MASSACHUSETTS
HEAD START ASSOCIATION

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September 30, 2026

The Honorable Robert F. Kennedy, Jr.
Secretary of United States Department of Health and Human Services
Washington, D.C. 20528

RE: Comment on Reducing Federal Burden for Head Start Programs (RIN: 0970-AD30; Docket ID: ACF–2026–0595)

Dear Secretary Kennedy,

I am writing on behalf of the Massachusetts Head Start Association (MHSA) in strong opposition to the Notice of Proposed Rulemaking (NPRM) *Reducing Federal Burden for Head Start Programs*. We urge the U.S. Department of Health and Human Services (HHS) to protect the Head Start Program Performance Standards and withdraw the proposed rule.

For more than 60 years, Head Start has enabled millions of children to have a strong start in life by providing high-quality early education, as well as health, dental, and nutrition services. Head Start was founded as a two-generation program, providing meaningful family engagement and parent leadership in addition to services to young children. Head Start serves children whose unique needs are often not met by other programs.

MHSA represents the 28 Head Start and Early Head Start agencies in Massachusetts which collectively operate 50 Head Start, Early Head Start, and Migrant and Seasonal Head Start programs. Massachusetts Head Start programs serve a funded enrollment of over 10,000 vulnerable young children and pregnant women across the Commonwealth of Massachusetts.

The research on Head Start's impact is clear. Head Start children perform better in school, are more likely to graduate from high school and college, and have higher lifetime wages for both themselves and their children. Head Start's impacts extend beyond children as Head Start's two-generation model suggests. Head Start parents have increased labor-force participation, are more

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likely to complete a college degree, and have stronger parenting practices.[1] These lifelong gains are a result of Head Start's strong and comprehensive standards requiring high-quality early learning practices, comprehensive services supporting children's wellbeing, and parent engagement and leadership.

The Head Start Act charges each program with the mission to provide high-quality services to the most vulnerable in our communities. The children in our programs are not the general population served by child care and are not best served by the licensing requirements of most states. Rather, they need a full complement of comprehensive services and nurturing, long-term relationships with exceptionally trained and supported educators. While this is a substantive investment in the short-term, it has proven fiscal returns—as well as deeply human ones. A thriving Head Start wraps around our most vulnerable children and their families to support their well-being, which ripples outward with tangible positive impacts on our communities and economy.

The Head Start Program Performance Standards protect and preserve Head Start's proven model. They operationalize evidence-based practices and ensure that the most vulnerable children and families have services that meet their needs. The standards provide consistent quality while allowing programs to flexibly design services around local needs.

The rule proposed by HHS would fundamentally upend those standards that enable generational benefits and severely compromise the ability of our programs to deliver the high-quality services children and families deserve. Below we detail the overall and specific impacts of the proposed rule underlying MHSA's opposition.

Overall Impacts

Workforce impacts

The proposed changes in the NPRM would drastically change the working conditions for the Head Start workforce. Larger class sizes, fewer behavioral health and developmental resources to support educators working with children who have experienced trauma, no requirements for staff breaks or wellness supports, and more would make an already difficult job harder for Head Start educators. The Regulatory Impact Analysis estimates nearly 40,000 jobs could be cut from Head Start programs and other staff could experience a 6-9 percent pay cut as a result of the proposed changes. A more difficult working environment, loss of jobs, and wage cuts would drain the mental health of the staff in our Head Start programs, leading staff to leave and fewer potential

[1] National Head Start Association. 2026. "More Powerful Than We Thought: New Research Shows Head Start's True Effects Have Been Systematically Undercounted." 2026. https://nhsa.org/about-nhsa/our-impact/head-start-research-briefs/more-powerful-than-we-thought/.

applicants to join this already strained workforce. Head Start's proven outcomes depend on a strong and stable workforce. The NPRM claims that the result of these changes would be more children served in Head Start. This relies on retention of existing staff, which is seriously under threat by the proposed changes.

Learning and quality

Weakening or eliminating existing evidence-based educational standards 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 environments and relationships matter. Head Start's current 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, effective teaching and use of curricula, well-trained educators, engaged families, and especially important for children growing up in poverty served by Head Start – comprehensive services that address the needs of the whole child and family.

