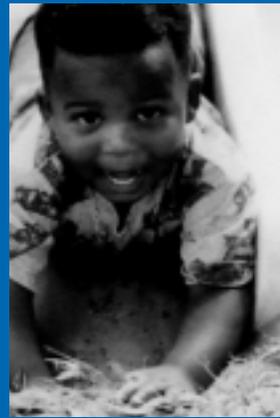




Early Head Start
and Head Start Partnerships:

Building a Birth-to-Five Head Start Program



U.S. Department of Health and Human Services
Administration for Children and Families
Administration on Children, Youth and Families
Head Start Bureau

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Early Head Start and Head Start Partnerships: Building a Birth-to-Five Head Start Program

Head Start (HS) has a long history of providing high-quality early child development services to preschool children and families. Early Head Start (EHS) was enacted in 1995 to extend those services to families with infants and toddlers. Now that the EHS initiative is nearly 10 years old, EHS and HS programs are grappling with how the two programs can collaboratively provide children and families with an array of services and supports from the prenatal period through entry to kindergarten. Birth-to-five programming is the concept of pro-

viding continuous and coordinated care for children and families participating in Head Start throughout pregnancy and for as long as Head Start remains an appropriate setting for a child during the first 5 years of life. The benefits of providing continuous and coordinated care are reflected in the relationships and partnerships that develop among programs, families, and communities. Additional benefits of prebirth-to-five programs include the following (Early Head Start National Resource Center, 2004)

- **Relationship building.** The opportunity for children and families to work with the same people, program, or both over an extended period of time allows for stronger relationships and increases the depth and breadth of the families' involvement in the program. Staff members are better able to individualize because of their greater level of involvement with families over time.

- **Community partnership.** Early Head Start and Head Start are a vital force for community development and can be a catalyst for creating partnerships that increase family access to needed resources. Birth-to-five programs can collaborate with community agencies that provide services spanning the prenatal-to-school-entry years and strengthen the network of supports and services available to families.
- **Staff development.** Birth-to-five programming provides an opportunity for early childhood staff members to learn more holistically about child development, beginning prenatally and continuing throughout the early learning years. Cross-training among infant-toddler and preschool staff members increases staff competence in both programs.



For 40 years, Head Start has provided comprehensive services to low-income preschool children and families to prepare them academically, developmentally, and socially for kindergarten. Since 1969, Migrant and Seasonal Head Start has provided birth-to-five HS services to low-income families who are working in agriculture. In the early 1990s, childcare advocates and researchers realized that there was a gap in services for children under age 3. When the Head Start Act was reauthorized in 1994, a special initiative was established to award grants to EHS programs beginning in fiscal year 1995. As a result, the then Secretary of Health and Human Services formed the Advisory Committee on Services for Families With Infants and Toddlers. The committee was asked to develop programmatic

approaches for addressing infant, toddler, and parenting development needs of low-income families. The position paper titled *Statement of the Advisory Committee on Services for Families with Infants and Toddlers* (U.S. Department of Health and Human Services, 1994) was the result of the committee's work and helped to lay the foundation for Early Head Start.

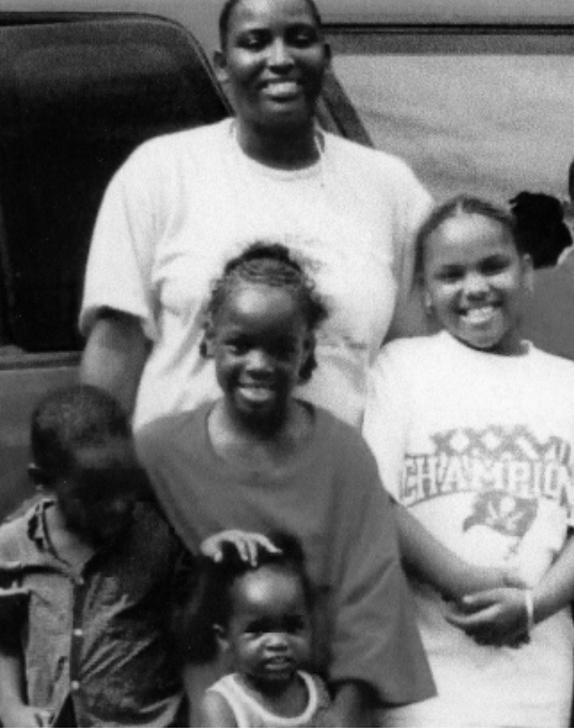
Early Head Start and Head Start share similar goals but bring different strengths to a collaborative, pre-birth-to-five program. The needs of expectant parents and infants and toddlers are different from the needs of preschoolers, and the Head Start Program Performance Standards recognize these differences. There are differences, for example, in the number of children allowed in one

group and in the ratio of children to teachers [1304.52(g)(4)] as well as in the approach to learning [1304.21(b)(1-3)]. The emphasis is on the parent-child relationship as the strongest foundation for healthy development. Early Head Start programs operate on a full-year schedule.

