

Early Head Start Participants, Programs, Families, and Staff in 2016

Introduction

In 1965, the federal Head Start program was established to provide comprehensive early education and support services to low-income children aged 3 and 4 and their families. In 1994, the U.S. Department of Health and Human Services launched Early Head Start (EHS), which provides comprehensive support to low-income pregnant women and children under 3. Both programs provide services focused on the “whole child,” including early education addressing cognitive, developmental, and socio-emotional needs; medical and dental screenings and referrals; nutrition services; parental involvement activities; referrals to social service providers for the entire family; and mental health services.

This fact sheet references data from the annual Program Information Report (PIR). The PIR collects data on all children and pregnant women who participate in a Head Start program, including EHS, at any point during the program year. We’ve used these data to describe the children and families served by EHS, and the services provided to them, during 2015-2016.¹

In 2016, EHS spending in totaled \$1.6 billion.² The program served 195,673 children under age 3 and 15,094 pregnant women through 1,414 grantees/delegates across the country.³

Despite the critical importance of EHS services for America’s poor children and families, only 7 percent of eligible children were served in 2016.⁴

Key Findings

Head Start PIR data provide a critical look at the array of services Early Head Start delivers to America’s most vulnerable children. Our review of 2016 PIR data produced these important findings:

- **Public nutrition programs support Early Head Start children and pregnant women’s nutritional needs.** The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) provided benefits to 63 percent of EHS families. In addition, 49 percent of Head Start families received benefits from the Supplemental Nutrition Assistance Program (SNAP).
- **Early Head Start serves a diverse group of children and families.** Eighteen percent of EHS participants were white, Hispanic; 26 percent were white, non-Hispanic; 1 percent were Black, Hispanic; 27 percent were Black, non-Hispanic. Twenty-one percent of all EHS participants were from homes where Spanish was the primary language spoken by the family.⁵
- **Early Head Start employs diverse staff.** Twenty-seven percent of non-supervisory staff were Black, non-Hispanic; 2 percent were black, Hispanic; 35 percent were white, non-Hispanic; 15 percent were white, Hispanic; 4 percent were biracial/multi-racial, Hispanic; 3 percent were American Indian or Alaska Native, non-Hispanic; and 2 percent were Asian, non-Hispanic.



Detailed findings from the 2016 PIR on Early Head Start include:

Participants

- Seventy-six percent of EHS children were up to date on a schedule of age-appropriate preventive and primary health care, according to the relevant states Early and Periodic Screening, Diagnostic and Treatment (EPSDT) schedule for well child care. Among them, 8 percent were diagnosed by a health care professional with a chronic condition needing medical treatment during the EHS year. Of those children, nearly all (93 percent) have received or are receiving medical treatment.
- By the end of the program year, 95 percent of children had a medical home, which serves as an ongoing source of continuous, accessible health care. Seventy-five percent had a source for ongoing dental care. Twelve percent of enrolled children had a disability. Among them, 64 percent were diagnosed prior to EHS enrollment.
- Ninety-three percent of pregnant women received prenatal health care, while 72 percent received postnatal health care. Additionally, 92 percent of pregnant women had health insurance at the end of the program year. Thirty-six percent received a dental examination. And 30 percent accessed mental health interventions.
- Twenty six percent of children were white, non-Hispanic, 18 percent were white, Hispanic; 27 percent were Black, non-Hispanic; 1 percent were Black, Hispanic; 3 percent were American Indian or Alaska Native, non-Hispanic; 2 percent were Asian,

non-Hispanic; 5 percent were biracial/multiracial, Hispanic; 5 percent were biracial/multiracial, non-Hispanic; 7 percent were other, Hispanic; and 3 percent were unspecified, Hispanic. Remaining racial categories comprised less than 1 percent of participants.

- The age breakdown for EHS children was relatively even: 30 percent of children were under age 1; 33 percent were age 1; and 34 percent were age 2.⁶
- EHS served a linguistically diverse group of participants. More than one-quarter (26 percent) of participants were from homes where English was not the primary language. Twenty-one percent of all participants were from homes where Spanish was the primary language spoken by the family. And 5 percent were from homes where a language other than English or Spanish was primary.

