

# Toddlers in Early Head Start: A Portrait of 2-Year-Olds, Their Families, and the Programs Serving Them

Executive Summary

February 2015

Baby FACES 2009

OPRE Report 2015-10



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# Toddlers in Early Head Start: A Portrait of 2-Year-Olds, Their Families, and the Programs Serving Them

Executive Summary: Age 2 Report  
OPRE Report #2015-10

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## **EXECUTIVE SUMMARY**

The Early Head Start Family and Child Experiences Survey (Baby FACES) is an ongoing study of Early Head Start programs designed to inform policy and practice at both national and local levels. In 2007, the Office of Planning, Research & Evaluation (OPRE) in the Administration for Children and Families (ACF), U.S. Department of Health and Human Services, contracted with Mathematica Policy Research and its partners to implement this six-year longitudinal study in 89 Early Head Start programs around the country. Baby FACES follows two cohorts of children through their time in Early Head Start, starting in 2009, the first wave of data collection. The Newborn Cohort includes 194 pregnant mothers and newborn children. The 1-year-old Cohort includes children who were approximately 1 year old (782 were ages 10 to 15 months). This report is the second of three submissions describing findings as we follow families and children throughout their experiences in Early Head Start. The first report provided in-depth information about the sample design, the measures used, and the baseline findings (Vogel et al. 2011). This report describes findings from the second wave of data collection and focuses primarily on children in the 1-year-old Cohort who were 2 years old in 2010. However, it also provides in the technical appendix information on the Newborn Cohort (when children were 1 year old). A subsequent report will describe children's experiences through age 3 and focus on the associations between receiving services at different levels of intensity and quality, and child and family outcomes.

Research questions for Baby FACES address three primary aims:

1. Describing Early Head Start and program services and staff
2. Describing the population served by the program
3. Relating program services to child and family outcomes

Because this report is only the second in a series of three, some questions will be answered only in the final report (short reports and research briefs that address particular topics are also planned). This report captures the first two aims and addresses the following questions using the spring 2010 data:

- What is Early Head Start? What are the program models employed, staff qualifications, and other important program features and characteristics?
- What specific services are delivered to families and what is their quality?
- What are the characteristics of the families Early Head Start serves in terms of their demographic, household, and family characteristics; their needs; and their risk factors?
- How are Early Head Start children and families faring over time?<sup>1</sup>
- How many children and families leave the program early? When do exits occur and what do families experience while they are enrolled?

We present in the appendices findings on the properties of the measures used in Baby FACES (Box 1 includes a brief summary of data sources). The rest of this summary highlights key findings from the spring 2010 data.

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<sup>1</sup> This report describes children at age 2. The final age 3 report will take into account the longitudinal nature of the data.

**Box 1. Overview of Baby FACES Data Sources at Age 2**

**Parent Interview.** This telephone interview asked the person primarily responsible for the care of the study child about demographic characteristics, the person's service needs and use, and both the caregivers' well-being and that of the child. It also asked about the child's exposure to environmental health risks and environmental and routine supports for the child's growth and development. Parents were also asked to rate their children's development and behavior.

**Direct Child Assessment and Home Observation.** This assessment includes administration of the Preschool Language Scale-4 Auditory Comprehension subscale (Zimmerman et al. 2002) and measurement of height and weight. While in the home, the field assessor also observes the child's ability to focus on the tasks, the interactions between the child and parents, and the quality of the home environment using the Bayley Behavior Rating Scale (BRS; Bayley 2006), the Home Observation for Measurement of the Environment (HOME; Caldwell and Bradley 2003), and scales drawn from a study of neighborhoods in Chicago (Ross et al. 2008).

**Parent Self-Administered Questionnaire.** Parents were asked to rate their children's development and behavior using the Ages & Stages Questionnaires, Third Edition (ASQ-3; Squires et al. 2009), MacArthur-Bates Communicative Development Inventories (CDI; Fenson et al. 2000), and the Brief Infant Toddler Social Emotional Assessment (BITSEA; Briggs-Gowan and Carter 2006). They also rated the quality of their relationship with the children's home visitors or teachers.

