

## **Diaper Distribution Programs**

Overview of Programs and Available Research

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### Overview

Diaper need, or the gap between sufficient diapers to keep a child dry and what their caregiver can provide, affects more than 5 million children in the United States. One in three families struggle to provide enough diapers to change their child frequently enough. Some children are disproportionately affected by diaper need, particularly children who are Black, Indigenous, or Latinx, and children whose parents are immigrants, lack a high school diploma, or experience economic insecurity and unemployment. Lack of sufficient diapers can lead to health consequences, such as diaper rash, severe dermatitis, infections, and hospitalization. This gap can also lead to other severe consequences, such as high levels of stress, anxiety, and guilt among caregivers; lack of childcare options; and caregiver economic instability from missing too many days of work or missing other opportunities to increase economic independence (Randles 2017).

The Office of Community Services in the Administration for Children and Families (ACF) launched the Diaper Distribution Demonstration and Research Pilot, the first federally funded diaper assistance initiative, in 2022. The purpose of the pilot is to provide funding to strengthen and expand existing diaper distribution services through a robust network of community partners that already provide anti-poverty services. In addition to providing diapers, grant recipients and their partners, including Community Action Agencies, social services agencies, nonprofit organizations, and diaper banks, will connect families to economic mobility and family support services. These connections may include job training, educational support, Early Head Start, housing services, and more.

As this pilot program launches, Mathematica completed a literature review to provide foundational information about diaper distribution programs. This review was sponsored by ACF's Office of Planning, Research, and Evaluation (OPRE) as part of its ACF Evidence Capacity Support project. We sought to understand the current landscape of diaper distribution programs and summarize the research about them. The brief begins by summarizing the literature review approach and highlighting key findings about diaper distribution. Then, the brief summarizes current knowledge about diaper distribution programs and the research on these programs.

### Literature review approach

The literature review sought to identify research that described and studied diaper distribution programs. We reviewed 15 articles identified by OPRE and identified 1 additional article to review **Diaper need** creates distressing effects on children and caregivers. Diaper assistance could transform the lives of more than 5 million children and one-third of families in the United States by:

- → Strengthening health equity across diverse communities
- → Improving access to opportunities that increase caregiver economic independence
- → Promoting healthy child development and caregiver socioemotional well-being

(Randles 2017).

from reference lists in these articles. The team also conducted a systematic search of 16 databases to









identify additional research on diaper distribution programs and thoroughly understand information gaps in the literature. The team limited search results to the last 10 years, and search terms included "diaper banks," "diaper need," and "diaper distribution."

This search yielded 10,223 total results. Most of the results were not relevant to diaper need or distribution (e.g. articles focused on diaper brand performance or environmental impacts of diaper waste). To identify the most relevant research, the team screened for articles that included information about diaper distribution programs' outputs and outcomes or described diaper need and associated health, demographic, and material hardship factors. After assessing the relevance of the articles and cross-checking with the articles previously identified by OPRE, the team identified 7 additional articles for review. Then the team completed a targeted internet search for documentation on programs discussed in these articles, which resulted in 7 additional non-research program documents, such as a diaper distribution program's annual report or organizational structure overview. Ultimately, the review included 30 relevant articles or program documents, which this brief summarizes (see Appendix A for a list of databases searched and all articles and program materials reviewed).

### **Key findings**

Most of the reviewed research focused on measuring or estimating diaper need and its effect on families, rather than research on diaper distribution programs specifically. The literature tended to describe a few existing programs through case studies and provided limited information on outcomes or effectiveness of these programs. Findings from the literature address three areas: (1) existing government support for diaper assistance, (2) diaper distribution program structures, and (3) output measures and potential outcomes related to addressing diaper need through diaper distribution.

