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ABSTRACT

Head Start, the federally funded, comprehensive child development program for low-income preschool children, was reauthorized by Congress in 1990 with a sufficient increase in funding to serve all eligible children by 1994, and to strengthen the Head Start program in general. The National Head Start Association mailed 1,800 surveys to Head Start programs throughout the nation in the fall of 1991 to assess the impact of this legislation after 1 year. A total of 314 agencies responded, a figure representing approximately 17% of the Head Start agencies and 19% of Head Start enrollment. The responding programs reported that, on average, funding increased by 20 percent from 1990 to 1991, and that enrollment increased 10 percent. The programs also reported that they had sufficient funds to increase staff salaries by an average of 7 percent, to add, improve or maintain staff benefits, to add staff, and to renovate classrooms and playgrounds. The survey found that significant improvements were made in the first year of the new legislation, although there is still considerable room for improvement. Program directors reported that they still had waiting lists of children wishing to enroll in Head Start, and that staff salaries were too low to attract and retain qualified staff. Two appendixes provide a copy of the survey form and a list of the 12 Head Start regions. (MDM)

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INVESTING IN QUALITY

The Impact of The Head Start Expansion And Improvement Act of 1990 in Its First Year of Implementation



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**The National Head Start Association
Alexandria, Virginia**

June 1993

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Introduction

Investing In Quality

This report was spawned by conversations with numerous Head Start directors across the country in the fall of 1991 in which they enthusiastically described the impact of the 1991 funding on their programs. In the first year of the new Head Start legislation, these directors were reporting the kinds of benefits envisioned by the many people who worked on the Head Start reauthorization the previous year. At the National Head Start Association, we recognized that wonderful things were happening in communities across the country, but there was no mechanism for capturing them. We knew it was important to study and share the impact of that landmark legislation, and so the Head Start Impact Study was launched.

It was equally important to conduct this study to particularly share with members of Congress. We wanted to express thanks for their vote of confidence in addressing the needs of programs as expressed by Head Start staff and parents. Further, the study will demonstrate that the funds were used as intended and that the quality of programs improved.

A simple survey questionnaire was designed and sent to programs, and more than 300 program directors took the time to respond. Their responses are the basis of this report. Their comments give human dimension to the policy and political decisions made in Washington, D.C. The Head Start Expansion and Improvement Act clearly made a substantial difference in their Head Start programs and in their communities.

*Arvern Moore, President
National Head Start Association
June 1993*

INVESTING IN QUALITY: The Impact of the Head Start Expansion and Improvement Act of 1990 in its First Year of Implementation

Executive Summary

"I feel my program has improved 100% because of the new money. Our program was great before on little funds... but now we have an excellent program for families." — Kentucky Head Start Director

Head Start, the federally funded, comprehensive child development program for low-income preschool children, was reauthorized by Congress in the Head Start Expansion and Improvement Act of 1990 ("the Act"). This landmark legislation authorized sufficient funding to serve all eligible children by 1994 and contained numerous provisions to strengthen program quality. The most significant quality improvement provision earmarked a percentage of all new funds for quality improvements, including salary increases (at least one-half of quality funds were required to be used for this purpose), additional staff, training, facility renovation, transportation, and supplies/equipment. Congress increased Head Start funding by \$399.8 million in FY 1991, the first year of the new legislation. Under the provisions of the Act, \$195.2 million of this increase was earmarked for quality improvements; \$200 million was available for expansion.

The Department of Health and Human Services (DHHS) reported in its January 1992 Head Start Fact Sheet that Head Start enrollment increased by 42,541 children in 1991, to a total of 621,078. In this first year of the new legislation, DHHS also reported that Head Start employment increased by 2,131 staff, the number of volunteers increased by 95,037, the number of Parent and Child Centers increased by 69 programs, and the number of Head Start grantees increased by twenty-five agencies. However, DHHS did not report on the specific impact of the quality improvement provisions on local programs in its Head Start Fact Sheet.

In order to assess the impact of this element of the legislation, the National Head Start Association (NHSA) surveyed Head Start programs in the fall of 1991. The Head Start Impact Study was mailed to approximately 1,800 agencies, and responses were received from 314 agencies. The responses represented approximately 17% of the Head Start agencies and 19% of Head Start enrollment.

The 314 programs reported that, on average, funding increased by \$189,572, a 20% increase, and enrollment increased by 39 children, a 10% increase. Program directors expressed great satisfaction in being able to serve more children and to bring Head Start services to previously unserved communities. Directors also mentioned that they still had sizable waiting lists.

