

About the Series

This is the 10th brief in a series of CLASP analyses of Head Start Program Information Report (PIR) data. State factsheets presenting PIR data for all Head Start programs in a state are also available. This brief and the accompanying state fact sheets are available at:

<http://childcareandearlyed.clasp.org/>

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CLASP staff are available to provide technical assistance on Head Start PIR and other child care and early education issues. Please contact us for more information.

By **Stephanie Schmit** and **Danielle Ewen**¹

Since its creation in 1965, Head Start has provided high quality early education and comprehensive support services to three- and four-year-olds in poor families. In addition to early learning opportunities, Head Start's comprehensive early childhood development program provides children and families with access to a range of services such as health screenings, referrals and follow-up support, parenting resources and social services. Additionally, Head Start works to involve children's parents and Head Start staff work to cultivate parents' abilities to be their child's first teacher. In 1995, Early Head Start was created for poor families with children from birth to age 3 and pregnant women.

Head Start was reauthorized most recently in 2007 and is scheduled to be reauthorized again in 2012. The 2007 legislation included several important changes for Head Start. The 2007 reauthorization increased funding for the Migrant and Seasonal Head Start and the Indian Head Start programs and allowed for up to 35 percent of the children served by a grantee to have an income between 100 and 130 percent of the federal poverty level if the grantee can demonstrate that children with income levels below the poverty level are already being served. It also prioritized services for homeless children, ensured that children with disabilities are promptly identified and served, and allowed part-day Head Start programs the flexibility to convert to full-day year-round services. The reauthorization also increased educational requirements for teachers serving Head Start children.²

As the result of the 2009 American Recovery and Reinvestment Act (ARRA), Head Start received \$2.1 billion of which \$1.1 billion was designated for Early Head Start. It was estimated that the funds would

serve an additional 16,000 children over two years. This brief reports on 2010 Program Information Reports (PIR) data.³ This data will reflect the first of the two years that the ARRA funds will impact.

This policy brief uses PIR data to describe the state of Head Start in 2010 and looks at the changes and trends that have developed from 1997 until now. The PIR data summarized in this brief provides contextual information for programs and advocates about Head Start programs and the children and families they serve.

In this analysis we highlight changes since 2006, which is the last year that CLASP published a trend analysis of Head Start data.⁴ Head Start requires all grantees to submit a PIR annually to the U.S. Department of Health and Human Services (HHS). The PIR provides a snapshot of Head Start children, families, staff and programs each program year. This brief looks at all children (birth to age 5) served through Head Start, including infants and toddlers in the Early Head Start program, children in the Migrant and Seasonal program, and children in the Head Start preschool program.

Highlights from the 2010 PIR include:

- **Head Start serves participants from diverse backgrounds.** In 2010, regardless of race, 36 percent of all participants were of Hispanic or Latino origin. Forty percent of participants were white, 29 percent were black, 11 percent identified as “other,” 8 percent were bi-racial or multi-racial, and the remaining participants fell into the Unspecified (6 percent), American Indian or Alaska Native (4 percent), Asian (2 percent) or Hawaiian or Pacific Islander (1 percent) categories. Additionally, 30 percent of participants lived in homes where English was not the primary language.
- **Head Start helps children access medical and dental care.** Among children without health insurance at entry into Head Start, more than half (52 percent) obtained health insurance during the program year. In 2010, 96 percent of Head Start children had an ongoing source of continuous, accessible medical care at the end of the program year. Additionally, 89 percent of Head Start children had an ongoing, accessible source of dental care at the end of the program year in 2010.
- **Most Head Start families had at least one working parent; many parents had limited formal education.** In 2010, 65 percent of families had at least one working parent and 14 percent of families had at least one parent in school or job training. Thirty-one percent of parents had not graduated from high school, and 41 percent had a high school diploma or the equivalent. Five percent had a bachelor’s degree or higher.
- **Most Head Start teachers have a degree and nearly half have a bachelor’s or higher.** In 2010, 76 percent of Head Start teachers had an associate degree or higher and 45 percent had a bachelor’s or higher. Only 6 percent of teachers had no degree or credential. In 2010, Head Start teachers made an average of \$26,751.⁵
- **Head Start provides most services in centers and more than half of services are full-day.** While 90 percent of Head Start slots were center-based in 2010, many other program options existed for participants. In 2010, 7 percent of the remaining slots were home-based, 1 percent was combination slots (center-based and home-based), 1 percent was family child care option slots and the final 1 percent of slots was for the locally-designed option. In 2010, 54 percent of

participants received full-day services, defined as five days a week for six or more hours per day.