#### Existing government support for diaper assistance

- Most existing federal government programs that support families with low incomes do not 1. provide resources for diapers. Diapers are currently not covered by most federal and state safety net programs. Families cannot purchase diapers using benefits from Mothers of color are the Supplemental Nutrition Assistance Program (SNAP) or the Special more likely to experience Supplemental Nutrition Program for Women, Infants, and Children diaper need and more (WIC) (Randles 2022b). Families with proper documentation that their likely to report racialized children require diapers for medical treatment might receive diapers stress and social from their state Medicaid programs, but states vary in their exclusion associated with requirements. Although families can use Temporary Assistance for diaper need Needy Families (TANF) funds to purchase diapers, nearly 80 percent of families living in poverty do not receive TANF cash assistance (Randles 2022a). (Shrivastava and Thompson 2022).
- 2. **State governments do not typically fund diaper distribution programs**. Currently, nine states (Arizona, California, Colorado, Connecticut, Georgia, Michigan, Nevada, Vermont, and Washington) provide funding for diaper distribution programs (National Diaper Bank Network n.d.[b]). Regardless of whether diaper distribution programs receive state funding, they rely on funding from a variety of other sources. These include individual donations, corporate scholarships, public or private grants, and fundraising events (Massengale et al. 2017a).

#### Diaper distribution program structures

3. Diaper distribution programs vary in their organizational structure but share many qualities with food banks. Like food banks, diaper distribution programs are organizations that collect supplies and organize them for distribution in a community. They act as a central hub to collect supplies and often partner with other organizations, such as food banks, community centers, and faith-based organizations, which then distribute diapers and diapering supplies directly to caregivers and families. Some diaper distribution programs directly distribute diapers to families.

4. **The size, capacity, and reach of diaper distribution programs vary.** Some diaper distribution programs are local, whereas others cover a whole region or a whole state. Sometimes diaper distribution programs exist as a stand-alone organization, and others exist as an arm of a larger organization, such as a food bank.

## Output measures and potential outcomes related to addressing diaper need through diaper distribution

5. Diaper distribution programs have the potential to improve the lives of families and communities. While almost all reviewed research highlighted potential outcomes related to meeting diaper need, a few articles also theorized potential outcomes that could result from diaper distribution programs specifically. Further, a few studies suggest that diaper distribution is correlated with positive outcomes like improving relationships between families and community-based organizations (Massengale et al. 2017a), reducing caregiver stress, increasing caregivers' ability to participate in the workforce (Massengale et al. 2017b), and allowing caregivers to spend more money on food or nonmedical bills (Massengale et al. 2017b). While the reviewed articles do not use research designs that draw causal conclusions between diaper distribution and such outcomes, these observational findings are an initial indicator of the promise that diaper distribution programs may have for families and communities.

Diaper distribution is the most prevalent strategy to meet diaper need. Other strategies identified in the literature were usually related to cash transfers, including implementing universal basic income or tax credits and earmarking additional TANF funds for diapers

(Randles 2017).

# Available literature on diaper distribution programs and related output measures and outcomes

#### **Diaper distribution program structures**

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This section describes the most common organizational components and structures that surfaced from our review, including program models, funding trends, and eligibility criteria for diaper recipients. Because the cross-section of programs described in the literature was limited, to gather this information, we consulted the National Diaper Bank Network's member directory to increase the scope of programs reviewed (National Diaper Bank Network, 2022). The information in the following section synthesizes our scan of program websites and documents for these diaper distribution programs mentioned in the literature review approach section of this brief. The additional program websites consulted are included in the reviewed resources section (Appendix A).

#### Reviewed literature and program documents described three models of diaper distribution programs.

- Stand-alone distribution. In one model, diaper distribution programs operate as stand-alone organizations that partner with community agencies to distribute diapers. The diaper distribution program collects diapers, typically through bulk purchasing and donations, and distributes them to partner agencies that organize direct distribution to families. Some examples of partner agencies include community centers, home visiting programs, day cares and preschools, and faith-based community organizations.
- 2. Distribution within larger programs. In a second model, distribution programs operate as part of a larger organization, distributing diapers through the larger organization's existing programs. For example, a program might exist within a food bank organization and distribute through the organization's existing infrastructure.
- 3. *Direct distribution.* A third model is where diaper programs directly distribute diapers to families via direct requests. For example, one distribution program has an online and call-in system available for

families to make ad hoc requests to pick up diapers. Alternatively, a few programs hosted open diaper drives, or efforts to collect and distribute diapers in a specific community. These drives may occur in coordination with community centers, college campuses, and faith-based organizations.

