Message from Executive Director

It has been a year of opportunities for MA Head Start Association and its member programs. With programs facing many changes, MHSA had the chance to provide members with some unique resources while continuing to offer professional development in direct response to immediate needs.

One of the most exciting new opportunities we were able to participate in was the Privacy Policy Template Project with Zoe Beckerman. In partnership with Zoe, and in response to one of the requirements of the updated Head Start Program Performance Standards, we developed a product to address the protection of child data. It was offered widely to the field and over 80 were sold across the country. We were able to offer this at a greatly reduced rate to our member programs. This project was a successful first effort at finding different ways to provide needed tools for membership while developing a different resource stream for the Association.

Our parent board members have been active in their work on the board, as well as reaching out to member agencies to encourage parent leadership development. Their willingness to share their stories publicly and their work to help encourage other parents to share their talents has helped create engagement on the local, state, and national levels. We are also excited by parent interest in participation in the MHSA board and look forward to the addition of at least one more to help drive our work. The parents continue to work on new ideas to engage more of their peers in the work of the Association and we are thankful for their contribution.

MHSA was able to once again offer professional development opportunities for members. Building on a growing partnership working with Dr. Jayne Singer, MHSA offered workshops that addressed the needs of staff working with children and families affected by trauma at both the spring and fall conferences. These trainings provided program staff with intensive, interactive opportunities to explore and learn tools to help address what has been seen as a heightened need. Some of this theme will carry over into what is offered at the upcoming NEHSA conference hosted in MA in the spring.

MHSA has worked closely with HSSCO to further develop our partnership in an effort to maximize the role of Head Start across state systems and collaborate with EEC. MHSA has taken an active role in providing feedback on changes to the BRC system, QRIS revisions, EEC regulations updates, and workforce and professional development changes taking place at the department. At the federal level, MHSA continues to work closely with NHSA and leaders across the country to support federal budget advocacy and address policy issues as the Office of Head Start has settled into working with the new Administration. Presently, work is being done to respond to potential changes to the use of CLASS in the DRS system. MHSA also continues to gather feedback as the new monitoring system rolls out.

As we look to this new year, MHSA will continue to ensure that Early Head Start and Head Start services are available to our families, fight for our workforce and the acknowledgment of the great work that they do, and strengthen our bonds with our partners. We look forward to the new opportunities that may present themselves. We thank you, our programs, for the good work you do, and we thank our community for your ongoing support of us to continue to provide for our children and their families!

Pam Kuechler
MHSA Executive Director

The Massachusetts Head Start Association, Inc., a not-for-profit, 501(c)(3) membership organization, works in collaboration with other stakeholders to meet the needs of low-income families and achieve successful outcomes for children in order to prepare them for future success in learning.

Head Start provides a comprehensive child and family development program for low-income children birth to age five and their families, as well as pregnant women. In addition to early childhood education, children and families receive health and nutrition services, family development support, access to mental health services, as well as supports for children with disabilities. The goal of the program is to improve child and family outcomes, including school readiness, by providing a continuum of comprehensive services that support children’s development and family functioning.

In Massachusetts, there are 52 Head Start programs operating 731 classes.

15,284 children received Head Start services in Massachusetts this year

Senator Elizabeth Warren met with families from Triumph, ABCD, Self Help, and Pathways for Children to learn more about how Early Head Start and Head Start has impacted them. We’re thankful for her continued support.

Join us in 2018 as the hosts of the New England Head Start Association Spring Conference

Stay tuned for more information!

April 10th—12th 2018

www.massheadstart.org
Belkis Amaya entered the program when her first child was just 2 years old. Being a first time parent and dual language learner, Belkis was hoping to gain skills that would help enhance the growth, development and language of her child. With one full year of service Belkis’s son had shown great improvement in the number of words he knew and understood in both English and Spanish. He will now sit and complete the task at hand and will ask for help when needed. He has reached his developmental level and will attend Head Start in the fall.

What the family found most helpful were the home visits, which were “learning opportunities” for her and her children. She uses the Learning Games Handouts from our home visiting curriculum to gain a better understanding of how to play with her children and how to extend the activities for their own individual development. She stated the sheets to be “helpful and informative” especially the ones with games for the family to play together.

Belkis has learned to advocate for herself and her children with the help of her home visitor utilizing the resources we provide and the ones in her community. Belkis has connected with many of our resources that EHS has to offer including our home and toy safety check list. She stated “I didn’t even know they had locks for toilets and appliances”, and was very excited to receive the items to make her home safer.

Belkis has made many accomplishments during her time with us including finding a part-time job and deciding on what her goals are. One huge accomplishment that she is super proud of is completing her CNA training course. It was a tough few months but her solid commitment to her own growth pulled her through. Although busy with all of this, she still managed to rearrange her schedule to fit our Home Visits in.

