



5604 Solway Street, Pittsburgh, PA 15217
412.421.3889
tryingtogether.org

**Reducing Federal Burden for Head Start Programs
A Proposed Rule by Administration of Children and Families
US Department of Health and Human Services on August 7, 2026**

October 5, 2026

The Honorable Robert Kennedy
Secretary of the United States Department of Health and Human Services
RE: ACF-2026-0595-0001, RIN-0970-AD30

Trying Together appreciates the opportunity to provide comments in response to the Department of Health and Human Services (HHS) Notice of Proposed Rulemaking (NPRM, Proposed Rule) regarding the proposed changes to the Head Start Program Performance Standards (Performance Standards) published in the Federal Register on August 7, 2026.

Trying Together supports high-quality care and education for young children by providing advocacy, community resources, and professional growth opportunities for the needs and rights of children, their families, and the individuals who interact with them in southwest Pennsylvania. We are also principal partners in Pre-K for PA and Start Strong PA, nonpartisan issue advocacy campaigns working to improve access to publicly funded, high-quality pre-kindergarten and to affordable, high-quality child care for Pennsylvania children and families.

We are writing to express our strong opposition to the changes proposed to the Head Start Program Performance Standards. As an early childhood intermediary working to ensure that programs and resources meet the needs of each child, family, and caregiver, we are deeply concerned about the changes of the NPRM on the early care and education system and how it will negatively impact the experiences of our youngest children and their families.

We strongly urge HHS to withdraw the Proposed Rule in its entirety and to preserve the Head Start Program Performance Standards. For more than 60 years, Head Start has provided more than child care. It provides high-quality early learning experiences delivered by skilled educators and health and developmental services from the community for children and families who face the greatest barriers to opportunity. The Head Start Program Performance Standards are not just rules, they have a meaningful purpose to guide programs and are based in child development science. They establish expectations for what families and children experience every day – including how many children are in





5604 Solway Street, Pittsburgh, PA 15217

412.421.3889

tryingtogether.org

a classroom, who teaches them, how health and developmental needs are identified, how families have a voice, and how children are kept safe.

The elimination of the majority of Performance Standards of a program with 60+ years of a proven track record does not support families or young children. Nor does it create more flexibility for programs already struggling. The proposed changes diminish the quality and safety of the programs and wither the trust and security of families.

In an effort to support the high level of attention on Head Start and make positive changes, we've pulled together public comments based on our experiences working with educators and families in Southwest Pennsylvania to help inform HHS on a better pathway forward.

The Critical Role of Head Start in Pennsylvania

In the Commonwealth of Pennsylvania, and across the Nation, Head Start and Early Head Start are critical components of the early care and education landscape. Head Start programs operate in 66 out of 67 counties in Pennsylvania, meaning all but one county rely on Head Start to provide child care, early education, and comprehensive health services to families¹. Across these 66 counties, a total of 675 Head Start programs follow a comprehensive set of Performance Standards that ensure families experience consistent and high-quality programming as they interact with both center-based and home-based Head Start environments in rural and urban areas². Across the Commonwealth of Pennsylvania, over 24,000 3- and 4- year old children and their families are served by Head Start in addition to approximately 6,000 expectant mothers, infants, and toddlers served by Early Head Start³.

Pennsylvania's mixed urban-rural composition illustrates how Head Start is vital in both major metropolitan areas as well as rural regions. Of particular importance, in rural farming regions of the Commonwealth, families have less access to high-quality early care and education experiences, which makes Head Start even more critical. According to analysis by the Center for American Progress, across the nation, approximately 46 percent of all funded Head Start slots are in rural congressional districts, compared with 32 percent in suburban districts and 22 percent in urban districts⁴. Regardless of where

¹ Ready to Succeed, *2025 State of Early Care and Education in Pennsylvania: A Sector in Crisis Is Impacting Critical Education for Young Children* (November 2025), https://www.prekforpa.org/wp-content/uploads/2025/11/2025_State_of_ECE.pdf.