The programs reported that they used the new money to increase staff salaries by an average of 7%. Many also reported using funds to add, improve, or maintain staff benefits such as health insurance or retirement. Directors reported that the improved salaries had a positive effect on staff morale, recruitment, and retention. However, a number of directors commented that even with the additional salary funds, their staff salaries were still too low. Others mentioned the difficulties they faced dealing with the rapidly increasing costs of employee benefits.

The Act allows the use of Quality Improvement Funds to add staff for existing services. The programs reported adding 659 staff with quality funds. Of these 659 staff, 39% were in the education component; 42% of the new positions were in the components which comprise Head Start's comprehensive services: Health (15%), Parent Involvement (9%), and Social Services (18%).

The 314 programs reported renovating 639 new and existing classrooms in 1991. This finding can be projected to more than 3,300 classrooms nationwide, more than 10% of all Head Start classrooms in 1991. The programs also reported adding 85 portable classrooms and renovating 375 playgrounds.

The results show that significant improvements were made in the first year of the new legislation. Salaries were increased, benefits added, component staffing improved, classrooms and playgrounds renovated, and administration strengthened. However, closer analysis indicates that there is still much to be done. In order to continue the quality improvements begun in 1991 the following is required:

- Head Start funding must continue to increase significantly each year — 25% of each year's increase will be used to increase quality in the existing program; and
- New Head Start slots must be funded at a level that allows for high-quality services in all components.

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IMPACT OF THE HEAD START EXPANSION AND IMPROVEMENT ACT OF 1990

"I feel my program has improved 100% because of the new money. Our program was great before on little funds...but now we have an excellent program for families." — Kentucky Head Start Director

In 1990 Congress enacted the Head Start Expansion and Improvement Act of 1990 ("the Act"), which reauthorized the Head Start Program through 1994. The legislation was widely hailed as a landmark because it authorized funding sufficient to serve all eligible children by 1994. Equally important, it contained provisions to strengthen the quality of services to children and families by reserving a portion of all new funds for quality improvements.

The \$399.8 million increase for Head Start in 1991 was the largest in Head Start's 26 year history, bringing total funding to \$1.9518 billion. The Act allocated \$195.2 million of this increase (10% of the total 1991 appropriation) for quality improvements, and \$10 million for Training & Technical Assistance (T&TA), with the remaining \$200 million reserved for expanded enrollment. In the fall of 1991, the National Head Start Association surveyed Head Start programs nationwide on the impact of the 1991 funding increase and quality improvement provisions.

Background

Since its founding in 1965, Head Start has provided comprehensive child development services to more than 12 million low-income preschool children and their families. With a firm commitment to involving parents in all aspects of the program, local Head Start agencies provide a broad range of services including early childhood education, health and social services.

Head Start is administered by the Administration for Children, Youth, and Families (ACYF), Administration for Children and Families (ACF), and the Department of Health and Human Services (DHHS). Grants are awarded by the DHHS Regional Offices and the ACYF Native American and Migrant Program Branches to local public agencies, private nonprofit organizations and school systems for the purpose of operating Head Start programs at the community level.

Since its inception, Head Start had grown from a six-week summer program with budget of \$96 million to a full-year (nine month) program with a \$1.552 billion budget. The 1,283 Head Start grantees (agencies receiving funds directly from the federal government to operate Head Start programs) and approximately 500 more "delegate" agencies enrolled more than 540,000 children as the nation celebrated Head Start's "Silver Anniversary." By 1990 Head Start had a proven record of success and was universally recognized as a program that "worked." Numerous studies

unequivocally demonstrated that children who attended Head Start were in better shape (social development, health, performance on standardized assessments, etc.) than their peers who did not attend Head Start. Moreover, carefully designed longitudinal studies of comprehensive, high-quality preschool programs revealed that the benefits of such programs were significant and long-lasting. Yet despite its track record, three out of four eligible children were still denied access to Head Start because of inadequate funding.

There was widespread support for extending Head Start services to all eligible children as Congress considered the reauthorization of Head Start in 1990. Business leaders, educators, governors, policy experts, and parents were in agreement that the well-being of America's at-risk preschool children and America's future productivity demanded fully funding Head Start. However, these same supporters also agreed that significant steps must be taken to assure the quality of the Head Start program.

During the 1970s and 1980s, Head Start programs suffered through hostile or indifferent administrations, inflation, and cutbacks — against a backdrop of declining communities and increasing need. In spite of strong community support and dedicated staff, many programs found it increasingly difficult to meet the needs of Head Start children and families and provide the services required by the Head Start Program Performance Standards. An analysis by the High/Scope Educational Research Foundation revealed that real funding per child, adjusted for inflation, *declined by 13% from 1981 to 1989*. Never well funded, Head Start programs were hard hit by the pressure to *serve more children with fewer resources*.