The Early Head Start program has made a huge difference in Belkis’s life by helping her become a knowledgeable, empowered person. With the help from EHS she now feels more confident in her abilities to take care of her family. “I really enjoy the support and encouragement I get from my home visitor and the staff at EHS.” She recommends all first time parents to join Early Head Start or anyone who may just need a little support.
“How Newburyport’s Head Start Handles Diabetes”, by Carol Feingold, Newburyport Current, December 6, 2017
Learning new skills isn’t only for the children at Head Start in Newburyport. This year the staff has been put to the test learning how to care for a three-year old with Type 1 Diabetes. “Children are protected by law to have equal access to education,” said Deborah Linett, deputy director of Early Learning Services including Head Start, Early Head Start and Family Childcare, which serves children ages birth to five in the Newburyport-Haverhill area.

“It’s available to everybody, to all children in the United States. Under federal law they have equal access to education.” Unfortunately that isn’t always as simple as it seems. Luckily Jenna Choquette and Mike Harkness of Amesbury know their rights and are strong advocates for their three-year old son Michael Harkness.

“I have been involved with Head Start for years,” Choquette said. “I have a nine and a half year old son Adam, who attended Head Start in 2011 here in Newburyport, and I did the pregnancy program with my daughter Juliaonna. She just turned six.” When Michael was 22 months old, Choquette, who had some medical training, knew something was wrong. “He went into diabetic ketoacidosis (DKA),” she said. “For a couple of weeks leading up to DKA, I knew something was wrong. He had excessive thirst, excessive urination, and labored breathing.”

Because Michael was in the Early Head Start (EHS) program at that time, Choquette contacted her EHS parent advocate and they took Michael to the hospital. The emergency room physician at Anna Jaques Hospital diagnosed him with Type 1 Diabetes and sent him to Tufts Floating Children’s Hospital in Boston where he was placed in the pediatric intensive care unit in critical condition.

“After he was stable and out of PICU,” Choquette said, “we learned how to take care of him. He just had his third birthday.”

At age three Michael graduated out of the EHS program and it was time for Head Start. “I grew really close with the staff here,” Choquette said, “and I knew I could trust them like family.” “It becomes like family here,” Linett said, “and, as in all families, sometimes there are issues. We knew Michael when he was one week old, but my staff was afraid of what they didn’t know.”

Head Start is not required by the Massachusetts Department of Early Education and Care (EEC) to have a medical person on staff. The only requirement is that the staff has adequate training to administer medicine. “Jenna is an expert in a lot of things,” Linett said, “her rights for starters and how to care for Michael. She started to train the Head Start staff and came to the center for a little while until the staff was comfortable with what they had to do.”

Again, it wasn’t simple. They had to learn how to check his glucose and give him insulin that is delivered through the Omnipod insulin pump he wears. They had to learn how to treat hypoglycemia by giving him simple sugars like a juice box or glucose tablets. “There is so much to it,” Choquette said, “temperature, food, stress, lack of sleep, literally everything affects the glucose.”

“It took a couple of months of going through the training with Jenna to feel comfortable,” Michael’s teacher Sandy Walsh said. “The rep from Omnipod came in and showed us how to use it. We’re getting more comfortable with knowing what to expect.

“I love having Michael around. He’s treated like everybody else, of course he is. Unless he has a short sleeve shirt on and you see his pod you wouldn’t know he has Type 1 Diabetes. He’s just a happy, loving child.”

It’s not only the teaching staff that had to be trained. Because the children eat breakfast and lunch at Head Start, the kitchen staff had to be trained, too. “We didn’t start out with this stuff,” she said. “We had to fight the insurance company to get it. Before, I was giving him a minimum of four injections a day and every three hours around the clock I was pricking him to check his glucose level. “People get overwhelmed. They don’t know where to start. You have to put all your trust in someone else, and you definitely have to know your rights and fight for them.”

“We have to watch what he eats,” Walsh said, “how many carbs he has before every meal.” Michael is in a class of 16 students with two teachers.

“I really give a lot of credit to the teachers,” Linett said, “and to Jenna for being persistent. We made it work. There’s a big stigma attached to the disease. People think diabetes is a result of poor parenting.” In addition to the Omnipod, Michael wears a Dexcom Continuous Glucose Monitoring (CGM) that allows Choquette to monitor his glucose level on her cell phone.

