Giving Head Start a Fresh Start

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From its earliest days, Head Start has been an extremely popular program because it is based on a simple idea that makes great intuitive sense: A child’s early learning experiences are the basis of later development and, given the connections between poverty and low academic achievement, a compensatory preschool program should help disadvantaged children catch up with more fortunate children.

Who could be against a relatively low-cost, voluntary program that children and parents seem to love? Especially if evaluations show that it “works”? But the attractiveness of Head Start’s underlying concept should not make it immune from constructive criticism. Given the results of recent evaluations, the program’s continued defensiveness has become counterproductive. Head Start cannot be improved without an honest appreciation of its weaknesses (as well as strengths) followed by real reform.

The original Head Start model consisted of a few hours a day of center-based education during the summer before kindergarten. After its first summer of operation, relatively informal evaluations suggested that Head Start raised the IQs of poor children. In the face of so many other programmatic disappointments, the Johnson administration latched onto these early findings. For example, in a September 1968 Rose Garden speech highlighting the “success” of Head Start, President Lyndon B. Johnson said “Project Head Start, which only began in 1965, has actually already raised the IQ of hundreds of thousands of children in this country.” And Sargent Shriver, who headed the War on Poverty, testified before Congress that Head Start “has had great impact on children—in terms of raising IQs, as much as 8 to 10 IQ points in a six-week period.”

No wonder that Head Start quickly expanded to every state and almost every congressional district. This early emphasis on improved IQ scores, however, proved to be a doubled-edged sword. In 1969, the results of the first rigorous evaluation of the national Head Start program were released. Echoing the findings of many future evaluations, this Office of Economic Opportunity-commissioned (OEO) study conducted by the Westinghouse Learning Corporation and Ohio University concluded that Head Start children made relatively small cognitive gains that quickly “faded out.” (This was, to program advocates, the notorious “Westinghouse Study.”) In the words of the report: “The research staff for this project failed to find any evidence in the published literature or in prior research that compensatory intervention efforts had produced meaningful differences on any significant scale or over an extended period of time.”

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As a result, support for the program waned, and there followed a period of uncertainty about Head Start’s future. Because the Westinghouse Study found that the academic-year version of the program had some measurable effects, the summer program was phased out and Head Start took on its current shape: four to seven hours a day from early September to mid-June.

By the early 1970s, Head Start advocates had regrouped. Ignoring the negative Westinghouse findings, they pointed to the apparent successes of other early childhood education programs, especially the Perry Preschool Project, and, later, the Abecedarian Project. And, indeed, the public’s impression that Head Start works stems largely from the widely trumpeted results of these two small and richly funded experimental programs from thirty and forty years ago. Some advocates describe these programs as “Head Start-like,” but that is an exaggeration: They cost as much as $15,000 a year in today’s dollars (50 percent more than Head Start), often involved multiple years of services, had well-trained teachers, and instructed parents on effective child rearing. These programs are more accurately seen as hothouse programs that, in total, served fewer than 200 children. Significantly, they tended to serve low-IQ children or children with low-IQ parents.

Most careful evaluations of actual Head Start programs are much less rosy. They have repeatedly shown either small effects or effects that, like those in the 1969 Westinghouse Study, fade out within a few years. No scientifically rigorous study has ever found that Head Start itself has a meaningful and lasting impact on disadvantaged young people. Upon reflection, this should not come as any surprise, given the large cognitive and social deficits that Head Start children evidence even after being in the program for two years (unless one thinks these children would be much worse off without Head Start).

After reviewing the full body of this research, a 1997 U.S. Government Accountability Office (GAO) report concluded that there was “insufficient” research to determine Head Start’s impact. “The body of research on current Head Start is insufficient to draw conclusions about the impact of the national program.” The GAO added: “Until sound impact studies are conducted on the current Head Start program, fundamental questions about program quality will remain.”

The Head Start Impact Study

Responding to the GAO report, in 1998, Congress required the U.S. Department of Health and Human Services to conduct another national evaluation of Head Start. To its credit, the Clinton Administration took this mandate seriously and initiated a 383-site, randomized

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experiment (the gold-standard of evaluation) involving about 4,600 children. (In fact, throughout his presidency, Clinton and his appointees were strongly supportive of efforts to improve Head Start, even to the point of defunding especially mismanaged local programs.)

