Getting A Head Start

Poor children benefit from early developmental interventions

The first wave of Early Head Programs swept across the country in 1995 with the mission of improving the outcomes of poor children. The idea, simply put, was to reach them early in life with development-enriching services that were well-conceived and effectively delivered. Six years later, the children, their parents, and the federal program itself earned high marks in the most extensive evaluation of Early Head Start to date.

Early Head Start (EHS) children made impressive strides, performing significantly better on cognitive, language, and social-emotional development measures than did the groups of children studied who did not participate in the program.

Benefits were also seen among EHS families. Their homes were judged to be more developmentally stimulating, on the average, and parenting behaviors were better among EHS parents than parents whose children were not enrolled in the program.

The findings arm early intervention advocates with strong evidence that gains are seen when young children are provided with high-quality, developmentally-focused services and their parents, at the same time, are offered support.

The national evaluation studied 17 of the original 68 EHS programs, including Pittsburgh Early Head Start, operated by the University of Pittsburgh Office of Child Development. Some 3,000 families were included in the evaluation, which was done by Mathematica Policy Research, Inc., of Princeton, New Jersey, and the Columbia University Center for Children and Families.

Early Head Start has grown to more than 600 programs serving some 45,000 families nationwide. In Pennsylvania, 23 EHS programs are found in cities and counties across the state.

**Starting Early**

The federal initiative set out to build a comprehensive system for supporting low-income children ages birth-5 years and their families with services, such as child care, developmental activities, home visitation, and parenting education.

Individual programs are tailored to the communities they serve. However, all EHS programs adhere to a set of standards that include a focus on high program quality, staff development, and building community partnerships. In Pittsburgh, EHS is based in three family centers, each hosted by community organizations under contract with the University of Pittsburgh Office of Child Development.

The way the services are delivered appear to matter, the national evaluation noted. EHS, for example, was found to have dramatically increased the intensive child development and parenting services that families received. The quality of those services was good and got better, evaluators reported.

But how services and delivery affect children and parents is always the bottom line. In that regard, evaluators noted a pattern of positive findings across a wide range of domains important for children’s

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well-being and future development.

**Child Outcomes**

By the time they were two years, EHS children were functioning significantly better across cognitive, language, and social-emotional development measures than children in control groups, the report states. For example:

- EHS children scored higher on the Bayley Scales of Infant Development Mental Development Index.
- Fewer EHS children fell in the at-risk range of developmental functioning.
- EHS children were reported to have larger vocabularies and to use more grammatically complex sentences at age 2.
- EHS children showed lower levels of aggressive behavior.

The evaluation reported, however, that EHS did not seem to affect children’s ability to regulate their emotions. Also, no differences were seen in children’s attention span while playing with their mothers.

Among EHS programs, those that use a home-based approach to service delivery or a mix of home visitation and center-based activities tended to have more of an impact on children’s language development, according to the evaluation report.

One reason might be that home-based programs work with the child and parent together, said Vivian Herman, Pittsburgh EHS Director. “When you do that, you’re helping the child respond to the parent and the parent to the child, and language is how you’re doing it.”

**Parents & Home**

EHS also appears to contribute to healthier home environments, better understanding of child development among parents, and lower stress at home. The evaluation found the following examples:

- The home environments of EHS 2-year-olds tended to be more stimulating in terms of cognitive development, language, and literacy than the homes of control children. EHS parents, for example, were more likely to read to children daily and at bedtime.
- EHS mothers were more emotionally responsive, showing greater warmth, praise, and affection toward their children.
- EHS parents created more structure in their children’s day by setting a regular bedtime.
- EHS mothers increased their knowledge of infant-toddler development and developmental milestones.
- They were less likely to report spanking their child and were more likely to suggest a positive discipline strategy, such as explaining to the child.
- EHS mothers reported lower levels of family conflict and parenting stress.

Parents of EHS children were also found to be more economically self-sufficient and more likely to take steps that will help them provide for their children and sustain their children’s developmental gains. For example, they were more likely to become involved in an education or job-training program.

On health issues, EHS has little apparent impact. Evaluators reported that EHS did not appear to make much of a difference in the health of children and parents or their access to health care services.

But overall, the Early Head Start report card strongly suggests that early intervention, when done well, keeps low-income children on a developmental course that improves their chances of success in school and later in life.

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**references**

This report was based on the following sources:


Interview, Vivian Herman, Director, Pittsburgh Early Head Start.

**contacts**

Vivian Herman, Director, Pittsburgh Early Head Start, (412) 661-9280.

**other sources**

Early Head Start National Research Center (www.ehsnrc.org).