**Parent-Child and Assessor-Child Interaction.** Children participated in two semistructured interaction activities that involve playing with two sets of toys. Parents interacted with children using the Two-Bag Task protocol, an adaptation of the parent-child interaction task used in the Early Head Start Research and Evaluation Project (EHSREP) and the Early Childhood Longitudinal Study-Birth Cohort (ECLS-B). The field assessors interacted with children following the Early Communication Indicator (ECI) protocol (Greenwood et al. 2006).

**Staff-Child Report.** Home visitors and teachers of study children completed a child-specific rating of the characteristics and behavior of the families and children. Staff members also rated the quality of their relationship with the parents of study children.

**Home Visitor/Teacher Interview.** We interviewed either the child's home visitor or the child's teacher to determine his or her demographic characteristics, tenure working for the program, and well-being, as well as training and education experiences provided by the program and the work environment.

**Classroom Quality Observation.** Observers rated classrooms with the Classroom Assessment Scoring system-Toddler (CLASS-T; Pianta et al. 2010), which measures the quality of teacher-child interactions in center-based settings and includes two subscales: (1) Engaged Support for Learning and (2) Emotional and Behavioral Support.

**Home Visit Quality Observation.** Field assessors observed the home visitors who provided services to children in the study sample using the Home Visit Rating Scales-Adapted (HOVRS-A; Roggman et al. 2009) and a form that assessed the content and characteristics of the visit.

**Program Director Interview.** Through a semistructured telephone interview program, directors reported on their demographic characteristics, credentials, and training; program implementation; the work climate and staff benefits; family characteristics and needs; services offered; and staffing and turnover.

**Family Services Tracking (FST).** Early Head Start home visitors and teachers of study children completed a weekly service tracking form that detailed the number of service experiences (home visits or days in care) study children were offered and the number received.

**What Are the Program Models Employed, Staff Qualifications, and Other Important Program Features and Characteristics?**

Using data from program directors and staff in a representative sample of 89 Early Head Start programs, we report on several program characteristics. Program directors and other staff provided information on program services, supports for service continuity, and the duration and timing of extended program closure or conversion to a different service model during a program year (for example, during the summer). Program directors also reported on the types of data they maintain at

the staff, family, and child levels, and the format in which they store them. In addition, we collected data on staff characteristics.

### **Provision of Continuous Services Varies**

***Almost all programs have policies that support continuity of care and service delivery at the staff-family/child level.*** Nearly all programs that offer center-based care assign a specific teacher to each child (99 percent). In 68 percent of programs, children stay with the same teacher throughout their Early Head Start experience, either through looping or attending mixed-age classrooms.

***Service continuity across a program year varies, with as many as one-quarter of programs closing for three or more weeks or changing service approach in the summer.*** About one-quarter of programs (26 percent) close for 3 or more consecutive weeks during the year, with closures ranging from 3 to 10 weeks. Not unexpectedly, most of these closures occur in the summer months (June through September). One-fifth of programs change their service delivery options in the summer and temporarily discontinue a given service option; in most cases, they change from center-based to another option or type of service (80 percent offer home-based, 7 percent offer group socializations, and 9 percent make other unspecified changes).

### **Programs Offer Core Child Development Services at Recommended Rates, but Uptake of Services by Families Varies Widely**

The performance standards require a comprehensive package of services to support children's development. Depending on the service approach, programs are encouraged to offer a certain quantity of services per week as well as throughout the year and to tailor services to meet the diverse needs of enrolled families. Baby FACES offers a unique opportunity to examine the provision and take-up of services using data collected from a variety of sources. An innovation for this study, the family services tracking (FST) system, collected weekly data on the services children received throughout the year as reported by home visitors and center teachers. The analyses reported here from the FST focus on services received by children in the 1-year-old Cohort from July 2009 to June 2010, approximately the time from ages 1 to 2 (in the instances we use program director reports, these program attributes would also apply to children in the Newborn Cohort at age 1).

***Early Head Start programs offer core child development services at a high rate of frequency.*** According to program director reports, all programs that provide home-based services offer families in the home-based program option weekly home visits and at least two group socializations per month. All programs providing center-based services offered four or five center days per week. Based on data from the FST, children in the home-based option are offered about one home visit per week for most of the year but slightly fewer in summer and winter. Children in the center-based option are offered four or five days for most of the year; in summer and winter, the average number of days offered drops to about three or four days per week.

