



2010

Maine HEAD START *Report*



Eleven Head Start grantees in Maine are funded primarily through the federal Office of Head Start. Three additional Head Start programs are funded by the Tribal Office of Head Start and are managed by the Passamaquoddy, Micmac and Maliseet tribes within their communities. The data presented here reflect only those programs funded by the federal Office of Head Start and are based on the 2008-2009 Program Information Report (PIR), a federally mandated report submitted annually to the Office of Head Start. The charts in this report reflect data from the PIR, unless otherwise indicated. The term "Head Start" in this report refers to both Early Head Start and Head Start serving children prenatal up to 5 years of age, unless otherwise specified.

FEDERAL HEAD STARTS

ANDROSCOGGIN HEAD START & CHILD CARE

County Served: Androscoggin
Coburn School, 269 Bates St., Lewiston, ME 04240
(207) 795-4040
Estelle Rubinstein, Director: erubinstein@androkids.com

AROOSTOOK COUNTY ACTION PROGRAM

County Served: Aroostook
P.O.Box 1116, Presque Isle, ME 04769
(207) 768-3045
Sue Powers, Director: spowers@acap-me.org

MIDCOAST MAINE COMMUNITY AND ACTION

County Served: Sagadahoc, Lincoln and Greater Brunswick
34 Wing Farm Pkwy., Bath, ME 04530
(207) 442-7963 ext 214 or 1-800-221-2221
Chris Rallis, Director: Chris.m.rallis@maine.gov

CHILD & FAMILY OPPORTUNITIES (CFO)

County Served: Hancock and Washington
P.O.Box 648, Ellsworth, ME 04605
(207) 667-2995 or 1-800-834-4378
Doug Orville: Dougo@childandfamilyopp.com

COMMUNITY CONCEPTS

County Served: Oxford and Franklin
P.O. Box 278, S. Paris, ME 04281
(207) 739-6574
Deb Florenz, Director: Dflorenz@community-concepts.org

KENNEBEC VALLEY COMMUNITY ACTION PROGRAM (KVCAP)

County Served: No. Kennebec and Somerset
97 Water St., Waterville, ME 04901
(207) 859-1613
Kathy Colfer, Child & Family Services Director: kathyc@kvcap.org

PENQUIS CAP

County Served: Penobscot, Piscataquis and Knox
P.O.Box 1162, Bangor, ME 04402-1162
(207) 973-3500
Jean Bridges, Director: jbridges@penquiscap.org

PEOPLE'S REGIONAL OPPORTUNITY PROGRAM

County Served: Cumberland
510 Cumberland Ave., Portland, ME 04101
(207) 553-5823
Louise Marsden, VP Child and Family Services Director:
lmarsden@propeople.org

SOUTHERN KENNEBEC CHILD DEVELOPMENT

County Served: So. Kennebec
337 Maine Ave., Farmingdale, ME 04344
(207) 582-3110
Michele Pino, Director: michelep@skcdc.org

WALDO COUNTY HEAD START

County Served: Waldo
P.O.Box 130, Belfast, ME 04915
(207) 338-3827
Katherine Johnston, Director: Kjohnston@waldocap.org

YORK COUNTY COMMUNITY ACTION

County Served: York
P.O.Box 72, Sanford, ME 04073
Mabel Desmarais, Head Start Director: mabeld@yccac.org
(207) 324-5762 ext 2964
Betty Graftam, Early Head Start Director: bettyg@yccac.org
(207) 284-4869 ext. 2404

TRIBAL HEAD STARTS

LITTLE FEATHERS HEAD START

Aroostook Band of Micmacs
County Served: Aroostook
13 Northern Rd.
Presque Isle, ME 04769
(207) 768-3217
Rick Getchell, Director: rgetchell@micmac-nsn.gov

MALISEET HEAD START

1 Maliseet Dr.
Houlton, Maine 04730
(207) 521-2410
Cindy Fitzpatrick, Director: cindyfitz@maliseets.com

PASSAMOQUODDY HEAD START

County Served: Washington
P.O.Box 344
Perry, ME 04667
(207) 853-4388 &
(207) 454-2128
Beth Cousins, Director: beth.cousins@bie.edu

WHAT IS HEAD START?

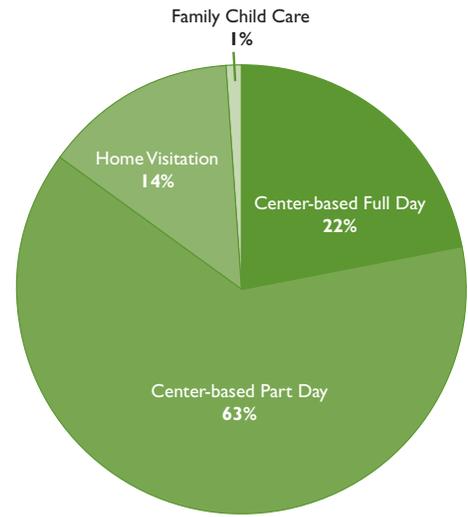
Head Start provides early care and education, as well as health, nutrition, mental health, social and family support to low-income families with children from prenatal to five years old. Head Start services are provided in a variety of ways. These include: a home visitor who meets with a child and the child's family for 90 minutes each week, an infant enrolled in Early Head Start either at a family child care home or at an early childhood center while the child's parents are working, a four-year-old who attends a collaborative partnership program of the local Head Start grantee and the public school, and three-and-four-year-old Head Start preschoolers attending a center in the community.

