Head Start and Early Head Start are federally funded programs that deliver comprehensive early learning, health, nutrition, and family support services to children birth through age five and pregnant women who are living in poverty. Early Head Start serves pregnant women and children birth through three, while Head Start serves children ages three through five.

**Creation of Programs**
Head Start was created in 1965 as part of President Lyndon Johnson’s War on Poverty. Since its founding, the program has served 37 million children and families. Recognizing the profound benefits of Head Start and the important role of prenatal experiences, as well as those in the first three years of life, Early Head Start was established during the 1994 reauthorization of Head Start to serve pregnant women and children during a critical development period when interventions are most effective.

**How the Program Works**
Today, there are 1,600 local Head Start programs and 1,700 local Early Head Start programs operating across America, in every state and territory in the country. Head Start and Early Head Start have the flexibility to customize services and programs to meet the needs of every community, while providing a continuum of high-quality early learning and comprehensive support services that meet common quality criteria outlined in the Head Start Program Performance Standards (HSPPS). Local flexibility also allows many programs to combine federal, state, local, and even private funding for preschool, child care, or other early care and education services to maximize the impact of available funds.

**At a Glance**
- **Created:**
  - Head Start: 1965
  - Early Head Start: 1994

- **Who this Program Serves:**
  - Early Head Start: Prenatal to age 3
  - Head Start: Ages 3 to 5
  - Children whose family income is below the federal poverty guidelines, ($27,750 for a family of 4) those receiving TANF or SSI, or who are homeless or foster children.

- **Number of Children Served:**
  - Early Head Start: 243,345
  - Head Start: 513,320

- **Administration of Program:**
  - The Department of Health and Human Services awards grants directly to public or private non-profits; organizations, including community-based and faith-based organizations; or for-profit agencies within a community.

- **Delivery Method:**
  - Early Head Start and Head Start are designed to meet community needs and can be center-based, home-based, family child care, or an approved locally-designed variation.

- **FY2022 Federal Funding:**
  - $11,036,820,000 total funding for Head Start and Early Head Start.

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1 2020-2021 Cumulative Enrollment (National Services Snapshot). Early Head Start number includes pregnant mothers as well as children served.
Decades of research shows that participation in Head Start and Early Head Start has both short- and long-term positive effects for participating children and their families.

- Children who attend Head Start demonstrate academic and social progress and are more likely to enter kindergarten ready to learn.
- Adults who attend Head Start as children are more likely to graduate high school and are better prepared to be parents to their own children.
- Parents whose children attend Head Start are more likely to advance their own education compared to parents of at-risk children who are not enrolled in Head Start.

Increasing Access for Eligible Families

Despite the well-documented benefits of Head Start and Early Head Start and the ever-growing bipartisan support for the program among lawmakers in Congress, current funding is insufficient to provide access to all eligible children. In fact, prior to the pandemic, only 36% of eligible 3-to 5-year-olds had access to Head Start and just 11% of children eligible for Early Head Start were served by the program.

To help fill this gap, in 2013 Congress and HHS created the Early Head Start-Child Care Partnerships (EHS-CCP) program. EHS-CCP is a competitive federal grant program that allows Early Head Start grantees to partner with local child care providers—both center-based and in-home providers—who serve children receiving subsidies in order to improve quality of care and provide wrap-around services. Still, the need far outweighs the supply, and many infants and toddlers from low-income families lack access to high-quality child care and comprehensive development supports.

In addition to the unmet needs of eligible children, Head Start and Early Head Start lack the resources to fully implement new quality and safety requirements established in the 2016 HSPPS. Additional funding would allow Head Start and Early Head Start to implement these new requirements.

Continued Improvement

Thanks to the longstanding bipartisan support for Head Start among lawmakers on Capitol Hill, legislative efforts to improve the quality of Head Start have been successful in recent years. Congress’ bipartisan Head Start Act of 2007 included policies designed to strengthen teaching in Head Start programs and improve coordination between Head Start, Early Head Start, and other early childhood programs such as the Individuals with Disabilities Education Act (IDEA) and child protective services.

Additionally, in 2016, the U.S. Department of Health and Human Services (HHS) revised the HSPPS to further support high-quality early learning and comprehensive services by emphasizing performance and ongoing improvement, rather than compliance, and incorporating recent research on effective early learning, child development, and family engagement.

FFYF supports increased funding to help this vital program reach all eligible families and is committed to identifying opportunities that leverage public support to ensure more children have access to high-quality early learning opportunities. Learn more about Head Start and Early Head Start at www.ffyf.org.