

# Building Sustainable Supply Structures and Expanding Access to Early Head Start: State Investment Strategies



Families in every state struggle to find affordable, high-quality infant and toddler care. As states look for solutions to this crisis, they can turn to Early Head Start (EHS) as a successful working model that is running in every state. In addition to providing the nation's strongest model for high-quality infant and toddler care, EHS provides services for expectant parents and comprehensive services that strengthen families and support positive child development. While over 200,000 babies, toddlers and their parents benefit from Early Head Start each year, the program only reaches about 10 percent of children who are eligible.<sup>1</sup> States can help expand access by either directly funding EHS programs in their communities or building programs that are modeled after EHS and provide the same strong support for the positive development of infants and toddlers.

Although EHS, like Head Start, is funded from the federal government directly to local programs, 20 states currently invest in building the supply of and increasing access to EHS services.<sup>2</sup>

## **There are four key policy levers that states are using:**

1. Invest state funds in existing EHS programs.
2. Develop and invest state funds in a locally designed program model like EHS.
3. Become an Early Head Start-Child Care Partnership (EHS-CCP) grantee and use state funds for the match.
4. Create conditions that are supportive of EHS (such as alignment of standards and ease of braiding funding).

States such as California, Washington, Oregon, and Maine have implemented innovative strategies to expand EHS or EHS-like programs, offering lessons and insights for other states. The following spotlights offer a snapshot of how these states are working to expand access.

## **California**

The California Department of Education became a federal EHS-CCP grantee in 2015, expanding slots in ten rural counties in northern California, with layered EHS and Child Care Development Fund (CCDF) funding. The state leveraged these funds to fill a service gap, prioritizing underserved rural counties that had no prior EHS providers. State support staff worked with local providers, including family home child care providers, to meet requirements and obtain credentials. In some cases, EHS funds supported facility renovations to expand capacity. Partnerships included working with a Tribal nation to offer EHS at their child care center.

### Maine

Beginning in the 1980s, Maine has leveraged state resources to support expanded access to EHS in several ways. The state allocated state funds to add EHS and Head Start slots and used tobacco settlement funds to extend full-day/full-year services and create additional slots. The state also appropriated funding to expand eligibility up to 185% FPL. Maine also launched First4ME in 2021, a pilot program modeled after EHS-CCP using Child Care Development Fund (CCDF) quality funds. Community coalitions lead assessments, applications, and coordination, while contractors support and subcontract with licensed providers to implement and deliver services in four counties. The pilot has created opportunities for diverse organizations, not only existing Head Start providers, to serve as lead contractors and support communities with flexible funding for wraparound services and program quality support tailored to local needs.

### Oregon

Since 1988, Oregon has leveraged Head Start through Oregon Prekindergarten (OPK) using state funding to add slots. Later, a small investment in state-funded EHS slots was added and then significantly expanded in 2019. In 2023, Oregon Prekindergarten was redefined in statute as Oregon Prenatal to Kindergarten. This change allows flexibility for programs delivering Oregon Prekindergarten to convert state-funded OPK slots to serve infants and toddlers (essentially state-funded EHS).

### Washington

Washington is supporting expanded access through policy changes related to child care subsidies, including counting EHS / Early ECEAP family engagement activities toward the subsidy program's work requirement so that families maintain eligibility and enrollment regardless of employment changes. The state also established Tribal Early Learning grants that can be used to add slots (ECEAP, EHS or HS) or to cover the non-federal share and provide culturally responsive services. Washington established the Early ECEAP (Early Childhood Education and Assistance Program) in 2019. ECEAP is the state's pre-k program, modeled after Head Start, while Early ECEAP is modeled after EHS and uses layered state and Child Care Development Fund (CCDF) funding. Funding for the program was cut during the 2025 state legislative session in response to a substantial state budget shortfall; however, the program remains in statute with advocates and legislative champions hoping to restore access in future years.

### Considerations for state leaders

EHS's comprehensive approach is proven to support what all babies need to thrive: good health, strong families, and positive early learning experiences. The state examples above highlight that there are a variety of strategies states can explore to expand access to Early Head Start and EHS-like services for children and families.

### The following considerations offer a starting place for states exploring investments to expand supply and support access:

1. What specifically is the problem(s) you are seeking to address? (expanding supply, expanding eligibility, increasing quality, addressing geographic service gaps, stabilizing the workforce, etc.)
  2. What is the landscape of program and community relationships? What strengths can you build on?
  3. What is the fiscal and political viability for change? Are some approaches likely to be better received than others in your context?
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<sup>1</sup>Center for American Progress. (2025). Data on Child Care and Early Learning in the United States.

<https://www.americanprogress.org/data-view/early-learning-in-the-united-states/?indicatorFilters=Head+Start+access>

<sup>2</sup>Prenatal-to-3 Policy Impact Center. (2024, October 22). 2024 Prenatal-to-3 State Policy Roadmap. Peabody College of Education and Human Development. Vanderbilt University. <https://pn3policy.org/pn-3-state-policy-roadmap-2024/>