OPRE Research Brief

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Selecting Families with the Greatest Needs: Lessons from the Head Start REACH Case Studies

What is the Head Start REACH project?

The Head Start REACH project is examining the ERSEA approaches that programs for infants and toddlers (Early Head Start) and preschool-age children (Head Start) use to engage Head Start–eligible families experiencing adversities.

Adversities is a broad term that refers to a wide range of circumstances or events that pose a threat to a child's or a caregiver's physical or psychological well-being. The adversities that families experience are often intertwined with poverty, may co-occur, and are influenced by systemic factors such as structural racism. Common examples include but are not limited to poverty, homelessness, involvement in the foster care or child welfare system, and effects of substance use. The case studies focused on these common adversities, based on priorities identified by staff at the Administration for Children and Families (ACF) and their emphasis in Head Start standards, policies, and initiatives.

Head Start programs engage parents to support children's growth from birth through age 5 through services that promote early learning and development, health, and family well-being. These programs specifically seek to assist families with low incomes and families facing a variety of other adversities. The Head

Start REACH: Strengthening Outreach, Recruitment, and Engagement Approaches with Families project is focused on understanding the eligibility, recruitment, selection, enrollment, and attendance/retention (ERSEA) approaches that Head Start programs use to engage Head Start–eligible families experiencing adversities (see Box). One of the foundational activities of the project was to conduct case studies to obtain an in-depth understanding of the ERSEA approaches that are being used with families experiencing adversities; the factors that affect their implementation; and how families find and experience early education and child care, including those who are and are not enrolled in Head Start.

Six urban and rural Head Start programs of varying sizes from six Administration for Children and Families (ACF) regions were part of the Head Start REACH case studies. From February to April 2022, the study team collected data from (1) Head Start program staff; (2) families who participate in their programs;

(3) organizations the programs partner with to work on eligibility, recruitment, selection, enrollment, and attendance/retention (ERSEA); and (4) families who are eligible for Head Start but not currently enrolled.

In this brief, we detail how programs develop and implement their criteria and processes for selecting families for enrollment. Selection refers to the procedures a program follows to assess their community's needs, update their selection criteria, and use those criteria to assign points to submitted applications. We highlight how programs use their selection processes to identify and select families with the greatest need. We also summarize approaches that programs perceive as successful and those that reflect opportunities for growth. The Methods section at the end of this brief details the sampling, data collection, and analysis methods.

ERSEA terms used in this brief

Eligibility refers to Head Start's eligibility requirements and how programs use these requirements to prioritize families for recruitment and enrollment, with a goal of engaging families most in need of services.

Recruitment refers to the processes Head Start programs use to identify, market to, and reach out to families to recruit them, and how they monitor their recruitment efforts.

Selection refers to the processes programs use to develop and implement their selection criteria, including reviewing application information to assign points and implementing waitlist processes.

Enrollment refers to programs' intake procedures and the systems they use to enroll selected families and monitor their enrollment efforts.

Attendance/retention refers to the procedures and processes programs use to ensure strong attendance and prevent participant turnover.

How do Head Start programs that participated in the case studies develop and update their selection procedures to ensure they select families who need services most?

Programs use information from their community needs assessments to formulate and update their selection criteria, reflecting which families programs should focus on for enrollment.

Program staff noted they formulate and update their selection criteria based on trends they observe in the community and information they obtain through their interactions with families. These interactions may take place during the application process, when families work with program staff to complete their applications, or when staff visit families to complete the enrollment process and better understand the families' needs. This approach helps programs ensure they are responding to needs in the community and prioritizing families with the greatest needs.

Programs also base their selection criteria on the Head Start Program Performance Standards (HSPPS) and information from their community needs assessment, an important process to determine the strengths and needs in their communities and to set direction and design for program services. All participating programs consider categorical eligibility as specified in the HSPPS, which are criteria that render a family eligible for Head Start and include families who are experiencing homelessness, involved in foster care, or receiving public assistance from sources such as the Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF), or

Supplemental Security Income (SSI). In addition, all programs that participated in the case studies have criteria related to family income; family status (single parent, for example); whether the child has a documented disability; whether the child or family are dual language learners; the age of the parent, particularly if they are a teen parent; whether the family is affected by substance use; and whether the family already has a child enrolled in Head Start or is transferring from another program.

