agencies. Our comments seek to support OCS in the creation of an instrument that sufficiently measures the impact of the program while minimizing burden to participating agencies and program beneficiaries.

Key Recommendations

Exempt Cohort I and Cohort II from Participation in the updated BES Survey and Follow Up Evaluation

Grantees in Cohort I (awarded DDDRP funds in fiscal year 2022) and Cohort II (awarded DDDRP funds in fiscal year 2023) were required to develop their own intake and evaluation systems as part of the grant's original framework. Since then, the program has evolved, with subsequent cohorts utilizing different systems. Under the changes proposed in the current Information Collection Request (ICR), all cohorts will be required to participate in the Beneficiary Enrollment Survey (BES) for intake (including the use of the Unique Identifier) and the follow-up survey for evaluation. This change would duplicate efforts for many Cohort I and Cohort II grantees, whose existing systems already meet these needs. Additionally, Cohort I is in a short-term supplementary award period that will conclude shortly after the BES and follow-up evaluation implementation. Given the short duration of their continued participation and their established processes, we recommend exempting Cohort I and Cohort II grantees from mandatory adoption of the new systems. Instead, voluntary participation should be allowed. This approach would reduce the burden on affected grantees and better align with the program's evolving structure.

Streamline Datapoints Collected from Customers

The BES includes at least 30 datapoints to be collected from customers, many of which duplicate data already collected by participating agencies for general intake purposes. Additionally, the survey asks at least six questions per child in diapers, which increases the length of the survey for families with multiple children in diapers. Based on feedback NCAP

gathered from the Network, OCS' burden estimates appear lower than the actual time required for participants to complete both the BES and follow-up survey.

To reduce burden, we recommend the following changes to the BES and follow-up survey:

- **BES:**
 - Combine questions about children in diapers into a single section, asking caregivers to indicate how many children in diapers share the same characteristics. This would eliminate the need to ask about each child individually.
 - Use age ranges (*e.g.*, 1–3 months, 4–6 months) instead of asking for the exact age of each child in diapers.
 - Simplify questions regarding the primary language spoken in the household.
 - Merge the question about working multiple jobs into the employment status question (*e.g.*, “I am working more than one job for pay”).
- **Follow-Up Survey:**
 - Remove questions about caregiver demographics that are unlikely to change, such as demographic information (gender, race, ethnicity). While OCS includes these questions to track changes in the caregiver completing the survey, the minimal benefit to data quality does not justify the added burden on respondents.
 - Ask caregivers if there have been any changes in their household since enrollment. Only prompt respondents that answer “yes” to answer additional questions.
 - Streamline questions regarding children by focusing on whether any children have enrolled or unenrolled in childcare or Head Start, rather than asking about each child individually.

By reducing duplicative questions and streamlining the data collection process, both customer and provider burden will be minimized. For example, in rural areas and among communities serving customers with limited English proficiency, DDDRPs providers help customers complete the BES (and soon will likely help with follow-up surveys). Simplifying the surveys reduces the time staff must spend assisting with forms, allowing them to focus on more impactful activities, such as engaging with families and improving program delivery. This ultimately increases the program's efficiency and effectiveness.

Improve Resources and Data Provided to Grantees

DDDRP is administered through a network of local providers who rely on effective support from both their state associations and federal partners for successful program implementation. Two key recommendations to OCS for improving local and state-level support are:

- **Language Accessibility:** DDDRPs grantees have requested that OCS provide the BES in additional languages to ensure it can be effectively administered across diverse

communities. Additionally, OCS should offer the follow-up survey in corresponding languages to ensure accurate reflection of outcomes across communities.

- **Granular Data Access:** Despite being key partners in program implementation, state association grantees currently only receive aggregated data at the state level from OCS. To enhance program effectiveness, more detailed data that would allow state associations to more accurately assess the impact of DDDR, make informed decisions to refine service delivery, and better advocate for the program's continuation and growth.

Improve Collaboration with the Network to Inform Updates

The updates to the BES and the development of the proposed follow-up survey were created by OCS and its contractor without sufficiently engaging the communities and local agencies most affected by these changes. We believe that the process of strengthening data collection and program evaluation should be a collaborative effort, drawing on the insights and expertise of both federal partners and the local network. We encourage OCS to engage more proactively with its partners outside of the public comment process, ensuring that the proposed updates reflect the collective knowledge and experience of those who are directly involved in delivering services. This approach will help create more effective solutions that are better aligned with the needs of the communities we serve.

Conclusion

DDDRP presents a valuable opportunity to address diaper insecurity and promote family well-being. By refining the data collection process, improving resources for grantees, and fostering a more collaborative approach to program updates, OCS can strengthen the program's impact and effectiveness.

NCAP is committed to supporting OCS in this endeavor and believes that by working together with the local network, we can create a more efficient and responsive program that truly serves the needs of the communities we aim to help. We look forward to continued partnership and progress in this important initiative.

Thank you for considering our comments and recommendations.

Sincerely,



Denise L. Harlow, MSW, CCAP
Chief Executive Officer
National Community Action Partnership

DDDRP Network Sign-Ons
(in alphabetical order)

California Community Action Partnership Association Sacramento, CA	Community Action Association of Alabama Birmingham, AL
Community Action of Southeast Iowa Burlington, IA	Community Action Partnership of Kern Bakersfield, CA
Community Action Partnership of Oregon Salem, OR	Community Action Partnership of Utah Ogden, UT
Connecticut Association for Community Action, Inc Middletown, CT	Hawkeye Area Community Action Program, Inc. Hiawatha, IA
Iowa Community Action Association Des Moines, IA	Jewish Community Alliance of Southern Maine Portland, ME
Maine Community Action Partnership East Wilton, ME	Massachusetts Association for Community Action (MASSCAP) Boston, MA
Merced County Community Action Agency Merced, CA	New York State Community Action Association (NYSCAA) Guilderland, NY
Sieda Community Action Ottumwa, IA	Upper Des Moines Opportunity, Inc. (UDMO) Graettinger, IA
Urban Services - a branch of the YMCA of Greater San Francisco San Francisco, CA	Washington State Community Action Partnership Olympia, WA
Young Parents Network (dba YPN) Cedar Rapids, IA	