Sadly, the first-year findings from this Head Start Impact Study,⁶ released in June 2005, showed little meaningful impact on disadvantaged children.

For four-year-olds (half the program), statistically significant gains were detected in only six of thirty measures of social and cognitive development and family functioning (itself a statistically suspect result). Of these six measures, only three measures—the Woodcock Johnson Letter-Word Identification test, the Spelling test and the Letter Naming Task—directly test cognitive skills and show a slight improvement in one of three major predictors of later reading ability (letter identification). Head Start four-year-olds were able to name about two more letters than their non-Head Start counterparts, but they did not show any significant gains on much more important measures such as early math learning, vocabulary, oral comprehension (more indicative of later reading comprehension), motivation to learn, or social competencies, including the ability to interact with peers and teachers.

Results were somewhat better for three-year-olds, with statistically significant gains on fourteen out of thirty measures; however, the measures that showed the most improvement tended to be superficial as well. Head Start three-year-olds were able to identify one and a half more letters and they showed a small, statistically significant gain in vocabulary. However, they came only 8 percent closer to the national norm in vocabulary tests—a very small relative gain—and showed no improvement in oral comprehension, phonological awareness, or early math skills.

For both age groups, the actual gains were in limited areas and disappointingly small. Some commentators have expressed the hope that these effects will lead to later increases in school achievement; however, based on past research, it does not seem likely that they will do so. As Jean Layzer of Abt Associates points out, vocabulary and oral comprehension skills tend to be more indicative of later reading comprehension than the small increase in letter recognition.⁷

These weak impacts come as a tremendous disappointment. They simply don’t do enough to close the achievement gap between poor children (particularly minority children) and the

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general population.\textsuperscript{8} And the absence of better short-term results is alarming, for it suggests that the quality of Head Start programs has deteriorated. In the past, the story of Head Start’s impact was always one of fade out. But the Impact Study indicates that there are now few initial impacts to fade out. We should expect more of a program that spends about $9,980 a year on each child.\textsuperscript{9}

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\textsuperscript{8}U.S. Department of Health and Human Services, Administration for Children and Families, “HHS Releases Head Start Impact Study,” \textit{HHS News}, June 9, 2005, http://www.acf.hhs.gov/news/press/2005/headstart_study.htm (accessed May 22, 2006). In this statement concerning the study’s findings, HHS said that despite the gains shown in several areas, the Head Start programs “did not close the gap” between poor children and the general population. “The study found that Head Start produced small to moderate impacts in areas such as pre-reading, pre-writing, vocabulary and in health and parent practice domains. However these impacts did not close the gap between low-income children in the Head Start program and the general population of three- and four-year olds. There were no significant impacts for three- and four-year olds in areas of early mathematics, oral comprehension and social competencies.”

\textsuperscript{9}The Head Start Bureau reports an annual per child cost of $7,222. However, that figure (1) does not include all funds allocated to or spent by the program, (2) ignores the cost differences between part-day and full-day, center-based and home-based care, as well as between Early Head Start and regular Head Start.

Total Head Start spending: For the 2003/2004 program year, total Head Start expenditures (including support activities not counted by the Bureau when calculating annual per child costs) were $6.774 billion ($6.074 billion excluding Early Head Start costs). In addition, the Head Start Act requires that grantees provide an additional 20 percent to annual spending, which brings total spending to $8.129 billion ($7.289 excluding Early Head Start costs). The children in center-based Head Start also receive an additional subsidy through the Child and Adult Care Food Program (CACFP) of about $1,106. This brings the total spent on Head Start to $9.015 billion (8.175 billion excluding Early Head Start costs). In addition, various medical and other services are provided that are not quantified. We make no adjustments to our costs for these additional expenditures.