Less common criteria include the recent death of a family member; migrant, refugee, or immigrant status; military service or a family member who is a veteran; a parent or guardian with a disability; whether the family has access to health insurance, medical care, or well-being services; adverse childhood experiences; food insecurity; and being affected by a natural disaster.

Programs work with the Parent Policy Council and their governing boards to review and update their selection criteria annually.

All programs participating in the case studies reported reviewing and updating their selection criteria at least annually. Oversight from the Parent Policy Council and governing boards appears to support programs in adhering to regulations, implementing their selection activities objectively, and addressing the needs in their communities. For example, at a meeting with the governing board and Policy Council, one program representative presented information on child abuse in the county. The board and council determined the program had not given sufficient priority to the issue of child abuse. They approved a change in the program's selection criteria, considering any involvement with Child Protective

Services during a child's lifetime as a risk factor that should be included in the program's selection criteria.

How do case study programs implement procedures to ensure they select families with the greatest need, including those experiencing adversities?

When programs receive families' application forms, program staff take the first step in the selection process by verifying families' eligibility for Head Start. This process varies across programs and for families experiencing adversities.

Programs have a limited number of available slots for families who are eligible to receive Head Start services. Programs verify a family's eligibility by confirming that the information a family provides on their application is valid. Eligibility verification is thus an important first step in the selection process, as the selection points assigned to a family are based on the information they provide on their application.

To verify families' eligibility, programs request various documents, such as pay stubs, W-2 forms, the child's birth certificate, proof of residence, immunization records, health insurance forms, and Social Security cards. Programs vary in how they accept these documents; some allow families to submit them via email or text, and others require submission in person.

Programs adapt verification requirements for families facing adversities, using relationships with community partner organizations to complete the eligibility verification process when needed. For example, for families experiencing homelessness, programs may use a third party, such as a homeless shelter, to verify the family's housing status. Programs noted they accept passports or immunization records to verify a child's age when a family does not have a birth certificate. Community partner organizations sometimes provide programs with documentation on eligibility, such as documents verifying foster placement, residency, or income.

Programs use information obtained during the application process, including the family interview, to understand family stressors and dynamics, apply their selection criteria, and assign points.

The application process, which precedes the eligibility verification and selection processes, gives families an opportunity to tell their story. They complete an application (on paper or online), providing information on their demographics, income, and the types of adversities they face. The family interview, conducted by program staff during the application process, provides nuanced details about the family's situation, which helps programs more accurately assign points during the selection process. Staff reported that gleaning this information depends on building trusting relationships with families. Staff from one program noted that it has been challenging to build strong relationships within the local refugee and immigrant community on their own, due to difficulties locating these families and their lack of understanding of the program's intentions.

Program staff indicated that criteria for categorical eligibility, including experiencing homelessness, involvement in foster care, and receipt of public assistance (SNAP, TANF, and SSI) are worth

the most points. Programs also consider other adversities when assigning points, such as substance use, domestic violence, and a parent's mental health diagnosis. When applied as intended, the selection criteria enable programs to assign points objectively to the families with the greatest need. Exhibit I gives an example of how one program assigns its points.

Programs use a collaborative process to apply the selection criteria and assign points to families.

Multiple program staff members review applications and assign families selection criteria points to ensure adherence to program guidelines. Applications are also subject to a systematic, multi-person review to double-check that each application is assigned the correct number of points.

"And so, through our conversations during the application [process], we really learn what is the family situation, what things do they have going on. And depending on what they share, that really helps us determine what points as far as the selection criteria they can get."
Head Start ERSEA staff member

When two applications are assigned the same number of points, one program collaborates with its health service advisory committee to conduct a blind review of the two applications and reassign points. The program then adds up the points assigned by each committee member and selects the child and family assigned the most points.

Exhibit I. How one case study program assigns points for selection criteria

Categorically eligible[1]	
Families experiencing homelessness	500 pts.
Children in foster care	300 pts.
Families receiving SNAP, TANF, or SSI	200 pts.