Programs

- About half (56 percent) of EHS slots for children were center-based. Thirty-seven percent of slots were in home-based programs, which included weekly home visits and group socialization programs. EHS children also received services in combination programs (2 percent), family child care settings (4 percent), and locally designed programs (1 percent).
- EHS funding provided for 151,689 EHS slots. The federal government funded 149,959 slots (through two sources: the Administration for Children and Families and the Maternal Infant and Early Childhood Home Visiting program). States and other sources funded 1,730 slots.⁷

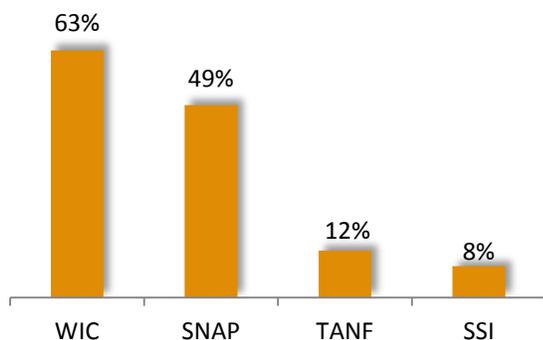
Families

- Among EHS families, 66 percent had at least one working parent. Twenty-three percent had at least one parent in school or job training.
- Seventy-five percent of families accessed at least one support service. Parenting education (59 percent) and health education (50 percent) were the most frequently used services. Other frequently accessed services

included emergency and crisis intervention, adult education, and mental health services.

- Sixty-three percent of families received WIC benefits and 49 percent received SNAP benefits. Twelve percent received cash assistance under the Temporary Assistance for Needy Families (TANF) program and 8 percent received Supplemental Security Income (SSI). Additionally, 15 percent of EHS children received a child care subsidy.

Share of Early Head Start Families Accessing Public Benefits, 2016



Staff

- Among non-supervisory EHS child development staff, 27 percent were Black, non-Hispanic; 2 percent were Black, Hispanic; 35 percent were white, non-Hispanic; 15 percent were white, Hispanic; 4 percent were biracial/multi-racial, Hispanic; 3 percent were American Indian or Alaska Native, non-Hispanic; and 2 percent were Asian, non-Hispanic. The remaining racial categories comprised roughly 1 percent of EHS staff.
- Twenty-seven percent were proficient in a language other than English, with Spanish being the highest. Twenty-three percent were proficient in Spanish.
- More than half (51 percent) of EHS teachers and 75 percent of EHS home visitors had at least an associate's degree in early childhood education or a related field. Twenty-five percent of teachers and 55 percent of home visitors had a bachelor's

degree or higher in early childhood education or a related field.

- EHS teachers earned an average of \$26,726, while EHS home visitors earned an average of \$32,251. By comparison, Head Start preschool teachers earned an average of \$32,341.

Endnotes

¹ For more information on the Head Start preschool program, see CLASP's fact sheet, *Head Start Participants, Programs, Families, and Staff in 2016 and Migrant and Seasonal Head Start Participants, Programs, Families, and Staff in 2016*. This analysis includes Early Head Start and AIAN Early Head Start participants and programs.

² The 2016 federal appropriation for Head Start was \$9.17 billion, of which approximately \$1.6 billion funded Early Head Start services. An additional \$635 million funded Early Head Start-child care partnerships.

https://www.acf.hhs.gov/sites/default/files/olab/acf_m aster_cj_508_comp may_21_2017.pdf

³ Inclusive of children served in Early Head Start Partnerships

⁴ National Women's Law Center calculations for Early Head Start based on data on Early Head Start funded slots in FY 2016 from Fiscal Year 2018 Administration for Children and Families Justification of Estimates for Appropriations Committees, 77, available at https://www.acf.hhs.gov/sites/default/files/olab/acf_m aster_cj_508_comp may_21_2017.pdf; and data on the number of children under age three in poverty from U.S. Census Bureau, Current Population Survey, 2017 Annual Social and Economic Supplement, Detailed Poverty Tables, POV₃₄. Single Year of Age-Poverty Status: 2016, available at <https://www.census.gov/data/tables/time-series/demo/income-poverty/cps-pov/pov-34.html>

⁵ Children referred to as Hispanic in this brief are categorized as Hispanic/Latino in PIR data.

⁶ The total does not add up to 100% due to rounding and a small enrollment of children who are 3 years old.

⁷ For information on state-funded Early Head Start initiatives, see *Expanding Access to Early Head Start: State Initiatives for At-Risk Infants and Toddlers*