Head Start Programs

All Head Start programs are required to comply with federal Head Start Program Performance Standards. Head Start Program Performance Standards are designed to promote a nurturing environment that fosters healthy socio-emotional, physical, and cognitive development for children.

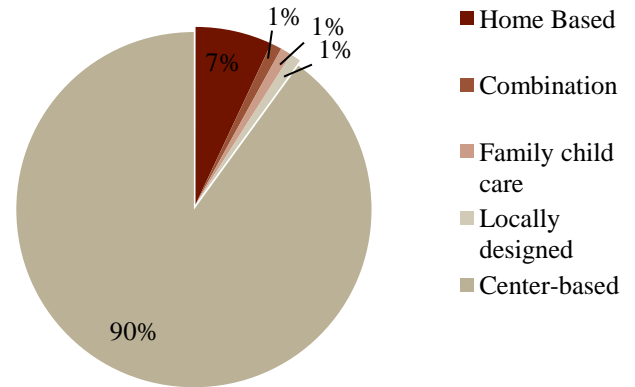
According to the PIR, funded enrollment in Head Start in 2010 was 961,284.⁶ Of the total funded slots, 943,449 were funded by the Administration for Children and Families (ACF) within HHS. Funding for the other 17,835 slots came from other sources, including other federal or state funding and private resources such as general state revenue, Child Care and Development Block Grant (CCDBG) funds, Temporary Assistance for Needy Families (TANF) funds, and support from foundations.⁷

Head Start services may be administered through several program options, including center-based programs, home-based services consisting of home visits and group socialization activities, combination programs that include center- and home-based services and locally designed programs created by the grantee and approved by the federal government.⁸

In 2010, 90 percent of Head start slots were in center-based programs (see figure 1). Just over half of center-based programs (54 percent) were full-day (as defined by Head Start)—operating at least six hours per day and five days per week. Seventeen percent were part-day, five-day-per-week-programs. Twenty-five percent of center-based programs operated four days per week, less than six hours per day, while 4 percent of programs operated four days per week, at least six hours per day (see Figure 2).

Figure 1

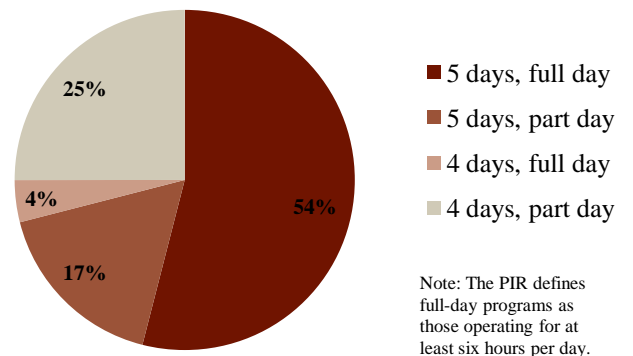
Head Start Funded Enrollment Slots by Program Type, Program Year 2009



Seven percent of the total funded slots provided services through the home-based program option. The remaining program options (family child care, combination and locally designed) accounted for 1 percent each of the residual funded slots.

Figure 2

Weekly Number of Days and Hours Children are served of Children Enrolled in Center Based Care, Program Year 2010



Note: The PIR defines full-day programs as those operating for at least six hours per day.