The early years of a child's life are extremely important because early experiences affect the architecture of the maturing brain. When building a house, the foundation is laid carefully and with exact measurements so that the remaining structure will be sturdy and strong. In the same way, as a child's brain grows, the quality of the architecture establishes either a sturdy or a fragile foundation for all of the development and behavior that follows. Getting things right initially is easier—and less expensive—than trying to fix them later.

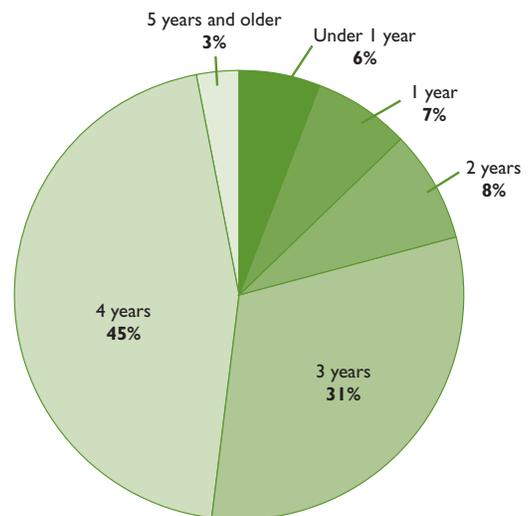
A recent national study of Head Start determined that children who were enrolled in Head Start continuously for at least three years before entering kindergarten displayed greater rates of kindergarten readiness than children participating in Head Start for two years or less. The results of this study, and the results of most current research on brain development, highlight the need for increasing the number of children in prenatal to five-years-old Head Start programs.¹

Maine currently has the capacity to serve only an estimated 29.5% of the children who are income eligible for Head Start.²

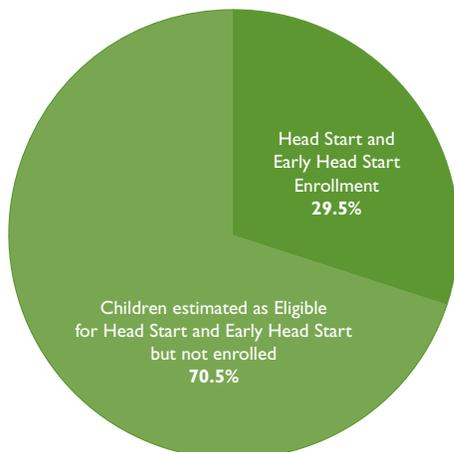
Enrollment by Program Option, 2008-09



Enrollment by Age, 2008-09



Child Eligibility versus Program Capacity, 2008-09



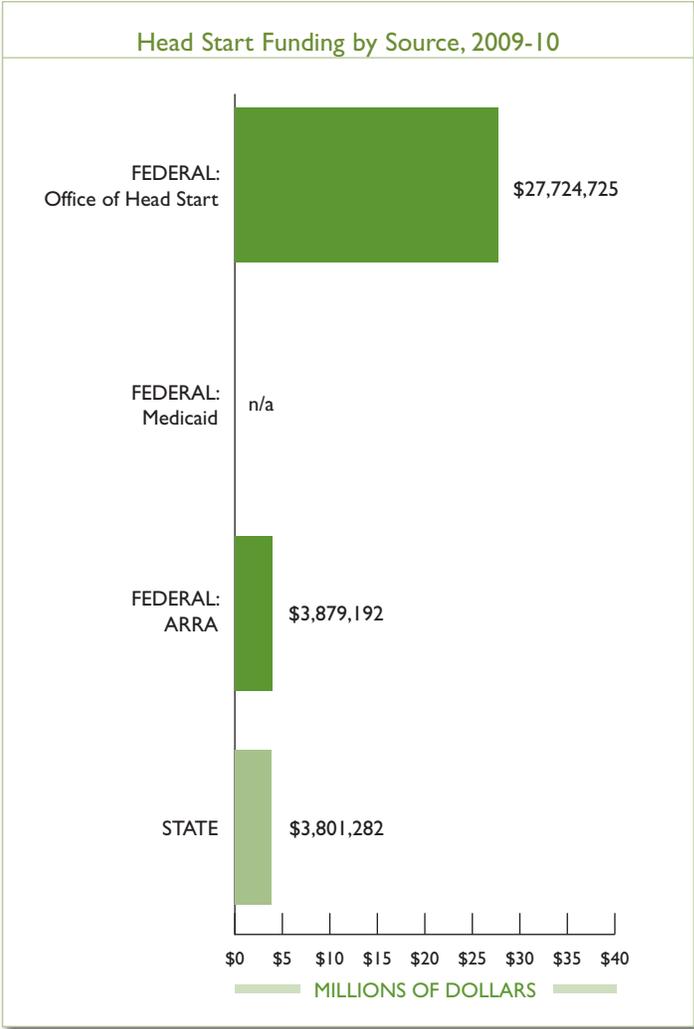
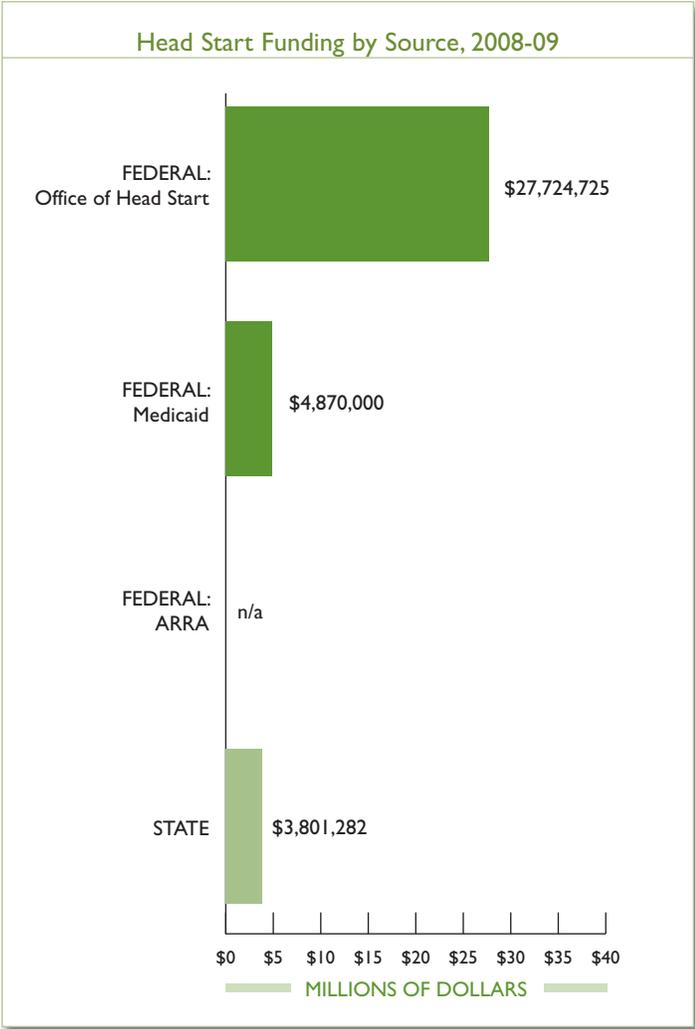
¹ *Head Start Impact Study* U.S. Department of Health and Human Services, Administration for Children and Families, Office of Planning, Research and Evaluation; January 2010