In contrast, the HS program for preschool children encourages more peer group interaction, independent exploration, school readiness experiences, and the development of pro-social skills. There are larger groups of children in a classroom, and children are more able to independently explore their environment. Head Start programs often operate on a 9-month schedule that follows the school year calendar, and programs may be part or full day.

Head Start has seasoned staff members, some of whom have been with the program since its inception more than 30 years ago. Early Head Start, while being a relatively new initiative, brings a wealth of resources to enhance program quality, including staff training opportunities, technical assistance services, and additional funding. Although integrating





EHS and HS programs can present challenges, respecting the strengths of each will lead to greater opportunities for building strong, high-quality, coordinated birth-to-five programs. The focus of this paper is on the integration of Early Head Start with preschool Head Start with an emphasis on the circumstances that are unique to providing services for expectant families and infants and toddlers and the implications for building a coordinated program from pregnancy through age five.



Head Start Program Performance Standards

1304. 21 (B) (1)—CHILD DEVELOPMENT AND EDUCATION APPROACH FOR INFANTS AND TODDLERS.

Grantee and delegate agencies' program of services for infants and toddlers must encourage (see [45 CFR 1304.3(a)(5)] for a definition of curriculum):

- (i) The development of secure relationships in out-of-home care settings for infants and toddlers by having a limited number of consistent teachers over an extended period of time. Teachers must demonstrate an understanding of the child's family culture and, whenever possible, speak the child's language (see [45 CFR 1304.52 (g) (2)]);
- (ii) Trust and emotional security so that each child can explore the environment according to his or her developmental level; and
- (iii) Opportunities for each child to explore a variety of sensory and motor experiences with support and stimulation from teachers and family members.

1304.21 (b) (2)—Grantee and delegate agencies must support the social and emotional development of infants and toddlers by promoting an environment that:

- (iv) Encourages the development of self-awareness, autonomy, and self-expression; and
- (v) Supports the emerging communication skills of infants and toddlers by providing daily opportunities for each child to interact with others and to express himself or herself freely.

1304.21 (b) (3)—Grantee and delegate agencies must promote the physical development of infants and toddlers by:

- (vi) Supporting the development of the physical skills of infants and toddlers including gross motor skills, such as grasping, pulling, pushing, crawling, walking, and climbing; and
- (vii) Creating opportunities for fine motor development that encourage the control and coordination of small, specialized motions, using the eyes, mouth, hands, and feet.

[Source: 45 CFR 1304.21]



The Unique Needs of Infants and Toddlers

One of the challenges of birth-to-five programming is ensuring that programs respond to the unique needs of infants and toddlers. This challenge is a particular concern if the EHS enrollment is significantly lower than the HS enrollment because the needs of preschool children and families are that much more visible. Early Head Start may feel that it is being “swallowed up” by the HS program. Classrooms for infants, toddlers, and preschool-

ers look, feel, and are different. A few examples of infant caregiving practices in center-based settings that support healthy development include the following:

- **Small group size.** Infants and toddlers respond best to a small number of consistent caregivers. The group size for infants and toddlers is four children to one teacher, with no more than eight infants or toddlers in a group. Group size is important for the individualized care that is necessary to meet the varied needs of very young children in a group setting. Limited group sizes also facilitates close, nurturing relationships between children and their caregivers.

- **Primary caregiving.** At the programmatic level, *primary caregiving* refers to the practice of assigning a primary teacher to be responsible for the care of a child. Primary caregiving is a recommended practice for infants and toddlers because it provides infants with an opportunity to develop a close, trusting relationship with a consistent caregiver who knows the child well. Although other caregivers may be in the classroom providing care, the primary caregiver is the person who takes the lead and provides continuity for the child and family.
- **Continuity of care.** The practice of keeping young children in child-care with the same caregiver for as long as possible strengthens those relationships. Frequent changes in caregivers should be avoided during infancy. Combined birth-to-five programs go further to promote continuity by allowing families and staff members to create partnerships over an extended time period. Staff members of birth-to-five programs can also incorporate program strategies that embrace continuity between the EHS and HS program, for example, joint transition planning for children moving from the EHS to the HS program or from an EHS program to a non-HS community-based setting.

WORKING WITH INFANTS AND TODDLERS IN CENTER- AND HOME-BASED SETTINGS

The environment in both center- and home-based settings is an important part of the curriculum. It is a tool to support child development and learning by responding to the preferences of different children; by meeting each child's needs for active play, quiet rest, physical comfort, and interaction with peers; and by adapting to meet the changing needs of children as they grow.

