

DATE: 7/13/98

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
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HUMAN SERVICES LEGISLATION
ROOM 413 H HUMPHREY BUILDING

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TOTAL PAGES
INCLUDING COVER): 3

REMARKS: Here's the House Republican (i.e. Riggs/Goodling) list of what they "might" include in their Head Start reauthorization bill. Obviously we need to see their actual legislative language (which we hope to see soon), but clearly there are a number of serious problems here including the 75/25 quality v. expansion split, the overly specific performance measures (and how to enforce - through a national test?), the paternity measure and the waivers. While the vouchers and scholarships are not on this list, I understand they are still under consideration.

The plan is for Riggs to mark-up in full committee on the 22nd, but most expect that date to slip. We'll keep you posted.

Differences between S. 2206 and House Draft Bill

2 **EARLY HEAD START AUTHORIZATION-** Draft bill includes a 7% set-aside for FY 99-01 and up to a 10% set-aside for FY 02-03, provided HHS has issued a report to Congress on the results of the Early Head Start Impact Study by January 1, 2001.

INCREASE QUALITY MONEY: *Goodling issue*

FY 99 75% quality - 25% expansion
FY00 75% quality - 25% expansion
FY01 50% quality - 50% expansion
FY 02 50% quality - 50% expansion
FY 03 25% quality - ~~50%~~ expansion *75*

26-497-38

Draft bill retains requirement that 50% of quality money must be spent on salaries. It also retains Senate language that stipulates that preferences in awarding salary increases, in excess of cost of living allowances, shall be granted to classroom teachers and staff who obtain additional training or education related to their responsibilities as employees of a Head Start program.

Draft also stipulates that after quality money has been expended on salaries, of the remaining quality money, the highest priority for quality dollars should be spent on training classroom teachers and other staff:

- to meet education performance standards in the Senate bill;
- to train staff in activities listed in the Senate bill, and;
- to train classroom staff to provide "competent staff" activities (note: competent staff activities are defined in the Senate bill).

PROFESSIONAL DEVELOPMENT

Draft bill requires that, by the year 2003, the majority of Head Start classrooms will have a teacher with a college degree. Retain Senate language on competent staff.

at least AA

LOCAL PERFORMANCE MEASURES

Draft bill retains Senate language on performance measures and local monitoring. However, the draft stipulates that HHS must develop local performance measures by January 1, 2000. In addition, the bill adds four performance measures to measure newly established education performance standards. Measures are as follows:

1. Knows that alphabet letters are a special category of visual graphics that can be individually named.
2. Recognizes a word as a unit of print.
3. Identifies at least 10 alphabet letters.
4. Associate sounds with written names.

PATERNITY REQUIREMENT

Draft bill requires Head Start grantees to certify in their plan that, prior to delivering services to a family, they require custodial parents (in cases where there is an absent parent) to

2dnd full committee

cooperate with the State child support agency to establish a child's paternity and to obtain child support from the non-custodial parent.

FORMULA CHANGE

Draft bill retains Senate language on 1998 hold harmless, but stipulates that new money go out based on most recent child poverty data.

WAIVER AUTHORITY

FAMILY LITERACY DEMO



DATE: 6/18/98

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TOTAL PAGES
INCLUDING COVER) : 5

REMARKS: Here's a piece we did earlier that gets to the crux of the difference we are having with the R's -- the issue of mandating a study with a national control group. GAO is behind this effort, including that their recommendations be legislatively mandated -- despite the fact that leading researchers do not think it makes sense. Lets stay in touch on this.

Research

GAO REPORT ON HEAD START RESEARCH

QUESTION: According to a recent GAO report, existing studies fail to fully establish what impacts or outcomes the Head Start program produces. Therefore, GAO recommended that HHS expand its research plan for Head Start to include an impact assessment. GAO stated (page 19) impact research "could be done that would allow the Congress and HHS officials to know with more certainty whether the \$4 billion dollar federal investment in Head Start is making a difference." Do you agree with this recommendation?

ANSWER: The GAO states that random assignment studies on Head Start effects are needed in light of the new results-oriented environment of the Federal Government. However, the Department has created a wealth of new initiatives and systems to promote stronger accountability and program quality, notably the Head Start Quality Research Consortium. In 1995, the Head Start Bureau established four Quality Research Centers (QRCs). One objective of the QRCs is to work cooperatively to develop and test instruments to gather information on program performance measures. In 1996, the Head Start Bureau established a Performance Measure Center which will use these instruments to conduct the Head Start Family and Child Experiences Survey (FACES). The FACES is an ambitious effort to assess the performance of the Head Start program on an ongoing basis through a national longitudinal study of a representative sample of Head Start children and their families.