² *The 2010 Maine KIDS COUNT Data Book*, Maine Children's Alliance

WHO PAYS FOR HEAD START?

Head Start programs receive most of their funding directly from federal grants. Additional funding is received from the state. State funds are used to provide the required match for federal funding. Federal funding streams for Head Start have shifted and changed over the past few years, but the base funding has remained the same for the past 10 years. Until recently Head Start programs were able to access federal Medicaid funds. State rule changes in MaineCare (Medicaid) have resulted in a reduction of \$4.8 million in federal Medicaid funding for Head Start.

The 2009 American Recovery and Reinvestment Act (ARRA) provided much-needed funds that have maintained Head Start programs and avoided significant program cuts. ARRA also supported three new Early Head Start programs in Maine. However this funding was not sufficient to stem the full loss of federal Medicaid funding. Continuation of the ARRA funds is essential to prevent any further reduction of service.



Data Sources: Office of Head Start, Administration for Children and Families, Maine Head Start Collaboration Office: <http://www.acf.hhs.gov/programs/ohs/about/fy2009.html>

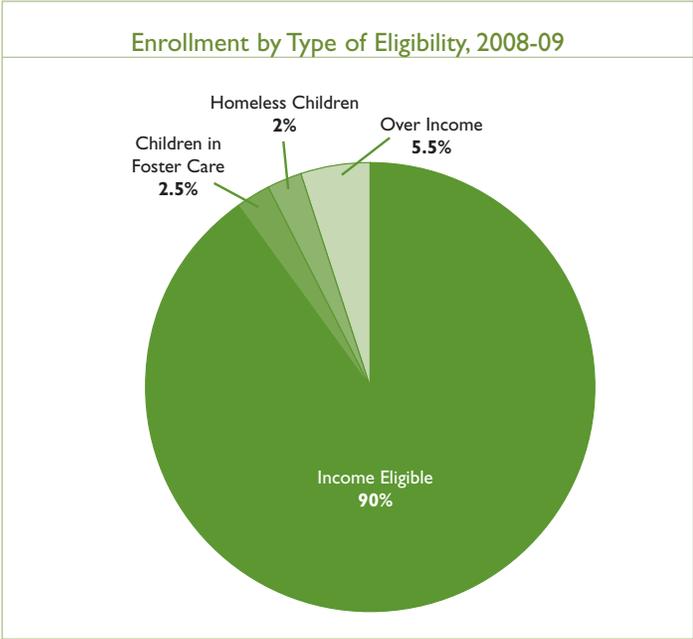
“Investment in birth-to-five early education for disadvantaged children helps prevent the achievement gap, reduce the need for special education, increase the likelihood of healthier lifestyles, lower the crime rate and reduce overall social costs.”

James Heckman, *“Testimony to the National Commission on Fiscal Responsibility and Budget Reform.”* June 30, 2010

WHO IS ELIGIBLE TO ENROLL IN HEAD START?

Enrollment priority in Head Start is given to families living in poverty. Programs use the Federal Poverty Guidelines.

Families with financial resources above the income guidelines are also eligible if they are receiving public assistance, are homeless, are in foster care, or live in areas defined as medically underserved. Children with special needs also have enrollment priority.