Head Start Participants

Head Start served over 60,000 more participants in 2010 than in 2009 and 25,000 more participants in

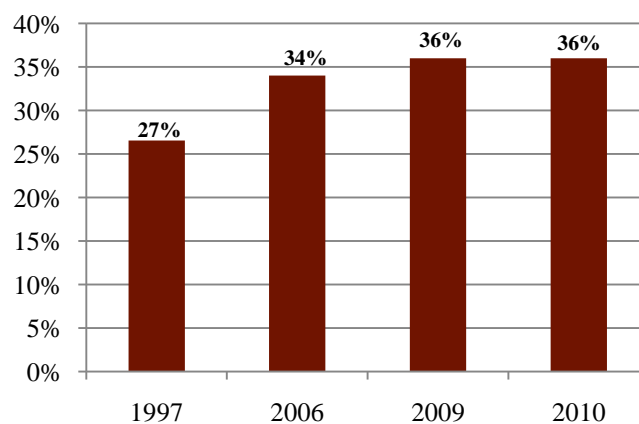
2010 than in 2006. The Head Start program has traditionally served preschool children between three and five years old, but also reaches a small, but growing, population of children birth to age 3 in the Early Head Start program and an even smaller population of children through Migrant Head Start programs.⁹ In 2010, of the 1,104,191 children who spent time in Head Start services,¹⁰ the majority of children (86 percent) were preschool age (3, 4, or 5 years old) with the remainder being infants and toddlers (birth through age two). Within Early Head Start, the age breakdown of children served was split almost evenly between infants (31 percent), 1-year-olds (33 percent), and 2-year-olds (32 percent). A smaller number of preschool children were served through the Early Head Start program. In addition to the children served through the program, 143,538 pregnant women were served.

As the result of the 2007 reauthorization, up to 35 percent of children served by a grantee can have an income between 100 and 130 percent of the federal poverty level if the grantee can demonstrate that children with income levels below the poverty level are already being served. In 2010, 3 percent of children were enrolled with an income between 100 and 130 percent of the poverty level. This is consistent with 2009.

As in previous years, the Head Start population remained diverse. In 2010, 40 percent of all participants were white, 29 percent were black or African American, 11 percent categorized themselves as “other,” 8 percent were biracial or multiracial, 4 percent were American Indian or Alaska Natives, 2 percent were Asian and 1 percent was Native Hawaiian or Pacific Islander. Regardless of race, 36 percent of all participants were Hispanic or Latino (See Figure 3 to see how the percent of Hispanic or Latino participants has changed over time).

Figure 3

Participants who are Hispanic or Latino, Program Years 1997, 2006, 2009 and 2010



Seventy percent of all participants spoke English as their primary language while 25 percent of participants spoke Spanish. Middle Eastern and South Asian, East Asian, European and Slavic and African languages were each the primary languages of 1 percent of participants. All other languages fell below one percent.¹¹

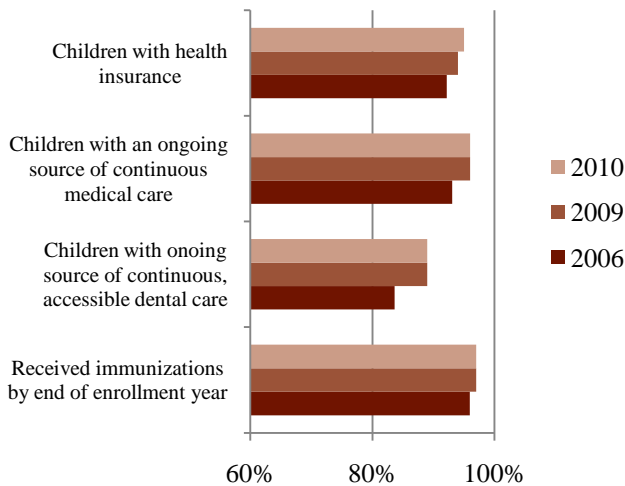
Head Start Program Performance Standards require that children are screened for developmental, sensory and behavioral concerns within 45 calendar days from enrollment and that programs work with their parents to arrange for any needed follow-up treatment.¹² In 2010, consistent with previous years, 90 percent of Head Start children received medical screenings, with 15 percent identified as needing treatment. This latter group declined substantially from earlier years (in 2006, 21 percent of children were identified as needing treatment), but the number increased 1 percent from 2009. Of those identified as needing treatment, 95 percent received follow-up medical treatment.¹³ Of the children who received treatment, 46 percent received treatment for asthma, 46 percent received treatment for being overweight, 21 percent received treatment for vision problems, 16

percent received treatment for anemia, and 11 percent for hearing difficulties.

In 2010, nearly all Head Start children had access to a continuous medical home as required by the Head Start Program Performance Standards.¹⁴ Ninety-six percent of Head Start children had an ongoing source of continuous medical care in 2010. Additionally, 89 percent of children had access to a continuous source of dental care in 2010 (See Figure 4 below for comparison between the 2010, 2009 and 2006 program years).