**Programs rely on donations and fundraising and operate with paid and volunteer staff.** Diaper distribution programs vary in size, scope, and organizational capacity. However, many of the programs described in the literature operate in similar ways. All three models of diaper distribution programs rely on donations and fundraising to run their programs. Programs typically receive donations from individuals, corporate sponsorships, and public and private grants. We found some evidence suggesting the importance of community organizers, most frequently mothers, soliciting diaper donations or other gently used baby supplies from neighbors and other community members to meet local diaper need. Programs often use money to directly purchase diapers and support operational costs, such as storage space and staff salaries.

Staffing varied by the size and scope of the diaper distribution program, but typically included some fulltime staff and community volunteers. Because the most common program model relies heavily on partnerships with existing agencies, staffing structures tend to be lean.

**Diaper distribution programs use a variety of eligibility criteria to determine who can receive diapers.** Program model sometimes determines criteria. For example, a stand-alone diaper program might be open to anyone, whereas a program that operates within a larger organization might only serve existing clientele. Some programs have no restrictions on who can receive diapers, while others require proof of need in various forms.

Examples of eligibility criteria that diaper distribution programs might use include:

- Be associated with a partner organization affiliated with the diaper distribution program. This is most common for diaper distribution program models that are part of larger organizations and rely on community agencies to physically distribute diapers to families.
- Be referred by an organization, such as a school district, food bank, or church.
- Present proof of qualification for means-tested social service benefits such as SNAP, WIC, or TANF.
- Be 18 or older. Some diaper distribution programs require recipients to show a government-issued identification or bring an adult guardian if they are underage.
- Bring proof of caregiver status, such as the physical presence of a child.
- Attend a parenting training, such as 20- or 30-minute videos on how to prevent choking hazards and install car seats.
- Have children younger than a certain age, such as age 2, by which age the program believes the child should be toilet trained.

## Output measures and potential outcomes related to addressing diaper need through diaper distribution

All reviewed research involved descriptive designs, using methods such as qualitative, cross-sectional, formative, or observational research; none of the reviewed research used a causal design to assess the effectiveness of diaper distribution programs (Exhibit 1).

#### Exhibit 1. Methods used in reviewed research literature

Citation	Research method			
Belarmino et al. 2021	Cross-sectional survey analysis			
Belarmino et al. 2022	Cross sectional survey			
Carstensen and Gunther 2018	Economic simulation modeling; cross-sectional survey			
Massengale 2017	Case study			
Massengale et al. 2017a	Community-engaged formative evaluation; mixed methods multiphase design			
Massengale et al. 2017b	Formative evaluation			
Massengale et al. 2020	Comparative analysis; survey; population data			
Randles 2020	Qualitative study			
Randles 2022a	Qualitative study			
Randles 2022b	Qualitative study			
Sadler et al. 2017	Qualitative study			
Shaffer et al. 2022	Cross-sectional study			
Sobowale et al. 2021	Secondary data analysis of a cross-sectional survey			
Smith et al. 2013	Cross-sectional study; community-based participatory methods, mixed methods			
Trumbo 2019	Mixed methods study, cross-sectional design			
Wallace et al. 2017	Analysis of state legislative initiatives and other government actions			

\*All research methods noted in this exhibit are descriptive. These methods are used to describe a population, need, or program, and not to assess causality or effectiveness.