² Ready to Succeed, *2025 State of Early Care and Education in Pennsylvania: A Sector in Crisis Is Impacting Critical Education for Young Children*

³ Ready to Succeed, *2025 State of Early Care and Education in Pennsylvania: A Sector in Crisis Is Impacting Critical Education for Young Children*

⁴ Center for American Progress, "5 Things To Know About Head Start," Center for American Progress, April 16, 2025, <https://www.americanprogress.org/article/5-things-to-know-about-head-start/>.





children and families live, the Head Start Performance Standards establish a consistent national baseline for the high-quality services and supports children and families can expect that will lead to greater success in school and in life, ensuring that it's good public investment for the federal government.

While we acknowledge HHS's view that the proposed changes will empower states and local authorities to meet the unique needs of children and families in their communities⁵, this is not how the proposed changes are experienced by the programs operating Head Start, the professionals delivering the services, and the families and children receiving the care and education. Making such sweeping changes to the Head Start program without adequately consulting with Head Start families, program leaders, local governments, or experts, demonstrates an alarming lack of concern for people who will be most impacted by the Proposed Rule. Below we outline the proposed changes our communities are most concerned about and provide the rationale of our recommendation that HHS withdraw the Proposed Rule.

MORE CHILDREN WITH FEWER EDUCATORS

Under the Proposed Rule, regulations would replace federally mandated staff-to-child ratios and group-size limits with state-established minimum licensing requirements. The removal of this Performance Standard will increase child-teacher ratios by allowing Head Start programs to follow weaker state child care licensing requirements. The Proposed Rule may result in 80% of children in Head Start having larger class sizes⁶. Having more children with a single educator means that the educator may have less capacity for:

- Building nurturing, responsive relationships and providing individualized attention to each young child
- Supervising all young children and responding to safety concerns
- Maintaining a positive and sustainable work environment

States establish legally enforceable minimum requirements for licensed child care programs including requirements for child-to-adult ratios that vary wide across the nation. Meeting minimum state

⁵ "Reducing Federal Burden for Head Start Programs," Department of Health and Human Services, Administration for Children and Families, Notice of Proposed Rulemaking, 91 Fed. Reg. 51248 (August 7, 2026), <https://www.federalregister.gov/documents/2026/08/07/2026-16134/reducing-federal-burden-for-head-start-programs>.

⁶ S. Meek et al., *Lowering the Bar: An Analysis of How Replacing Head Start Standards with State Child Care Licensing Weakens Early Learning Across the United States* (The Children's Equity Project at Arizona State University, August 2026), URL provided in source.





licensing requirements for staff-to-child ratios does not necessarily mean a program will be able to maintain the high-quality early learning outcomes that Head Start is known for.

Larger class sizes result in fewer adult-child interactions and less individualized attention.

Responsive adult interactions and individualized attention are key components to a high-quality early learning environment. For example, the Head Start Performance Standards require a 1:8 staff-to-child ratio for 3-year-old preschool classrooms, meaning that one educator may have up to eight 3-year-olds in their solo supervision⁷. Only five states in the nation match this ratio in their state licensing requirements for supervision of 3-year-olds⁸. In Pennsylvania, for example, the state licensing standard for 3-year-olds is 1:10. In Florida and North Carolina, however, we see a larger staff-to-child ratio of 1:15 for 3-year-olds; nearly double what the current Head Start Performance Standards require⁹. There is undoubtedly a difference in the quality and quantity of responsive interactions and individualized attention that one teacher can provide to 8 young children versus 10 to 15 young children.

Weakening or eliminating existing evidence-based educational standards on staff-to-child ratios threatens the overall quality of the services offered in Head Start programs and risks undermining the positive learning and developmental outcomes evident in children participating in the program. The quality of early relationships matter. Head Start's standards have been intentionally designed to align with the core elements of quality early childhood practice, including ratios and group sizes that support responsive relationships between teachers and children. Early relationships support healthy social, emotional, physical, and language development, while also giving parents confidence that their children are in a safe, nurturing environment.

Perspective of a program administrator with 24 years of experience in the field: *"By the end of this past school year 40% of our students had IEPs. There is no way humanly possible for all of these students needs to met (ie. IEP goals that are legally binding) if we were to increase the ratio - it is a struggle now to meet all of the individual student needs even with 2 staff in the room and EI therapists pushing in. The 40% with IEPs is not even mentioning addressing the needs of the students without a diagnosis who just*

⁷ Head Start Program Performance Standards, 45 C.F.R. chap. XIII (2024), <https://headstart.gov/sites/default/files/pdf/performance-standards-final.pdf>.

