



# Center for Children & Families

## Research Brief Head Start/Child Care Partnerships

### Partnering Programs More Likely to Provide Comprehensive Services

by Diane Schilder

#### Introduction

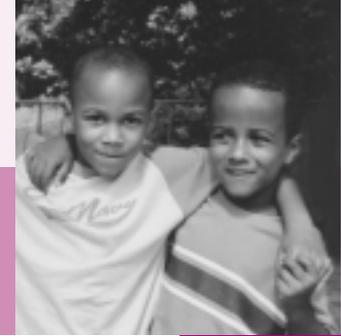
Numerous studies provide evidence that many comprehensive early care and education programs significantly improve the lives of poor children. Low-income children who have participated in programs such as the Carolina Abecedarian Project, the Chicago Parent-Child Centers, Head Start, and Perry Preschool have reduced incidence of grade retention and special education placements when compared with their peers.<sup>1-4</sup> These children have higher cognitive gains than their peers and the gains persist until at least the third grade.<sup>5,6</sup> Furthermore, long-lasting benefits are associated with participation in some of these programs including reduced incidence of school drop-out, increased likelihood of attending college, and increased employment rates.<sup>7,8</sup> While these programs differ in terms of the type, quality, and amount of services, some similarities exist. Common elements include parental involvement opportunities, referrals to health and social services, and some type of preschool services.

The issue of comprehensive services is currently of interest as policymakers debate how to meet the dual needs of promoting school readiness and supporting child care for low-income families.<sup>9</sup> In light of increasingly tight budgets, policymakers are exploring the best ways to invest public dollars. Comprehensive services programs are more costly than child care programs alone.<sup>10</sup> And, some believe that school readiness programs should primarily focus on improving young children's scholastic skills rather than providing services. Yet, the existing body of research suggests that comprehensive service

programs yield improvements in children's school readiness as well as longer term savings.<sup>11-13</sup>

To create more comprehensive, accessible, and higher quality services, federal and state governments have encouraged the development of partnerships between Head Start, prekindergarten, and child care.<sup>14,15</sup> While each of these programs provides early care and education services, the comprehensiveness of services, programmatic goals, and hours of operation differ.<sup>16</sup> For example, Head Start provides comprehensive health, social, and family services to meet the developmental needs of low-income children and their families, but the program is offered mostly on a part-day and part-year basis. By contrast, child care is offered on a full-day, full-year basis, and child care providers are not required to offer comprehensive services. PreK services vary by state, but the programs are primarily part-day and part-year and many do not offer comprehensive services. By blending funds from each of these sources, programs have the potential to provide comprehensive services, early education, and child care that meet the needs of low-income parents who are working or attending training.<sup>17</sup>

Recent qualitative studies reveal that some child care providers partnering with Head Start offer higher quality and more comprehensive services.<sup>18,19</sup> These findings are consistent with the fact that in some states, child care providers in partnership with Head Start can use both the full-day child care subsidy and Head Start funds with the goal of meeting Head Start's more rigorous requirements.



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The Head Start standards require Head Start providers and their partners to engage in a family goal-setting process and offers or provides families with access to the services that are necessary for parents to attain their goals.<sup>20</sup> New research suggests that children attending Head Start receive more services than low-income children who do not attend this program.<sup>21</sup> However, no quantitative studies examine whether children attending child care centers that are partnering with Head Start also receive more services.

## Research Design and Methodology

To address questions about early care and education partnerships, researchers at the Center for Children & Families (CC&F) are undertaking a three-year research project. This brief highlights findings from an analysis of data collected from a random sample of 141 child care centers in Ohio. The brief summarizes differences in services provided by the 78 centers in partnership with Head Start agencies (using both federal and state funding) and 63 comparison centers not in partnership. Subsequent briefs will present findings on the nature of the partnerships, teacher practice and benefits, and parent perceptions.

## Characteristics of the Sample of Child Care Centers

The child care centers in the study represent all child care centers in Ohio that accept child care subsidies and provide full-day, full-year services to preschool-aged children. An analysis of data from the sample of 141 child care centers reveals variability in the type and size of centers and in the populations served.

- **Type:** Almost 40 percent of the child care centers in Ohio are non-profit and 60 percent are for-profit; 18 percent are faith-based organizations and the remaining centers are not affiliated with a religious organization. About 38 percent are affiliated with a larger agency.
- **Size:** The average daily enrollment of the centers in the sample is 28 preschoolers. Centers range in size from fewer than five preschoolers to over 200 preschoolers. (Centers with fewer than five preschoolers provide care for younger aged-children and some of these report serving such children in mixed-age classrooms.) The child care centers' operating budgets range from below \$50,000 to over \$6 million.
- **Populations:** The typical center reports that

approximately 50 percent of families attending the center use child care subsidies. While all of the centers in the study accept child care subsidies, the percentage of families using child care subsidies at the point in time when the data were collected ranged from 0 to 100 percent. Centers in partnership with Head Start report higher percentages of families using child care subsidies compared with the non-partnering centers. Partnering centers on average, report that 56 percent of families attending the centers receive subsidies, compared with 50 percent of the families at non-partnering centers.