Figure 4

Access to Health Services Among Head Start Children, Program Years 2006, 2009, and 2010



In addition, 95 percent of all Head Start children were enrolled in a health insurance program at the end of the 2010 program year. Sixty-nine percent had insurance through Medicaid or the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) program, 10 percent had private insurance, 10 percent were enrolled in the combined Medicaid/CHIP program, 9 percent were insured through the Child Health Insurance Program (CHIP), 1 percent had state-only funded insurance and less

Figure 5

Head Start Disability Determination and Special Services, Program Year 2010

Children determined to have a disability	128,157
Percentage with a disability out of all Head Start Children	12%
Children who received special services, of those determined to have a disability	99%
Most significant disability that preschool-age children received services for:	
Speech or language impairments	60%
Non-categorical/Developmental Delay	31%
Autism	2%

*Disabilities that accounted for 1% or less were not included in this chart

than 1 percent categorized their insurance plan as “other.” Poor children in Head Start are more likely to have health insurance than other poor children. According to 2009 Census data, approximately 9.1 percent of all poor children under the age of 5 were uninsured. In 2010, only 5 percent of Head Start children were uninsured.¹⁵

In 2010, 12 percent of Head Start children were diagnosed as having a disability, and 99 percent of children who were diagnosed as having a disability received special services. This is same as the previous year, but up from 96 percent in 2006. Of the Head Start preschool-age children who received treatment, the most common treatment was for speech or language impairment (60 percent), followed by non-categorical/developmental delays (31 percent) (see Figure 5).

In addition to providing services to young children, Early Head Start provides comprehensive services to expectant families. Pregnant women made up 10 percent of the Early Head Start population. Twenty percent of women were identified as having medically “high-risk” pregnancies compared with 22 percent in the previous year. Upon enrollment,

pregnant women receive help in accessing specialized health services, including prenatal and postpartum health care and mental health interventions. In addition, the program provides prenatal education and information on breastfeeding (see Figure 6).

Figure 6

Pregnant Women Enrolled in Early Head Start, Program Year 2010

Enrollment of pregnant women in Early Head Start	13, 538
Pregnant women whose pregnancies were identified as medically "high-risk"	20%
Pregnant women with health insurance	91%
Health services received by pregnant women:	
Information on the benefits of breastfeeding	92%
Prenatal education and fetal development	92%
Prenatal and postpartum health care	88%
Mental health interventions	36%

Head Start Families

In 2010, 1,024,962 families participated in Head Start. Head Start families are primarily poor, working families with limited education. In 2010, 57 percent of Head Start families were headed by a single parent or caregiver. Sixty-five percent of Head Start families had one or both parents working compared with 85 percent the previous year. While more than half of single-parent families were working, the share not working was 47 percent in 2010, an increase of 3 percent from the previous year (see Figure 7). In two parent families, 59 percent of families included at least one employed parent.

In the majority of Head Start families (72 percent), neither parent had more than a high school degree or general equivalency degree (GED). This is

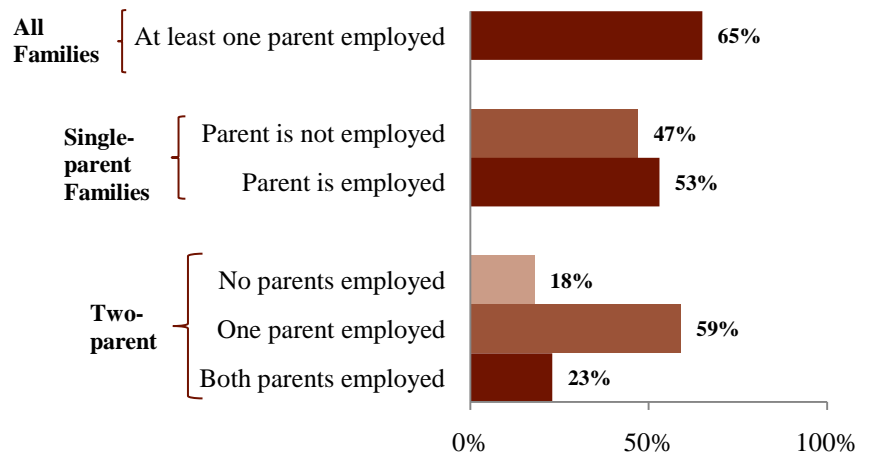
consistent with 2009. In 2010, the share of Head Start families with at least one parent in education or job training reached 14 percent, which is consistent with both 2006 and 2009.