***Most families take up services at high frequencies, but rates vary by time of year.*** Data from the FST show that the average child in the home-based service option receives 37 home visits per year, and the average child in the center-based option attends 179 days per year. These rates varied somewhat by child and family characteristics. Take-up rates were lower in the winter, likely due to holidays or inclement weather.

***Programs work to maintain families' active participation but have established thresholds for disenrollment based on nonattendance.*** Programs use a variety of strategies to reach out to

families with poor attendance. Most sites conduct a home visit or call parents to encourage attendance. Other strategies include sending a letter home or arranging a meeting at the center. Some programs also seek to identify and help with barriers to participation, including transportation, changing service options, or health issues. Most program directors (66 percent) reported having a policy in place for dealing with frequent absences. These policies typically include a set cutoff for the number of missed center days or home visits before a family's slot is considered vacant and they are no longer enrolled in the program.

***Both directly and through referrals, programs connect families with a variety of additional services to support their needs.*** Programs provide activities for families such as group socializations in the home-based service option and parenting workshops in the center-based option. Fewer than half of families participate in these activities regularly, according to program directors. However, FST data for the 1-year-old Cohort show that a typical family in the home-based option attends an average of 11 group socializations over the observed period (a bit less frequently than once a month). Among center-based families, 80 percent participate in at least one parent education session during the year, and these participants attend 12 sessions, on average.

Programs provide referrals to help families access additional services. Seventy percent of families received at least one referral during the period from July 2009 to June 2010, according to the FST. On average, these families received six referrals during the year. Families who received a referral were less likely to be African American, and more likely to have a child who is a dual language learner, and a mother who is not employed.

### **Programs Used American Recovery and Reinvestment Act Funds to Expand**

Baby FACES provide the unique opportunity to get a sense of how the 54 programs in the sample that received expansion funds under the American Recovery and Reinvestment Act (ARRA) used those funds.

***Programs that received funding through ARRA added more than 4,000 program slots.*** These programs added nearly 2,200 center slots and 1,850 home visiting slots. About two-thirds of programs that received expansion funds added a new center or program site.

### **Access to Data to Inform Program Management Is an Area for Further Development**

***Programs vary in their storage of and access to data.*** Although all programs collect a range of data (for example, enrollment lists, treatment plans, and referrals), the mode of storage is mixed. Most store data in a combination of electronic and paper formats and use a database system to store attendance data. Paper storage is most common for progress reports (43 percent of programs), treatment plans (31 percent), referrals (27 percent), and information on staff training (24 percent); primary storage in electronic format is most common for enrollment lists (38 percent). Despite these systems, most programs (95 percent) indicated it would be very difficult to produce a list of enrolled children and their birthdates.

### **Staff Continuity, Diversity, and Credentials Are Program Strengths**

Analyses of data from teachers, home visitors, and program directors create a profile of program staff strengths and challenges. These findings extend program director reports of staff characteristics overall by adding detail from reports of staff working with the families and children in the Newborn and 1-year-old Cohorts.

**Programs have moderately low frontline staff turnover rates.** In 2010, program directors reported that 12 percent of teachers and 11 percent of home visitors left the program in the past year. More than half of these teachers and home visitors (58 percent) left for personal reasons. Turnover at the leadership level in programs is high, with 43 percent of programs losing a coordinator or manager during that same period, and 17 percent losing a director. Nearly half (47 percent) of programs have unfilled full-time staff positions. On average, program directors report that they have about four unfilled full-time staff positions. Most commonly, programs have vacancies for teachers (61 percent), home visitors (37 percent), and managers/supervisors (15 percent).

**Children have teachers and home visitors who are female and diverse in their racial/ethnic and linguistic backgrounds.** Nearly all 2-year-olds have a teacher or home visitor who is female (100 and 99 percent, respectively). Although slightly more than half of children have teachers or home visitors who are white (54 and 56 percent, respectively), a sizable percentage receive services from an African American or Hispanic staff member. Overall, 39 percent of children receiving home-based services and 31 percent of those receiving center-based services have a home visitor or teacher speaking a language other than English.

