

EARLY HEAD START

Early Head Start is an effective state STRATEGY to impact:



Early Head Start:

- improves numerous aspects of childparent relationships;
- positively impacts participation in good-quality child care; and
- positively impacts language and vocabulary skills and problem behaviors.

states supplement federal funding and have an estimated percentage of income-eligible children with

access to EHS that is at or above the

median state value (8.9%).

WHAT IS EARLY HEAD START?

Early Head Start is a federally funded program serving low-income pregnant women, infants, toddlers, and their families.¹ Early Head Start promotes healthy social, emotional, cognitive, and physical development in young children, assists parents in developing positive parenting skills and moving toward self-sufficiency goals, and brings together community partners and resources to provide families with comprehensive services and support.

WHAT IMPACT DOES EARLY HEAD START HAVE?

Early Head Start improves numerous aspects of children's relationships with the adults in their lives, leaving children better off due to more nurturing and responsive relationships with parents and teachers in safe settings. Early Head Start also may improve child health and development.

Early Head Start May Benefit Black Families the Most

Although no strong causal evidence evaluates the effectiveness of EHS at reducing racial disparities, research demonstrates that the impact of EHS on child-parent relationships and optimal child health and development is stronger for Black families than for White and Hispanic families.

Strong Causal Studies Show That Early Head Start Impacts Three Prenatal-to-3 Policy Goals

Examples of Impact:



- EHS participation led to more supportive home environments for language and literacy (effect sizes 0.12) (I, S), particularly for Black families (effect size 0.19) (N) and families with moderate-level risk factors (effect size 0.18) (N)
- Fewer parents participating in EHS reported spanking their child (effect size -0.13) (J, S)
- Black EHS parents were more involved in school at grade 5 follow-up (effect size 0.37) (T)



- The share of children participating in good-quality center-based care was three times greater among children in EHS (K)
- In center-based care, caregiver-child interactions were better among EHS participants than among nonparticipants (K)



- Children in EHS were more engaged during play (effect size 0.18) (J, S)
- Children in EHS had higher developmental functioning assessment scores (effect sizes 0.14) (I,
 S), particularly Black children in EHS (effect size 0.23) (N)

Note. Results are based on comprehensive reviews of the evidence. Letters in parentheses in the table above correspond to a strong causal study in the comprehensive evidence review of Early Head Start. Each strong causal study reviewed has been assigned a letter. A complete list of causal studies, as well as more details about our standards of evidence and review method, can be found in the Prenatal-to-3 Policy Clearinghouse at pn3policy.org.