The Proposed Rule would increase class sizes, decrease hours of operation, reduce the qualifications, competencies, support, and coaching of teachers and staff, and eliminate requirements for effective teaching and learning environments, home visiting, and parental involvement. It creates conditions where fewer staff with fewer qualifications and supports are responsible for larger groups of high-needs children. These conditions lead to unsafe environments for children and staff. These changes, collectively and individually, threaten the improvements in both school readiness and long-term educational outcomes of Head Start children.

Protections for the most vulnerable children

The Proposed Rule undermines one of the core elements of Head Start: prioritizing children from families who are most in need to help them succeed in school and in life. That core element requires tailoring Head Start's services to the needs of different children, including children from all cultural backgrounds and children who are dual language learners, children with disabilities, children from families experiencing homelessness, children in foster care, and children from families performing agricultural work. The Standards establish expectations for how Head Start programs can and must effectively serve all of Head Start's diverse children. The NPRM would decimate eligibility and services for these children who Head Start was designed to serve.

Requirements under statute

The Head Start Act clearly states that the Secretary's revisions to the Performance Standards may not eliminate or reduce the quality, scope, or types of services required under the standards in effect as of December 12, 2007. This binding statutory limit on how far any revision to the Standards may go is clearly spelled out in the Act. In our detailed comments below, we share

how the NPRM will clearly reduce the quality, scope, and types of services required under the Head Start Program Performance Standards.

Flexibility

The NPRM frames the proposed changes as added flexibility for Head Start programs. MHSA supports true flexibility for programs and does not stand in the way of finding opportunities for programs to develop services that best meets the needs of their local communities. However, this flexibility exists in current Head Start Program Performance Standards. Programs identify program models, develop locally designed options, provide a wide range of family services, and build classrooms and home visits that meet the cultural, linguistic, and local needs of their families. We recognize that an effort to make regulations less administratively onerous would be welcome. This proposal, though, is not that. This proposal would reduce the quality, scope, and services of Head Start and threaten the carefully designed flexible programming that our Head Start grantees have worked so carefully to build for their communities. A thorough regulatory framework is necessary, not extraneous, to high-quality programs. Additionally, removing over 90 percent of regulatory language for Head Start programs does not make it easier for programs to meet federal requirements, it makes it more complicated. Rather than looking to a comprehensive document written for program leaders, they would now be required to know state and federal statutory language, know state regulations, track updates to corresponding regulations, and follow state and federal lawmaking and regulatory processes.

Below are specific examples of MHSA's opposition to the proposed changes:

Program Governance

The proposed rule would remove critical components of parent governance and leadership of Head Start programs. Parent leadership is fundamental to Head Start's 61-year promise of supporting local communities by meeting the needs of that community. The proposed rule would remove the accountability of a Head Start program to its parents and remove requirements that parents govern programs and centers across our community. In the 2024-2025 program year, Massachusetts Head Start programs served over 11,000 families from across our Commonwealth, each one bringing unique skills and perspective to our 28 agencies.

Head Start recognizes that families are central to children's school readiness. The Standards protect this central role for parents by giving parents formal governance authority over program design and operation, encouraging parent and family engagement, requiring high-quality family partnership services, and helping families access social services necessary for security and stability. The proposal would weaken not only the role of parents in Head Start in the short term by reducing their role in governance, but threatens the leadership abilities of parents in the long term as advocates for their children throughout their schooling. The proposal will also weaken

the role of families by eliminating the standards on family engagement and family partnership services, and removing requirements to support family security stability through connections with social services.

Eligibility, Recruitment, Selection, Enrollment, Attendance (ERSEA)

We are deeply concerned that changes to ERSEA within the NPRM would limit access to our programs for our community's most vulnerable children and threaten the health and safety of young children.

Proposed Eligibility Requirements Rescinded and Replaced from Current Regulations

Self-Attestation

The NPRM proposes to remove the allowability for families to self-attest to their homelessness status or their child's age. There is no data-driven reason for these changes, and the NPRM itself recognizes that 8 percent of children nationwide would lose access to Head Start due to these changes. In the 2024-2025 program year, 16 percent of all children in Massachusetts Head Start programs experienced homelessness. This is a rate that is rising quickly and represents an 82 percent increase from two years prior. Cost of living and housing in Massachusetts create alarming rates of family homelessness. These children and families represent exactly the families Head Start was designed to support, allowing Head Start programs the opportunity to work with the parents and the children to offer support and lift the family from poverty. A family experiencing homelessness could have many reasons that they cannot produce documentation as to their status. The McKinney-Vento Act is clear that families doubled-up or couch surfing meet federal definitions of homelessness, which the NPRM recognizes as a governing statute for Head Start programs. Those families would have no such documentation as to their status and would simply lose access to this program that was inherently designed for them.

