

November 25, 2024

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

Dear Dr. Howard,

Thank you for the opportunity to comment on the proposed information collection for the Diaper Distribution Demonstration and Research Pilot Program (DDDRP) (OMB No: 0970-0531). We, the New York State Community Action Association (NYSCAA), and the participating New York State Community Action Agencies (CAAs) (subgrantees) have reviewed and discussed the proposed changes to the Beneficiary Enrollment Survey (BES).

It should be noted that NYSCAA and its subgrantees support the collection of quality data to determine the success and value of the DDDRP to families who qualify for the program. NYSCAA and the CAAs have some concerns regarding the proposed changes to the BES, which are noted below.

Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility;

NYSCAA and the CAAs note that much of the demographic information collected in the BES is duplicative of data already collected and stored by the CAAs during the intake process for all services. The redundancy of the data collection is an unnecessary burden on CAA staff and reduces the time available to complete other work. NYSCAA also has concerns that only a portion of the collected data is shared with the CAAs. The lack of a closed circle affects the practical utility of the information being gathered. Because the CAAs do not receive the disaggregated data at the individual CAA level, the data has limited value and they are ill-equipped to assess the full scope of diapering needs and successes in their community. Additionally, the proposed form is missing key pieces of data that would be critical to telling the story of the benefits of the DDDRP to individual

children and families. Specifically, the proposed BES does not allow caregivers to identify the use of wrap-around services, or address changes in emotional health or distress of children and caregivers.

NYSCAA and the CAAs are concerned that the request for parent demographics regarding race, language, fluency of English in the home, and work status combined are unnecessary for the agency's ability to provide supports and assistance to children and caregivers and will not have practical utility in determining the research program's success. Further, removing the option to respond "Prefer not to share" from all demographic questions aligns with the above concerns and will skew the data in the follow-up surveys.

NYSCAA and the CAAs recommend developing a system for CAAs to report demographic data in aggregate form to OCS. This would reduce the staff reporting burden and alleviate privacy concerns for some families.

The accuracy of the agency's estimate of the burden of the proposed collection of information;

The CAAs note the current estimate of five minutes for completion is inaccurate for many caregivers. Barriers that affect the time commitment include literacy (reading and digital), the number of children in the home, and the availability of stable internet. NYSCAA proposes a streamlined question model that does not require caregivers to answer the same questions for each child. Further, when CAA staff must print PDF forms and assist caregivers with completing the survey offline, the time burden increases to thirty minutes per survey once the data is collected on paper, then transferred to digital and submitted.

The quality, utility, and clarity of the information to be collected;

NYSCAA notes the risk of inaccurate data collection if changes to the BES are implemented during the mid-grant cycle. The gaps in data collection and changes in some questions will result in skewed data across the grant's duration.

As noted above, NYSCAA advocates that "Prefer not to share" should remain an option in the new version of the BES. Exclusion of this choice will lead to incomplete data and a reduced percentage of caregivers willing to participate in the survey. NYSCAA also believes the repetitive survey format for families with more than one child in diapers will deter caregiver participation and reduce the number of completed surveys.

Ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology.

First, the burden can be reduced by allowing CAAs to report aggregated demographic information from records and data already collected. This will reduce caregivers' time completing the survey and alleviate the inefficiencies in collecting redundant information.

NYSCAA also recommends changing the BES format to simplify gathering information for multiple children in one household. A change in structure will reduce the estimated completion time, increasing the survey completion rates.

Conclusion:

NYSCAA appreciates OCS's work in collecting data to support the continuation of the DDDRP. We also appreciate the ability to actively participate in this process on behalf of the four participating CAAs and two partner diaper banks. We value and understand the importance of data collection for the DDDRP grant and look forward to utilizing a BES and follow-up survey that meets the needs of the grant with minimal burden to caregivers and CAA staff.

Sincerely,

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