2009 Federal Poverty Level

FAMILY SIZE	ANNUAL INCOME
1	1..... \$10,830
2	2..... \$14,570
3	3..... \$18,310
4	4..... \$22,050
5	5..... \$25,790
6	6..... \$29,530
7	7..... \$33,270
8	8..... \$37,010

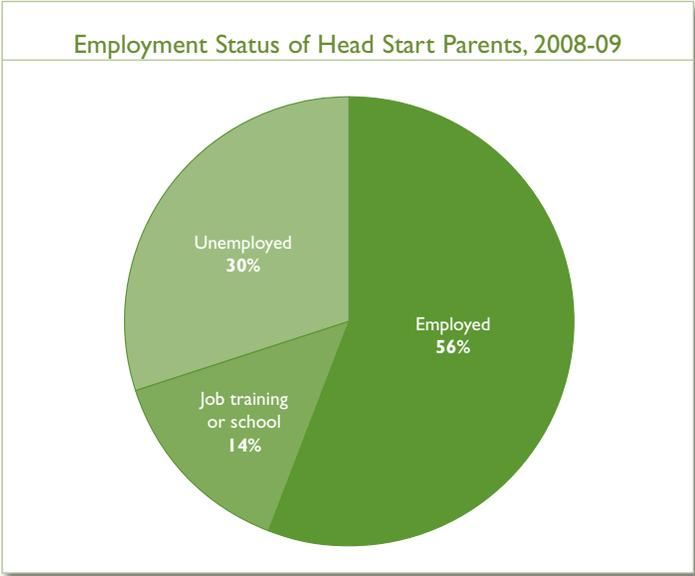
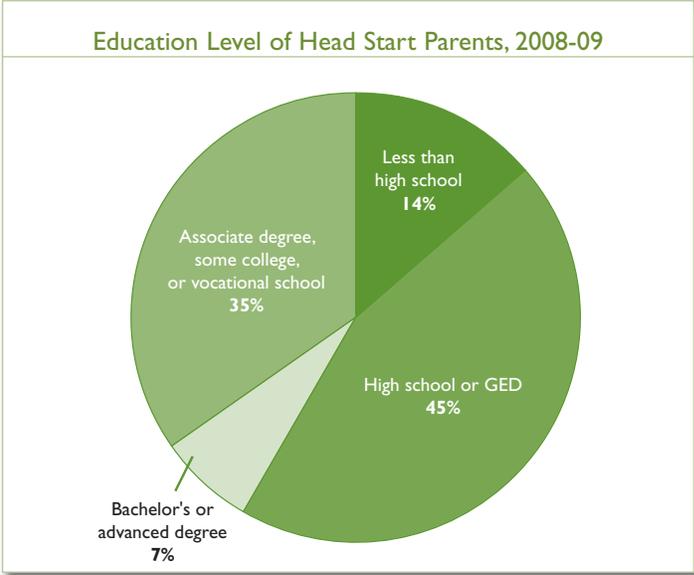
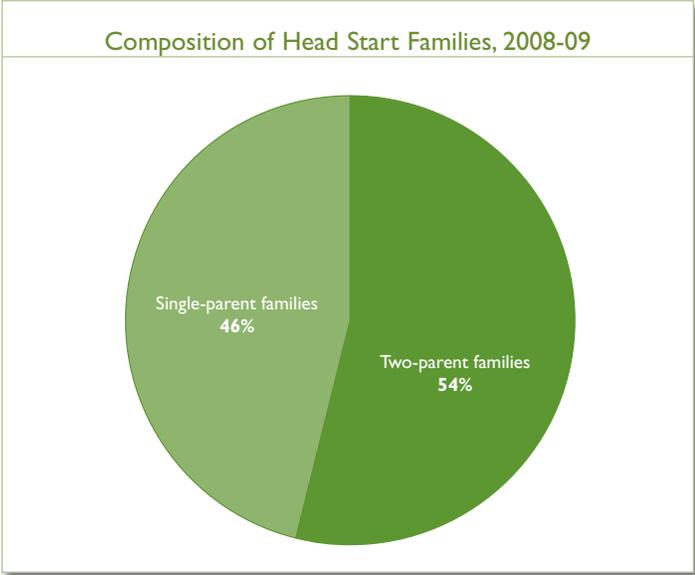
Add 3,740 for each additional family member above 8



WHO ARE MAINE'S HEAD START FAMILIES?

The number of two-parent families enrolled in Head Start programs in the 2008-2009 program year was 3% higher than the number enrolled in the 2007-2008 program year.

87% of Head Start parents have at least a High School degree or GED, with 42% having a college degree or some college experience.



In 2007-2008, 79% of Maine's Head Start parents were working, in job training or attending school. In 2008-2009 that figure was 70%. This decrease most likely reflects Maine's current high unemployment rate and difficult economic conditions. The employment status of Head Start families serves as an indicator of how the economy affects the general population of lower-income citizens in Maine.

HEAD START AND THE LOCAL ECONOMY

Head Start contributes to Maine's economy by employing close to 1,300 people. Head Start is also committed to supporting parents as they work towards achieving employment goals. The program often provides the first step toward employment for parents, thus contributing to the economic development of a

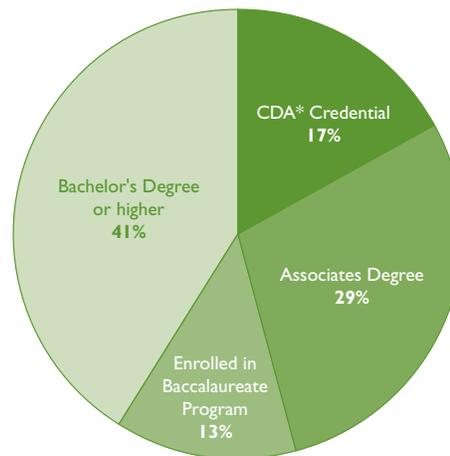
community. In 2008-2009, former or currently enrolled parents comprised 51% of the Head Start staff in Maine. Head Start programs support the local economy by purchasing food, classroom supplies and furniture and by contracting for services such as snow removal, landscaping, and trash removal.