**Reviewed research described potential outcomes at various levels, including child and caregiver; organizational; and local, regional, and state levels.** Exhibit 2 presents potential outcomes described in the reviewed literature organized by the level at which the outcome would be experienced. Most research did not directly evaluate the impact of diaper distribution on outcomes of interest. Some research assessed the correlation between diaper distribution and outcomes of interest, but again not causal impact. Therefore, the relationship between diaper distribution programs and outcomes is largely hypothesized across this limited body of literature.

Child and caregiver-level outcomes						
Child	Са	regiver	Both			
<ul> <li>Improved child health and well-being such as reduction in diaper dermatitis (diaper rash) or increased likelihood of infants receiving well baby pediatric visits</li> </ul>	<ul> <li>Increased workforce participation and financial stability</li> <li>Increased happiness of caregivers; decreased stress and anxiety related to diaper need</li> <li>Increased feelings of connection with other caregivers struggling with similar needs</li> </ul>		<ul> <li>Increased day care and/or childcare enrollment</li> <li>Increased connections to social support services</li> <li>Increased feelings of social inclusion and dignity</li> <li>Reduced food insecurity</li> </ul>			
Organizational-level outcomes						
Diaper distribution program		Partnership agencies				
<ul> <li>Increased levels of trust with community and participants</li> </ul>		<ul> <li>Strengthened relationships between community organization staff and clients (that is, parents and families)</li> </ul>				

#### Exhibit 2. Potential outcome measures of diaper distribution programs organized by level

<ul> <li>Strengthened partnership with community agencies</li> </ul>	<ul> <li>Increased opportunities to communicate with clients (that is, diapers gave staff an excuse for a home visit)</li> <li>Partnering with diaper programs might open up funding and staff time for other important agency needs and staff time (that is, staff no longer need to search for diapers)</li> </ul>			
Local, regional, and state-level outcomes				

#### Increased community awareness of diaper need

- Decreased diaper need in the local community
- Higher percentage of children in each state with met diaper need
- Destigmatized diaper need by normalizing diaper assistance

#### The reviewed research observed several child and caregiver outcomes related to diaper distribution.

For example, one study interviewed mothers of color who reported that diaper distribution programs decreased stigma they experienced related to diaper need and caregiver stress, which disproportionately affects Black, Indigenous, Latinx, and low-income families (Randles 2022a). Another study interviewed caregivers who reported experiencing various health, social, and financial outcomes from receiving community-based diaper distribution assistance, including improved caregiver mental health, child health and well-being, and opportunities for economic independence and school attendance (Massengale et al. 2017b). One study used a cross-sectional survey in which caregivers self-reported that receiving diapers from a diaper distribution program led to a 77% decline in days babies experienced diaper rash (Carstensen and Gunther 2018).

**Programs track their reach using varied output measures of diapers distributed and numbers served (Exhibit 3).** Often, programs report the total number of diapers distributed over a specific timeframe. Two programs reported the number of children served, whereas two other programs reported the number of annual households served (Carstensen and Gunther 2018; Massengale 2017; Hull and Kelsey 2014). Some programs also reported on the number of diapers distributed per child per month (Massengale et al. 2017b; Massengale 2017; Randles 2022b). Another study found that community-based organizations reported benefits associated with diaper bank partnerships, such as improved program budgets and program retention (Massengale et al. 2017a).

Citation	Timeframe	Location	Program	Output measures
Carstensen and	2016	Connecticut	The Diaper Bank of	Total number of diapers distributed
Gunther 2018			Connecticut	Number of households served
				Number of children served
Hull and Kelsey	Not reported	Williamsburg,	The William and	Total number of diapers distributed
2014		VA	Mary Healthy Beginnings	Number of households served
Katims 2019	2019	California	Orange County Food Bank	Total number of diapers distributed
Massengale 2017	2014 – 2016	Durham	Diaper Bank of North	Number of diapers distributed per month
		County, NC	Carolina	Number of children served
Massengale et	January –	Nationwide	National Diaper	Total number of diapers distributed
al. 2020	March 2017		Bank Network	(disposable and cloth)
Massengale et	2014	North	Diaper Bank of North	Number of diapers distributed per child per
al. 2017b		Carolina	Carolina	month
Randles 2022b	2017 – 2018	California	CalWORKsª, other	Number of diapers distributed per child per
			local diaper bank,	month
			church, or agency	

#### Exhibit 3. Output measures reported in the literature

<sup>a</sup> California Work Opportunity and Responsibility to Kids (CalWORKs) is a state public assistance program that provides cash aid and other services to eligible families with children in California.