Approximately 37 percent of the centers currently provide services to children with disabilities, and 40 percent provide services to children whose primary language is other than English.

## Partnership Arrangements

Child care centers in partnership with Head Start vary in terms of number of children served, duration of the partnership, and resources that are exchanged. The number of children receiving Head Start-enhanced services at the child care centers varies substantially. Some child care centers provide Head Start services to a single child, whereas others provide services to more than 30 children. On average, 14 children per center received Head Start services. The median partnership between child care centers and Head Start agencies began in 2000. However, some partnerships began in 1994 while others formed in 2002.

Nearly 90 percent of partnering child care centers receive funds directly from federal and state Head Start. In 2002, the average yearly amount of Head Start funding received by child care was \$2,200 per child with over two thirds of child care directors reporting that they received between \$1,400 and \$3,000 per child. About 83 percent of the centers report using the funds for equipment such as learning centers or playground equipment, 89 percent use funds for supplies, approximately 66 percent use funds for teacher professional development, and 62 percent use funds to enhance teacher salaries. Most of the child care centers in partnership also receive equipment, supplies, training, and materials directly from Head Start. Half of the centers (50 percent) receive equipment directly from Head Start, 65 percent receive supplies, and 92 percent receive training from Head Start. Furthermore, about one

third of child care centers (32 percent) report that Head Start employs and directly supervises teachers who work with Head Start children in the child care centers. (A forthcoming brief will provide additional details about the nature of the partnerships.)

## Partnering Centers More Likely to Provide Screenings, Referrals, and Services

Ohio's child care centers in partnership with Head Start are more likely than comparison centers to provide the screenings, referrals, and services that are required by the Head Start Program Performance Standards.

Specifically, child care centers in partnership with Head Start are more likely to provide screenings for children including vision, hearing, dental, mental health, and developmental screenings. For example, 91 percent of partnering child care programs provide developmental screenings compared with 57 percent of the comparison centers, 85 percent provide vision screening compared with 40 percent, and 80 percent provide hearing screening compared with 33 percent of the comparison centers. Table 1.1 shows that the percentage of partnering centers that provide screenings, referrals, or services to preschool-aged children is higher than the percentage of comparison centers.

The total number of screenings provided was 5.4 on average for partnering centers and 2.6 for non-partnering centers. The differences between partnering and non-partnering centers are all statistically significant at the .01 level. This means that such differences are unlikely to occur by chance.

Partnering centers are more likely to provide referrals and services to children. The average number provided by partnering centers is 3.7, compared with non-partnering centers averaging 2.5 referrals or services. The differences in services and referrals offered are statistically significant at the .05 level or lower except for medical and social service referrals.

Child care centers in partnership are also more likely to provide parent referrals and services than comparison centers. Specifically, higher percentages of partnering centers offer opportunities for family goal-setting and referrals to health services, employment, and education services. Table 2.1 shows the percentage of centers that provide specific referrals or services to parents. Child care centers in partnership offer on average 6.2 referrals/services to families, compared with 4.0 provided by comparison centers.

**Table 1.1: Percent of Centers Providing Screenings and Referrals for Children**

Services or Referrals for Child	Partnering Centers (n=78)	Comparison Centers (n=63)	Chi-square
<b>Child Screenings</b>			
Developmental screening	91%	57%	21.86***
Vision screening	86%	40%	32.27***
Hearing screening	81%	33%	31.96***
Speech screening	79%	41%	21.21***
Mental health screening	70%	43%	10.57***
Dental screening	60%	14%	30.01***
Nutritional screening	43%	16%	11.86***
Lead screening	39%	19%	6.81**
<b>Child Referrals</b>			
Medical referrals	56%	43%	2.56
Dental referrals	53%	29%	8.24**
Mental health referrals	68%	51%	4.28*
Social Service referrals (child)	74%	61%	2.73
<b>Child Services</b>			
Physical Therapy	38%	21%	4.78*
Speech Therapy	73%	44%	11.93***