⁸ The Children's Equity Project, "Child Care Ratios and Quality: How Lower Adult-to-Child Ratios Support Young Children," The Children's Equity Project (blog), Arizona State University, August 2026, <https://cep.asu.edu/blog-cep/child-care-ratios-head-start-state-licensing>.

⁹ First Five Years Fund, "State Data: Child Care Ratios – Adult-to-Child Ratios for Center-Based Care," First Five Years Fund, May 29, 2026, <https://www.ffyf.org/2026/05/29/child-care-ratios/>.





5604 Solway Street, Pittsburgh, PA 15217
412.421.3889
tryingtogether.org

have behavioral concerns, those who are living with trauma, or even the children who are excelling and are above grade-level who need enrichment.”

Larger class sizes increase safety risks.

The Proposed Rule to increase staff-to-child ratios will create environments that make children in Head Start less safe. Head Start programs often serve children who require increased supervision due to their young age, language needs, and disability status. It is not possible to increase ratios without increasing risk of harm to young children.

Eliminating the staff-to-child ratios which determine how many children one adult can supervise is particularly unsafe and harmful for infants. Infants and toddlers are particularly vulnerable to health and safety risks and adequate adult supervision is critical to protecting their health and safety. For example, infants require careful monitoring of sleeping conditions and are susceptible to choking - concerns, requiring constant attention, fast adult identification and response or their lives could be in danger.

A former early childhood teacher who now oversees many Head Start classrooms: *“When children come to us in Head Start and Early Head Start with so many needs, it is essential to have enough high-qualified adults in the classroom to ensure the physical safety of students - both that could harm themselves with their unsafe behaviors, but also those that could hurt other children and staff. If a child were to have a tantrum or elope and there's only one staff person in the classroom, that staff person has to make a snap decision on who's safety to prioritize and where to intervene first. If there are two or more staff in the classroom they can divide and conquer by removing one child or group of children from the situation while the other goes after the child leaving, calms the tantruming child, calls for support, etc.”*

Larger class sizes worsen working conditions for early educators.

The early care and education system has been under a workforce crisis, facing chronic challenges recruiting and retaining qualified early educators. In Pennsylvania for example, an April 2026 Start Strong PA staffing survey revealed that 78% of early care and education programs across Pennsylvania are experiencing staffing shortages¹⁰. While low wages drive early educators out of the classroom, increasing class sizes and reducing the size of the Head Start workforce places additional burden on

¹⁰ Start Strong PA, *Child Care Crisis April 2026 Survey Results: Pennsylvania* (Start Strong PA, April 2026), <https://static1.squarespace.com/static/5c2e545d0dbda3cf1389658c/t/69fa062e24d2605234029b89/1777993262928/SSPA-County-Fact-Sheet-2026-PA.pdf>.





teachers who stay. Increased staff-child ratios and group sizes for educators increases educator burn-out and risks pushing even more early educators out of the classroom.

WEAKER WORKFORCE STANDARDS

The Proposed Rule eliminates some federal qualification and professional development requirements beyond those required by law, resulting in less qualified teaching staff and further devaluing the work of early childhood. More specifically, the Proposed Rule removes training and coaching requirements, undermining the relationship between teacher preparation, ECE quality, and educator compensation and retention. The Administration projects savings based on programs having to pay staff less with reduced qualifications and credentials. These projected savings come at the expense of having qualified early educators with the nation's most vulnerable children.

The most rapid period of brain development occurs before the age of five and the early experiences that children have lay the foundation for all future learning and development. Young children require educators with complex skill sets and competencies gained through formal education, training, and experience.

The goal should not be to lessen training, coaching, and credential requirements so more teachers will work for less. Rather the goal should be to create a sustainable pipeline of passionate and dedicated early childhood educators who feel equipped with the knowledge and skills to teach a classroom of young children.