HEAD START TEACHER QUALIFICATIONS AND SALARY

Federal Head Start regulations require that classroom teachers have formal early childhood training. Currently, Head Start programs are working toward a national standard of 50% of all classroom teachers having at least a bachelor's degree in early childhood by 2013.

Because Head Start is mandating increased credential requirements without increasing funding, there is a concern that Head Start will become the "farm league" of public schools, with Head Start teachers leaving for more lucrative public school positions. Specifically, the increased need for well-trained, qualified teachers in public pre-K classrooms may cause increased teacher turnover in Head Start programs. Continuity of care is of utmost importance for young children, thus a high turnover rate can significantly reduce the quality of a program.

Education Levels of Head Start Teachers, 2009

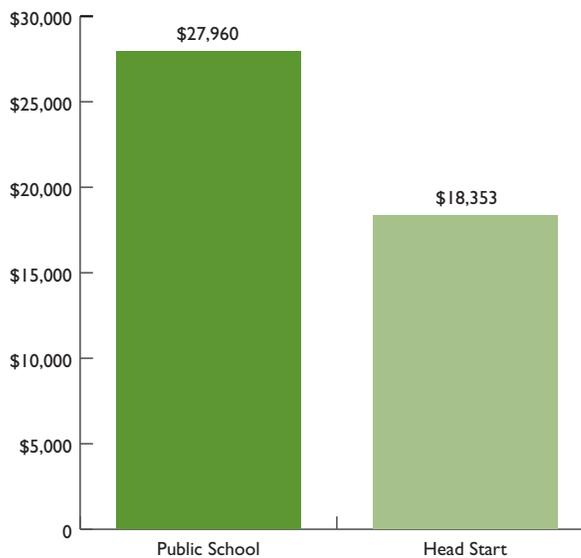


* Child Development Associate (CDA) is an early childhood credential typically equal to 11 college credits.

Average Teacher Salary Comparisons, 2009



Average Assistant Teacher Salary Comparisons, 2009



Data Source: Salary Average for public school kindergarten teacher and teacher assistant from Maine Department of Labor, 2009.

"A teacher is a compass that activates the magnets of curiosity, knowledge, and wisdom in the pupils."

Ever Garrison

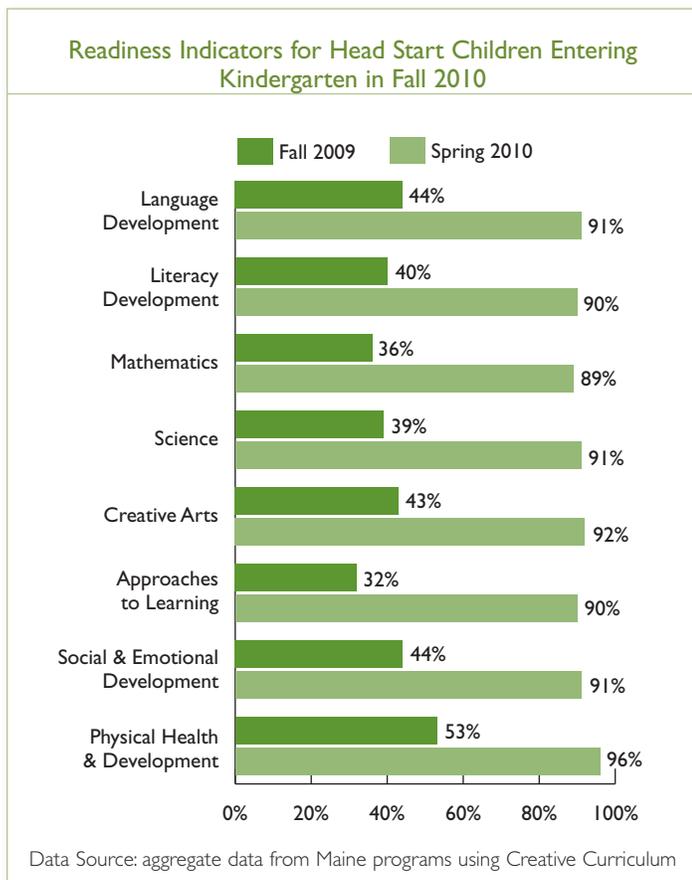
WHAT IMPACT DOES HEAD START HAVE?

Early Head Start focuses on fostering social/emotional development, assuring secure attachments, and supporting positive brain development. Evaluation of each child's progress is ongoing, so that areas of concern are identified and appropriate supports are received.

Head Start focuses on kindergarten readiness skills. Parent input, along with ongoing observations and assessments provide important information on the growth and progress of each child. Individual assessments focus on social/emotional development, language, literacy, math and science. Teachers use these assessments when planning individual and group activities to support each child's progress. This information is also reviewed for overall program improvement goals.