Temporary Assistance for Needy Families (TANF) usage among Head Start families was 16 percent in 2010 (the same as 2009) and continued the downward trend for TANF participation among families. The number of families participating in the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) has increased slightly in recent years from 50 percent in 2006 to 55 percent in 2009 and to 57 percent in 2010. Additionally, the number of families receiving Supplemental Security Income in 2010 is up 1 percent to 7 percent (holding at 6 percent for the previous 5 years).

Head Start programs help children and families to access a variety of support services, either through direct provision or through referrals. Seventy-six percent of families received at least one support service in 2010. Fifty-one percent of Head Start families received parenting education, 49 percent received health education, 21 percent received

Figure 7

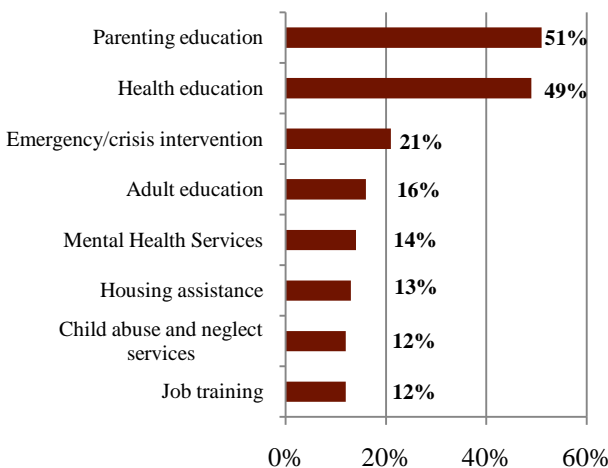
Parental Employment, Program Year 2010



emergency or crisis services, 16 percent received adult education services, 14 percent received mental health services, 13 percent received housing assistance, 12 percent received child abuse and neglect services, and 12 percent received job training. The rate at which families accessed these services is outlined in Figure 8. Services that were received less frequently (accessed by 10 percent of families or less) than those outlined in Figure 8 include: marriage education services, assistance to families of incarcerated individuals, child support assistance, domestic violence services, substance abuse prevention or treatment, and English as a Second Language (ESL) training.

Figure 8

Share of Services Accessed Most Often by Head Start Families, Program Year 2010

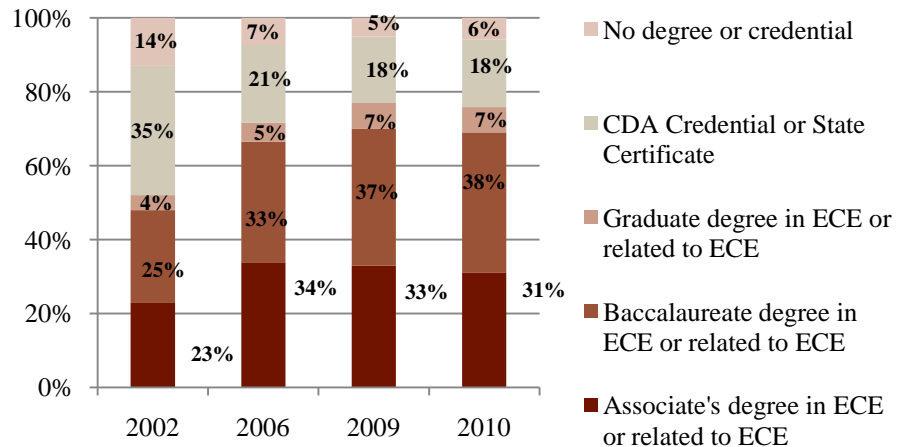


Head Start Staff

The Head Start Program Performance Standards emphasize the importance of a nurturing, responsive, and consistent caregiver to support healthy development in young children. All program staff

Figure 9

Qualifications of Head Start Teachers, Program Years 2002, 2006, 2009 and 2010



included in the adult to child ratio must have at least a Child Development Associate (CDA) credential.¹⁶ The number of Head Start teachers with degrees has increased rapidly in recent years.