Removing self-attestation of a child's age also solves no discernable problem and only excludes otherwise eligible young children from our care. In our communities, we see highly mobile families – families experiencing homelessness, families experiencing domestic violence, and others – who often lose track of documents when moving from place to place.

Eligibility Requirements Proposed for Removal from Current Regulation

Applying Housing Costs for Eligibility Determination Purposes

Since 2024, the Head Start Program Performance Standards have allowed programs to deduct excessive housing costs from a family's gross income for the purposes of eligibility determination. This was a welcome standard in Massachusetts. In our state, housing costs are soaring and families are paying well beyond their ability to safely house their families. According to the National Low Income Housing Coalition, an individual working at $15 minimum wage would have to work 106 hours each week – or the equivalent of 2.7 full time

jobs – just to afford a modest one-bedroom rental home at fair market rent in Massachusetts. Fair market rent for a two-bedroom home, needed for a family, is the often unattainable $2,527 per month.[2] According to an MHSA survey, more than half of surveyed Massachusetts Head Start programs use the flexibility of deducting excess housing costs from gross income, including in some of Massachusetts' highest cost of housing communities. In these programs, between 5 and 16 percent of all income-eligible families were found to have excess housing costs. These changes would mean these families – families struggling to live and remain in their communities and who could not otherwise access childcare to work or go to school – would no longer be eligible. As one program leader shared with MHSA, "This would impact those families that are just trying to make ends meet. These families are barely scraping by with outrageous rent payments, utility payments, food expenses, etc. These families will be over income for our program due to the current wages in the state of Massachusetts."

Enrollment and Attendance

100 Percent Enrollment

The NPRM removes the allowability for our programs to reserve 3 percent of slots for children experiencing homelessness and children in foster care. Head Start programs use this flexibility to ensure that these highly vulnerable families always have access to Head Start services that support child and family needs. The changes in the NPRM would mean that programs are no longer required to locate and recruit homeless children, no longer allowed to reserve a seat for a homeless child or a child in foster care, and no longer guarantee that a child experiencing homelessness or in foster care can remain enrolled in Head Start if they move. These changes fly in the face of Head Start's mandate to prioritize and serve children in foster care and children experiencing homelessness.

Eligibility for Children in Foster Care

By removing the Standards meant to provide access to Head Start programs to children in foster care, the proposal will decrease access for these children. Under the Proposed Rule, Head Start programs will no longer be required to make specific efforts to locate and recruit children in foster care, prioritize those children for enrollment, nor make efforts to maintain a child's enrollment even if the child moves. The proposal will also eliminate Head Start agencies' authority to reserve spots for children in foster care. Head Start remains required to maintain categorical eligibility for foster children but the proposal would remove all Standards that support enrolling and maintaining quality continuity of care for these statutorily eligible children, making it difficult for programs to comply with their statutory requirement.

[2] National Low Income Housing Coalition. 2026. "Housing Needs by State: Massachusetts." https://nlihc.org/housing-needs-by-state/massachusetts.

Suspension and Expulsion

The ERSEA section of the NPRM removes all restrictions on suspension and expulsion of very young children from Head Start environments. Head Start's current standards protect the social-emotional learning capacity for young children and provide support for staff to work with children rather than excluding them from educational opportunities. Head Start Program Performance Standards are the only federal standards providing this protection, prohibiting the use of exclusionary discipline and protecting the emotional safety of very young children.[3] Evidence shows that suspension and expulsion are not applied evenly across preschool children in non-Head Start programs. Black boys represent roughly half of all preschool suspensions and expulsions even though they represent about 20 percent of enrolled children.[4] Children with disabilities are suspended or expelled at a rate that's 14.5 times higher than that of their typically developing peers.[5] Exclusionary discipline also has harmful economic impacts, forcing parents to take time off work or pushing them out of the workforce entirely when their children are denied a safe and supportive classroom environment.[6] This hurts families and hurts our economy.