SCHOOL READINESS

Children are assessed in four areas of development: social/emotional, physical, cognitive and language/literacy. Within these four areas, there are additional subsets of development, highlighted in the following chart. Head Start teachers assess each child's developmental progress a minimum of three times per year. These assessments are used to inform curriculum planning for the individual child and for small groups of children. The assessments are also used for parent-teacher conferences that occur at least twice per year. Aggregate child data are used by each program to inform systemic planning and professional development activities.



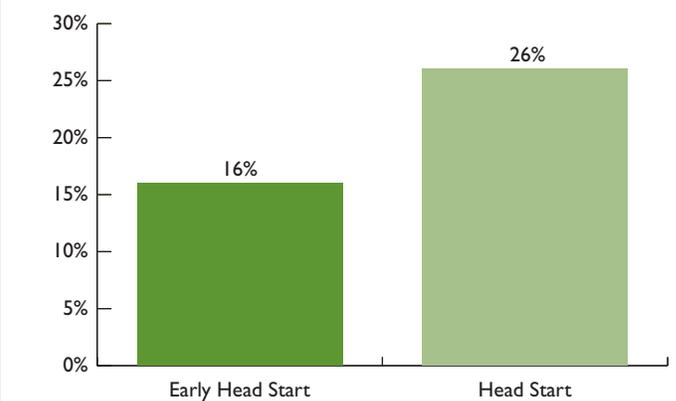
CHILDREN WITH SPECIAL NEEDS

Early identification of developmental delays and behavioral problems can lead to timely interventions that best support a child's development and decrease parental stress. Research has demonstrated that there are specific moments in the development of a young child when intervention can be the most effective and can reverse negative impacts. It is essential that such interventions occur within the first five years of life.

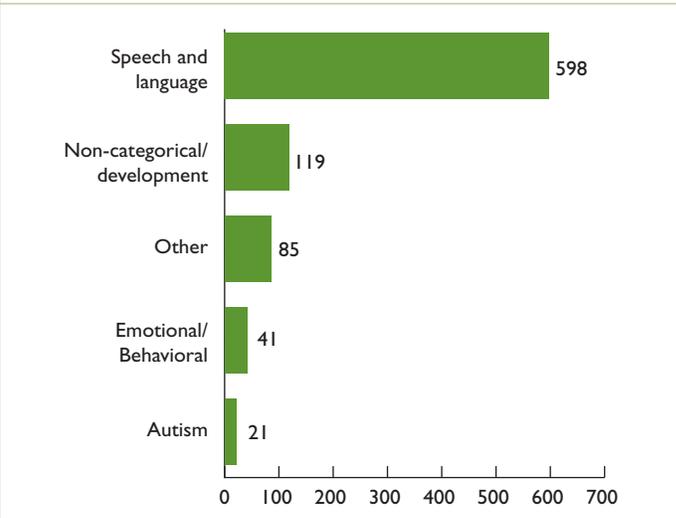
Federal Head Start standards require that children with special needs comprise at least 10% of a grantee's total enrollment. Programs are required to conduct developmental screenings within the first 45 days of a child's enrollment to determine whether referral for special services is needed.

Program staff works with parents, the local Child Development Services and public school departments as members of an Early Childhood Team (ECT). These teams develop individualized plans for children with special needs.

Percent of Enrolled Children with Diagnosed Disability, 2008-09



Numbers of Children with Most Prevalent Disabilities in Head Start, 2008-09



HEALTH SERVICES

Supporting families by ensuring that their children have access to ongoing preventative medical, dental and mental health services is a hallmark of the Head Start program.

Physical Health:

Evidence strongly indicates that success in adult life is directly linked to early childhood health. Head Start staff works closely with parents and guardians to ensure that their children have access to health insurance, are up to date with immunizations and well-child visits and have a regular health care provider.

Mental Health:

When children are exposed to what scientists call “toxic stress” such as domestic violence, caregiver depression, abuse or neglect, the result can be lifelong difficulty in learning, memory and self-regulation, all key indicators for kindergarten readiness. As adults, their risk of developing chronic health conditions such as diabetes, obesity and heart disease increases. Supportive and respectful family interventions can result in substantial improvements in the well-being of both the child and the parent or guardian.

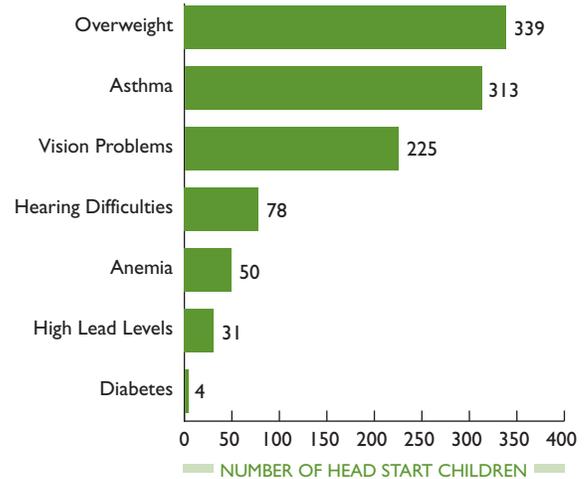
Head Start programs provide mental health services and referrals to community mental health providers, according to the needs of the child and the family.