Cost differences for part-day and full-day, center-based and home-based care, as well as between Early Head Start and regular Head Start: Head Start data do not identify the different costs for these types of care, but it is possible to estimate them by deriving hourly costs for each. First, we assume that hourly costs are the same for part-day and full-day care, and are 25 percent lower for home-based care compared to center-based care. We then derive an approximate hourly cost by taking estimated expenditures for part-day and full-day care (derived from the portion of spending on children in each, 29 percent and 71 percent, respectively) and dividing them by their respective durations (four hours and seven hours for 156 and 197 days, respectively, multiplied by the number of children for each category). After adjusting for the cost difference between center-based and home-based care, this results in annual per child costs of $6,081 for part-day and $13,438 for full-day center-based care. The respective figures for home-based care are $3,731 and $9,249. For Early Head Start, which is about seven hours a day, we simply divide total expenditures ($677 million) by the number of children in the program (52,487) without including the pregnant mothers (5,896). The result is a 2004 estimated per child cost for Early Head Start of $12,899.

By applying these per child annual costs, we find a weighted average per Head Start child of $10,156 ($9,980 for part-day and full-day children), compared to the Head Start Bureau’s estimate of $7,222.


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Instead of acknowledging the troubling significance of these findings, the Head Start establishment and its allies immediately went on the offensive—perhaps because the reported impacts imply that the program needs a major overhaul that would threaten vested interests. The Head Start Association, for example, claimed that the study is “good news for Head Start” and warned that “those who have resolved to trash Head Start at every turn will twist this data to their ends” as part of their “continued attempts to dismantle the program.”\(^\text{10}\)

Whatever might be the motivations of the enemies of Head Start, many friends of low-income children find these results heartbreaking. Civilrights.org is a collaboration between the Leadership Conference on Civil Rights, the Leadership Conference on Civil Rights Education Fund, and 180 allied organizations. The best it could say about the study was that Head Start has a “modest impact.”\(^\text{11}\)

Sadly, the Head Start establishment’s stonewalling seems to be working. Even responsible critics have been cowed into silence, or at least relegated to private muttering on the sidelines. As a result, instead of galvanizing action to improve the program, this most recent study will likely be ignored.

The same thing happened in 2001 when the equally heartbreaking results of the evaluation of Early Head Start were released. Started in 1995, Early Head Start is a two-generation program intended to enhance children’s development and help parents to educate their
young children. In 2004, it served about 62,000 children in about 1,300 centers, at a cost of about $10,500 per child. The program’s total annual cost was about $677 million.

The evaluation of Early Head Start, involving about 3,000 families, was also based on a rigorous random assignment design. Unfortunately, the effect sizes for virtually all important outcomes fell below levels that have traditionally been considered educationally meaningful. For instance, at age three, Early Head Start children achieved a statistically significant, but small, two point gain on the Bayley MDI, a standardized assessment of infant and toddler cognitive development (91.4 vs. 89.9 for control group children). In addition, a smaller percentage of Early Head Start children fell in the “at-risk” range of developmental functioning on the Bayley MDI (27.3 percent compared to 32.0 percent for the control group) (only statistically significant at the 10 percent level). But these impacts are small, with the effect sizes just 0.12 and -0.10.

The HHS evaluation contractor’s report was carefully worded to avoid claiming large gains while still making the program seem a success: “The Early Head Start research programs stimulated better outcomes along a range of dimensions (with children, parents, and home environments) by the time children’s eligibility ended at age 3.” A press release about these findings issued by then Secretary of HHS, Donna Shalala, was not as careful. It was titled: “Early Head Start Shows Significant Results for Low Income Children and Parents.”

Both were misleading overstatements, but the tactic worked. There was no public dissent from this unjustifiably rosy interpretation of the findings—either from within the early childhood education community or even from more skeptical conservative observers. (After five years in office, the Bush administration has done little to provide a more realistic understanding of these disappointing findings.)

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So, don’t count on the politicians to do much on their own to improve Head Start. Republicans, worn down by years of battling, are reluctant to raise Head Start’s problems, for fear that Democrats and liberal advocates will paint them, yet again, as being against poor children. And Democrats are afraid that honesty about Head Start’s weaknesses will sharpen the knives of conservative budget cutters. In fact, even after the release of the Impact Study results, the relevant committees in both Houses of Congress voted unanimously to expand eligibility for Head Start. The Senate bill would raise the income-eligibility cap from the poverty line to 130 percent of poverty (a roughly 35 percent increase in eligible children), and the House bill would allow programs to enroll more one- and two-year-olds, rather than their traditional target group of three and four-year-olds (ultimately doubling the number of eligible children). At this writing, no final action has been taken, but it appears likely that the Senate will adopt the House provision.