The rapid pace of physical development during infancy means rapidly changing needs for a safe and stimulating physical environment. Center-based settings should offer young infants soft places to sit or lie

down and comfortable accommodations for nursing mothers to breastfeed. Mobile infants need safe places to crawl and surfaces to pull up on whereas toddlers require adequate space to run and climb. Outdoor spaces provide a natural learning environment, support gross motor development, and conform to safety standards. Both indoor and outdoor environments need to be flexible so caregivers can respond to a variety of different needs at the same time. And the environment needs to be welcoming to parents and support the goal of strengthening the parent-child relationship by inviting interaction with their children. Additional considerations for a developmentally appropriate environment include the following:



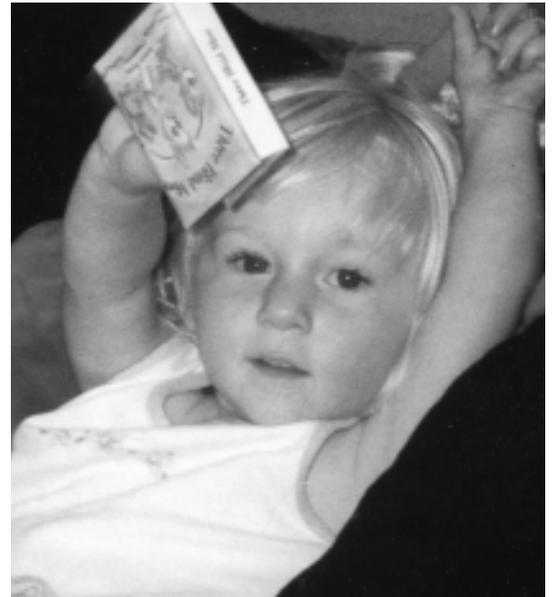
- Health and safety are priorities when establishing high-quality environments for children, and they directly affect how staff members interact with children. When teachers are nervous and tense about the children's safety, they will not be able to relax and play. An unsafe environment usually leads to spending too much time on behavior management ("Don't touch that"; "Don't climb there") and too few opportunities to join children in the kind of active exploration that facilitates learning. Home visitors can help parents identify safety hazards in the home and some strategies for arranging the home environment to meet the child's developmental needs.



- Caregivers need to create places where children can retreat from the group for some alone time. The noise and activity of a toddler classroom can be overwhelming, and children need the opportunity to spend time alone. Cozy book corners, lofts, or other small play structures can provide an escape for the toddler but permit safe supervision.
- Infants, especially, can be easily overstimulated. Watch for the baby's cues about whether certain toys and experiences are distressing. In an overstimulating environment, infants may be irritable and fussy or may disengage or go to sleep to tune out the environment. Infants can be overstimulated in any of their senses—by too many highly contrasting colors or harsh lights, by too much noise or activity, or by being touched and handled by too many people.
- One aspect of a child's sense of comfort and trust comes from how well the center-based environment reflects her home language and culture. Infants and toddlers are just developing their sense of identity and self-esteem and depend on the sensitivity of their caregivers to respond to them in ways that affirm their developing sense of self. Staff development and training in the area of cultural diversity is critical for the success of any program.



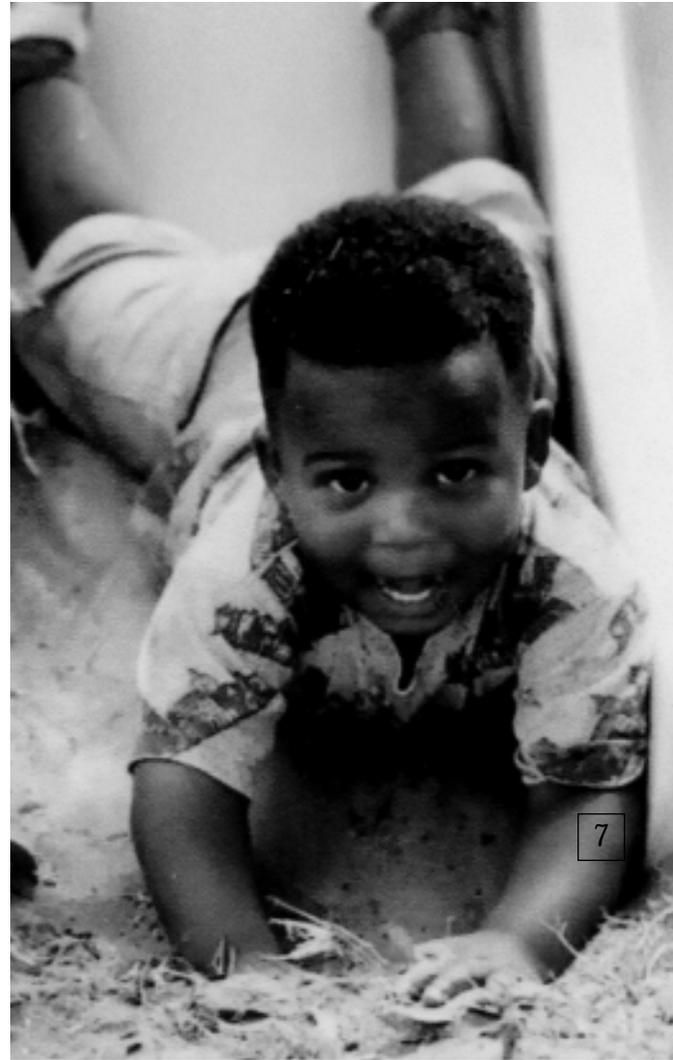
Home visiting and group socialization experiences present some differences for programs that are new to working with expectant parents and families with infants and toddlers. Home visitors working with new parents pay particular attention to the parent-child attachment and to the family adjustment to parenthood, breastfeeding education, establishing a medical home, and ensuring a safe physical environment from the perspective of a young baby. If the same home visitor is to stay with the family potentially throughout the child's enrollment in Early Head Start and Head Start, he or she may need additional training to understand the changing needs of children as they move from infancy