Income eligible	
Less than 50% of poverty guidelines	150 pts.
Less than 100% of poverty guidelines	100 pts.
100–130% of poverty guidelines	50 pts.
More than 130% of poverty guidelines:	0 pts.

To obtain any of the following points, the family must be eligible within 130% of the poverty guidelines:			
Currently receiving child care subsidy	400 pts.	Employed, in school, or training full-time	300 pts.
EHS/HS sibling; EHS/HS transfer	150 pts.	Single-parent household	100 pts.
Formerly homeless	100 pts.	Current IFSP/IEP or documented disability	100 pts.
CPS involvement	100 pts.	Pregnant mother	75 pts.
Parent mental health/drug/alcohol	75 pts.	Teen parent	50 pts.
Parent less than 12th grade education	50 pts.	Incarcerated parent	40 pts.
English language learner	25 pts.		

CPS = Child Protective Services; EHS = Early Head Start; HS = Head Start; IEP = Individualized Education Program; IFSP = Individualized Family Service Plan; SSI = Supplemental Security Income; SNAP = Supplemental Nutrition Assistance Program; TANF = Temporary Assistance for Needy Families.

[1]Families who are categorically eligible can also receive points for the other adversities they are experiencing.

> "[Working together is] another check and balance to say, Okay, if we're using our selection criteria [and they're] directing us to this family at face value…is that who we would have picked? Does that match? What do we think we can provide to the family most in need?"
>
> — Head Start program director

Once programs have assigned selection criteria points to families' applications, they place families on a waitlist. Families with the most points are placed at the top, and programs systematically select children with the most points from the list.

As with assigning points, placement decisions often involve multiple staff members reviewing the information and coming to a final decision. This review by multiple staff members ensures programs are following the HSPPS, and that families with the greatest need are being selected for open slots.

One program tries to reserve a few slots for emergency placements, such as referrals from the child welfare department, and if such an immediate placement is warranted, a special committee of the ERSEA coordinator, director, and division director reviews the situation and makes the placement decision.

In addition to selection criteria points, programs consider a variety of other factors when selecting children from the waitlist.

When selecting a child for an open slot, programs consider factors such as teacher caseloads, classroom composition (for example, whether there is enough classroom support for children with disabilities), and the age range of children in the classroom. These additional considerations enable programs to place children in a way that meets HSPPS

and follows the program's selection procedures while addressing the unique needs of the child and family as well as the program's capacity.

Programs work with families on the waitlist to help them understand their enrollment options when a slot opens up, so families can make the best choice for themselves.

Programs prioritize the selection of families with the greatest need; however, they also recognize the importance of helping a family enroll in a slot that best meets the family's needs. If an open slot in a center does not seem like a good fit for a selected family with a child with a disability, for example, programs will help that family enroll in a different option, such as family child care.

What role does the waitlist play in the selection process for case study programs?

Waitlists provide a space for programs to list families who are accepted for services and to track assigned points. Programs diligently maintain their waitlists to reflect current and accurate information, so the waitlist is a key resource for prioritizing families with the greatest need and maintaining full enrollment.

Program staff often rely on waitlist reports pulled from a database, such as ChildPlus, or on algorithms to determine which child is highest on the waitlist. Selection

> "The waitlist is ever-changing. So, what it could be right now, could be completely different by the end of the day. It all depends...on our applications that are being submitted and...families with the higher needs being bubbled to the top."
>
> Head Start ERSEA staff member

criteria drive these reports and algorithms. Programs with multiple locations sometimes have a separate waitlist report for each center, which they use to select families for open spots at specific centers.

Program staff maintain their waitlists by periodically reaching out to waitlisted families to see whether they have experienced any changes in their circumstances that would affect their eligibility. Staff also deactivate expired applications and update the waitlist based on selection criteria points. The waitlist constantly shifts based on submitted applications and families with greater needs moving to the top.

Staff reported that the waitlist helps them to monitor enrollment and maintain full enrollment. The waitlist provides early information about potential enrollment and classroom composition for the upcoming school year.

Some programs connect families to partners to obtain services while they are on the waitlist.