Not what parents want

No single evaluation, of course, should decide the fate of an important program like Head Start, but this new study reinforces a developing professional consensus about Head Start’s limitations. Many liberal foundations have already shifted their support away from Head Start and toward the expansion of preschool or prekindergarten (“preK”) services—which siphon off hundreds of thousands of children from Head Start programs. Many states have likewise begun funding expanded prekindergarten programs, again at Head Start’s expense.


To compensate for this drop-off in the proportional enrollment of four-year-olds, Head Start grantees are signing up more three-year-olds and encouraging them to stay in the program for a second year. Between 1997 and 2004, the number of three-year-olds in the program increased by 38 percent, and their proportion of total enrollment increased from 30 percent to 34 percent.\footnote{U.S. Department of Health and Human Services, Head Start Bureau, “Head Start Program Information Report for the 1999–2000 Program Year” (Washington, DC: U.S. Department of Health and Human Services, undated); and U.S. Department of Health and Human Services, Head Start Bureau, “Head Start Program Information Report for the 2003–2004 Program Year” (Washington, DC: U.S. Department of Health and Human Services, undated).} HHS strongly encourages grantees to serve four-year-olds before serving other age
groups. So, these age allocations, largely in the control of local grantees (except for Early Head Start), presumably reflect local needs and preferences.

This explains, by the way, why Head Start allies have pushed for an expansion of eligibility even in the absence of more funding. The program has essentially run out of eligible four-year-olds to enroll. There has already been a notable loosening in the application of income-eligibility rules. By our calculation, about a quarter of the children in Head Start would not be income eligible if their income were measured at the time of enrollment or reenrollment.

A major reason for this shift away from Head Start is the increase in the employment, especially full-time employment, of low-income mothers. When Head Start was first conceptualized in the 1960s, few low-income mothers (for that matter, few mothers in general) were in the paid labor force. So Head Start’s part-time, part-year program was not an obstacle to participation. Since then, and especially after welfare reform, many more low-income mothers are working. Between 1996 and 2001, for example, the percentage of never-married mothers working full time rose from 36 percent to 52 percent. In almost all places, though, Head Start remains a part-time, part-year program, with half-day classes usually beginning in September and ending in mid-June.

The Head Start Bureau has actively encouraged grantees to provide more assistance for working parents, including targeted expansions for full-day programs and collaborations with child care agencies. It has had real, but limited success. Some Head Start grantees have responded to the needs of working mothers by obtaining additional funding for “wrap-around”

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child care services. But only about half of the Head Start children whose parents say that they “need” full-time/full-year care obtained it from Head Start in 2003/2004.\(^{23}\) Hence, the other half of mothers who work full-time and use Head Start must find some other child care for the rest of the day and the summer. About 230,000 mothers do just that.\(^ {24}\)

The issue runs deeper, however. The evidence suggests that some parents simply do not want to use Head Start. Most income-eligible mothers who work full-time do not use Head Start, even though that means that they must spend more on child care (because of an often substantial copayment)\(^ {25}\)—over 200,000 children in 2001. Or, instead, they rely on relatives to care for their children (another 200,000 plus children in 2001).\(^ {26}\)

Even many mothers who do not work, or who only work part-time and thus could use Head Start as a form of child care while they work, use relative care. In fact, we are told by a number of directors of local agencies that, when offered free Head Start in the summer, many parents who used Head Start during the school year prefer to leave their children home with older siblings.

\(^{23}\)U.S. Department of Health and Human Services, Head Start Bureau, “Head Start Program Information Report for the 2003–2004 Program Year” (Washington, DC: U.S. Department of Health and Human Services, undated). This is up from 41 percent in 1998/1999, although we have some questions about the accuracy of these data.