to toddlerhood and the preschool years. To preserve the continuity for the family, it is well worth providing the additional professional development rather than changing home visitors.

Group “socialization” experiences in the home-based program option for infants and toddlers is an opportunity for parent–child group interaction. The purpose of socialization experiences for infants and toddlers is to support child development by strengthening the parent–child relationship. Socialization offers structured and unstructured learning opportunities for both children and parents, an opportunity for staff members to model successful strategies for engaging children and supporting their development, and a place for parents to share the joys and complexities of parenting. In contrast, socializations for preschool-age children are focused on peer group interaction and children’s social skills in the group context. The Head Start Bureau Information Memorandum *Child Development Services During Home Visits and Socializations in the Early Head Start Home-Based Program Option* (U.S. Department of Health and Human Services, 2000) states:

Socialization experiences for infants and toddlers support child development by focusing on relationships and are planned to support parents’ interaction with their children. All activities should be appropriate for the ages and developmental level of the children present, and take into consideration adult needs and learning styles. Programs should consider the different developmental needs of young infants, mobile infants, and toddlers when planning socialization experiences. For example, young infants may tire easily and only tolerate group experiences of a short duration, while toddlers might enjoy a longer or more active group experience. For this reason, Early Head Start grantees may consider forming socialization groups based on the developmental level of the children: young infants, mobile infants, and toddlers. Mixed age groups can be appropriate for families with multiple children under three years of age or other family circumstances. Both models support the parent-child relationship when the experiences are planned to meet the developmental needs of the children in Early Head Start. Programs might consider separate accommodations for older siblings of the children enrolled in Early Head Start so that the parent is fully available to focus on the infant or toddler during the socialization experience.





BRAIN DEVELOPMENT AND LEARNING

8

The most recent research on early brain development highlights the “pruning” process that occurs in the connections among brain cells. This process literally shapes the structures of the brain by strengthening the connections among frequently used cells and by weakening or eliminating the connections among brain cells that are not used (National Research Council & Institute of Medicine, 2000). The research has been misunderstood to mean that infants need constant stimulation or special toys and activities to stimulate their brain development. This interpretation is not true. Interactions that take place through daily caretaking routines such as holding, rocking, bathing, feeding, dressing, and talking to infants all help create new connections in the brain. Infants do not need toys or products

that are specially made to stimulate brain development, and these items will not make a smarter baby. Children need a variety of play materials that challenge them at different ages and that capture their interest and imagination. For example, blocks can be used by older infants for stacking or, when hollow, for using as containers to fill up and dump out; they can also be used by toddlers and preschoolers for building structures that support their pretend play.

A comprehensive approach to curriculum addresses learning goals in all developmental domains—motor, sensory, language, cognitive, social, and emotional skills. Infants and



toddlers learn new skills through their interaction with and exploration of the world around them. Rote teaching of discrete skills is developmentally inappropriate. Moreover, each area of development relates to and influences the others. For infants and toddlers, it is impossible to separate one developmental area, such as cognitive development, from any other. For example, an infant playing pat-a-cake with his caregiver is learning language skills (words and sounds), cognitive skills (imitation), motor skills (bringing his hands together in front of his body), social skills (turn taking), and emotional development (gestures have meaning and playing together is fun). What is needed is to (a) create an approach to curriculum planning that allows the EHS staff members and parents to collaboratively develop learning goals, (b) identify the experiences they want children to have in the program, and (c) do what is necessary to create those learning opportunities.

Although infants, toddlers, and preschoolers all have unique needs, programs providing coordinated birth-to-five services share common goals. The section that follows discusses how Early Head Start and Head Start, together, can best support the rapidly changing needs of children and families throughout the child’s first 5 years.



Building a Strong Birth-to-Five Head Start Program

A strong, coordinated birth-to-five effort takes careful planning and strong leadership. Management systems such as program governance, planning, communication, as well as record keeping and reporting are critical components of effective programs. Program leaders, for example, form governing and advisory bodies that include adequate representation from both EHS and HS programs to ensure that each entity has a strong and respected voice in program services. Carefully planned and effective systems for communicating and record keeping allow for sharing of information, service coordination, and follow-up across the whole program. A number of administrative issues, program practices, and staff development opportunities are detailed in the following sections.