**English and Spanish are the languages most commonly spoken in classrooms and during home visits serving 2-year-olds.** English is the language adults most often speak in classrooms (100 percent) and during home visits (97 percent). Following English, teachers and home visitors most frequently report Spanish as the language spoken in children's homes. Arabic and Asian languages are also spoken. Considering only Spanish-speaking home-based families, the home visitor for 95 percent speaks Spanish. Among center-based children from Spanish-speaking homes, for 97 percent of children, the teacher or another adult in the classroom speaks Spanish.

**Children's teachers and home visitors are well-qualified and experienced.** Many children have a teacher or home visitor with a college degree and experience working with infants and toddlers. In fact, 78 percent of those served in home-based options have a home visitor with an associate's degree or higher, and 72 percent of those in the center-based option have a teacher with at least an associate's degree. Children's teachers and home visitors have 7 and 10 years of experience, respectively, working with infants and toddlers. Teachers and home visitors of children also have relevant credentials and backgrounds in early childhood. Among teachers with at least an associate's degree, 63 percent report that their field of study included early childhood education or child development. Similarly, among home visitors with at least an associate's degree, 59 percent studied early childhood education. Of teachers who have not earned a college degree, 74 percent have a Child Development Associate (CDA) credential; similarly, of home visitors who have not earned a college degree, 79 percent have a CDA.

**Children's teachers and home visitors participate in a number of professional development activities.** Children in the center-based option have teachers who reported attending an average of 58 hours of staff training annually; those in the home-based option have home visitors who reported an average of 64 hours. More than 70 percent of children have a teacher or home visitor who receives both one-on-one and group supervision. Among center-based children, 40 percent have a teacher with an assigned mentor/coach, as do 38 percent of home-based children and families.

**Children's teachers and home visitors report positive feelings about their current jobs and few mental health problems.** Close to 90 percent of children have a teacher or home visitor who reports that he or she is very likely to stay in his or her current job. Fewer than 80 percent have a teacher or home visitor who reports no to low symptoms of depression. Two percent have a teacher or home visitor with severe symptoms of depression.

## What Specific Services Are Delivered to Families and What Is Their Quality? <sup>2</sup>

Baby FACES documents service quality using observational measures of home visits and classrooms. As in the prior data collection round, the Home Visit Rating Scale-Adapted (HOVRS-A) and the Home Visiting Content and Characteristics Form document home visit quality. Given the timing of the age 2 data collection and overall design of the study, Baby FACES provided the unique opportunity to examine the newly developed measure of toddler classroom quality, the CLASS-T, in a national study. Thus, the CLASS-T was used to document classroom quality received by children in the 1-year-old Cohort (at age 2), replacing the Infant/Toddler Environment Rating Scales-Revised, which was used at baseline.<sup>3</sup>

### **Home visit and center-based care quality is in the midrange**

***Children and families receiving home visits experience a variety of activities.*** The largest proportion of home visit time is spent on child-focused activities (50 percent of time in a home visit), followed by staff-family relationship-building activities (17 percent), and parent-child and parent-family-focused activities (15 and 14 percent, respectively). The typical home visit includes time devoted to play (86 percent of home visits), provision of education and/or information (67 percent), goal-setting/planning (55 percent), and child/parent observations (50 percent). Modeling or facilitation of parent-child interactions is also common (44 percent). Home visits observed for the study lasted approximately 77 minutes, on average.

***Most children and families primarily served by home visits receive visits of midrange quality.*** Families receive home visits scoring in the midrange (3- to 4-point) on the total HOVRS-A score (out of a possible score of 5). Scores below 3 fall in the minimal range of quality. Scores are highest (4 or higher) in the areas of Child Engagement and Relationship with the Family and lowest (less than 3) in Nonintrusiveness and Facilitation of Parent-Child Interaction. Scores in the area of Visitor Effectiveness are somewhat higher than those for Visitor Strategies. Home visit quality is positively related to home visitors' receipt of a CDA credential, regardless of home visitors' overall level of education. Quality is also negatively associated with the number of unfilled staff positions in the program and home visitors' risk of depression.

***Children are in classrooms with group sizes and ratios within the performance standards and professional recommendations.*** The ratio of children to each adult is relatively low, averaging slightly fewer than three children per adult; the maximum allowed for this age range is four children per adult. Group sizes are considerably smaller than the maximum allowed (about six versus eight children).