\(^{25}\)Even though child care for low-income families is subsidized, most states require copayments that can be substantial, even for families under the poverty line. As of FY 2000, many states imposed copayments for poor families as high as 10 percent of family income [U.S. Department of Health and Human Services, Administration for Children and Families, National Child Care Information Center, “Sliding Fee Scale,” Part III, Section 3.5 in Child Care and Development Fund Report of State Plans for the Period of 10/01/99 to 9/30/01 (Washington, DC: U.S. Department of Health and Human Services, 2002), http://www.nccic.org/pubs/CCDFStat.pdf (accessed June 30, 2005), stating: “Co-payments are typically based on a percentage of family income, a percentage of the price of the child care, or a percentage of the State reimbursement rate.” Thirty-eight states set copayments on a percentage of the family income, often as much as 10 percent; five states set them as a percentage of the price of the child care; six states set them as a percentage of the state reimbursement rate; and one state allows but does not require counties to set copayments at between 9 and 15 percent of the family’s gross income, with the average, in FY 2001, being about 3.4 percent of family income. For a family of three (a mother and two children at the poverty line ($14,128) that would be a copayment of about $480 per year.] [Craig Turner, Director of Program Management, Head Start Bureau, U.S. Department of Health and Human Services, e-mail message to Douglas Besharov, June 22, 2005, stating: “In FFY 2001, the average co-payment as a percentage of income for families with incomes below the poverty line was 3.4%. In FFY 2002, it was 3.6% and in FFY 2003 3.8%.” (These average payments include families with zero copayment.]\)

Lastly, the new prekindergarten programs for low-income children established in many communities also seem to be syphoning off large numbers of children.\textsuperscript{27} Between 1990 and 2001, for example, the enrollment in public prekindergarten, which primarily serves low-income children, nearly tripled, increasing from about 300,000 to 800,000 children. This included, in 2001, about 111,000 Head Start-eligible four-year-olds, already about a quarter of the number in Head Start—and, coincidentally, about the number of additional three-year-olds added to Head Start. In 2005, for example, the Milwaukee Journal-Sentinel reported that competition from other early childhood programs had caused under-enrollment in some local Head Start programs.\textsuperscript{28} In order to increase Head Start enrollment among eligible three- and four-year-olds, school board members there have considered converting several prekindergarten classrooms to Head Start classrooms.

Why the apparent preference for prekindergarten programs? Perhaps parents find them more attractive than Head Start because of their seeming universality. Although most preK programs are directed to low-income children, they generally serve children from families with incomes as high as 185 percent of the poverty line.\textsuperscript{29} Or perhaps it is because parents deem preK programs to be superior, especially since they are usually in school buildings and staffed by more highly educated teachers.

Some of the parents not using Head Start are undoubtedly making such choices involuntarily—because the Head Start program in their community has no vacancies or there are other barriers to enrollment. The weight of the evidence, however, indicates that this is not the predominant explanation. The lack of vacancies or other barriers would not explain the aggregate decline in the enrollment of four-year-olds unless these problems were worsening over time. Even that, however, would not be consistent with the growing enrollment of three-year-olds.

\textbf{Past proposals}

Despite Congressional inaction, Head Start stands at a crossroads. The easiest course would be for the program to continue without modification and without responding to the major social and programmatic changes engulfing it. That would mean a continuing loss of four-year-

\textsuperscript{27}U.S. General Accounting Office, \textit{Head Start: Better Data and Processes Needed to Monitor Underenrollment}, GAO-04-17 (Washington, DC: General Accounting Office, 2003), http://www.gao.gov/new.items/d0417.pdf (accessed April 3, 2005), stating: “Regional and grantee officials often indicated that competition from other early education or child care centers serving low-income preschool children contributed to Head Start underenrollment. . . . A large underenrolled grantee on the East Coast said that availability of prekindergarten programs at public and charter schools is the most important reason its delegate agencies are underenrolled.”

\textsuperscript{28}Sarah Carr, “Head Start may need new direction,” \textit{Milwaukee Journal-Sentinel}, February 6, 2005.

olds and an increase in the number of younger children in the program—with no substantial impact on their cognitive and emotional development.

The wisdom (and practical implications) of this shift in the program’s primary target age on the organization of programs and their curricula should be carefully considered before grantee practices and expectations become too set to be changed. Other options that would meet the pressing needs of low-income children should also be considered before politically powerful vested interests are created.

Wishful thinking about Head Start’s impact will not improve the life chances of disadvantaged children. A fundamental restructuring of the program is needed.