**Several gaps exist in published research.** Given the emerging nature of this field, it is not surprising that research is limited and there are many open questions. Much of the research discusses how until recently public policy viewed requiring diapers as a want, and not an essential need. The prior lack of policy support for diaper need contributed to clear systemic barriers related to diaper distribution, and as a result, related research.

First, as mentioned throughout this brief, we did not find any causal studies that compared outcomes across diaper distribution recipients to those who did not receive diaper assistance. The outcome research we identified was entirely theoretical, qualitative, or correlational. Existing research on diaper distribution programs focuses largely on program output measures (see Exhibit 3) and the prevalence and importance of meeting diaper need (for example, see Sobowale et al. 2021 and Belarmino et al. 2022).

Second, we found that much of the research on diaper distribution programs is conducted by a small pool of researchers. Similarly, we found that existing research on distribution programs focuses on a small number of regions or states, such as North Carolina (Massengale et al. 2017a, Massengale et al. 2017b, Massengale 2017), Connecticut (Wallace et al. 2017; Sadler et al. 2017), and California (Jackson 2015; Randles 2022b; Katims 2019).

Additional research should be conducted with communities from more diverse demographic and geographic backgrounds. For example, no published research has been conducted in partnership with Tribal Nations to understand how diaper need is met, whether through diaper distribution or other strategies, in Indigenous communities. Research could also be more inclusive of understanding diaper need and distribution with varying family structures, families experiencing homelessness, or children experiencing diaper need in foster or kinship care.

While reviewed literature described a few distinct models of diaper distribution programs, research could take a deeper dive into understanding implementation factors by model, and whether that produces differences in outcomes. There are gaps in knowledge about how these models and differences in implementation might have an impact on effectiveness or reach, for example. Additional program-level research could elevate lessons learned and promising practices for the field.

Future research could also evaluate program funding. For example, examining the role of community and grassroots organizing efforts could reveal additional context about how diaper need is met in informal ways in the absence of federal or state funding. Investigating the reach and impact of these programs, as compared with state-funded diaper distribution programs, could be an opportunity to understand how communities organize to meet their own diaper need.

Finally, studies might also explore community-level outcomes, such as whether diaper distribution programs increase a community's capacity to coordinate diaper distribution and support services across different agencies. Future research could explore community or state-level outcomes of diaper distribution on service coordination among social services agencies, community organizations, and other service providers. Longitudinal studies could examine long-term outcomes, such as the effect of diaper distribution programs on community connection, community unemployment rates, and family incomes, which were hypothesized frequently in existing research.

### Conclusion

To more fully understand how diaper distribution programs operate and the outcomes and effectiveness of these programs, more research is needed. Overall, the field would benefit from studies that address the implementation of diaper distribution programs in a diverse landscape of settings and their associated levels of responsiveness or effectiveness in meeting diaper need. Finally, causal impact research is needed to study the direct effects of diaper distribution programs on reducing diaper need and associated outcomes for children and caregivers.

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#### Appendix A

#### **Reviewed resources**

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#### **Reviewed databases**

- EBSCO
- Academic Search premier
- CINAHL
- Cochrane Central Register of Controlled Trials
- EconLit
- Education Research Complete
- E-Journals
- ERIC
- SocINDEX
- APA PsycInfo
- Campbell Collaboration
- Google Scholar
- MedRxiv
- ProQuest Dissertations
- PubMed
- SAGE database
- Scopus

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