\*p <.05 \*\*p<.01 \*\*\*p<.001



**Table 2.1: Percent of Centers Providing Services or Referrals for Parents**

Services or Referrals for Parents	Partnering Centers (n=78)	Comparison Centers (n=63)	Chi-square
Set goals for families	46%	32%	2.78**
Social service referrals	76%	66%	1.53
Parent workshops	50%	44%	0.43
Medical referrals (Parent)	53%	31%	7.56**
Mental health	58%	45%	2.42
Employment referral	36%	21%	3.72*
GED preparation	38%	21%	4.97*
Immigration	10%	0%	6.85**
Marriage counseling	23%	14%	1.74
Adult literacy	33%	10%	10.96***

\*p <.05 \*\*p<.01 \*\*\*p<.001

## Discussion

Child care programs that are partnering with Head Start are required to follow Head Start Program Performance Standards. These standards require Head Start and their partners to offer or provide families with comprehensive services. Our analysis reveals statistically significant differences in the percentage of partnering child care centers that provide screenings, services, and referrals compared with centers not in partnership with Head Start. The sample of partnering centers in this analysis include centers that were beginning partnerships as well as centers with established partnerships.

While our analysis reveals statistically significant differences between the child care centers in partnership with Head Start and non-partnering centers, this analysis does not address the cause of these differences. For example, the partnership with Head Start could have caused the centers to provide the services, or Head Start could have selected child care centers as partners that were already providing some family and health services. Nonetheless, the size of the differences for most of the screenings, referrals, and services as well as for the total number of services, leads the researchers to hypothesize

that partnership with Head Start contributes to these differences.

To test the hypothesis that the duration of the partnership leads to increased child care quality and more services, researchers are in the process of collecting and analyzing longitudinal data. The analysis of this new data will enable researchers to answer questions about whether a center's partnership duration with Head Start leads to the provision of additional services. Furthermore, subsequent analysis will examine whether partnerships lead to increased child care center quality.

## End Notes

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## Selected Organizations Conducting Research on Early Care and Education Partnerships

**Center for Law and Social Policy**—a national nonprofit organization conducts research, policy analysis, and technical assistance on issues related to economic security for low-income families with children. Lead contact on state early education policy issues: Rachel Schumacher, 202-906-8000, Address: The Center for Law and Social Policy, 1015 15th Street, NW, Suite 400, Washington, DC 20005. Website: [www.clasp.org](http://www.clasp.org)

**Education Development Center, Inc. (EDC)**—a national nonprofit organization with five decades of experience providing state-level consultation, training and technical assistance to state leaders, and conducting research on early care and education issues. Lead contact: Diane Schilder, Center for Children & Families, 617-618-2757. Email: [dschilder@edc.org](mailto:dschilder@edc.org), Address: Center for Children & Families, Education Development Center, 55 Chapel Street, Newton, MA 02458-1060. Website: [www.ccf.edc.org](http://www.ccf.edc.org)

**Investigating Partnerships in Early Childhood Education (I-PIECE)**—An in-depth study of local early childhood partnerships occurring between Head Start, preschool and child care in New York state. Describes collaborations and explores their consequences for classroom conditions, teacher salaries and benefits, children's school readiness, and parents' satisfaction. Contact information: Sally Selden, 434-544-8266, Email: [selden@lynchburg.edu](mailto:selden@lynchburg.edu), Address: School of Business and Economics, 1501 Lakeside Drive, Lynchburg, VA 24501-3199. Website: <http://www.lynchburg.edu/business/i-piece/index.htm>

**National Center for Children in Poverty**—The National Center for Children in Poverty identifies and promotes strategies that prevent child poverty in the United States and that improve the lives of low-income children and their families. NCCP is part of the Mailman School at Columbia University. Contact information: National Center for Children in Poverty, 646-284-9600, Address: 215 W. 125th Street, 3rd Floor, New York, NY 10027. Website: [www.nccp.org](http://www.nccp.org)

## About the brief

This brief on early care and education partnerships is the fourth in a series produced by the Center for Children & Families (CC&F). Diane Schilder wrote the brief. Dr. Schilder serves as a senior research associate and principal investigator of early care and education studies at the Center for Children & Families. The research is funded by the U.S. Department of Health and Human Services, Administration for Children and Families, Child Care Bureau (Grant Number 90YEO37). Any opinions, findings, conclusions, or recommendations expressed in this publication are those of the authors and do not necessarily reflect the views of the funders. CC&F briefs provide information on a range of issues affecting young children and their families. CC&F seeks to strengthen programs by bringing together research and practice with the aim of improving the lives of children and families. Our briefs serve as a vehicle for informing research and practice. Copyright 2004. Education Development Center, Inc. With attribution, this brief may be freely reproduced for non-commercial purposes but cannot be sold or republished without written permission. The brief is available at: [www.ccf.edc.org](http://www.ccf.edc.org).



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