“We didn’t start out with this stuff,” she said. “We had to fight the insurance company to get it. Before, I was giving him a minimum of four injections a day and every three hours around the clock I was pricking him to check his glucose level. “People get overwhelmed. They don’t know where to start. You have to put all your trust in someone else, and you definitely have to know your rights and fight for them.”
Our Children & Families

Over half of our families are eligible for services because their income is below 100% of the federal poverty line. Others are eligible for services because they receive public assistance such as TANF or SSI, their status as a foster child, or they are homeless. 1,434 children were over the income eligibility requirements.

Our families speak a variety of languages as the primary language in their homes.

- English
- Spanish
- Native Central American, South American, and Mexican Languages
- Caribbean Languages
- Middle Eastern & South Asian Languages
- East Asian Languages
- Pacific Island Languages
- European & Slavic Languages
- African Languages

48 families have at least one parent/guardian who is a member of the United States military on active duty. 67 families have at least one parent/guardian who is a veteran of the United States military.

Parent/Guardian Education Level

- 1,192 have an advanced degree or a bachelor’s degree
- 3,330 have a associate’s degree, vocational school, or some college
- 5,883 have a high school diploma or GED
- 3,123 have less than a high school diploma

1,215 Head Start children who have an Individualized Education Program (IEP) indicating they have been determined eligible to receive special education services. 996 infants and toddlers in Early Head Start have an Individualized Family Service Plan (IFSP) to receive Early Intervention services.
Our Staff

Like our families, our staff speak a variety of languages. Almost 1,000 staff members are proficient in a language other than English. They speak Spanish, Native Central American, South American, and Mexican Languages, Caribbean Languages, Middle Eastern & South Asian Languages, East Asian Languages, Pacific Island Languages, European & Slavic Languages, African Languages, and a few others.

24% of all Head Start staff are current or former Head Start or Early Head Start parents!

Teachers & Assistant Teachers
- 4% have an advanced degree
- 34% have a bachelor’s degree
- 29% have an associate’s degree
- 32% have a Child Development Associate (CDA) credential

Family and Community Partnerships Staff
- 12% have an advanced degree
- 51% have a bachelor’s degree
- 15% have an associate’s degree
- 5% have a family-development-related credential

Program Management Staff
- 35% have an advanced degree
- 63% have a bachelor’s degree
- 1% have an associate’s degree

This year, the average Teacher salary increased by 7% to $31,674

The state recognizes the need to support our workforce and was able to make some headway in helping support our workforce by implementing a rate increase this year.

Staff Turnover

28% of Teachers who left their positions, went for higher compensation/benefits package in the same field

13% of Teachers who left their positions changed their job field altogether
Supporting Working Families

With the support of their Head Start programs and the comfort of knowing their children were receiving high quality early education, parents reached their own educational milestones this year.

- 970 parent/guardians completed high school or were awarded a GED
- 250 completed an associate degree
- 152 completed a baccalaureate or advanced degree

- 4,203 children received transportation to and from their Head Start programs
- In 71% of all enrolled families, one or both parents/guardians are employed
- 3,397 families have at least one parent enrolled in job training or education

Nurturing Healthy Families

Children receive comprehensive developmental, sensory, and behavioral screenings upon enrollment. Programs also work to ensure all children are current with their immunizations.

- The number of families with no health insurance decreased by 84% during their time with Head Start
- 98% of enrolled children have an ongoing source of continuous, accessible healthcare
- 88% of enrolled children receive continuous, accessible dental care provided by a dentist
- 11,197 families received family services such as health education, substance abuse prevention, parenting education, and mental health services

Fostering Family and Community Partnerships

Programs employ 423 Community and Family Partnerships staff to help families set and achieve their goals. Additionally, programs entered into formal agreements with almost all Local Education Agencies and public school pre-kindergarten programs in their communities.

- 305 homeless families acquired housing
- Fathers/father figures engaged in family assessments, family goal setting, parenting education workshops, and involvement in their child’s development experiences like home visits and parent-teacher conferences. 386 participated in Head Start program governance, such as Policy Council.
- 14,226 people provided volunteer services this year. 9,970 of these volunteers are current or former Head Start parents.
Discover What Head Start Offers!

Did you know Head Start provides comprehensive services to more than a million children each year?

Birth to 5

We support learning through play, creative expression, and guided activities. We build strong relationships as the foundation of early learning.

We promote language and literacy development, early math and science concepts, and positive attitudes toward learning.

Health & Wellness

We promote physical development both indoors and outdoors. We serve breakfast and lunch, as well as healthy snacks.

We provide medical, dental, hearing, vision, and behavioral screening.

Social Services

We help families find assistance in challenging times.

We help families identify and reach goals around employment, training, and parenting.

Disability Services

We build on children’s strengths and individualize experiences to meet their needs.

We collaborate with community agencies when further assessment is needed.

Pam Kuechler, Executive Director

508-561-7965

email: info@massheadstart.org