Some observers believe that Head Start should be expanded to meet the needs of working mothers, so that it would become a full-time, full-year program. Bill Clinton proposed something along these lines when he was first elected president. But his plan stalled because of Head Start’s high cost compared to other forms of child care; the substantial operational and administrative challenges in shifting facilities that are used for two Head Start sessions (morning and afternoon) or by other programs into full-time schedules; and, ironically, opposition from the Head Start community itself. (Much of the Head Start staff preferred to work only part-time and not in the summer.) Moreover, even this would be only a partial remedy for low-income, working mothers. Approximately 60 percent of low-income, working mothers have irregular hours and, thus, need child care at night and on weekends.\(^{30}\)

Whatever were the merits of the original Clinton proposal, Head Start’s cost structure is now an even greater obstacle to going full-time. After fifteen years of cost increases mandated by Congress (at the behest of Head Start advocates),\(^{31}\) the average cost of a year of full-time Head


\(^{31}\)The primary explanation for the increase in per child costs seems to be the growth in money spent on quality improvements. In 1991, 10 percent of the total Head Start appropriations were set-aside for quality improvement activities. Beginning in 1992, the set-aside was modified to include 25 percent of all new funds. Half of these “quality monies” are to be used to raise the salaries of classroom teachers and other staff, for the putative purpose of helping programs recruit and retain quality staff. Quality improvement funds can also be spent on providing transportation, improving facilities, and expanding staff training and development.

In 1999, the set-aside was increased to 60 percent, with the percent then declining to 50 percent in FY 2000, 47.5 percent in FY 2001, and back again to 25 percent in FY 2003. In FY 2001, quality improvement funding peaked at about $356 million. Due to a slower growth in Head Start appropriations since then and a drop in the percent required to be spent on such activities, quality improvement funding dropped to about $32 million in FY 2003. See *Human Services Reauthorization Act*, U.S. Code 42 (1998) § 9801, section 6403 (A), http://frwebgate.access.gpo.gov/cgi-bin/getdoc.cgi?dbname=105_cong_public_laws&docid=f:publ285.105.pdf
Start ($20,259 in 2004\textsuperscript{32}) is about four times the cost of center-based child care (about $5,242 in the 2001, the last year with data\textsuperscript{33}). Of course, Head Start supporters argue that the greater costs are because of greater quality. But the results of the Head Start Impact Study contradict their claims.

Furthermore, expanding Head Start in this way is no longer practical because the growth in government-subsidized child care (largely stemming from federal welfare reform legislation) means that Head Start is no longer the predominant form of child care for low-income families. In the 1980s and early 1990s, Head Start was by far the largest early childhood program, amounting to nearly half of total spending in some years.\textsuperscript{34} By 1999, however, Head Start accounted for only about a third of all federal and state child care spending.\textsuperscript{35} Moreover, because of federal legislation passed in 1990, the child care world is now a vouchers-based system that accords parents at least some measure of choice about what provider to use. (At the same time, Head Start, not facing a similar market test, has become an even more defensive, entrenched interest, with federal refunding all but guaranteed year after year.)

Responding to these changing realities, in 2003, President George W. Bush proposed a different approach to integrating Head Start into the wider world of child care. He wanted to give qualifying states control over Head Start funds. Opposition forced the House Republicans to limit the proposal to an eight-state demonstration program and to impose relatively stringent protections for turning the program over to a particular state. (According to the Congressional

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\item[	extsuperscript{32}]To estimate an annual cost for full-time/full-year Head Start, we assume eight hours of care for five days a week for 52 weeks a year. Applying the per hour cost of $9.74 derived above, this comes to $20,259 per year per child. [Authors’ calculation based on data from: U.S. Department of Health and Human Services, Head Start Bureau, “Head Start Program Information Report for the 2003–2004 Program Year.”]

\item[	extsuperscript{33}]For 2001, the most recent year for which we have data, combining CCDF provider payments, administrative costs, Child and Adult Care Food Program subsidies, and parental copayments, results in an hourly cost of $2.36 ($2.52 in 2004 dollars). Assuming full-time, full-year care is eight hours per day, forty hours per week, fifty-two weeks per year, results in a per year per child cost of $4,915 ($5,242 in 2004 dollars). We have no reason to think this cost substantially increased in three years. [Authors’ calculation based on: University of Maryland, Welfare Reform Academy, “Early Education and Child Care (ee/cc) Model,” 2006.]