Dental Health:

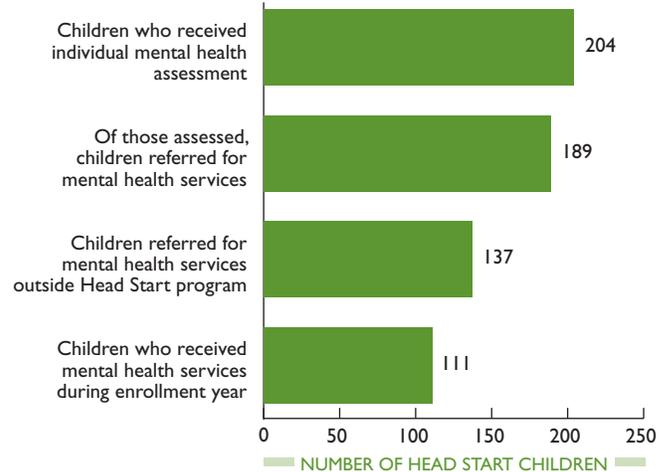
When a child’s oral health suffers, so does school performance, because children who are in pain cannot pay attention to teachers or parents, and thus they fall behind. Untreated oral disease has been linked with long-term health problems such as heart and respiratory diseases.

In Maine, there is a considerable shortage of dentists overall and in particular of those who accept MaineCare (Medicaid). This is the one category in the annual Program Information Report (PIR) in which Maine falls behind Head Start programs in the rest of New England and most of the nation. Maine Head Start Directors are working closely with the Maine Dental Access Coalition to address this health concern.

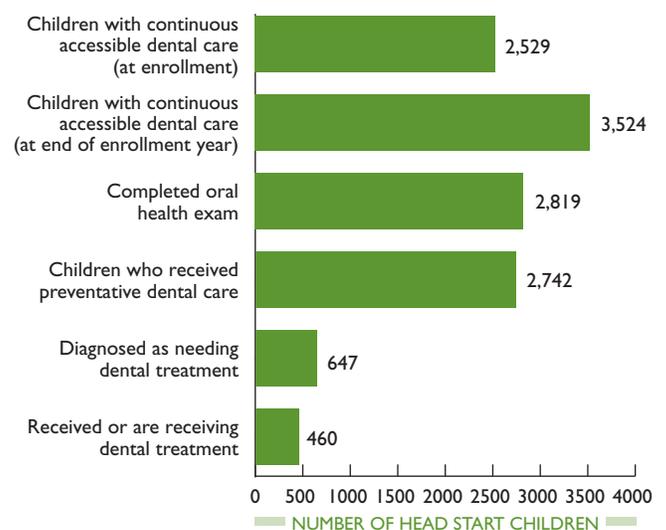
Most Prevalent Treatment for Physical Health Conditions, 2008-09



Mental Health Services, 2008-09



Dental Health Services, 2008-09



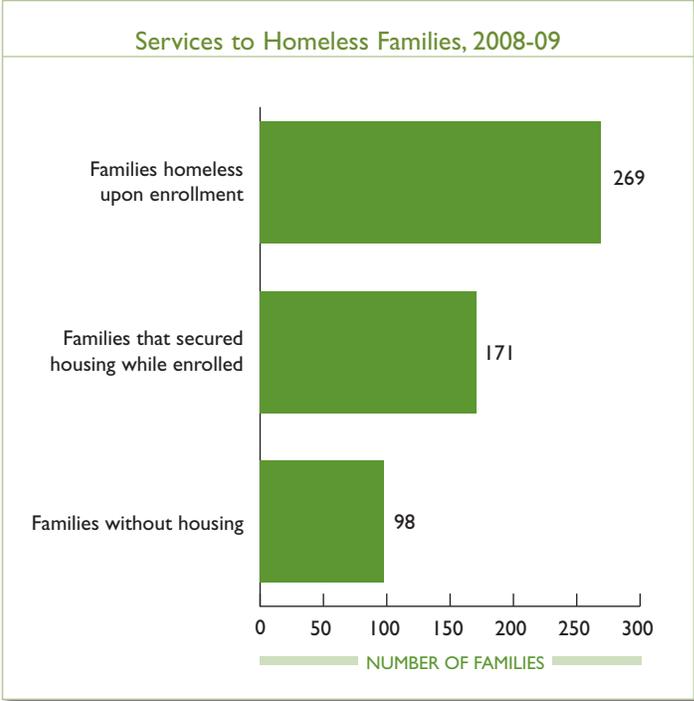
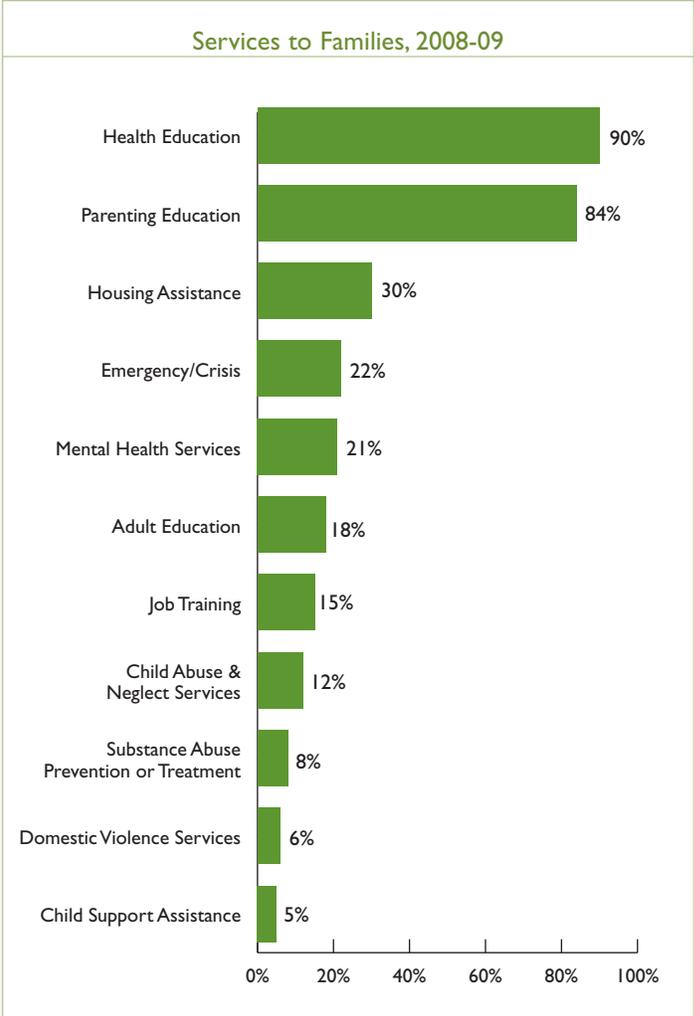
FAMILY SERVICES