By 1990, this inadequate funding threatened program quality in a variety of ways:

- Near-poverty level wages made it difficult for programs to recruit and retain trained staff. A 1988 study by ACYF revealed that 47% of Head Start teachers earned *less than \$10,000 per year*.
- Many Head Start centers were located in inappropriate, run-down, or potentially unsafe facilities. For example, a study by Mississippi Head Start Directors indicated that 25% of the centers in the state needed to be *replaced*.
- Many programs were forced to eliminate or combine family support positions (Parent Involvement and Social Service staff) in order to reduce or contain costs.
- Funds for T&TA as a percentage of the Head Start budget declined from 5.4% in 1971 to 2% in 1990.

The Head Start community realized that this erosion cheated children and families and threatened the entire Head Start program. Acting upon an initiative by the National Head Start Director's Association, the National Head Start Association established an *ad hoc* committee in the fall of 1989 to address the program quality issues caused by low salaries and inadequate funding. The committee oversaw the establishment of a

lobbying capacity within NHSA's Alexandria office, collected data on the impact of declining funding on local programs, mobilized the Head Start community, and launched an aggressive public education campaign on conditions in Head Start.

Concerned about the effect of such erosion on service delivery, Congress took steps to strengthen the program. The Act of 1990 was designed to assure that all eligible children had access to high-quality Head Start services by allocating funds for expanded enrollment and quality improvement.

Key Elements of the Act of 1990

- Funding authorization sufficient to serve all eligible children by 1994.
- Quality reserve provisions which earmarked a percentage of new funds each year for quality improvement in existing services. The Act further required that at least 50% of the funds reserved for quality improvements be used to increase staff compensation. In 1991, 10% of the total appropriation was earmarked for quality improvements. In subsequent years, not less than 25% of the increase after inflation must be used for quality improvements.
- A permanent mechanism for increasing T&TA funds to keep up with program growth, earmarking 2% of all funds for T&TA.
- Increased services to infants and toddlers by doubling the funding for Head Start Parent and Child Centers.
- A major new demonstration project, the Head Start Transition Project, to continue the Head Start approach into the early grades of elementary school.

Congress increased funding by \$399.8 million dollars in 1991, raising total funding to \$1.9518 billion, in the first year of this new legislation. This was the largest single-year increase in the 25 year history of the program and marked the first time that substantial resources were directed towards strengthening the program.

The annual Project Head Start Statistical Fact Sheet issued by DHHS provides an overview of the impact of the new legislation and funding on Head Start nationally in 1991:

- Head Start enrollment increased by 42,541 low-income children.
- Enrollment in infant-toddler programs (birth to 3 years of age) increased by 1,276 children.
- Head Start employment increased by 2,131 staff. An estimated 36.1% of these new staff are current or former parents of Head Start children.

- The number of volunteers in Head Start programs increased from 799,000 to 894,037; an increase of 95,037 volunteers.
- The number of Head Start grantees increased from 1,321 to 1,342; an increase of 25 agencies.
- The number of Parent Child Center Programs (serving children birth to 3 years of age) increased from 37 to 106; an increase of 69 programs.

The NHSA Impact Survey

The Head Start Fact Sheet illustrates the impact of the new legislation and funding on the Head Start Program overall, but it does not reveal much about changes at the local level. The National Head Start Association surveyed Head Start agencies in the fall of 1991 to collect information on the impact of the new legislation on local programs.

The NHSA Impact Survey [see Appendix A] was sent to all Head Start grantee and delegate agencies (approximately 1,800 agencies) with a cover letter requesting that the survey be completed and returned by mid-November. There were no additional mailings or telephone follow-up to agencies regarding the survey.

The survey was designed to provide insight into how programs used the new funds to expand enrollment, improve salaries, strengthen quality, and what effect these funds had on local programs and communities.

Three hundred and fourteen agencies (314), from 47 states and Guam, responded to the survey, (17% of total). Responses were received from all twelve Head Start regions (including Native American and Migrant Branch grantees). These agencies reported on overall enrollment of 102,800 children, representing 19% of the total 1990 Head Start enrollment. NHSA received responses from programs in 47 states, Guam, and the District of Columbia. Responses were not received from programs in Delaware, Hawaii, Iowa or Puerto Rico. The average 1990 enrollment of the responding agencies was 339 children, slightly larger than the national 1990 average of 300 children. Because of the overall number of responses, the number of children and states represented by the responses, and the similarity of the average enrollment of respondents to the national enrollment average, NHSA judges that the results of this summary are representative of the impact of the 1991 legislation on Head Start overall.