Unfortunately, even with the reduction of training for Head Start teachers and staff, programs would still have to compete with other industries who can afford to pay more and would still struggle to staff classrooms to meet community needs.

Our children are our most precious resource and the future of our country. Head Start has 60+ years of serving children and families and providing care, education, and resources that enables them to thrive. The adult-child relationships are the foundation of success for a program like Head Start. Weakening workforce standards will make the investments in the program less effective.

FEWER FEDERAL PROTECTIONS FOR CHILDREN WITH DISABILITIES

Head Start is regarded as an inclusive programming, not only supporting young children with developmental delays and disabilities, but actively recruiting them for Head Start seats. The Proposed Rule shockingly eliminates all standards for meeting the needs of children with disabilities and





5604 Solway Street, Pittsburgh, PA 15217

412.421.3889

tryingtogether.org

replaces them with a single sentence: “A program must comply with all applicable Federal and state statutes and regulations regarding providing services for children with disabilities¹¹.” This proposal would reduce the scope of services Head Start programs have to provide to children with disabilities and developmental delays, such as providing individualized services while a child is being evaluated for Early Intervention eligibility, assisting parents to obtain services under the IDEA, and providing transportation for children with disabilities. HHS acknowledges that the Proposed Rule will bring the agency out of compliance with the Head Start Act, which requires the Secretary of HHS to establish policies and procedures to ensure children who may have disabilities receive early support services.

Additional concerns surround the Proposed Rule’s removal of longstanding clear protections and requirements around accommodating children with disabilities and their families critical to supporting them in thriving inclusive settings, including rolling back child suspension and expulsion restrictions, placing children at risk for removal from Head Start and unable to access other early care and education options. This includes eliminating regulations that require programs to not turn away children because of disabilities.

The Proposed Rule also removes the key requirement that all Head Start children receive developmental screening and that the screening happens within 45 days of enrollment. Screening young children is a critical step to monitoring development and identifying possible delays or disabilities. The Performance Standards currently detail procedures for follow-up after screening, including referral to Early Intervention (IDEA Part B and C), and individualized instruction. Delayed or inconsistent developmental screenings and lack of timely follow-up can cause young children’s needs and disabilities to be identified later, drastically impacting their trajectory for success. The Proposed Rule also eliminates the related current requirement for Head Start programs to explicitly promise to ensure the full participation and inclusion of children with disabilities and support of their families while determining IDEA eligibility and no matter the outcome of their IDEA eligibility. These alarming proposed changes create massive gaps in services for young children of all abilities.

In Pennsylvania, in 2026, 7,855 young children with disabilities or delays (as identified by eligibility for IDEA Part B or Part C) were also served by Head Start¹². That means that in PA alone, close to 8,000 young children with disabilities or delays had access to inclusive, individualized early learning programs in their communities alongside their peers because of Head Start. As the child care system

¹¹ U.S. Department of Health and Human Services. Administration for Children and Families. "Reducing Federal Burden for Head Start Programs

¹² First Five Years Fund, "Pennsylvania: Head Start State Fact Sheet," First Five Years Fund, September 14, 2026, https://www.ffyf.org/wp-content/uploads/2026/09/2026HS_PA.pdf.





5604 Solway Street, Pittsburgh, PA 15217
412.421.3889
tryingtogether.org

continues to operate under a staffing crisis, access to inclusive learning environments is limited for many young children - especially those with disabilities and their families. Without access to inclusive early learning programs like Head Start, children are left at a disadvantage entering kindergarten and we see higher costs of special education services in K-12. Families also find themselves without reliable and appropriate resources, often impacting their job stability and economic security.

Many of the Performance Standards that HHS proposes to remove are not simply “paperwork” - they are concrete services, safeguards, and responsibilities that Head Start programs are proud to provide to children with disabilities and their families. It is not a burden for Head Start staff to provide the high-quality support to children with disabilities that is defined in the Performance Standards. Removing these requirements does not eliminate the underlying needs of young children and the Proposed Rule will shift more responsibility and cost to families in an already overwhelming situation.