***Many children are in mixed-age classrooms.*** Approximately half of the classrooms observed are mixed-age and include children who are 12 months or younger and/or 36 months or older—that is, a mixed-age classroom in this context includes the study 2-year-olds and children who are younger than 1, or older children ages 3 and older, or both those who are younger than 1 and 3 and older. Within these mixed-age classrooms, the average age span between the youngest and oldest child is 21 months.

***Most children in center-based programs are in classrooms of midrange quality.*** Overall, children are in classrooms scoring in the midrange on the CLASS-T (from 3 to 5 out of a possible score of 7). Scores are highest in the area of Emotional and Behavioral Support (5.3 on average), which includes Positive Climate, Teacher Sensitivity, Regard for Child Perspectives, and Behavioral Guidance; classrooms

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<sup>2</sup> This question is partially addressed by the data on family service uptake presented under the first research question.

<sup>3</sup> Observations of classrooms serving 1-year-olds at baseline used the Infant-Toddler Environment Rating Scales-Revised (ITERS-R); see Vogel et al. (2011) for details.

were rated in the low range on Negative Climate, indicating that interactions characterized by negativity were infrequently observed. Scores are lowest in the area of Engaged Support for Learning (3.6 on average), which includes Facilitation of Learning and Development, Quality of Feedback, and Language Modeling. Aspects of classroom quality are positively related to teachers' job satisfaction, experience, and child development credentialing, and negatively related to teachers' depressive symptoms, and staff turnover.

***Parents and staff have positive relationships with one another.*** Parents and staff endorse positive statements about their relationships at roughly similar rates. On average, parents agree or strongly agree with positive statements about the quality of relationships with their home visitors or teachers. Teachers and home visitors express similar positive attitudes about their relationships with children's parents. Relationship quality is not associated with observed quality of the home visits, but it is positively correlated with aspects of classroom quality.

### **What Are the Characteristics of the Families Early Head Start Serves in Terms of Their Demographic, Household, and Family Characteristics; Their Needs; and Their Risk Factors?**

During spring 2010, we visited families of 2-year-olds in their homes and collected information on parenting and the home environment. Sources of information include direct child assessments, observations of the home environment, and video recordings of parent-child interactions. These interactions were video-recorded for later coding using two coding schemes: the Parent-Child Interaction Rating Scales for the Two-Bag Assessment (Mathematica Policy Research 2010) and an adaptation of the Parenting Interactions with Children: Checklist of Observations Linked to Outcomes (PICCOLO; Roggman et al. 2009). As above, all information is for the 1-year-old Cohort at age 2.

#### **Children's parents and home environments are supportive of development**

***Most children are read to or told stories at least daily.*** About 61 percent of parents read to their children more than once a day, and an additional 29 percent read about once daily. Comparatively, about 38 percent of parents tell stories to their children more than once a day; nearly the same proportion (39 percent) tell a story about once a day. More than half of all households (57 percent) have at least 25 books for the children, and nearly another quarter have 11 to 25 books for the children.

***Most 2-year-olds' home environments are emotionally supportive and cognitively stimulating.*** Scores on the Home Observation for Measurement of the Environment (HOME) inventory (Caldwell and Bradley 2003) average nearly 25 out of 30, suggesting that 2-year-olds live in home environments that have adequate emotional support and cognitive and language stimulation.

***Recordings of parent-child interactions show mid- to high-range levels of positive parenting behaviors and low levels of negative ones.*** According to observed ratings on the 7-point Parent-Child Interaction Rating Scales, parents of 2-year-old children received average scores of 4 (out of 7) on sensitivity, positive regard, stimulation of cognitive development, and relationship quality. Parental sensitivity, positive regard, and relationship quality were highly intercorrelated, and were combined into a single composite score (synchronicity), with comparable average ratings of 4. Conversely, negative parenting behaviors during the play-based assessment averaged 3 for negative regard, 4 for intrusiveness, 3 for detachment, and 3 for dissolution of boundaries. Compared with the EHSREP (ACF 2001) and the ECLS-B (Andreassen and Fletcher 2007), mean ratings on the positive dimensions of parenting are similar across the studies. Overall, ratings of parental positive regard and cognitive stimulation are slightly higher in Baby FACES than in EHSREP. Notably, negative parenting behaviors (negative regard, intrusiveness, and detachment) were observed to be somewhat higher in Baby FACES than in other studies.