Administrative Issues. Program administrators can do a number of things related to funding that supports birth-to-five programming. The following issues are important to keep in mind:

- Grantees with both EHS and HS programs are expected to submit one refunding application for both programs. However, each grantee's EHS and HS programs will submit separate budgets because the funding comes from separate EHS and HS program accounts.
- Grantees are allowed a maximum of 15% of the budget for administrative costs, which can be calculated across the EHS and HS budgets. Similarly, in-kind contributions can be calculated across both the EHS and HS budgets.
- The federal regulations that require grantees to offer at least 10% of enrollment opportunities to children with disabilities and no more than 10% to children from families who are over-income are calculated separately for EHS and HS. This procedure is to ensure that the number of enrollment opportunities are equally represented in the EHS and HS programs.

Program Practices. Although EHS and HS programs are legislated and funded separately, programmatic practices help to ensure that families experience coordinated services.

- Program managers may consider how programs can “share” staff members when a family has an infant in Early Head Start and a preschooler in Head Start. In this case, a home visitor who is qualified in early childhood birth-to-five could provide both EHS and HS services to the family rather than assign separate home visitors from each program.
- The EHS and HS programs might also consider creating positions that work across both programs, for example, content area specialists, including health or mental



health specialists, disabilities specialists, or education specialists. Such staff members would need to have training and experience in providing services to children and families from prenatal stages to age 5. The benefit of “sharing” staff positions is the integrated approach to service delivery and the continuity for families as well as for transitions between Early Head Start and Head Start. Both of these options present budget considerations such as cost allocation and require careful fiscal management, but they are well worth the effort to coordinate birth-to-five services.



THE TRANSITION FROM EARLY HEAD START TO HEAD START

When a grantee operates an EHS and a HS program, the HS program is expected to serve the children from the agency's EHS program [Head Start Act 645A (b)(7)]. This expectation is not the case for stand-alone EHS programs who do not offer HS services. In those programs, Early Head Start is not required to transition their children into the community's HS program, and the HS program is not required to "save" spots for the EHS children. It is in the best interests of children and families for the two programs to work together to develop systems that provide the coordinated and continuous services in their community.

12

When a child leaves Early Head Start and enters Head Start, the family's income must be reassessed to determine whether the family meets

income eligibility requirements for Head Start. If the family of a child leaving Early Head Start no longer meets the income eligibility criteria for Head Start, then the EHS program can assist the family in finding an alternative preschool placement. Another possibility is that the child could be enrolled in Head Start as part of the enrollment that HS programs can offer to families who are above the federal poverty guidelines but who meet other eligibility and selection criteria.

Some EHS programs have met the challenge of providing developmentally appropriate services to 3-year-olds by creating "transition classrooms." Grantees that offer services to children from birth to age 5 can have EHS and HS children in the same classroom if they do the following (Early Head Start National Resource Center, 2004):



- Obtain regional office approval on a grantee by grantee basis. This procedure must be done through the grantee's regional office program specialist.
- Follow the appropriate regulations for group size, child-and-teacher ratio, and teacher qualifications. When 3-year-olds who are enrolled in Early Head Start are in a class with HS children, the ratio of children to teachers must be 4:1, with a maximum group size of eight children and two qualified teachers as required by the Head Start Program Performance Standards [45 CFR 1304.52(g)(4)].
- Maintain separate funding accounts, when applicable.

When children make the transition from Early Head Start to Head Start, it is helpful to foster continuity by (a) arranging visits to the new classroom so the children and families can become familiar with the teacher and setting; (b) sharing information with the new teachers so they can learn about the children's interests and preferences; and (c) following similar routines in the new setting as children adjust to their surroundings.

Head Start Program Performance Standards

Grantee and delegate agencies must establish and maintain procedures to support successful transitions for enrolled children and families from previous child care programs into Early Head Start or Head Start and from Head Start into elementary school, a Title 1 of the Elementary and Secondary Education Act preschool program, or other child care settings. These procedures must include:

- Coordinating with the schools or other agencies to ensure that individual Early Head Start or Head Start children's relevant records are transferred to the school or next placement in which a child will enroll or from earlier placements to Early Head Start or Head Start;
- Outreach to encourage communication between Early Head Start or Head Start staff and their counterparts in the schools and other child care settings including principals, teachers, social workers and health staff to facilitate continuity of programming;
- Initiating meetings involving Head Start teachers and parents and kindergarten or elementary school teachers to discuss the developmental progress and abilities of individual children; and
- Initiating joint transition-related training for Early Head Start or Head Start staff and school or other child development staff. [Source: 45 CFR 1304.41(c)(1-3)]



PROGRAM VOICES

The greatest challenge to integrating our Early Head Start and Head Start has been how to create a service delivery system that will facilitate effective and successful transitions for children and families. For young children, the transition is much more than simply changing buildings or settings; it means learning a new set of rules and behavior as well as getting to know a new peer group and new teachers. Thus, we developed a transition plan from Early Head Start into Head Start and from Head Start to kindergarten. Our plan spells out the specific roles and responsibilities for individuals involved in the transition to reduce differences and enhance similarities between environments, which helps to ensure a smooth transition for children.