We are convinced that the current research design will allow us to have an ongoing, longitudinal data collection on representative Head Start children, families, staff and programs. The Performance Measures are in place, and we will continue to develop, test and refine the instruments as necessary to provide periodic, regular data on these objectives. The ability to compare data with nationally normed instruments, as well as other data from large national surveys, will provide good indicators of how Head Start children measure up to their peers. In addition, the use of observational measures of program quality, often used in national studies of preschools and day care centers, will provide Head Start with ongoing assessments of the educational quality of classroom environments. Finally, the opportunity to link indicators of program quality with child outcome data over time will provide the strongest test of program accountability.

The Head Start research agenda has been shaped over the years based on input from a number of leading researchers from the field. The various researchers that have been consulted consistently have recommended against conducting a single nationally-representative impact study of the effectiveness of Head Start due to a variety of ethical, methodological and logistical difficulties. In 1990, the Advisory Panel for the Head Start Evaluation Design Project put forth a set of research recommendations in the publication "Head Start Research and Evaluation: A Blueprint for the Future."

"An overall research strategy rather than a single large scale study is the appropriate framework or addressing critical Head Start research and evaluation questions. The Panel recommends strongly against a single large-scale study of Head Start as the principal mechanism for seeking answers to the pivotal research questions highlighted above. The methodological requirements for the new generation of research and evaluation issues do not lend themselves to large-scale evaluations that treat Head Start as a single program. Head Start is not, in any simple sense, a uniform "treatment." The common denominator of Head Start programs nationwide is conformity to a set of regulatory performance standards that reflect comprehensive service requirements in education, parent involvement, social services, and health services. But programs are allowed and encouraged broad flexibility in how they deliver the required component services. Moreover, Head Start programs serve children in different regions and subeconomies of American society. They serve a number of minority groups and address issues of bilingualism and multiculturalism. They embody a variety of programmatic formulas and intentions created by local Head Start staff to respond to the unique needs of families in their communities...

It is important to note then, in the view of the Panel, randomized studies designed to compare the effects of Head Start against the effects of nonparticipation ("treatment vs. no treatment") are generally no longer viable options. First, as ACYF progresses toward the Administration's goal of universal services for all eligible children, the potential for withholding services to form a control group, already difficult for ethical and practical reasons, will cease to be an option. Second, in view of the expansion of State and public school preschool programs and developmental child care, it is unrealistic to expect to find in most communities a representative group of "untreated" eligible children, even if Head Start services are not provided.

There are a variety of more specific barriers to a randomized study design reflected in the summary comments of the Panel. First, recruitment of children and families for Head Start is guided by mandates to serve the most needy of eligible families and to incorporate a minimum of 10% of children with disabilities in each program. A randomized, control group design would mean that agencies would be expected to recruit a sufficiently large pool of children with special needs to provide both a treatment and control group with at least 10% children with disabilities - and then to inform roughly one-half of the parents that they would not be allowed to enroll in Head Start. Second, in some states and many communities, Head Start is already serving more than a majority of the eligibility children and families. For example, in Ohio, the combination of state contributions and federal Head Start resources is estimated to be sufficient to serve 85% of all eligible families. In these situations, it would be impossible to conduct the form of evaluation recommended by GAO because of a lack of sufficient numbers of unserved children to comprise a control group. In addition, because of the very success of Head Start-state collaborations and Head Start-child care partnerships, it is difficult to determine whether control group children are actually participating in care that is totally non-Head Start.

One of the other violations to the basic assumptions of randomization is the mobility of low-income populations like Head Start. The Transition study and other research have documented the large number of moves among this population. Having children leaving treatment in unpredictable numbers and at unpredictable time points corrupts the random assignment design. Crossovers from program to comparison or vice versa are also common.