In 2010, 76 percent of Head Start teachers had an associate degree or higher.¹⁷ In 2002, only 51 percent of teachers had an associate degree or higher, and in 2006, 72 percent of teachers had an associate degree or higher (see Figure 9). Forty-five percent of teachers had a bachelor's degree or higher in 2010. This is up 1 percent from 2009. Among teachers without a degree in 2010, many had a credential or were pursuing a degree program. Eighteen percent of teachers had only a CDA in 2010, and of those with a CDA, 39 percent were pursuing a degree. Among teachers without a degree or CDA, 69 percent were in a degree program or CDA training in 2010.

Head Start home visitors provide Head Start services to children and their families through the home-based program option. The qualifications of Head Start home visitors have held steady in the past few

years. In 2010, 62 percent of home visitors had an associate degree or higher, which is 1 percent higher than the previous year. Forty-one percent of home visitors (up 4 percent from 2009) had a bachelor’s degree or higher. Fourteen percent of home visitors had a CDA (down 4 percent from the previous year), and of those with a CDA, one-fourth were enrolled in a degree program.

Family child care providers served a small portion of the overall Head Start population in 2010, but are also increasing their qualifications. In 2010, 18 percent of family child care providers had an associate degree or higher. This is down 4 percent from 2009, but still much higher than 2008 when only 12 percent had an associate degree. Additionally, the number of family child care providers with a CDA increased in 2010 to 43 percent from the previous year’s 40 percent. Of the family child care providers with no degree or credential (39 percent, up 1 percent from 2009), 56 percent were enrolled in a degree or credential program.

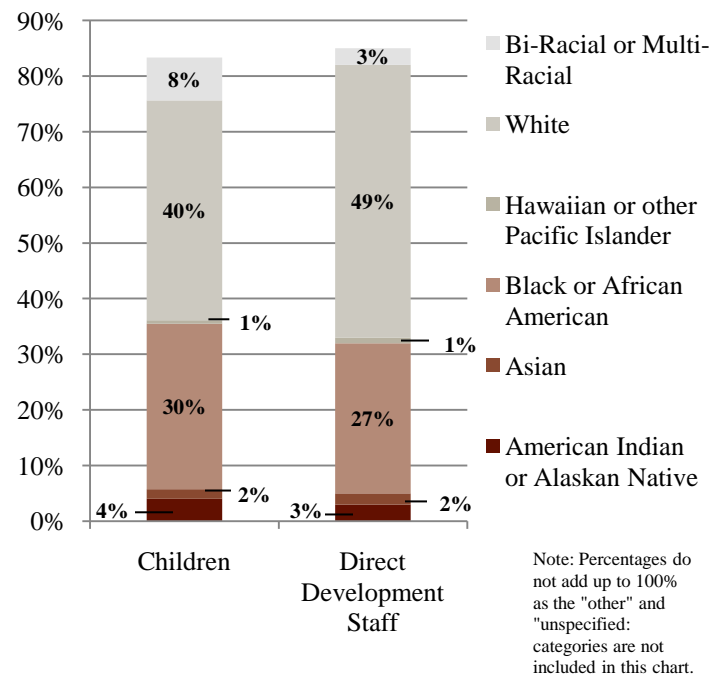
Salaries for Head Start teachers ranged from \$22,329 for a teacher with a CDA to \$35,194 for a teacher with a graduate degree, with an average for all teachers of \$27,880.¹⁸ This is considerably less than preschool teachers in elementary and secondary schools whose salaries averaged \$42,150 in 2010.¹⁹

Head Start Staff represent diverse racial and ethnic backgrounds. In 2010, 49 percent of child development staff were white, 27 percent were African American, 9 percent categorized themselves as “other,” 5 percent were unspecified, 3 percent were American Indian or Alaska Native, 3 percent were bi-racial or multi-racial, 2 percent were Asian and 1 percent were Native Hawaiian or other Pacific Islander.²⁰ Regardless of race, 28 percent of the Head Start child development staff identified as Hispanic or Latino. This is consistent with the previous year (see Figure 10 for a comparison of child development staff race to child race). Thirty

percent of child development staff were proficient in a language other than English. The PIR does not collect data on staff proficiency in specific languages.²¹

Figure 10

Race of Direct Child Development Staff and Head Start Children, Program Year 2010



Conclusion

As in past years, Head Start served a diverse group of children and families from primarily working families with limited formal education in 2010. Head Start provides critical supports to poor infants, toddlers, pregnant women, and their families.