Program administrator from Western PA shared perspective on serving children with disabilities:
“Many families do not even know what early intervention is and aren't around enough other young children to notice that their child isn't developing as expected. As a Head Start program required to screen all children for developmental and health needs, we catch these delays and are able to make referrals so children's needs can be met. We've been averaging around 40% of children with IEPs over the past few years and our early intervention program has continually exceeded their funded numbers because we catch these delays early, address them, and in many cases these children don't need school aged special education services - likely saving general education and special education funds millions.”

NEW BARRIERS FOR SOME FAMILIES

The Proposed Rule eliminates self-attestation as an acceptable form of documentation to determine eligibility, which will have significant impacts on children experiencing homelessness. Self-attestation is often used to establish a child's age and could have broader implications for families that do not have immediate access to documentation, delaying enrollment and removing access for some families. The Proposed Rule would make it more challenging particularly for children experiencing homelessness to enroll, including by adding new documentation requirements and the new prohibition on self-attestations. Further, the Proposed Rule no longer states that programs can reserve 3% of slots for children experiencing homelessness and children in foster care. Finally, the Proposed Rule includes a requirement for programs to report staff who violate eligibility determination regulations to HHS. HHS indicates that it retains the provision that allows families to demonstrate eligibility for Head Start if they are enrolled in SNAP, although this is not codified in regulation.





5604 Solway Street, Pittsburgh, PA 15217
412.421.3889
tryingtogether.org

According to a 2026 factsheet published by the First Five Years Fund, Head Start in Pennsylvania served 2,517 young children experiencing homelessness across programs¹³. This can be further broken down by looking at 639 unhoused infants/toddlers served through Early Head Start and 1,878 3-5 year olds served through Head Start¹⁴. The current Performance Standards are designed to support Pennsylvania's vulnerable and unhoused young children whereas the Proposed Rule threatens their access to Head Start.

FEWER CONSISTENT COMPREHENSIVE HEALTH REQUIREMENTS

The Performance Standards ensure that Head Start agencies provide high-quality health, oral health, mental health, and nutrition services that are developmentally, culturally, and linguistically appropriate. For each of these categories, the Performance Standards establish the minimum requirements for the scope, type, and quality of services that Head Start programs must deliver for enrolled children and pregnant women.

Child Health

The health, mental health, and oral health services required through the Performance Standards are a critical component of the comprehensive services Head Start programs provide in service of school readiness. Head Start's comprehensive services are grounded in the idea that children thrive most when their holistic needs are addressed, acknowledging the key connection between health and learning. Every year, through following the Performance Standards, Head Start programs improve health outcomes for hundreds of thousands of families. These services are not burdensome requirements and instead have demonstrated positive impacts on child health outcomes such as increasing access to preventive care and dental check-ups, increasing healthy diet, and supporting mental health. By removing the Performance Standards on health, HHS undermines the quality of a core component of Head Start's comprehensive services model. Under the Proposed Rule, it is more likely that children will be off schedule with critical well-child visits and other medical services, delays in health and developmental screenings that would identify health conditions or developmental delays will be delayed, health disparities will be exacerbated, and inconsistency in information and supports for families will be created. The proposed elimination of health standards is likely to compromise child health, result in decreased trust in the Head Start program, and increase confusion for families.

¹³ First Five Years Fund, "Pennsylvania: Head Start Fact Sheet."

¹⁴ First Five Years Fund, "Pennsylvania: Head Start Fact Sheet."





5604 Solway Street, Pittsburgh, PA 15217

412.421.3889

tryingtogether.org

A Licensed Practical Nurse (LPN) who is the Health Coordinator for a regional Early Head Start program in Western, PA shared her perspective: *“... We partner with local dental offices to provide services to the entire family 5 to 6 times a year. This [dental service] is especially needed for the Clairton community, who have limited access to dental clinics.”* This illustrates how the Proposed Rule will have detrimental impacts on the health of children and their families.

Maternal Health

The Proposed Rule would undermine the health of pregnant women and exacerbate existing inequities. By eliminating the Performance Standards on the services, information, and referrals that Early Head Start programs are required to provide to enrolled pregnant women, the Proposed Rule undermines maternal health, which is foundational to the health and well-being of young children. HHS’s Proposed Rule will create meaningful inconsistencies in how maternal health supports, referrals, and programming are implemented.

