## Congress of the United States Washington, DC 20515

## [[DATE]]

The Honorable Robert Aderholt Chair Committee on Appropriations, Subcommittee on Labor, Health and Human Services, Education, and Related Agencies 2358-B Rayburn House Office Building Washington, DC 20515

The Honorable Rosa DeLauro
Ranking Member
Committee on Appropriations,
Subcommittee on Labor, Health and Human
Services, Education, and Related Agencies
1036 Longworth House Office Building
Washington, DC 20515

## Dear Chairman Aderholt and Ranking Member DeLauro:

As you consider Fiscal Year (FY) 2024 Labor, Health and Human Services, and Education appropriations legislation, we urge you to prioritize funding for Head Start. Specifically, we request \$17.47 billion for Head Start in FY 2024 to maximize the role Head Start plays in supporting our country's most vulnerable children and their families.

Head Start and Early Head Start programs offer education, health, and nutrition services to children from at-risk backgrounds—those living in poverty, in foster care, or experiencing homelessness—as well as employment and educational support to their parents. Increased funding for Head Start is a wise, cost-effective investment in families and local communities that ultimately leads to greater prosperity for future generations. Research has repeatedly demonstrated that high-quality early childhood education programs generate a significant return on investment, and that the advantages of Head Start can last a lifetime. Head Start programs have also proven to be resilient in their work to maintain quality programming and support children and families throughout the pandemic-related challenges of the past few years, and we must continue to invest in Head Start's proven, crisis-tested work.

Head Start programs continue to face substantial challenges in recruiting and retaining qualified staff as programs struggle to pay competitive wages and match the benefits provided by comparable jobs. Strong outcomes for children and families receiving Head Start services rely on well-qualified staff, and well qualified staff should be properly compensated. Yet compensation for the early childhood workforce, including Head Start, ranks in the lowest 10 percent of professions, resulting in unprecedented turnover of Head Start staff and threatening the stability and ability of Head Start programs to properly serve a maximum number of children.<sup>2</sup> This request ensures funding for an adequate cost-of-living-adjustment to help programs keep pace and funding to support increasing the compensation of Head Start staff to help attract and retain a well-qualified workforce.

Deal (Dec. 2022), https://nhsa.org/press\_release/fy23-appropriations-960-million-increase/.

<sup>&</sup>lt;sup>1</sup> Schanzenbach, Diane Whitmore & Bauer, Lauren, *The Long-Term Impact of the Head Start Program* (Aug. 2016), The Hamilton Project, <a href="https://www.hamiltonproject.org/assets/files/long-term-impact of-head-start program.pdf">https://www.hamiltonproject.org/assets/files/long-term-impact of-head-start program.pdf</a>; Barr, Andrew & Gibbs, Chloe, *Breaking the Cycle? Intergenerational Effects of an Anti-Poverty Program in Early Childhood* (Jan. 2022), Journal of Political Economy, <a href="https://www.journals.uchicago.edu/doi/10.1086/720764">https://www.journals.uchicago.edu/doi/10.1086/720764</a>.

<sup>2</sup> National Head Start Association, *Statement of NHSA Executive Director Yasmina Vinci on FY23 Appropriations* 

This request also supports a strong investment in quality improvement funding (QIF), which provides critical flexibility to Head Start programs to address local quality improvement priorities. For instance, this funding can be used for staff training on trauma-informed care to ensure the Head Start workforce is prepared to help children who have experienced childhood trauma. This funding can also help programs employ qualified classroom staff to reduce child-to-teacher ratios, and can be used to ensure that the physical environments of Head Start programs are conducive to providing effective program services to children and families.

Finally, Early Head Start programs work alongside Head Start programs to provide comprehensive care and support for the unique needs of infants and toddlers as well as pregnant women. Early Head Start programs promote physical, cognitive, social, and emotional development of infants and toddlers that prepare these children for continued growth and development and eventual success in school and life. Currently, Early Head Start serves only 11 percent of eligible infants and toddlers,<sup>3</sup> preventing a continuum of care for our youngest learners and undermining quality. Recognizing that Early Head Start is an essential and growing component to ensuring that even our youngest learners can access high-quality care, we encourage you to include funding for Early Head Start expansion and Early Head Start-Child Care Partnerships. This funding level includes \$1 billion for these elements, with grants awarded based on the unique needs of each community and its families.

For decades, and in a spirit of bipartisanship, Congress has united around Head Start to provide high-quality early learning and support to our nation's underserved children. Nevertheless, perennial issues remain that we look to address. For these reasons, we request that you make these investments as outlined so that Head Start can continue putting children and families on the path to success in school, in work, and in life.

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[[SIGNATURES]]

<sup>&</sup>lt;sup>3</sup> National Head Start Association, *Early Head Start Rising* (last accessed March 6, 2023), <a href="https://nhsa.org/advocacy/early-head-start-rising/">https://nhsa.org/advocacy/early-head-start-rising/</a>.