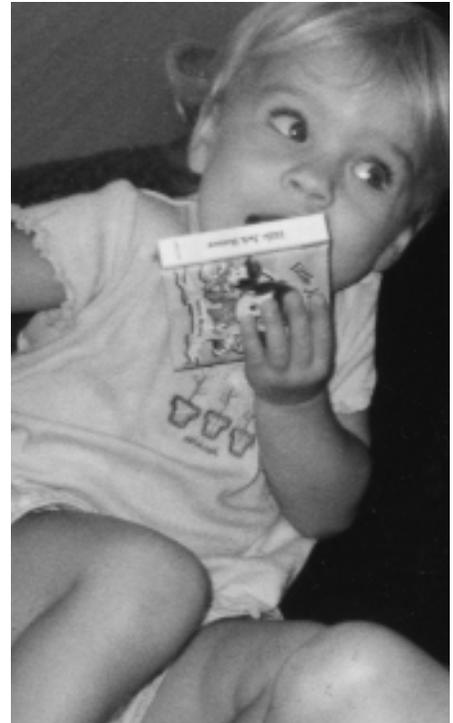
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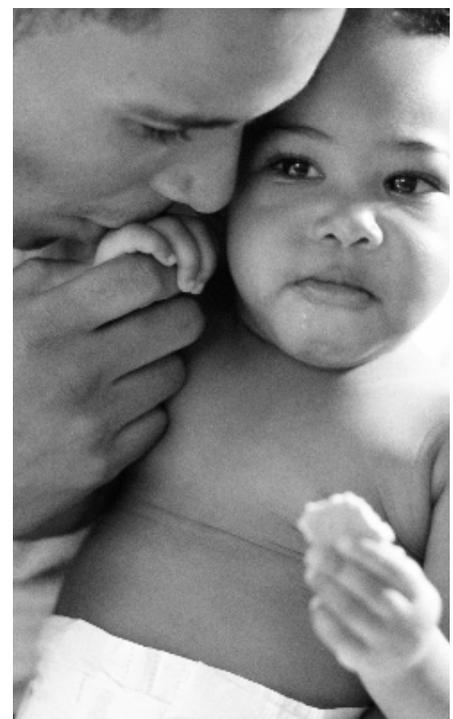
Additional transitions for programs to consider include the following:

- The transition from EHS prenatal services to a child development program option. Expectant families enrolled in Early Head Start make the transition to a center-based, home-based, or combination program option when their baby is born. Programs must plan how they will simultaneously provide services to pregnant women while ensuring that space will be available for the infants in one of the child development program options and that the available option will meet the needs of the child and family. Helping families plan for this transition should begin from the time the expectant family is enrolled in Early Head Start. The Family Partnership Agreement process offers the opportunity to begin planning for EHS services after the birth of the baby. EHS program staff members work with the parents to identify family needs and prepare for a smooth transition for the family when the baby is born.



- Transitions from one program option to another. Programs that offer a variety of program options recognize the changing and diverse needs of families during the course of their enrollment. When a child moves from one program option to another, the adjustment to new settings, routines, and relationships is stressful for children and families. These transitions can be eased with joint planning, information sharing, open communication, and time to adjust.

- Transitions for children with disabilities from Part C to Part B services. Infants and toddlers with disabilities who participate in programs funded through Part C of the Individuals with Disabilities Education Act (IDEA), the federal program for infants and toddlers with disabilities, transition to Part B, the program for preschool children with disabilities, when they are 3 years old. Transition services are mandated by IDEA and may include transition meetings, developmental assessments, and coordination with community partners.



JOINT TRAINING AND STAFF DEVELOPMENT

The 1998 reauthorization of the Head Start Act mandated that at least 50% of all EHS and HS teachers have at least an associate in arts degree (AA) in early childhood education or a related field. The Head Start Program Performance Standards specify additional qualifications specifically for teachers working with infants and toddlers [CFR 1304.52(f)].

One of the challenges in combining EHS and HS programs is preparing and training staff members to think about the program from a birth-to-five perspective. Joint training experiences offer an opportunity to build a strong sense of community between Early Head Start and Head Start and to motivate staff members to work toward common goals. Examples of joint training opportunities that can benefit EHS and HS staff members include the following:

- **Child development from prenatal stages to age 5.** Staff members from both entities benefit when they learn about the nuances of early development as children grow. Infant and toddler teachers and home visitors can support emerging abilities when they know what “comes next” and how the skills the children are gaining now will benefit them in the future. Preschool teachers and home visitors likewise can better support child development when they understand the foundational skills their preschoolers bring to Head Start.
- **Similarities and differences between Earl Head Start and Head Start.** Understanding the differences and similarities of both program entities can lead to greater appreciation and respect for what each program offers and how both programs work together to fully support young children and families.





