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Summary of the Rigorous Research on Early Head Start

Early Head Start (EHS) is a federally funded program serving pregnant women, infants, toddlers, and their caregivers in families with incomes at or below 100% of the federal poverty level. EHS programs can be home-based, center-based, focused on family child care, or an alternative locally designed approach. Although the standards of quality are similar, each format approaches the goal of child wellbeing and healthy development somewhat differently.



EMERGING EVIDENCE FOR IMPACTS ON CHILD AND FAMILY WELLBEING

By providing comprehensive services to families, including mental and physical health services to children and a variety of supports to parents, EHS aims to bolster the child's social support through caregivers. More specifically, EHS 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.

Although EHS is primarily a federal-to-local program, states play a crucial role in EHS policymaking. States can promote EHS programs and encourage family participation using a combination of strategies—including allocating state funds to support local EHS programs, leveraging federal funds as an Early Head Start-Child Care Partnership grantee, and administering state-level programs similar to EHS in both structure and criteria.

EVIDENCE-BASED POLICYMAKING

The Prenatal-to-3 Policy Impact Center at Vanderbilt University analyzes rigorous evidence to determine which policies are proven to produce positive outcomes for young children, their families, and society. Our comprehensive review of evidence demonstrates that Early Head Start can improve parental health and emotional wellbeing, build nurturing and responsive child-parent relationships, and promote child health and developmental outcomes.

RIGOROUS STUDIES FIND THE FOLLOWING IMPACTS

EHS improves parental health and emotional wellbeing.

- Decreased parenting stress during the first 3 years participating in the program.
- Decreased depressive symptoms after participating in the program for 2 years.

EHS helps families build more nurturing and responsive child-parent relationships.

- More supportive home environments for language and literacy, particularly for Black families and families with moderate risk factors.
- Decreased spanking behavior at age 3.
- Black parents were more involved in school when children were in grade 5.

EHS promotes optimal child health and developmental outcomes.

- More engaged with parents during play at age 3.
- Achieved higher developmental functioning assessment scores at age 2, particularly among Black children.
- Greater vocabulary skills at ages 2 and 3.

EHS enhances caregiver-child interactions and child care quality.

- Greater levels of caregiver-child interactions.
- Three times more likely to experience high-quality center-based child care.

For more information on Early Head Start:

- For more information and citations for the above-referenced studies, please refer to our comprehensive Evidence Review on Early Head Start: <https://pn3policy.org/policy-clearinghouse/early-head-start/>.
- Refer to our Prenatal-to-3 State Policy Roadmap for state progress and variation: <https://pn3policy.org/pn-3-state-policy-roadmap-2023/us/early-head-start/>.
- Refer to our state strategy lever checklist for necessary considerations to maximize the effectiveness of Early Head Start: <https://pn3policy.org/state-policy-lever-checklist-ehs/>.