\item[	extsuperscript{34}]Douglas J. Besharov and Caeli A. Higney, Federal and State Child Care Expenditures (1997–2003): Rapid Growth Followed by Steady Spending (College Park, MD: Welfare Reform Academy, August 2005). This figure includes funds from the Child Care and Development Fund, Head Start, Temporary Assistance for Needy Families, the Child and Adult Care Food Program, and the Social Services Block Grant.

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Research Service, to gain control over Head Start programming, a state was required to have “an existing state-supported system of public pre-kindergarten; standards for school readiness that are aligned with state kindergarten through twelfth grade; prior year state and local spending at a level of at least 50% of the federal Head Start funds to be allocated to the state; and an established ‘means’ for interagency coordination and collaboration. States would need to demonstrate that their standards ‘generally meet or exceed the standards that ensure the quality and effectiveness of programs operated by Head Start agencies.’”

Despite these changes, Head Start advocates vigorously opposed the idea. The president of the National Head Start Association, Sarah Greene, called it a “radical proposal that dismantles the federal government’s nearly four-decades-long commitment to getting at-risk children ready to learn.” In one particularly colorful phrase, Congressman George Miller (D-CA) said that handing control of Head Start over to states was “like handing your children over to Michael Jackson.” (It is ironic that Congressman Miller seemed to think that Head Start was safer in the hands of a Republican President and Republican Congress than in the hands of the many states with Democratic governors or legislatures. But that particular rhetorical gap was not widely noticed.)

One must ask why the Head Start grantees and their allies were so opposed to this idea of a demonstration program, and would not accept an experiment in even a few states—unless they feared that the experiment would be successful. In any event, they were able to kill the Bush proposal, even after it had been substantially watered down.

A fresh start

In retrospect, a major element was missing from both the Clinton and Bush proposals: Although both proposals tried to align Head Start with state and local child care networks, neither would have done anything to close the achievement gap for the most disadvantaged children.


One of Head Start’s key weaknesses is its one-size-fits-all approach. Head Start does too much for some children—and too little for others. Despite the convenient rhetoric surrounding Head Start, not all poor children face the cognitive and developmental problems that animated Head Start’s creation. Many poor children do not need the array of support services provided by Head Start and, based on the evidence, do just fine in regular child care when their mothers work. Children from the most troubled families (usually headed by young, single mothers), however, surely need much more than the program currently provides.

The current Head Start model is just not sufficient, in terms of both its services and curriculum. It generally consists of only four hours a day of classroom instruction (some grantees provide more), for less than nine months. And, despite Head Start’s claims about “parent involvement,” there seem to be no systematic efforts to include parents in the program or to give parents better child-rearing skills.

The best thing would be for Head Start to go back to its roots, to search for ways to make a meaningful improvement in the lives of the poorest, most disadvantaged children. It might, for example, provide services to unwed teenagers that start during their first pregnancy. Head Start should not try to serve all families that happen to fall under the poverty line.

In the summer of 1968, I visited some of the first/earliest Head Start centers. They were in the Mississippi Delta and I was a civil rights worker (from the despised North). What I saw was one of the most heart warming and exciting scenes in my life. The children of sharecroppers and the dispossessed, victims of centuries of poverty and deprivation, were being given early education to help prepare them for school, as promised by Lyndon Johnson. In another room, their mothers were receiving training in homemaking and child-rearing skills. (This was, of course, long before we thought that mothers, especially low-income mothers, belonged at work.)

Focusing on the most in need, the new Head Start would be truly two-generational, that is, with real services for parents (not just the current lip service to parent involvement), and it would bring to bear all the programmatic services that have developed since Head Start was first conceived—WIC, Medicaid, the Maternal and Child Health Block Grant Program, the Community and Migrant Health Center Program, and the Title X program, which seeks to reduce unintended pregnancy by providing contraceptive and related reproductive health care services to low-income women.