We also assessed positive parenting behaviors using the PICCOLO, an observational instrument designed to measure developmentally appropriate parenting along four domains: affection, responsiveness, encouragement, and teaching. Average scores are similar to those reported in other studies with parents of children at this same age (Cook and Roggman 2009).

## How Are Early Head Start Children Faring?

Parent and staff reports, direct child assessments, assessor ratings, and video-recorded interactions provide a more complete picture of children's development at age 2.

### **Children's physical development and health are on track, but other measures in other developmental domains do not provide a clear picture of development.**

***Most 2-year-olds in Early Head Start maintain physical well-being and have access to health care.*** Based on parents' reports, 80 percent of 2-year-olds have excellent or very good health; only 5 percent have fair or poor general health. On the 5-point rating scale for children's general health, which ranges from excellent (5) to poor (1), the mean of parent ratings is 4.2, suggesting that overall children's general health status is between excellent and very good. Based on direct measures of children's height and weight, the prevalence of obesity is 17 percent—the same result found in the nationally representative ECLS-B. In addition, about 16 percent of children are identified as at risk for obesity (similar to the 15 percent prevalence rate found in the ECLS-B); and 6 percent are underweight.

Parents reported that all of the 2-year-olds received some type of health services—including doctor or dentist visits, immunizations, and evaluation for disabilities—in the past year. Compared with 6 percent of children nationally who do not have a regular source of health care (Federal Interagency Forum on Child and Family Statistics 2010), only 1 percent of Early Head Start children lack a regular health care provider. Only 2 percent have not had a well-child checkup in the past year. Approximately 92 percent of 2-year-old children are reported as “completely up to date” with immunizations.

***According to parents' reports, 2-year-old Early Head Start children are near their same-age peers in general development.*** As reported by parents on the ASQ-3, on average, toddlers are near their same-age peers nationally in each of the developmental areas. The average scores on the age-specific forms are approximately 50 of 60 in Communication, Gross Motor, and Personal-Social, and about 45 of 60 in Fine Motor and Problem Solving. The average ASQ-3 total score for 2-year-olds is 239 of 300. At age 2, Early Head Start children scored in line with the normative sample in Communication, Gross Motor, and Personal-Social. However, their scores are lower than the normative sample in Fine Motor and Problem Solving.

***Children are continuing to develop their language development at age 2 but are not quite at national norms.*** Although parents reported better expressive language development in children on the CDI than did Early Head Start staff, compared with national norms and the ECLS-B, ratings by parents and staff indicate that children still have catching up to do with their same-aged peers. Two-year-old Early Head Start children score a little more than half a standard deviation below the national norms<sup>4</sup> on the English Preschool Language Scale-4 (PLS-4) Auditory Comprehension scale and on the Spanish PLS-4 Auditory Comprehension scale (91 and 90, respectively).

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<sup>4</sup> The standard scores for the national normative sample have a mean of 100 and a standard deviation of 15.

Likewise, the expressive communication scores of 2-year-old children on the ECI, a child-interviewer interaction task, are a little more than one-half of a standard deviation below the standardized mean of 100.

***Multiple data sources provide a mixed picture of children's social-emotional development.***

On the BITSEA, parents reported children as having more problem behaviors than did Early Head Start staff. Staff reports yield Problem scale scores that are comparable to the national norms, whereas parents' reports indicate that children's problem behaviors are higher than the national norms. Both parents' and staff reports yielded similar Competence scale scores which fell below national norms.

Children display positive behaviors in play interactions with their parents. On rating scales that range from 1 to 7, children displayed behaviors of about 4 on engagement, sustained attention, and enthusiasm. Overall, expressions of negativity were about 3. More than three-quarters of children received scores greater than or equal to 4 on engagement of parent (77 percent), sustained attention with objects during play (87 percent), and expressions of enthusiasm (80 percent). Only 24 percent of children displayed indicators of negativity at similarly high levels. Scores are similar to those reported in other large-scale studies with children at this same age (including the EHSREP and ECLS-B).