Randomization also assumes that everyone in the treatment group and everyone in the control group gets the same treatment (program) within their group. However, it is virtually assured that control group children will participate in a wide range of other early childhood programs and settings, of varying levels of quality, intensity, and comparability to the standard of Head Start services. In the first place, it would be difficult to coordinate recruitment and enrollment processes across these various program options, in order to identify the full range of eligible children before they are recruited/enrolled into other programs. Second, it would be challenging and expensive to track these other arrangements (including transitions between programs during the year and instances where children participate in a combination of several different programs simultaneously.) Further, it would be very difficult to interpret or use the results of a study that compares Head Start participation with such a wide range of other forms of programming. The types of available alternative programming, and the selection effects that contribute to parental choices of these programs are locally-determined. They include such factors as the welfare reform requirements parents face (and their resulting need for child care), child care licensing standards and effects on the formal and informal child care market, as well as cultural factors of the community such as ethnicity and family composition that affect choices parents make.

Finally, GAO has suggested in their 1997 report and in testimony this year that alternative strategies such as randomly accelerating and delaying Head Start services or studying partial vs. full versions of Head Start services should be considered as suitable for evaluation of Head Start effects. However, both of these recommended strategies have serious flaws and would not provide useful evidence on the central question of Head Start's effectiveness. Delaying/accelerating Head Start treatment would presumably involve serving some children as 3-year-olds and others as 4-year-olds. It would be difficult to draw appropriate comparisons between outcomes from these different forms of Head Start treatment, given the varying capacities of children of different ages and the correspondingly different expectations of appropriate outcomes for these different sets of participants. Such a delayed entry control design would, in most localities, change the fundamental way in which programs are operating. For example, current recruitment and enrollment patterns indicate that programs serving three year olds may select them according to special criteria (including being at greater risk than four-year-olds, and deemed by the program to be in need of services for a longer period).

The proposed design of partial vs. full versions of Head Start would contend with many of the same complications as the treatment/no-treatment design, given that

parents would be unlikely to be satisfied with assignment to the "watered-down" or partial versions of Head Start and could choose not to participate. In addition, this design would not produce answers to the central questions of outcomes and payoff of the existing comprehensive Head Start program that drive the call for more research.

The current body of research on early childhood interventions does achieve consensus on some points. When studying program effects, it is imperative to take into account such factors as family and neighborhood characteristics, culture and language, quality and intensity of services received (including observation of classrooms and caregiver-child interaction), as well as parent participation in and satisfaction with the program. There is less consensus about the best methodology for answering questions about program effectiveness. Some researchers advocate using comparisons to nationally normed instruments or large-scale studies, while others insist that random assignment designs are the standard, however difficult to carry out in real-life situations. Given this divergence of opinion on such an important question, perhaps the best recourse would be to seek consensus and advice from experts called together by an external scientific organization, such as the National Academy of Sciences.

Conf call 6/18

Head Start

- back & forth D's & R's H/S
- work together to reach a bipart bill - passed & Sen
- UC - only way ^{to reach} Sen Labor Com.
- both sides leverage.

Sen. -

Bq -

HHS - met w/ H-S subcommittee staff

Dodd, Cant, Riggs → Olivia has met

countless briefings - research issues
GAO - part

both sides talking - mark-up - slipping

Sen L - next wed in full com

Honer - not marking off July 4.

Sen R stuff - disc draft

Fri / Mon at latest → draft

read it quickly / come up w/ views letter of
position - for Wed. marking.

Issues:

Our bill - status quo - no major changes
'94 -

4 yr auth

↑ EHS 7 1/2 → 10

fellowships - 1 - 2 mil

new qual study

clean up stuff

H-5

5 yr auth

R - secure willing - 10% - font not at same pace.
6, 7, 8, 9, 10

D - may want to go up more quickly

Harkin - uncon, moved it to 6 1/2 in approp.

1995 law -

• prof. dev.

R - waiver stuff -

Gov dev a plan - Ser auth -
in prog. -

prog need.

cur a prov -

plans for new
grants to Gov -
Gov tell us if they
disapp.

- ch - had to
approve.

(Moving away -

D - NO

Top priority

For Profit - apply to run h.s. programs.
most needy, disab., etc.

- contracts - priv

- expenditure review

- priority for nonprofit

Collab w/ other prog - full day/full year

→ R - v. imp to them

We've said priority to us - but we don't want a
demand → no binding.
concern that → priority over children - b/c
then we'd never expand

- School readiness, reading, literacy.
- 4-5 prepare kids for school
- Perennial awareness
- "Next test" →

Impact study of control group →

Imp?