Funding and Expansion

"The expansion created the biggest stir...we increased (by) 68 children. The quality improvement was wonderful. It gives us enough money to feel confident in our ability to compete for quality staff. Our parent involvement activities have been fantastic. Tell the folks on the Hill thanks!!" — Utah Head Start Director

Programs reported a 20% average increase in permanent funding in 1991, increasing from \$943,994 to \$1,113,556; an average \$189,572 increase over 1990 funding. These increases included: funds designated for quality improvement (average \$129,011); T&TA (average \$1,241), literacy (average \$6,081), and expansion. The largest percentage increases were reported by Native American programs (average 38% increase) and programs in Region IX (31%) and Region X (30%); the smallest average increases were reported by programs in Region III (18%) [See Table 1].

Average enrollment of reporting programs increased by 39 children, from 381 to 420. The largest enrollment percentage increase was reported by Migrant programs (27%), Native American programs (24%), and programs in Region IX (22%). The smallest increases were reported in Regions I (6%), II (8%), and VI (9%).

Nearly all agencies reported that their programs expanded. This often included expansion to previously unserved areas, as reported by these Head Start directors:

"...A new center in a town which desperately needed services for years." (Massachusetts) ■ "(The) size of the program more than doubled. Services in two communities previously unserved." (Oklahoma) ■ "Able to begin services to an unserved county." (North Carolina) ■ "We were able to expand into areas that had not been served." (Ohio).

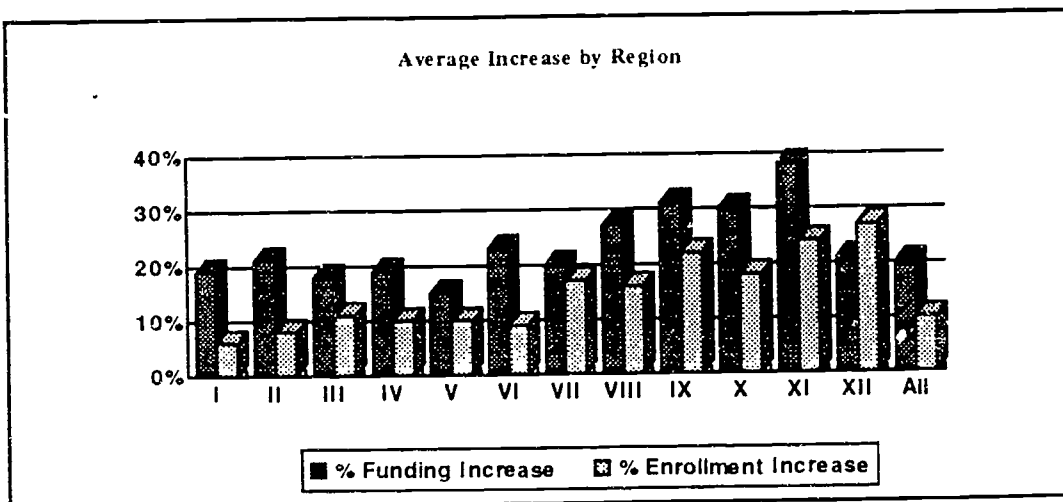
Table 1
Average Funding and Enrollment Increase by Region

Region	Programs Reporting	1990 Funding	1991 Increase	Percent Increase	1990 Enrollment	1991 Increase	Percent Increase
I	24	1,054,199	199,715	19%	274	16	6%
II	33	995,321	205,577	21%	289	24	8%
III	34	783,750	140,291	18%	283	30	11%
IV	45	1,147,267	217,395	19%	447	43	10%
V	54	1,358,068	209,161	15%	528	51	10%
VI	24	708,951	166,094	23%	391	35	9%
VII	17	547,409	108,486	20%	201	34	17%
VIII	21	388,104	105,466	27%	146	24	16%
IX	21	1,467,422	461,181	31%	460	100	22%
X	18	450,118	134,100	30%	165	18	11%
XI	14	318,432	120,534	38%	102	24	24%
XII	6	531,449	110,664	21%	209	57	27%
All	311	943,944	189,572	20%	381	39	10%

In spite of the expansion in 1991, however, several directors called attention to the fact that more expansion was needed:

"Our waiting list went down by 20 children, (but) we still have 172 three- and four-year olds who can not get into Head Start." (North Dakota) ■ "Allowing us to serve additional children is a great help, but still far from enough. We still have long waiting lists. We are currently serving about 20% of eligible four-year olds." (Utah).