Staff in some programs reported sharing parents' names and phone numbers with select partners (with parental permission) to connect families with necessary services while they remain on the waitlist. Two programs using a community-based model work closely with a community-based partner to select and enroll waitlisted families into open slots. If a Head Start slot is not available at a location but a community slot is, the

Exhibit II. Selection process implemented by Head Start case study participants
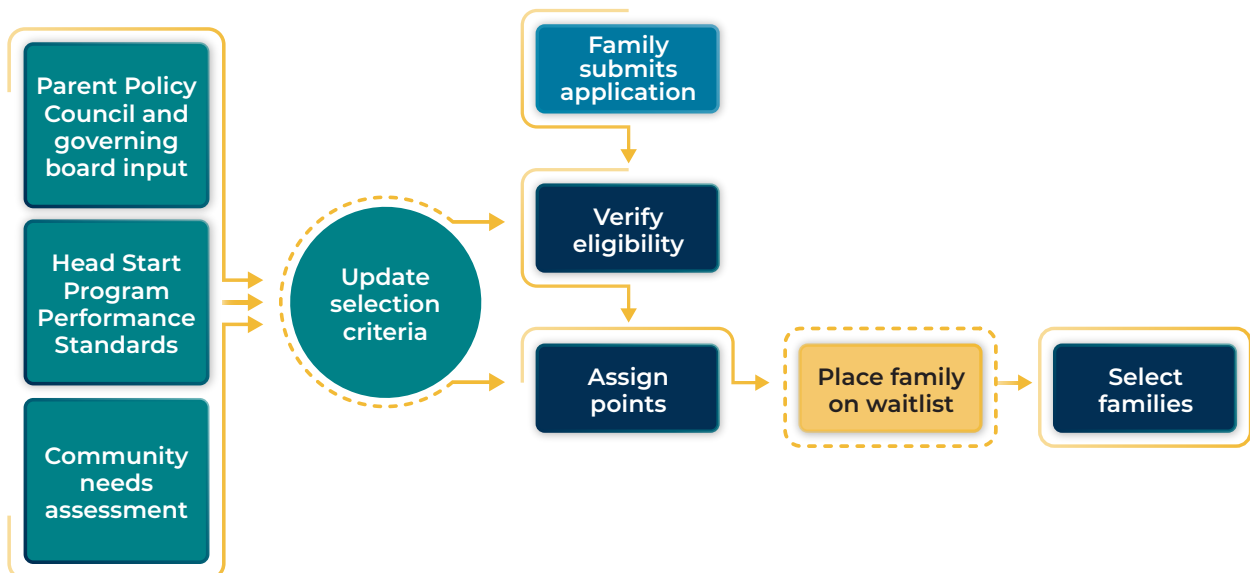
Note: The dotted lines in the graphic above indicate the selection criteria and the waitlist are fluid entities, as Head Start regularly updates them.

program tries to help the child enroll in the community slot instead.

Head Start parents associated with some programs identified ways to improve their experiences with waitlists.

Parents reported they spent varying lengths of time on the waitlist (three months to a year), and those who spent a long time on the waitlist reported feeling frustrated. Related challenges include the lack of information they received during the waitlist process and the lack of time to make an enrollment decision after coming off the waitlist. Parents said the process would improve if staff updated parents periodically about their position on the waitlist.

What are some considerations for practice that emerge from these findings?

The following considerations reflect information program staff or parents shared directly and potential opportunities to improve selection approaches, based on the salient challenges and successes programs and parents shared.

Promote collaboration among staff and with entities such as the program's Parent Policy Council and the program's governing board to ensure programs develop and implement selection criteria that prioritize families with the greatest need.

Programs primarily use their community needs assessments and input from the Parent Policy Council and governing board to understand the challenges families face, so they can tailor their selection criteria appropriately. By requiring multiple staff members to review applications and

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"Well, I'm still on the waitlist...I don't really get any updates, so that can be a bit frustrating, not knowing. I work from home, so it's kind of difficult taking care of my baby and just having to plan things out. So it is–it's a little bit frustrating not having to sort of update kind of when my baby will be able to transition to the center."

Head Start parent

selection decisions, programs ensure they are following the HSPPS, assigning points accurately, and making appropriate selection decisions. Consequently, programs report prioritizing families in their communities with the greatest need.