The Family Partnership Agreement (FPA) is a key element in the comprehensive approach of Head Start. The FPA is used by Head Start Family Advocates to support parents in developing goals for family success. In 2008-2009, 95% of Head Start families successfully completed an FPA.

Head Start Programs provide support services to families and assure appropriate community referrals. Training opportunities for parents, ranging from how to best support a child’s cognitive development to parent leadership development, are also provided.

Parent involvement is integral to the success of Head Start. Parents volunteer in the classrooms, participate in decision making at both the center and program level, and have a strong influence, through a Policy Council, over policies and procedures implemented by the Head Start program.

Every Head Start program has a Policy Council. Head Start parents comprise at least 51% of the Policy Council; other members are community representatives. The Council works in collaboration with each agency’s staff and board of directors to administer responsive, relevant programs in compliance with federal Head Start regulations.



“ It’s not only children who grow. Parents do too. As much as we watch to see what our children do with their lives, they are watching us to see what we do with ours. I can’t tell my children to reach for the sun. All I can do is reach for it myself.”

Joyce Maynard

COMMUNITY RELATIONSHIPS

Head Start programs in Maine are supported by community partners. Every Head Start program in Maine has local partnerships in the communities where services are provided.

Volunteers:

A total of 6,534 volunteers provided their time and talents to Maine Head Start programs in 2008-2009. Volunteers in Head Start programs include parents, community members, and health professionals who donate their time and talents. All Head Start programs are required to generate a local match equal to 25% of their federal grant. This is accomplished through a combination of monetary and in-kind contributions.

Relationships with Public Schools:

Head Start programs have formal collaboration agreements with public schools. Over the past few years, there has been an increase in the number of partnerships between Head Start programs and public pre-K programs. A total of 1103 four-year-olds participated in Head Start pre-K partnerships in 2008-09 with 591 children from Head Start programs and 512 children from public pre-K. As a result, the children who came to the partnership from the public pre-K programs received comprehensive child development services.

Sharing buildings, staff and transportation costs, Head Start programs and public schools across the state have combined forces to ensure that a high quality preschool program is provided to the children in their communities.

Relationship to Maine's Home Visiting System:

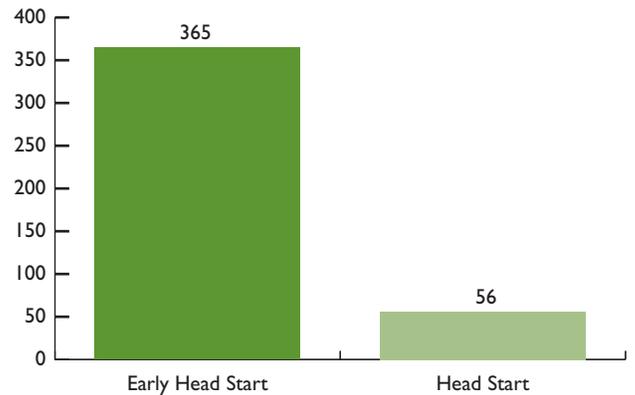
Maine Head Start programs provide home visitation services to 421 children. The majority of these services are provided to families with infants and toddlers. Home visiting in Head Start includes a weekly visit, usually an hour and a half in length, and at least two opportunities every month to socialize with other families in the program. The parents and home visitor work together to plan activities and establish goals within an established curriculum.

Federal health care reform provides new opportunities for collaboration between Head Start and Maine Families (Maine's home visitation program), with potential for integrating services and avoiding duplication of effort. In the coming year, the leadership of Maine Head Start and Maine Families will work together to develop a comprehensive, fully integrated home visiting system for Maine.

Relationships with Family Child Care Providers:

In rural communities, some Head Start programs collaborate with family child care providers. These local providers implement a curriculum designed for the family child care setting that meets Head Start requirements. Providers gain access to professional development opportunities and supplies and materials. Head Start family and community partnership staff visit the family child care setting to deliver health and family services.

Early Head Start and Head Start Home Visiting, 2008-09



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Maine People Living
Safe, Healthy and Productive Lives

John E. Baldacci, Governor

Brenda M. Harvey, Commissioner



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