

INFANTS AND TODDLERS IN EARLY HEAD START

The first three years of life are a period of dynamic and unparalleled brain development in which children acquire the ability to think, speak, learn, and reason.¹ During these first 36 months, children need good health, strong families, and positive early learning experiences to lay the foundation for later school success. Yet not all babies and toddlers are given the opportunities that foster and support their healthy intellectual, social, and emotional development. Young children living in poverty are more likely to face challenges that can negatively impact their development² and create disparities in their cognitive and social abilities well before they enter Head Start or pre-kindergarten programs at age 4. In an effort to ensure that all young children have the same opportunities to succeed in school and life, the federal Early Head Start program was created to support the healthy development of low-income infants, toddlers, and pregnant women. Research shows that Early Head Start makes a positive difference in areas associated with children's success in school, family self-sufficiency, and parental support of child development, but federal funds are reaching only 3% of eligible children and families.³ Given the limited scope of current federal funding, 20 states are now taking action to expand and enhance Early Head Start services to young children and their families.⁴ Policymakers at the federal and state level should build upon these efforts to expand Early Head Start and take leadership roles to ensure that all at-risk infants and toddlers enter school ready to learn and succeed.



What is Early Head Start?

Early Head Start is the *only* federal program specifically designed to ensure that all young children have the same opportunities by improving the early education experiences of low-income infants and toddlers. The mission of Early Head Start is to support healthy prenatal outcomes and enhance the intellectual, social, and emotional development of infants and toddlers to promote later success in school and life. It does so by offering opportunities for early learning experiences, parent support, home visitation, and access to medical, mental health, and early intervention services. This comprehensive approach supports the whole child—physically, socially, emotionally, and cognitively—within the context of the family, the home, and other child-serving settings. All Early Head Start programs must comply with the federal Head Start Program Performance Standards, which were adapted to the unique needs of infants and toddlers when the program was created.

The reauthorization of Head Start and Early Head Start in 2007 provides numerous opportunities to expand and strengthen the program. The new law expands access for infants and toddlers by prioritizing the expansion of Early Head Start as annual appropriations for the overall program grow, and allowing for the conversion of preschool Head Start grants into Early Head Start grants based on local community needs and capacity. The legislation also includes changes to improve the quality of the program, including support for training and technical assistance for Early Head Start grantees, with at least 20% of all Head Start training dollars allocated to Early Head Start programs, and a state-based training and technical assistance system staffed by specialists in infant and toddler development.

FAST FACTS

● **22%** of children under the age of 3 are living in poverty, a number that is growing at a faster rate for infants and toddlers than for older children.⁵

● Low-income infants and toddlers are at greater risk than middle- to high-income infants and toddlers for a variety of poorer outcomes and vulnerabilities, such as later school failure, learning disabilities, behavior problems, mental retardation, developmental delay, and health impairments.⁶

● Children who participated in Early Head Start had significantly larger vocabularies and scored higher on standardized measures of cognitive development than children in a control group who did not participate in Early Head Start. Additionally, Early Head Start children and parents had more positive interactions, and these parents provided more support for learning than did those in a control group.⁷



Policy Recommendations

1. **Increase federal and state investment in Early Head Start, and programs modeled on Early Head Start, to ensure that more eligible infants and toddlers can be served.**

Unfortunately, only a small portion of low-income children are currently served by federal Early Head Start programs and state Early Head Start initiatives, leaving the majority of eligible infants and toddlers without access to this proven program. Federal and state policymakers should work to expand Early Head Start, so that more at-risk infants and toddlers can receive services early in life when we have the best opportunity to reverse the trajectory of poor development that can occur in the absence of such supports.

2. **Ensure State Advisory Councils on Early Childhood Care and Education that include a focus on the needs of infants and toddlers.**

The Head Start for School Readiness Act of 2007 mandates that governors designate or establish State Advisory Councils to build statewide systems of early care and education for children from birth to school entry. Governors should ensure that infant-toddler issues are a focus of the State Advisory Councils by designating infant-toddler professionals as participants on the councils.