Chart 1
Average Funding and Enrollment Increase by Region



Salaries and Benefits

"We were able to hire staff without difficulty for the first time. Staff turnover was also decreased compared to previous years." — Pennsylvania Head Start Director

As in most human services, personnel is the largest single cost of the Head Start program and the single most critical factor in the delivery of quality services. Recognizing the importance of a trained and stable work force in a high quality Head Start program and the appallingly low salaries currently paid in Head Start, Congress made improving staff compensation a top priority in the Act. The Act required that not less than 50% of all quality improvement funds be used to improve staff compensation. In 1991, \$97.5 million was earmarked for salary and benefit enhancements. Locally programs also had the option of using all or part of their portion of the remaining \$97.5 million "Other Quality Improvement Funds" for additional salary/benefit enhancements.

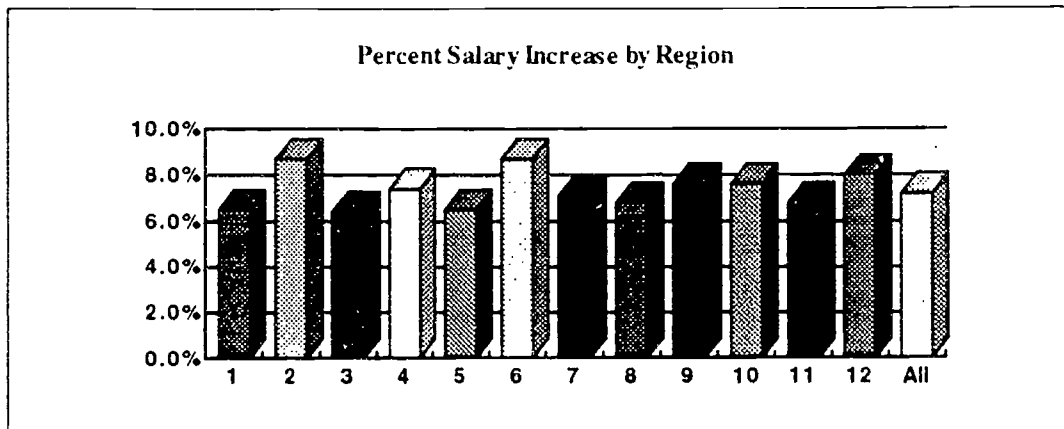
Overall, the 314 programs reported that salaries increased by an average of 7.2% in the first year of the Act. Region II programs reported the highest average percentage increases (8.7%), and Region I and Region V programs reported the lowest average percentage increases (6.5%). Based upon an estimated 1990 average teacher salary of \$12,581 per year, this 7.2% increase raised teacher salaries on average by \$905 per year, to \$13,486. [See Chart 2]

Many agencies reported that the salary enhancement had a positive impact on staff recruitment, retention, and morale:

"Staff morale increased due to salary enhancements." (Virginia) ■ "(The) 1991 funding increase helped to bridge the gap between salaries of (the) local

community and Head Start." (Louisiana) ■ *"Pride in staff that we are expanding, being recognized and better paid."* (Colorado) ■ *"We were able to increase salaries (reduce turnover and be more competitive)."* (Kentucky) ■ *"Staff morale improved."* (Tennessee) ■ *"Help(s) to retain staff."* (New York) ■ *"Increased entry level wages which attracts more quality staff; able to afford cost-of-living increases and annual salary increases for a change!"* (Wisconsin) ■ *"Staff salary increases help to boost morale, although salaries are still not up to par."* (New York) ■ *"Retention of staff. We were averaging a 40-50% turnover yearly."* (New Jersey) ■ *"Improved staff morale with increased salaries."* (Montana)

Chart 2
Average Salary Increase by Region



Many programs reported using salary enhancement funds to add, maintain, or improve employee benefits such as health insurance and retirement:

"We had no health benefits for staff. All the quality funds were used for this." (North Carolina) ■ *"We can now offer health insurance subsidy for 12 months rather than for nine months."* (New Hampshire) ■ *"Added dental and EAP (employee assistance program)."* (Michigan) ■ *"Added retirement benefits."* (California) ■ *"For the first time in 26 years, our staff has pension and life-insurance...(We) still need health insurance."* (Indiana)