The Proposed Rule is particularly problematic for pregnant and postpartum women because the timing of many aspects of medical and mental health care is critical to protecting the health of pregnant and postpartum women and their infants. Further, the elimination of these evidence-backed standards will create inconsistencies in how Early Head Start – a key federal maternal health program – is administered. The proposal will likely exacerbate issues of access and outcomes for all moms, with the potential to more deeply affect moms who are members of populations with outcomes that are already far below those of the general population, including those in Black and brown communities, tribal communities, rural communities, and those living in health care deserts.

A Licensed Practical Nurse (LPN) who is the Health Coordinator for a regional Early Head Start program in Western, PA. shared her perspective: *“We provide education and support to expectant mothers. At their request, we go on prenatal visits with them to advocate on their behalf. We perform the CES-D before and after their baby to support their mental health. With an increase in the number of moms with preeclampsia, we perform blood pressure and heart rate checks during our visits. We are constantly looking for ways to promote and maintain the health of our expectant mothers and the delivery of their baby. The proposed cuts put mothers and their babies at risk for death. Having the support services that our health team provides for our mothers and their babies is crucial for their lives and wellbeing.”*





REDUCED QUALITY AND SCOPE OF EARLY HEAD START HOME VISITING SERVICES

Evidence-based home visiting programs recognize that parents are a child's first and most important teacher. Early Head Start nurtures healthy relationships for eligible families who are parenting infants and toddlers, and for pregnant women and their families, through intensive, comprehensive child development and family support services. Research shows that families participating in the home visiting program improves children's cognitive, social, and emotional development; improves health outcomes, and expands the parents skills in responding to their child. Early Head Start serves families in 48 of our 67 counties, making it one of the most widely used home visiting models in Pennsylvania¹⁵.

The quality of care that pregnant women and their children receive from Early Head Start will be negatively impacted by HHS's proposal to remove requirements on: home visit frequency and duration, home visitor training and qualifications, tracking prenatal services delivered, home visitor language and cultural competency training, and facilitating connections to health insurance.

Currently, Early Head Start home visitors are required by the Performance Standards to co-plan home visit content in partnership with parents to promote the parent's role as the child's teacher and support them in executing parent-directed goals that are aligned with the Head Start Early Learning Outcomes Framework. The Proposed Rule removes requirements for this content, as well as requirements to focus home visits on promoting secure relationships between parent and child and activities that promote parents' ability to support the child's cognitive, social, emotional, language, literacy, and physical development.

The HHS Regulatory Impact Analysis (RIA) indicates that because of the proposed changes, the Early Head Start home visiting workforce will be reduced by 25%-75% and home visitor salary floors would be lowered, leaving remaining home visitors to manage higher caseloads with fewer clear requirements, fewer overall program resources, fewer staff well-being protections, with lower compensation.

¹⁵ Childhood Begins at Home, *What is Home Visiting? Pennsylvania State Fact Sheet* (Harrisburg: Childhood Begins at Home, 2025), 1, <https://www.childhoodbeginsathome.org/wp-content/uploads/HV-Fact-Sheet-Pennsylvania-2.pdf>.



5604 Solway Street, Pittsburgh, PA 15217

412.421.3889

tryingtogether.org

An Early Head Start Home Visitor Supervisor in Pennsylvania described: *“Home visits are designed to provide parents and caregivers with activities and insights about their child's learning and development. Weekly [EHS home visits] focus on school readiness, parent education, community resources, and health and well-being. These routines reduce isolation and help to normalize challenges that come with raising infants and toddlers. The benefits include increased health and economic stability with enrolled families.”* The full promise of Head Start’s two generation approach is written into the standards which play an especially critical role in home visiting and services for pregnant women and must remain in place.

REMOVAL OF STANDARDS THAT SUPPORT DUAL LANGUAGE LEARNERS

Trying Together envisions a future in which all caregivers of young children feel valued. When we inspire belonging among caregivers, we inspire belonging within them and the children and families they serve. Guided by the NAEYC Code of Ethics, we have a responsibility to ensure each child, family, and caregiver is safe from harm and has equitable opportunities to thrive. Receiving care and education in the home language is critical for children to feel a sense of belonging and to fully realize the potential of the services. In addition, there are decades of research demonstrating the importance of nurturing a child’s home language and its impact on long term academic and life outcomes when instruction includes the home language.