- **Developing a shared mission and philosophy.** When staff members see the “big picture” and can identify common goals, they can more easily understand how program practices and policies support those goals.
- **Cultural continuity, language, and literacy.** Continuity between home and child-care settings provides children with a feeling of belonging and sense of security and has a powerful effect on their identity formation. Parents who are from linguistically diverse backgrounds may have specific literacy goals for their children. For example, some

parents may prefer that their infant first become fluent in their native language and learn English later. Other parents may want to their children to learn both languages at the same time. And yet other families may prefer that their child be exposed only to English when outside of the home. Further, parent’s literacy goals often change as their children age. Working together, Early Head Start and Head Start programs can help empower parents to make informed decisions about their child’s early language and literacy goals.





Reflective Supervision

18

Program leaders can help staff members develop self-awareness as a tool for promoting healthy relationships in their program. Just as we speak about the importance of relationships between children and parents, or between staff members and families, we need to recognize the importance of the relationships that staff members build with one another. These relationships can enhance or inhibit successful partnerships between Early Head Start and Head Start. It is important for staff members to take stock of their own temperament, working style, as well as feelings and reactions to program policies and practices so they can use that information to work more effectively. Regular opportunities for staff members to meet with their supervisors can provide a safe place to talk openly about their positive and negative feelings as well as the challenges or frustrations they might encounter in their work. A safe and supportive supervisory relationship to explore these normal feelings can help staff members better understand how their thoughts and behavior affect the work. Armed with self-awareness, they are able to build more effective partnerships and be more successful in all aspects of their work.

- **Environments.** Help staff members understand how the physical space is set-up differently according to the developmental needs of the children.
- **Program options.** Staff members can think flexibly about meeting changing family needs if the EHS and HS programs have a range of options to offer families. The rapid rate of growth in the early years often translates into different needs. For example, a new parent might prefer home visits when her baby is very young and might require center-based services when the child is older and the parent is ready to return to work. Program staff members can be prepared to help families assess which program options are right for them and to move from one program option to another as their needs change.

Creating an open environment in which differences are respected and valued is reflected in all aspects of collaboration between Early Head Start and Head Start: program planning, policies and procedures; hiring practices, supervisory relationships, and staff development opportunities; and most importantly in the daily interactions among staff members, parents, and children.

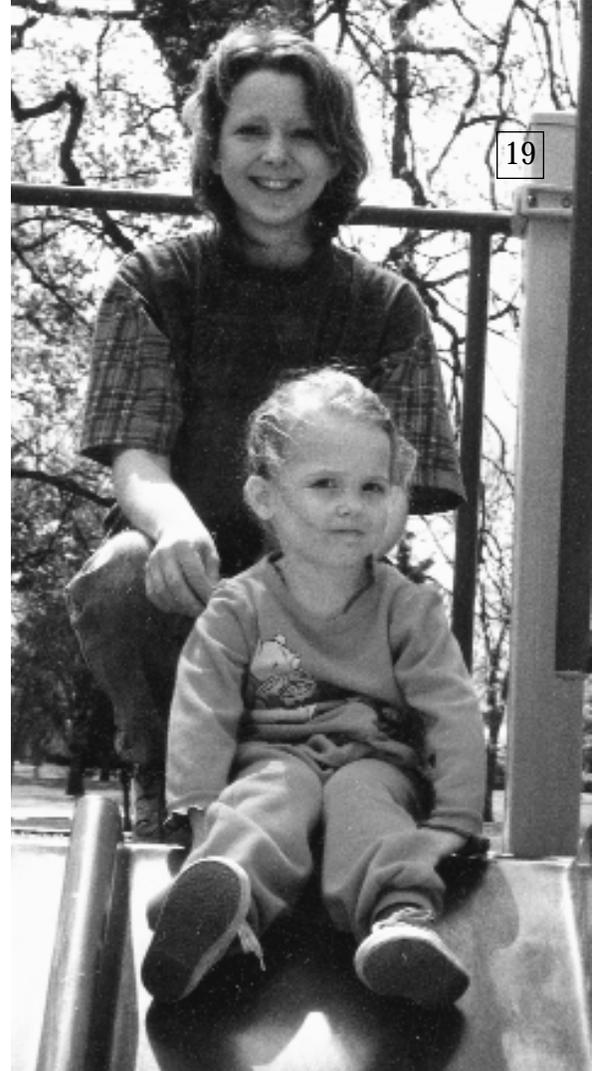
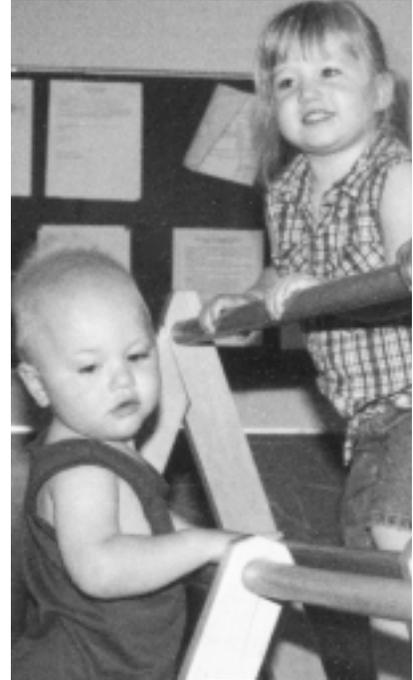
PROGRAM VOICES