In 2010, young children, pregnant women, and their families continued to receive comprehensive early childhood services through Head Start. Nearly all children diagnosed with a disability received treatment.

Additionally, a steady number of Head Start teachers had degrees in 2010 consistent with 2009, showing great progress on meeting the Head Start teacher qualification requirements, although salaries have not increased.

While the data in this brief demonstrate that Head Start programs are working hard to meet their promise, less than half of all eligible children in the U.S. are currently able to participate in these important programs.²² Additional funds are necessary to expand access to Head Start services for children in need.

¹ Danielle Ewen is a former staff member at CLASP. She is currently the Director of Early Childhood Education for the District of Columbia Public Schools.

² Danielle Ewen, "Head Start Reauthorization and other Federal Changes," 2008, <http://www.clasp.org/admin/site/publications/files/hs-reauth.pdf>.

³ Department of Health and Human Services, Head Start, *Early Head Start Programs to Receive Over \$2 Billion in Recovery Act Funding*, 2009, <http://www.hhs.gov/news/press/2009pres/04/20090402a.html>.

⁴ Hamm, *More Than Meets the Eye: Head Start Program Participants, Families and Staff in 2005*, 2006, <http://www.clasp.org/admin/site/publications/files/0311.pdf>.

⁵ Salary figure calculated by CLASP.

⁶ This figure differs from the level of federally funded enrollment reported in 2010 by the U.S. Department of Health and Human Services, which was 904,118 (Source: Office of Head Start).

⁷ Based on data reported by grantees through the PIR. This information has not been separately verified.

⁸ Head Start Regulations. 45 CFR 1306.32 - 45 CFR 1306.35.

⁹ This analysis includes Head Start Preschool, Early Head Start and Migrant and Seasonal head Start children and families.

¹⁰ The PIR collects data on all children who participated in the program at any point in the year, including those who do not complete the year; this figure is not simply the number of funded slots in the program.

¹¹ Note that language percentages add up to slightly over 100 percent when considering all languages due to rounding.

¹² Head Start Performance Standards, 45 CFR 1304.20(b)(1) and Head Start Performance Standards, 45 CFR 1304.20(a)(1)(iii) & (iv).

¹³ CLASP's calculations of the percentages of children who received medical screenings, dental exams, and immunizations or were referred to mental health specialists may slightly under-represent the percentage of children who received these services because there is no way to adjust the figures to exclude those children who dropped out of Head Start before the 45 calendar day requirement.

¹⁴ Head Start Performance Standards, 45 CFR 1304.20(a)(1)(i).

¹⁵ U.S. Census Bureau *People without Health Insurance Coverage by Selected Characteristics: 2008 and 2009*, 2010.

¹⁶ Head Start Program Performance Standards. 45 CFR 1304.52(f) and 45 CFR 1304.52(g)(4).

¹⁷ Head Start teachers are defined as the lead teacher or co-lead teacher in a center-based program. Additional staff categories include assistant teachers, home-based visitors, and family child care teachers. These staff members' qualifications are reported separately in the PIR from teacher qualifications.

¹⁸ Salary figure calculated by CLASP.

¹⁹ U.S. Department of Bureau and Labor Statistics. *May 2010 National Occupational Employment and Wage Estimates*, 2010, <http://www.bls.gov/oes/current/oes252011.htm>.

²⁰ Child development staff includes Early Head Start staff who work directly with children, including teachers, teacher assistances, family child care providers, and home visitors.

²¹ CLASP has recommended improvements to the PIR, including better data collection on the languages spoken by families and language proficiency of staff. See: Hannah Matthews and Deanna Jang, *The Challenges of Change: Learning from the Child Care and Early Education Experiences of Immigrant Families*, 2007.

²² National Women's Law Center. *House Budget Would Make Deep Cuts in Head Start and Child Care*, 2001.