In Head Start, as in the early childhood education field generally, there has been a shift away from direct, cognitive-oriented instruction and towards play-oriented and discovering-learning activities. Yet, according to Nicholas Zill, former director of Child and Family Studies at Westat, Inc., “the latest research evidence indicates that direct assessments of cognitive skills at kindergarten entrance are predictive of both early and later achievement, into the later grades.
of elementary school and beyond.” Zill notes that new instructional methods and curricula aimed at bolstering children’s language and literacy skills have been developed by education researchers and are currently being evaluated by the Institute of Education Sciences and the National Institute of Child Health and Human Development. If the results of the evaluations are encouraging, these new methods could inform a revamping of Head Start’s curriculum and, possibly, result in a more effective early childhood education program.

In other words, if Head Start is to do a better job raising the intellectual and cognitive skills of disadvantaged children, it will need to alter its curriculum and teaching methods to emphasize such learning. This would, of course, would require a major change in staffing and leadership and has been enough to raise the opposition of most Head Start administrators.

This would not be the first attempt to give Head Start a greater educational focus. In 1978, President Jimmy Carter also proposed that it be moved to the new Department of Education (as did George Bush twenty years later). The proposed transfer faced stiff opposition from Marian Wright Edelman, founder and president of the Children’s Defense Fund, a notably liberal lobbying group. Civil rights groups, parents of children enrolled in Head Start programs, and child advocates also strongly opposed the proposal, arguing that the shift in focus to education would undermine the social services component of Head Start. Despite this, President Carter sent a bill to the Senate that would have made the proposed changes. After hearings, the Senate Operations Committee voted the bill down by a vote of 14 to 0.

The policy (and political) challenge would be to identify the children and parents needing this kind of intensive intervention. The other group needs an intense compensatory program for children and a seriously therapeutic program for parents. Research suggests that such a program would likely be much smaller that the current Head Start program (although total spending might not decrease) because it would serve only the identifiably at-risk children—perhaps identified at birth through WIC, Medicaid, TANF, and other services for disadvantaged mothers and their newborns.

A plausible substitute needed

One hopes that the Head Start establishment, or at least major parts of it, as well as the larger child development community, will back such an endeavor. But after fighting many battles for survival over the past forty years, however, they are understandably wary of those who question Head Start’s effectiveness. Too often in the past, criticisms of the program have been

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39 Nicholas Zill, e-mail message to Douglas Besharov, May 3, 2006.

used to justify dismantling the program, or at least curtailing its funding. They are unlikely to support real reform in the absence of a substitute programmatic model that is politically plausible—and that rigorous research indicates will do a better job than Head Start to narrow the achievement gap between poor and nonpoor children.

Hence, the strategy for real reform seems clear: Build a better early childhood intervention program somewhere—and prove that it really works. Based on past failures, this will be no mean feat. It will require a sustained, no-holds-barred inquiry into what is needed to improve the cognitive and social development of the neediest children.

Instead of expanding Head Start eligibility, therefore, Congress should mandate a systematic program of research and experimentation, one that tries and evaluates different approaches to see what works best. Despite forty years of operation, Head Start does not have a scientifically tested knowledge base about which approaches work—and for whom. Needed is a scientifically rigorous inquiry into the comparative effectiveness of various curricula and program elements, such as full-day versus part-day and one- versus two-year programs, traditional nine-month versus full-year programs, classroom size (paralleling work on class size done at the elementary level), the training or formal education of teachers, and effective ways of helping parents do a better job meeting their children’s needs. Most important, distinctions among children from different family backgrounds and with different degrees of need will be crucial.

Such a multifaceted R & D effort could be patterned after the new one for K through 12 education established under the No Child Left Behind legislation. That effort enjoys a $400 million annual budget, compared to only $20 million for Head Start research. A tripling of Head Start’s research budget would be a good start. If no new money is available, Congress could reallocate some of the $30 to $111 million now designated in the pending reauthorization bills for quality improvements (especially since about half of these funds go to raise the salaries of Head Start staff, already among the highest in the early childhood education world).

Conducting such an inquiry will require substantial intellectual and political effort—because of the turf battles it would trigger, the scientific challenges involved in designing so many multi-site experiments, and the sustained monitoring and management needed. Nevertheless, without an effort on this scale and without such intellectual clarity, it is difficult to see how better approaches to child care and early childhood education can be developed.

Perhaps it is naive to think that Head Start can be operated on the basis of careful research rather than politics, but each year almost a million children pass through the program without getting the head start on learning they were promised. Shame on us.