Staffing

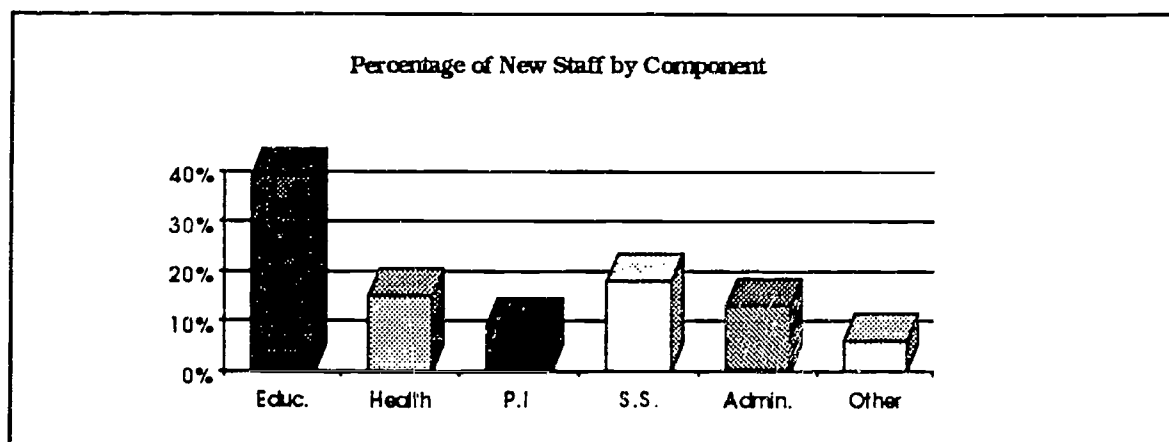
"(The) Program Quality Improvement funds allowed us to (add) four outreach workers and a supervisor to help manage the tracking of children's records (health/dental follow-up, social service referrals, attendance, etc.)." — Michigan Head Start Director.

The Act of 1990 allowed Head Start agencies to use "Other Quality Improvement Funds" for new or additional staff positions to strengthen program services. The Impact Survey included a question about the number of staff added with quality funds in each component. The 314 programs reported adding 659 new staff with quality funds, a ratio of 2.04 new staff per reporting program.

The Education Component, with the greatest overall number of Head Start staff, received 39% of the staff added with quality funds. However, strengthening *comprehensive* services was a major emphasis of the reporting programs. Forty-two percent (42%) of the new positions added with quality funds were in the components which comprise Head Start's comprehensive services, Health (15%), Parent Involvement (9%), and Social Services (18%).

"...Reduced overburdened staff with additional personnel for components..." (Florida) ■ "Full-time coordinators in all component areas." (Oklahoma) ■ "The funds enabled us to hire a full-time parent involvement specialist to strengthen this critical component." (Florida) ■ "The addition of a Parent Involvement Coordinator will improve our delivery of services to parents (families) in our program." (Ohio) ■ "Helped to reduce case load of family service workers." (Louisiana) ■ "Additional staff in the Social Services/Parent Involvement component to reduce case loads." (New Jersey) ■ "Quality money will fund a new position (1/2 education and 1/2 parent involvement) which will help our program assistant who is now doing Parent Involvement, Social Services, and part of Mental Health alone!" (California)

Chart 3
Staff Added With Quality Funds



"We were able to finally add to central staff to better manage 15 local sites. We had the same central staff when we had only 8 sites." (New Hampshire) ■ "We now have partial janitorial services at our centers." (California) ■ "Established a Head Start Director's position...eliminating a dual role." (Washington)

Agencies also took steps to strengthen administration; thirteen percent (13%) of the new staff added with quality funds were in "administration." Quality funds were also used to add staff in a variety of "other" positions, such as transportation, maintenance, etc. (6%).

Table 2
Component Staff Added With Quality Funds by Region

Region	Total New Staff	Education % of total	Health % of total	Parent Involvement % of total	Social Service % of total	Admin % of total	Other % of total
I	41	39%	17%	5%	7%	17%	12%
II	77	48%	10%	6%	18%	21%	4%
III	50	38%	10%	7%	18%	13%	0%
IV	122	30%	18%	11%	25%	8%	2%
V	113	42%	14%	19%	22%	22%	6%
VI	80	25%	10%	5%	11%	10%	15%
VII	26	46%	15%	23%	19%	8%	4%
VIII	41	68%	17%	2%	7%	0%	0%
IX	43	53%	30%	7%	23%	16%	16%
X	18	33%	17%	6%	17%	17%	6%
XI	10	20%	40%	10%	0%	10%	20%
XII	9	67%	0%	0%	22%	11%	0%
All	659	39%	15%	9%	18%	13%	6%

Classrooms and Playgrounds

The 314 programs reported renovating 639 new and existing classrooms, approximately two renovated classrooms per program. Region IV reported the most renovations, (150), and the highest average per program, (3.3). Region XII reported the fewest renovations, three, and the smallest average per program, (0.5). [See Table 3] Assuming that the 314 reporting programs, with 19% of the total enrollment, are representative of Head Start overall, the author projects more than 3,300 existing and new classrooms were renovated with funds from the 1991 legislation. This would mean that more than 10% of the 31,254 classrooms in operation in 1992 were renovated the previous year with funds from the 1991 legislation.