The challenge is trying to get a holistic, integrated approach for birth-to-five programs. Children are at different developmental stages, and staff members have varying levels of knowledge and understanding about working with children from a birth-to five perspective. Our program has taken the responsibility to “grow” home educators and providers to serve the children and families. In response to this challenge, the program has invested time and money to train staff, and we also have a professional development coordinator who works closely with staff to encourage completion of AA and BA degrees.

(Tulare County Office of Education, Visalia, CA)

Children and families reap the benefits of quality birth-to-five programming through the ongoing relationships that families develop with EHS and HS staff members. One of the strengths shared by Early Head Start and Head Start is the opportunity for parent involvement and the partnerships that form between families and staff members. These relationships begin to form from the first contact the family has with the program and deepen over time. Naturally, a family who is able to maintain the relationships they have established at the entry of the

program—beginning in the prenatal period; continuing through the infant, toddler, and preschool years; and lasting until school entry—receive a wonderful gift. The power of trusting and supportive relationships inspires families to find their own solutions and achieve their goals. Families will continue to benefit from these early positive experiences in Early Head Start and Head Start as they use these skills to advocate for their child and family throughout their child’s years in school and for the rest of their lives.



References and Resources

Brazelton, T. B., & Greenspan, S. I. (2000). *The irreducible needs of children: What every child must have to grow, learn, and flourish*. Cambridge, MA: Perseus.

Early Head Start National Resource Center (2004, March). *The journey to creating a high quality birth-to-five program* [Audioconference]. Sponsored by the Early Head Start National Resource Center, Washington, DC.

Early Head Start National Resource Center (2004). *Transition strategies: Continuity and change in the lives of infants and toddlers*. Washington, DC: Head Start Bureau, U.S. Department of Health and Human Services.

Lally, J. R., Griffin, A., Fenichel, E., Segal, M., Szanton, E. S., & Weissbourd, B. (2003). *Caring for infants and toddlers in groups: Developmentally appropriate practice*. Washington, DC: ZERO TO THREE.

Lally, J. R., Mangione P. L., Signer, S., Butterfield, G. O., & Gilford, S. (1993). *Essential connections: Ten keys to culturally sensitive child care* [Videotape]. Sausalito, CA: The Program for Infant/Toddler Caregivers (developed collaboratively by the California Department of Education and WestEd).

Lally, J. R., & Signer, S. M. (2003). *Introduction to continuity*. Sausalito, CA: WestEd, The Program for Infant Toddler Caregivers.

Mangione, P. L. (Ed.) (1995). *Infant/toddler caregiving: A guide to culturally sensitive care*. Sacramento, CA: California Department of Education.

National Research Council, & Institute of Medicine (2000). *From neurons to neighborhoods: The science of early childhood development* (J. P. Shonkoff & D. A. Phillips, Eds.). Committee on Integrating the Science of Early Childhood Development; Board on Children, Youth, and Families; Commission on Behavioral and Social Sciences and Education. Washington, DC: National Academy Press.

U.S. Department of Health and Human Services (1994). *Statement of the Advisory Committee on Services to Infants and Toddlers*. Washington, DC: Author.

U.S. Department of Health and Human Services (2000). *Child development services during home visits and socializations in the Early Head Start Home-Based Program option* (Head Start Bureau Information Memorandum ACYF-IM-HS-00-22), Available at <http://www.headstartinfo.org/publications/im00/im0022a.htm>

U.S. Department of Health and Human Services (2004). *What do we mean by continuity of care in out-of-home care settings?* (EHS Tip Sheet No. 21) Available at <http://www.headstartinfo.org/infocenter/ehstipsheet/tip21.htm>

Head Start Training Guides

Effective transition practices: Facilitating continuity (2000). Available at <http://www.headstartinfo.org/publications/effectivetransitions/index.htm>

Infant and toddler transitions (1999). Available at <http://www.headstartinfo.org/publications/infant-toddlertransitions/index.htm>

Planning for transitions (1997). Available at <http://www.headstartinfo.org/publications/PlanningTransitions/index.htm>

Transitions: Parents are key (2000). Available at <http://www.headstartinfo.org/publications/transitionsparentskey/index.htm>

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