1/2 can / 1/2 can't → to study

United

outcome data

Faces - measures - normed on kids, outcome that way

Sep Qual set-aside for EHS:

→ current applies

More input -
portion of EHS \$
some % to go
for qual

CSBG, Lihec → draft now
meet

EHS - what #

Waivers / for profit (how imp?)

Ashcroft charitable choice - keep none on wall
faith - where we'd be
• 1048

Innov. neighborhoods -
Bob Wood

SUMMARY:
EARLY CHILDHOOD, YOUTH AND FAMILIES
SUBCOMMITTEE HEARING
ON THE HEAD START PROGRAM
9 JUNE 1998

The panel of witnesses generally focussed on three themes: Teacher training and qualification; family literacy and children's literary experiences in the home; and, whether control/oversight of H.S. programs should be national or local.

Witnesses generally agreed that H.S. programs should be encouraged to collaborate with family literacy programs in order to ensure solid preparation for learning during the elementary school years. There was also general consensus that goals for H.S. should be implemented (there are currently in place operating standards, but no goals or aspirations), but there was disagreement over whether it is best to make these goals national or local. Generally, however, witnesses agreed that H.S. curricula should be designed and implemented on a regional level, so as to take into account localized needs.

Chairman Riggs expressed his support for H.S., and asked several questions during the Q&A portion of the hearing, concerning funding choices: Should quantity or quality be emphasized? Witnesses agreed that quality is more important. Riggs's subcommittee is looking at increasing Early H.S. from 5% to 10% of the H.S. budget over the next five years (with a 1% increase each year), and expects to have a working draft of the Reauthorization bill sometime within the next three weeks.

SUMMARY OF TESTIMONY:

Dr. Edward Zigler, "father" of Head Start and director of the Yale Bush Center on Child Development and Social Policy, Yale University.

Focus: The quality of Head Start teachers, and the quality of H.S. curriculum.

"Head Start is improving, but today, one area needs more attention above all others. Since Day One of Head Start, early childhood educators have been unhappy with the quality of staff qualifications. Only about 50% have a college degree. While some teachers have a CDA, many cannot afford the costs of pursuing one. Many poor people who work for Head Start don't have the money for better training and certification. A CDA is not enough. To attract "A"-level teachers, we need better compensation. The average pay of an elementary school teacher in this country is \$33,000/yr, while the average Head Start teacher earns \$17,000/yr."

On the issue of H.S. curriculum, Dr. Zigler talked about his own studies of possible curricula, conducted twenty years ago. He found that no particular model was particularly superior, but warns that this does not excuse lack of lesson planning in H.S. centers. Because a uniform curriculum was not mandated at the onset of H.S., many centers did not bother to implement one;

they are play-based centers, not learning-based.

Suggestions: The primary goal of H.S. should be school readiness. Many poor children arrive in Kindergarten unprepared for learning. H.S. is a chance to give them good health, a sound, positive environment, and solid socio-emotional development. As H.S. reauthorization goes through, I would like to see two measures: (1) quality control measures to assure meaningful curricula implementation; and, (2) provisions for an annual national sample of performance so that we can assess the success of H.S. curricula.

Dr. Catherine Snow, chairwoman, human development and psychology, Harvard Graduate School of Education.

Focus: reading development and the importance of the preschool period in developing the skills necessary for literary success. She sees H.S. as a “prevention program” ideal for combating reading difficulties. Dr. Snow made four major points in her testimony:

(1) Which children typically have trouble with reading? Kids with poor oral skills and unfamiliarity with print letters. These are kids who cannot recognize the alphabet, cannot write their name, and may not even know which way to turn the pages of a book.

(2) Language and early literary skills demand a rich literary experience in H.S.

(3) Studies show that early childhood educators and parents can be taught how to connect with kids through literary encounters. Where kids have one-on-one conversations with adults, kids acquire a better knowledge of words and print. Poor kids are typically worse off because they tend to have fewer opportunities for meaningful literary interactions. Dimensions of quality can only be improved through early childhood education.

(4) Teachers can be trained, so investing money in teacher training leads to better H.S. quality. Those teachers with an appropriate depth of understanding ensure a better learning experience for H.S. children.

Bonnie Freeman, assistant director of the National Center for Family Literacy.

Focus: How family literacy programs can join with H.S. to enhance and support the preschool experience. She highlighted three successful collaborative endeavors: (1) Pima County, AZ, where the Family Literacy Council works with H.S. to make sure kids' parents are literate; (2) Washington DC, where H.S. and the Morton(?) / Adams Elementary School collaborate; and, (3) the state of South Carolina, in which the National Center for Family Literacy works with H.S. centers to develop and explore the role of welfare and family literacy.