"We were able to renovate two new classrooms" (Utah) ■ "New floors in classrooms that would not otherwise meet licensing requirements." (Massachusetts) ■ "Renovate bathrooms in existing center." (Pennsylvania) ■ "Much improved facilities in three locations." (Michigan)

The 314 programs also reported adding a total of 85 portable classrooms. With 314 reporting programs, representing 19% of the total enrollment, the author projects that programs nationally added 447 portable classrooms in 1991.

Quality improvement and startup funds were also used to build playgrounds. Responding programs reported adding 375 new playgrounds, which projects to 1,974 new playgrounds nationally.

Table 3
Renovated Classrooms, Portables & New Playgrounds by Region

Region	Programs Reporting	Total Classrooms Renovated	Average Classrooms Renovated by Program	Total New Portables	Total New Playgrounds	Average New Playgrounds by Program
I	24	34	1.42	0	18	0.75
II	33	74	2.24	6	13	0.39
III	34	59	1.74	6	23	0.68
IV	45	150	3.33	25	111	2.47
V	54	101	1.87	9	64	1.19
VI	24	41	1.71	8	55	2.29
VII	17	21	1.24	2	12	0.71
VIII	21	38	1.81	6	27	1.05
IX	21	52	2.48	11	36	1.71
X	19	40	2.11	2	12	0.63
XI	14	21	1.50	5	6	0.43
XII	6	3	0.50	5	2	0.33
All	312	634	2.03	85	374	1.20

"(We) renovated two depressing play yards...they now look like parks." (California) ■ "We were also able to renovate a playground at a center which has heavy after-hour use by neighborhood young children." (Maine)

Other Findings

Literacy

Every Head Start grantee was awarded funds for "Literacy" in FY'91. ACYF established a minimum award level of at least \$3,500 for every Head Start grantee. The 314 responding programs reported an average funding level for "Literacy" of \$6,081 in FY'91. In their comments about the impact of the 1991 funding, many directors were enthusiastic about the new literacy initiative:

"...Literacy funds will help parents to get their CDA, high school diploma, and GED." (Connecticut) ■ "Implemented literacy program into the entire Berkshire County area." (Massachusetts) ■ "Allowed Migrant Programs to implement literacy programs in all sites." (Arkansas) ■ "We are holding a literacy training with the Minnesota Literacy Council for nine programs in our region; certifying parents as Laubach tutors to work with other parents in the program on literacy." (Minnesota) ■ "Literacy funds provided greater incentive to work with community literacy programs; brought great attention to literacy needs of Head Start parents." (Indiana)

Technology

A number of programs reported that the 1991 funds had enabled them to invest in technology that strengthened their programs:

"The addition of computers!" (New York) ■ "Communication system for vans." (Colorado) ■ "Allowed us to computerize classrooms and update data management computerized system at administration offices." (New York) ■ "Safety mobile phones in all vans/buses." (Washington) ■ "Purchase of computer network to enhance (the) capability of (the) clerical staff." (Michigan) ■ "Computerized check-out system for resource room." (Alabama)

Summary and Recommendations

Based upon the response of the 314 programs, the Act had the kinds of effects at the local level that Congress intended, including:

- increasing the number of children and families served;
- increasing the number of communities in which Head Start services are available;
- improving the salaries and benefits of Head Start staff;
- improving the ability of Head Start programs to recruit and retain trained staff;
- improving the staffing ratios in the Head Start components;
- strengthening parent education through literacy programs; and
- improving Head Start facilities.

The survey confirms that Head Start took a significant step forward in the first year of the Act, but it is important to recognize that it was just the first step. Behind the enthusiasm, there are indications that continued significant investments in quality are required.

Head Start salaries increased faster than inflation for the first time in memory, but the overall 7% increase is relatively modest when it is considered in actual dollars. While the average annual teacher salary is projected to have increased by \$905, it still resulted in an average annual salary of only \$13,486 per year. Head Start salaries are still far too low, making it difficult for Head Start staff to support their families and for Head Start programs to continue to recruit and retain qualified staff. Moreover, a number of programs commented on the difficulty of improving salaries **and** benefits with the limited funds available; these pressures will continue in future years.

Quality funds were also used to add much needed staff. Adequate staffing is essential to the delivery of high-quality comprehensive services. Several Task Forces convened by ACYF during the 1980s recommended establishing staffing patterns for Head Start components to assure program quality, but limited funding prohibited programs from approaching these staffing ratios. It is encouraging to note that quality funds were used to add component staff, but the total number of staff added was again quite modest.