Requiring English-only instruction conflicts with Head Start’s mandate to help children from immigrant families acquire English language skills and could undermine their overall academic achievement. The Proposed Rule requires all educational instruction to be conducted in English, reversing the program’s current bilingual-development pedagogy and eliminating bilingual staffing requirements. Robust research shows that Dual Language Learners (DLLs) who receive high quality instruction in their home language, alongside English, have better and faster English-language acquisition trajectories and higher gains in their academic skills, than DLLs in English-only programs¹⁶. Prohibiting dual language instruction also will deprive DLLs of the numerous developmental, cognitive, and educational benefits shown to occur when DLLs become bilingual. Research on Head

¹⁶ American Institutes for Research, "First 5 California Dual Language Learner Pilot Study," American Institutes for Research, 2026, <https://www.air.org/project/first-5-california-dual-language-learner-pilot-study>.





5604 Solway Street, Pittsburgh, PA 15217

412.421.3889

tryingtogether.org

Start specifically shows that dual language instruction leads to higher English vocabulary skills for DLLs than those instructed only in English¹⁷.

English proficiency and developmental milestones are not interchangeable. For example, a three-year-old who has been in the United States for six months may have age-appropriate vocabulary, reasoning, and social-emotional skills in Spanish and not yet speak or understand English. An English-only educational environment creates challenges for educators to distinguish between emerging English proficiency and developmental delay. This could contribute to over- or under-identification of multilingual children for disability services.

This proposed change will also negatively impact the workforce and create additional burden for programs that will need to replace curriculum, instructional materials, and classroom resources. Families who do not speak proficient English will not be able to participate and engage with the program the way it was designed to support them. This will conflict with the Head Start Act mandate that the programs regularly communicate with families and the requirement that changes in standards “ensure that any such revisions in the standards will not result in the elimination of or any reduction in...parental involvement,” along with the overall quality and scope of services.

LESS CONSISTENCY FROM COMMUNITY TO COMMUNITY

Head Start standards are not overly perspective and they do not constrain flexibility. They serve a purpose to provide clear and consistent guidance for how programs service their community and directly impact the experiences children and families have every day. Safety and quality of a federal program that serves our youngest children should not be left to the discretion of whoever happens to be interpreting the law.

Head Start is a successful program with a good return on investment because there are comprehensive, clear, and uniform program performance standards. There is consistency across the nation even though the program is carried out by thousands of different organizations.

That consistency enables measurable outcomes for the Head Start program. It allows for federal monitoring that ensures quality and safety, and that complies with the Head Start Act’s requirement that the Secretary ensure reviews “are conducted in a manner that evaluates program performance, quality, and overall operations with consistency and objectivity.” It means that families who move

¹⁷ Alexandra Figueras-Daniel and Christina Stephens, "An English-Only Mandate for Head Start Will Harm Children" (policy brief, New Brunswick, NJ: National Institute for Early Education Research, August 2026), https://nieer.org/sites/default/files/2026-08/head_start_deregulation_brief_dlls_8.20.26_2.pdf.





5604 Solway Street, Pittsburgh, PA 15217
412.421.3889
tryingtogether.org

between communities and states can transition between programs and families can know what they can expect from a Head Start program. This is particularly important for children who move frequently, including when their families are involved in seasonal agricultural work or are experiencing homelessness. And it means that agencies that operate Head Start programs in multiple communities or multiple states can have one consistent set of standards that apply to all of their programs.

Conclusion

In conclusion, we strongly urge The US Department of Health and Human Services to immediately withdraw the current Proposed Rule in its entirety. Instead we respectfully call on HHS to dedicate its efforts to advancing policies and making investments that strengthen Head Start by ensuring that programs and their staff are well resourced, valued, and compensated so they are best able to deliver programming that helps children, families, and communities thrive.

Thank you for the opportunity to submit a public comment.

Respectfully submitted,

A handwritten signature in black ink that reads 'Cara Ciminillo'.

Cara Ciminillo, Executive Director