“When parents are illiterate, they cannot reach a higher educational level or a better class status. H.S. has historically engaged parents and supported their involvement by giving them access to programs and guiding curriculum. Success for parents with poor literary skills helps ensure a more literal-richness for young children.”

“I do not see an ‘either-or’ proposition here. We should support both family literacy programs and H.S., because the two support each other. Parents must enter the workforce (because of TANF requirements), and this adds new stress to the family. Previously, adults with poor literary skills were just sent to non-specific adult education programs. Now, adult ed. is inadequate because some programs are inaccessible to adults (lack of space, geographic distances), and others are useless because they do not establish clear goals for participants.”

Suggestions: (1) Congress should implement a new working definition of Family Literacy Services, because comprehensive services are necessary to make H.S. work. (2) Reauth. Bill should include a measure for monitoring the effects of coordination between higher teacher skills and better H.S. experience for kids. (3) Congress should fund training to develop internal expertise (the NCFL has trained over 10,000 H.S. teachers). (4) The Reauth. Bill should open legal avenues for collaborative partnerships.

Dr. Wade Horn, president of the National Fatherhood Initiative, and former Commissioner of the Children, Youth, and Families Initiative under the Bush Administration.

Focus: H.S. should be devolved from Federal to State governed. H.S. is too large for the Fed. government to monitor, making it hard to oversee quality. Further, if H.S. were State-controlled, it would be easier to coordinate with CCDBG and TANF, since both are State programs.

“Workfare is not designed to be part day/part year, but H.S. is. This is a barrier to constructing a healthy TANF-H.S. partnership. 40% of H.S. enrollees need full-time child care, but only about 10% get it.”

Suggestions: Do not invest money in making H.S. multiple-year, because there is no research to suggest that additional years of H.S. schooling make a big difference in children. Research does show that the impact of H.S. schooling ‘fades’ by the 3d grade. Do put money aside for a voucher program, so that H.S. graduates could attend the school of their choice. (This would enable researchers to monitor whether H.S. graduates fare better in public or private schools.)

Jackie Dollar, director of the Napa-Solano (CA) Head Start program.

Focus: Regionalism is the key to success in H.S. programs. Local H.S. centers should have freedom over their curricula implementation, because a Federally-mandated H.S. curriculum would not be able to take into account each individual neighborhood’s needs.

“A grant given to us in September 1995 enabled us to increase the size of the program by 400%. We went from 200 to 800 families. Our budget increased from \$1 million to \$5 million. We opened thirty more classrooms and hired more staff. There is a central office with waiting lists, and a universal application form. Yet each community within the region can address its own weaknesses through its own goals.”

“A hallmark of collaborative partnerships is the Fillmore H.S. center in Fairfield, CA. There, the H.S. program works with police, the City of Fairfield, the City Office of Education, and a

neighborhood 'team' of parents. Each element provides a service: the City gives us rent support, landscaping services, and paint. The police have a substation on site, to ensure safety. The Office of Ed. negotiated block grants to provide playground equipment, which the 'team' used to build a playground. The neighborhood has benefited: the vacancy rate has dropped from 25% to 3%, serious crime has been eliminated, property values have gone up, and there are more ESL classes for bi-lingual families."

Suggestions: CCDBG partnerships should allow individual choice of collaboration partners. H.S. must provide full-day services to meet family needs, particularly those affected by TANF work requirements. A review of income eligibility is necessary (currently, a single mom with one baby, working at McDonald's 50 hrs/wk., is not economically eligible for H.S.).

Corey Aguillar, President of the Los Angeles County Board of Education, Executive Member of the Children's Play Center. Ms. Aguillar is responsible for operating the largest H.S. program in the nation, with 15 school districts, 15 non-profit agencies, and two cities. 21,000 children are served in this district.

Focus: School readiness and family literacy. The foundation of a child's success is richness of literary experiences in the home. HR 3880 (Martinez, D-CA) supports better transition services from H.S. to elementary school. Such a bill should look at staff development, teacher-student ratios, continuity, and curriculum.