Comparing the number of staff needed in the Social Service Component illustrates the modest impact of the Quality Improvement Funds on staff. Approximately 5,400 *additional* staff would be required just to reduce Social Service staff ratios from 1:100 families to 1:50 families for the 540,000 children enrolled in 1990. However, DHHS reported that a total of 2,134 new Head Start staff (including expansion staff) were hired in 1991. While there were anecdotal reports of progress in this area, it is doubtful that significant overall progress was made in staffing patterns in the first year of the Act. Given the competing pressures for the use of quality funds (salaries/benefits, other components, etc.) it will be difficult to achieve the

recommended staffing patterns in the Health and Social Service components relying solely on quality funds.

There are at least two requirements for continuing the progress begun in the first year of the Act. The first requirement is significant funding increases. Under the quality reserve provisions of the Act, the size of the quality reserve in future years is dependent upon the size of the funding increase (25% of the increase after adjusting for inflation); without significant funding increases, future quality improvements will be severely limited. Of course, significant funding increases will also enable many more low-income preschool children and their families to benefit from Head Start services.

A second requirement is that Head Start expansion must be funded at levels that assure quality services. It is essential that the Administration fund *new slots* at levels that allow for appropriate class size, low social service, health, and parent involvement ratios, high-quality facilities, adequate management support, and decent salaries and benefits. Head Start expansion can be a vehicle for additional investment and strengthening of program quality.

The NHSA Impact Survey provides a very encouraging "picture" of how the Act affected local Head Start programs in its first year. As Head Start continues to grow and reach its potential, it is important to continue to monitor the changes and progress of the program in order to achieve the goal of providing high-quality Head Start services to all eligible children and families.

Appendix A

National Head Start Association

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NHSA IMPACT SURVEY

1. State _____ Region _____ (1-12)

What Did You Get?

2. 1990 funded enrollment _____
1991 funded enrollment (*anticipated 1991-92 enrollment — after expansion*) _____
3. 1990 federal Head Start funding (PA 22-26) \$ _____
1991 federal Head Start funding (PA 22-26) \$ _____ (*with permanent increases only--do not include one-time only/start-up funding*)

1990 federal T/TA (PA 20) \$ _____ 1991 federal T/TA (PA 20) \$ _____
4. 1991 funds to Increase Salaries/Fringe Benefits \$ _____
5. 1991 funds for "Other Quality Improvements" \$ _____
Use of "Other Quality Funds" (*with approximate amounts*):

\$ _____ salaries/fringe \$ _____ transportation \$ _____ additional staff \$ _____ insurance
\$ _____ facility repair/renovation - equipment purchase \$ _____ training
6. 1991 "One time only/Program Improvement/Start-up" funds \$ _____
1991 Literacy Funds \$ _____

What Did You Do?

7. On average, how much did your staff salaries increase (*percentage*)? _____ %

Overall, salary/quality money was used for _____ increasing salaries _____ maintaining benefits (offset increases) _____ improving existing benefits _____ adding new benefits (*Check all that apply*)
8. Other uses for quality improvement funds:

_____ number of buses/vans purchased _____ number of classrooms renovated
_____ number new staff added

Staff added with quality funds by components: _____ education _____ health _____ parent involvement
_____ social service _____ administration (*number added in each component*)
9. Use of One-Time Only and Start-Up funds:

_____ number of buses/vans purchased _____ number of classrooms renovated
_____ number of portable classrooms purchased/leased _____ total number new classes added
_____ number of playgrounds improved
10. What specific use(s) did you make of the increased T/TA funds? _____
11. Specific examples of how 1991 funds benefited your program and/or community; other comments: _____

Appendix B

Head Start Regions

Region I	Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont
Region II	New York, New Jersey, Puerto Rico, Virgin Islands
Region III	Delaware, Maryland, Pennsylvania, Virginia, Washington, D.C., West Virginia
Region IV	Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, Tennessee
Region V	Illinois, Indiana, Michigan, Minnesota, Ohio, Wisconsin
Region VI	Arkansas, Louisiana, New Mexico, Oklahoma, Texas
Region VII	Iowa, Kansas, Missouri, Nebraska
Region VIII	Colorado, Montana, North Dakota, South Dakota, Utah, Wyoming
Region IX	Arizona, California, Hawaii, Nevada, Pacific Trust Territories
Region X	Alaska, Idaho, Oregon, Washington
Region XI	American Indian Programs
Region XII	Migrant Programs

'I feel my program has improved 100% because of the new money. Our program was great before on little funds...but now we have an excellent program for families.' — Kentucky Head Start Director

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