Assessors rate the majority of 2-year-old children as scoring above the cutoffs on the BRS. However, approximately one-quarter (26 percent) of children score in the nonoptimal range (10th percentile or lower) on Orientation/Engagement; 43 percent score in the nonoptimal range on Emotional Regulation. Compared with the national norms, assessors rate more Early Head Start children as falling into the nonoptimal range.

**How Many Children and Families Leave the Program Early? When Do Exits Occur and What Do Families Experience While They Are Enrolled?**

One way to assist programs in improving their retention of families is to document who leaves the program earlier than expected and determine whether that group differs from those who do not leave. The Baby FACES FST system and exit interview data provide an opportunity to analyze the pattern of service use and transition out of Early Head Start. This report provides an initial picture of the experiences of so-called early exiters (children and families in the 1-year-old Cohort who leave the Early Head Start program before spring 2010, the time of their second birthday).

**Those who exit programs early are similar to those who stay on a range of service-use characteristics, but they are at higher demographic risk.**

***Overall, most children do not exit Early Head Start by age 2, but slightly more than one-fifth of children do leave early.*** Children in home- and center-based options exit at similar rates. Early exiters attended programs with characteristics similar to those attended by continuing participants. Exiters' programs, however, have smaller staff-child ratios (that is, there are slightly fewer staff per child). Early exiters and continuing participants experience similar levels of classroom and home visit quality. Staff members serving early exiters have similar levels of education, experience, and depressive symptoms as those serving continuing participants. Early exiters and continuing participants share similar program attendance rates and were similar developmentally at age 1. Continuing participants' staff members rate staff-parent relationships slightly but significantly better than exiters' providers.

***Early exiters come from families facing more maternal risks.*** Early exiters and those who continue in the program do not differ in terms of gender, race/ethnicity, or dual language learner status. Early exiters did not differ from those who stayed in the program in whether they moved in the past year.

Early exiters come from families facing a higher number of maternal risks, with an average of 2.3 risks compared with 2.1 for continuing families. Among exiting families, 75 percent are receiving public assistance, compared with 68 percent of continuing families, and 31 percent of exiting mothers were teenage mothers, versus 21 percent of continuing mothers. Though early exiters are more likely to receive public assistance than continuing participants, the two groups do not differ in income-to-needs ratio.

***Families often cited moving as their reason for leaving and most of exiting families were very satisfied with the program.***<sup>5</sup> Families most commonly cited moving away from the program area as their reason for leaving the program (31 percent). The second most common reason, given by 12 percent of families, is being too busy to participate. In general, exiting families expressed high satisfaction with their Early Head Start programs. Seventy-four percent said they were very satisfied with their programs overall, and 97 percent reported that they were either very or somewhat satisfied. Despite the high levels of satisfaction reported, 8 percent of families cited inconvenient center hours or home visit times as their main reasons for leaving, and 7 percent desired a service option that was not available.

***About one-quarter of early exiters move on to another Early Head Start or early childhood program.*** Among exiting families, 23 percent moved on to another early childhood program: 6 percent enrolled in another Early Head Start program, and 17 percent obtained services from a different early childhood program. The remaining 77 percent of families did not report using any formal program.<sup>6</sup> Many families report that Early Head Start helped them to find other child care arrangements. Seventeen percent of exiting families overall, and 33 percent of those reporting that their children are in another early childhood program, said that the Early Head Start program they left helped them find another program. Most of these families (88 percent) indicated that the Early Head Start program they left helped by providing referrals for or identifying other child care arrangements.

## Next Steps/Looking Ahead

This report sets the stage for a final report on 3-year-olds to follow. That next report will include information collected in spring 2011 and 2012 and will cover all study children, from both cohorts, who remain in the program through age 3. It will focus on understanding and modeling the longitudinal aspects of the data to develop an understanding of relations among family and child characteristics, service uptake, and outcomes. A series of short reports and program-friendly four-page briefs will address other topics of interest, such as our efforts to measure program implementation.

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<sup>5</sup> These data are from the exit interview, which in this round had low response rates (54 percent). The data are weighted to account for this low response, but the findings should be interpreted with caution.

<sup>6</sup> We asked exiting families if they were attending another Early Head Start program, and if they were attending any other day care center, preschool, or early childhood program. Seventy-seven percent of families answered no to both questions and are presumably not using any formal early childhood arrangement.

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