Suggestions: The Reauth. Bill should require specific literacy services for the whole family; H.S. should be linked to literacy services as well as pre-employment training. The E.L.F. should be expanded, along with early H.S., to support cognitive and social development. Concrete objectives and timelines for a child's achievement should be established. H.S. should work with the Dept. of Justice to ensure the safety of H.S. environments. Parents' child care skills training should count towards their TANF educational requirements. Reauth. Bill should include goal of serving 1 million families by 2003.

QUESTIONS & ANSWERS

Chmn. Riggs (R-CA): Will the Dept. of Ed.'s recommendations on H.S. learning be enough?

Dr. Snow: It's a step in the right direction, but we should see more focus on language and literacy, because social development alone is not sufficient for preparing children for school.

Dr. Zigler: But local community control is best, not one national curriculum. We need clear goals, and these can be uniform, but we need to allow individualized approaches to those goals.

Dr. Snow: The problem is, we have uniform standards, but not uniform practices. I would like to see that all H.S. programs emphasize adult interactions, book reading, and literary challenges.

Chmn. Riggs: Dr. Horn, where do we go from here if H.S. doesn't "devolve" from Federal controls to State controls?

Dr. Horn: As Dr. Zigler said, we do not know which one curriculum is best. We also don't know whether kids are better off with one or two years of H.S. - whether that really makes a big difference. H.S. is not a "one-shot inoculation" against crime, abuse, neglect, and illiteracy.

Chmn. Riggs: How do you promote literacy in non-English households?

Ms. Freeman: Parents come to family literacy programs for ESL classes, and their academic time is conducted in English. However, parent training is done in the native language. Neither language is "promoted" by the family literacy program; that is left to agency case workers.

Ms. Aguillar: Speaking and reading English should be a goal for H.S. kids. They should be ready to master English by the time they get to Kind. But, families make the difference for kids' readiness. We all must learn English, but we must not jeopardize familial relations by rejecting a family's native language. Communication between parents and kids should not be broken down.

Dr. Snow: If English is the dominant language in H.S., the kids will realize the importance of speaking English and will learn it. Kids who arrive in Kind. with strong language skills in any language, whether Spanish or Chinese or English, will be poised for success in learning.

Rep. Martinez: If H.S. children do "fade-out" in elementary school, it's the fault of the school. As Ms. Aguillar says, there should be continuity with K-12 education. Parental involvement and further education helps in combating fade-out. But how do we reconcile doubling H.S. funds with doubling the training of H.S. teachers? Shouldn't we instead put money towards K-12 teachers? They touch everyone.

Dr. Zigler: It depends on what you're trying to accomplish. I have evidence that two years of H.S. are better than one year. But right now, 70%* of eligible children are not getting even one year. (*this number contested by Dr. Horn, who estimates the percentage of unmet need among H.S.-eligible children to be closer to 20%.) We should do a cost-benefits analysis of whether it's better to have H.S. teachers with a BA or a CDA.

Rep. Martinez: What is quality? What is "readiness"?

Dr. Zigler: This is tough to define. 35% of kids are not ready for Kindergarten in the average school district; this rises to 65% in rural "slums" (according to Kind. teachers). We need to set clear goals for H.S., focussing on language, behavior, oral communications, health, etc. H.S. has always had minimum operating standards, but never specific goals.

Dr. Horn: We need to see not just whether H.S. prepares kids for Kind., but whether Kind. is prepared for these kids.

Rep. Roemer (D-IN): Should Congress reauthorize with specific readiness standards?

Dr. Zigler: We have performance standards. These are different from goals, which H.S. has never had. We have basic minimums, not aspirations. (Supported by Drs. Snow and Carlotta Joyner.)

Rep. Roemer: We pay zookeepers and car attendants more than we pay those caring for our kids. I think we need better pay and better qualification standards and more incentives to stay on.

Dr. Zigler: Amen! I would like to see higher pay for higher-educated teachers.

Dr. Snow: Attrition is terrible at the low end of the pay scale. But the rate of attrition in the state of MA was halved ten years ago, when state gov. started putting in funds for training.

Ms. Dollar: We had to compete with CA public schools for teachers because they make more in the public schools. 50% of our program is funded by parent fees, and we cannot charge them more in order to pay teachers more.

Chmn. Riggs: Should the primary goal of H.S. be school readiness?

Snow, Zigler, Aguillar: Yes.

Dr. Horn: I'm more ambivalent. Transition should not just focus on "ready," but ready for what?

adjourned: 1.45pm

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Head Start

**Helping Families Move
From Welfare to Work**




Children's Defense Fund