Consider identifying staff support needs around communicating with families in a nonjudgmental way, to ensure staff can gather accurate information about a family's situation.

The application process, including the interactions program staff have with families, is critical to understanding the challenges and stressors these families face. Detailed information on these stressors and challenges can inform the number of points a family receives on their application, influencing the chances they receive a program slot. Conversations covering such sensitive topics can be complex and difficult. Trauma-informed care techniques and strategies, for example, could offer helpful insights for communicating with families in a nonjudgmental way that encourages families to share all information relevant to their situation.

Explore opportunities to provide periodic updates to waitlisted families.

Parents across participating programs expressed frustration about the length of time they were on the waitlist and the lack of information or updates they received during the waitlist process. Programs could consider a more systematic approach to updating parents about their status, so parents can make informed decisions about child care in the interim. This approach could include monthly phone check-ins to provide families with a status update and ask whether families would like to be connected with a partner organization for services, or sending periodic emails updating families on their waitlist status.

Consider using relationships with community partners to connect families on the waitlist to necessary services.

Staff in some Head Start programs reported sharing names and phone numbers of parents with certain partners (with parental permission) to connect families with necessary services while they are on the waitlist. Programs could consider connecting families on the waitlist systematically with partner organizations so families can receive services, such as opportunities to enroll their children in other preschool or child care options, while they wait for a Head Start slot to become available. This type of connection could also include providing families on the waitlist with a list of partner organizations they could contact for services or providing families a warm handoff to relevant partner organizations.

Visit the project website for more information about findings from the Head Start REACH case studies including the case study report.[1]

Conclusion

Strong collaboration among program staff and within the community helps programs to understand challenges families in their community face and prioritize the selection of those with the greatest need. Programs could benefit from identifying staff support needs around communication strategies during the application process to encourage families to share information, particularly on sensitive topics. Programs could consider implementing systematic outreach to waitlisted families and regularly updating families on their status. Programs could also use this outreach to connect waitlisted families with services in the community.

Endnote

[1] Shah, H., T. Shenbanjo, C. Lauver, K. St. Kitts, N. Aikens, and L. Tarullo. "Strengthening Outreach, Recruitment, and Engagement Approaches with Families: The Head Start REACH Case Study Report." OPRE Report #2023-132. Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services, 2023.

Methods

The case studies included six urban and rural programs of varying sizes from six Administration for Children and Families (ACF) regions. When recruiting programs, we asked program directors to name two family adversities their programs focus on for their ERSEA activities. Based on program directors' reports, the programs vary in the adversities they prioritize. The most commonly reported adversity was homelessness, followed by mental health challenges and involvement in the child welfare and foster care systems.

To answer our research questions, we conducted data collection in six sites (that is, six programs and their associated partner organizations) from February to April 2022. Respondents included (1) Head Start program staff, (2) families who participate in their programs, (3) organizations the programs partner with to conduct ERSEA work, and (4) Head Start–eligible families not currently enrolled in Head Start.

Characteristics of Head Start programs included in the case studies

Program	Number of families enrolled	ACF region	Location type	Focal Adversity 1	Focal Adversity 2
A	355	7	Urban	Homelessness, including doubling up	Refugee or immigrant status
B	76	8	Rural	Homelessness, including doubling up	Mental health challenges
C	4,086	9	Urban	Lack of affordable housing, leading to homelessness	Involvement in child welfare and foster care system
D	319	3	Rural	Mental health challenges	Children with disabilities
E	161	1	Rural	Substance use	Family violence
F	654	6	Urban	Homelessness	Involvement in child welfare and foster care system

Data collection activities and sample sizes for the case studies

After collecting all data, we prepared the data for analysis, extracted themes from each data source, and used these themes to identify key findings related to our research questions. The programs and partner organizations included in the case studies were purposively selected and thus are not representative of all Head Start programs and partners. The results in this brief are descriptive and based on qualitative methods.

One-on-one interviews with program directors (n = 6)

One-on-one interviews with program (n = 15) or center-level (n = 3) staff

One-on-one interviews with staff from community organizations (n = 19)

Virtual discussion with families enrolled in Head Start (n = 30)

Virtual discussion with eligible families not enrolled in Head Start (n = 20)

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