3. **Conduct community assessments to determine the needs of eligible children and consider converting preschool Head Start funds to serve more infants and toddlers.**

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Doing The Math

We know that education leads to greater opportunities for success in life. But what if only 3% of the children in our public schools were given the opportunity to learn math? That would significantly limit our children's opportunities to thrive in the workforce, and it would harm our nation's success in an increasingly competitive global market. Early Head Start provides low-income infants and toddlers with opportunities for learning and healthy development that all children need to succeed in school, in the workforce, and in life. Yet federal funding only covers 3% of all eligible infants, toddlers, and pregnant women to receive Early Head Start services.⁸ The math just doesn't add up.





and communities are increasingly providing services to preschool-age children, some Head Start programs no longer have waiting lists and are under-enrolled. Head Start grantees, particularly those in communities served by state pre-kindergarten programs, should assess the needs of eligible children from birth to age 5 and consider converting Head Start funds to serve more infants and toddlers. Programs that apply to provide or are providing services to infants and toddlers with funds previously used for 3- and 4-year-olds should have access to training and technical assistance related to program planning and implementation for infants and toddlers.

4. Ensure high-quality Early Head Start programs through the full implementation of the Head Start Program Performance Standards and staff training and technical assistance.

Research shows that Early Head Start programs that fully implement the Head Start Program Performance Standards have the strongest impacts on both children and parents.⁹ To ensure that high-quality services are provided to young children and their families, federal and state Early Head Start programs should meet all components of the Head Start Program Performance Standards. The federal Department of Health and Human Services and state administrative agencies should provide ongoing training, technical assistance, and professional development for federal and state Early Head Start staff to support their ability to provide services that are reflective of these best practices. Additionally, staff should receive training on the unique social and emotional development of infants and toddlers to help them better identify children at risk for mental health problems.

5. Partner with child care providers to expand Early Head Start services to more children.

Linkages should be built between Early Head Start programs and child care providers to better coordinate federal and state investments and improve the quality of child care. Partnerships



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make it easier to provide continuity of care for infants and toddlers, allowing them to have a consistent caregiver with whom to build a strong relationship. State Early Head Start initiatives may even provide Early Head Start services through community child care providers, leveraging the federal and state investment in child care and giving providers access to Early Head Start resources, such as training and professional development, which help to improve program quality.¹⁰

6. Support continuous improvement activities through data collection and evaluation.

Continual evaluation of programs is important at the federal, state, and local levels to ensure the maximum effectiveness of Early Head Start. Programs should engage in ongoing data collection and evaluation activities so that they may monitor and improve their implementation of the Head Start Program Performance Standards and the impact of services on participating children and families. State initiatives should ensure that data collection and evaluation requirements are built into state policies to better help programs continually improve their effectiveness and meet the federal Head Start Program Performance Standards.¹¹

7. Conduct research to demonstrate the long-term impacts of Early Head Start.

Without longitudinal research, it is difficult to understand the long-term impacts of Early Head Start on at-risk infants, toddlers, and their families. Funds should be set aside to conduct longitudinal research on Early Head Start, so that federal and state policymakers are able to assess the impact of the program through middle childhood and provide an evidence-based rationale for the expansion of the program.



EHS funded spaces for about 57,400 infants and toddlers and about 3,700 pregnant women in 2008-2009.¹² The Office of Head Start estimates that ARRA investments will fund spaces to serve an additional 48,000 infants, toddlers, and pregnant women.¹³



Research

Research demonstrates that Early Head Start is effective. The Congressionally mandated Early Head Start Research and Evaluation Project, a rigorous, large-scale, random-assignment evaluation, concluded that Early Head Start is making a positive difference in areas associated with children's success in school, family self-sufficiency, and parental support of child development. What is most compelling about the Early Head Start data is that they reflect a broad set of indicators across different types of families participating in Early Head Start, all of which show positive impacts. Some highlights of the research include:

- Positive Impacts on Children.** Children who participated in Early Head Start showed statistically significant, positive impacts on standardized measures of cognitive and language development, as compared to control group children eligible for Early Head Start who did not participate. Additionally, Early Head Start children had more positive interactions with their parents than control group children—the children engaged their parents more, and these parents rated their children lower in aggressive behavior than did the parents in the control group.¹⁴ By creating positive outcomes for intellectual and social/emotional development, Early Head Start moves children further along the path leading to greater school readiness.
- Positive Impacts on Parents.** Early Head Start parents were more emotionally supportive of their children and less detached than control group parents, as well as significantly more supportive of language and learning. They also reported less spanking and more positive discipline techniques than parents in a control group who did not participate in Early Head Start. Early Head Start also was found to significantly improve how fathers interacted and related to their children.¹⁵

A follow-up wave of research demonstrated that a number of the positive impacts for children and parents participating in Early Head Start were still demonstrated two years later, when the children entered kindergarten. Additionally, the follow-up research examined the effects of Early Head Start in combination with pre-kindergarten education, showing that children who attended Early Head Start and formal child development programs between the ages of 3 and 5 experienced the most positive outcomes.¹⁶



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For more information about the State Advisory Councils required by the 2007 Head Start reauthorization, see **[What About the Babies? A Focus on Infants and Toddlers in State Advisory Councils.](#)**

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About Us

The ZERO TO THREE Policy Center is a nonpartisan, research-based resource for federal and state policymakers and advocates on the unique developmental needs of infants and toddlers. To learn more about this topic or about the ZERO TO THREE Policy Center, please visit our website at www.zerotothree.org/policy.



National Center for Infants, Toddlers, and Families

1 National Research Council and Institute of Medicine, *From Neurons to Neighborhoods: The Science of Early Childhood Development*. Jack Shonkoff and Deborah A. Phillips, eds. Washington, DC: National Academy Press, 2000.

2 National Center for Children in Poverty, *Poverty and Brain Development in Early Childhood*. National Center for Children in Poverty, 1999, www.nccp.org.

3 U.S. Department of Health and Human Services, Administration for Children and Families, *Making a Difference in the Lives of Infants and Toddlers and Their Families: The Impacts of Early Head Start*. U.S. Department of Health and Human Services, 2002, www.acf.hhs.gov.

4 Rachel Schumacher and Elizabeth DiLauro, *Building on the Promise: State Initiatives to Expand Access to Early Head Start for Young Children and Their Families*. Center for Law and Social Policy and ZERO TO THREE, 2008, www.zerotothree.org.

5 Vanessa R. Wright and Michelle Chau, *Basic Facts about Low-Income Children: Children Under Age 3*. National Center for Children in Poverty, 2009, www.nccp.org.

6 National Research Council and Institute of Medicine, *From Neurons to Neighborhoods*.

7 U.S. Department of Health and Human Services, Administration for Children and Families, *Making a Difference in the Lives of Infants and Toddlers and Their Families*.

8 2008 is the most recent year of Census Bureau data available. Note that 85,211 is the exact number of children under 3 served by Early Head Start in Fiscal Year 2008. U.S. Department of Health and Human Services, Administration for Children and Families, Early Childhood Learning and Knowledge Center, *Head Start Program Information Report for the 2007-2008 Program Year, Early*

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10 Schumacher and DiLauro, *Building on the Promise*.

11 Ibid.

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13 Office of Head Start, Division of Policy and Budget, presentation, May 25, 2010.

14 U.S. Department of Health and Human Services, Administration for Children and Families, *Making a Difference in the Lives of Infants and Toddlers and Their Families*.

15 Ibid.

16 U.S. Department of Health and Human Services, Administration for Children and Families, *Research to Practice: Preliminary Findings from the Early Head Start Prekindergarten Follow-up*. U.S. Department of Health and Human Services, 2006, www.acf.hhs.gov.

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