Removal of children from care cannot be an option on the table for any Head Start program. The children who come to Head Start have often experienced trauma in their earliest years with high levels of needs and resulting behaviors that are challenging. The solution to those needs is to meet them, not to remove that child from the program best suited to meet their needs. We strongly oppose this proposed change.

Education and the Learning Environment

We strongly oppose the NPRM changes to teaching and learning.

English-Only Education

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[3] Meek, Shantel, Darielle Blevins, Brittany Alexander, Mario Cardona, and Rosemarie Allen. 2026. "Harsh Punishment and Exclusionary Discipline in the Early Years." In The Children's Equity Project. https://cep.asu.edu/sites/g/files/litvpz916/files/2026-09/Harsh%20and%20Exclusionary%20Discipline%20%286%29.pdf.

[4] Novak, Sara. 2023. "Half of the 250 Kids Expelled From Preschool Each Day Are Black Boys." Scientific American, January 12. https://www.scientificamerican.com/article/half-of-the-250-kids-expelled-from-preschool-each-day-are-black-boys/.

[5] Heasley, Shaun. 2026. "Preschools Disproportionately Kick out Kids With Disabilities." Disability Scoop, June 23. https://www.disabilityscoop.com/2026/06/23/preschools-disproportionately-kick-out-kids-with-disabilities/32056/.

[6] Smith, Nina, Valerie Jarvis McMillan, Sherrell Hicklen House, Jennifer Beasley, and Jessica Price. 2026. "Building Equitable Foundations: Policy Solutions to Address Preschool Suspension, Expulsion, and Exclusion Inequities." Frontiers in Psychology (Switzerland) 17 (May): 1726081. PubMed Central. https://doi.org/10.3389/fpsyg.2026.1726081.

The requirement in the NPRM that all education be provided in English threatens the learning outcomes of children in Head Start. In the 2024-2025 program year, 64 percent of Head Start children in Massachusetts came from non-English primary language homes. The Head Start Act requires programs to provide culturally and linguistically appropriate services. Evidence shows that this approach is best for children. Young children learn better and acquire English faster when taught by bilingual educators who also speak their home language.[7] Bilingualism has been proven time and time again to be a cognitive benefit for young children, supporting linguistic, social, and cognitive development.[8] Programs cannot meet their statutory obligation or their obligation to provide the highest-quality early education to the young children in our community with this proposed change. The proposed mandate would also undermine the ability of parents to be involved in their child's education, as well as program flexibility to determine how best to serve the communities they work with.

Group Size and Ratio

The NPRM removes all Head Start standards for group size and child/staff ratios, leaving class composition to state licensing standards. Head Start group size and ratios were designed to look different from child care licensing because of the populations we serve. Child care licensing standards serve as a floor for all child care programs across the state, serving children across urban, suburban, and rural environments in subsidized and private pay programs. Head Start serves only the most vulnerable families across the nation and needs not just a floor, but a higher standard to meet the higher needs. Head Start classrooms have higher levels of diagnosed disabilities, developmental delays, and behavioral health needs. These children need and deserve smaller class sizes with more individualized instruction and quality interactions and learning opportunities with educators. Head Start standards provide distinctions between age groups in a nuanced and developmentally appropriate way, noting that classrooms with primarily 3-year-olds must be smaller than older preschoolers. Developmental differences between 3- and 4-year-olds are large and we urge the Administration to maintain this group size difference. The NPRM would also create inconsistent standards for Head Start programs across the nation, with smaller classes here in Massachusetts than many of our peers serving similar populations of vulnerable children in other states.

The research on the value of smaller class and group sizes is clear. Lower adult to child ratios not only benefit children's wellbeing and development but improves learning outcomes.[9] For infants

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[7] Bialystok, Ellen. 2016. "Bilingual Education for Young Children: Review of the Effects and Consequences." International Journal of Bilingual Education and Bilingualism 21 (6): 666–79. https://doi.org/10.1080/13670050.2016.1203859.

[8] Lee, Patrick. 1996. "Cognitive Development in Bilingual Children: A Case for Bilingual Instruction in Early Childhood Education." Bilingual Research Journal 20 (3–4): 499–522. doi:10.1080/15235882.1996.10668641.

[9] Owen, Margaret. "Child Outcomes When Child Care Center Classes Meet Recommended Standards for Quality. NICHD Early Child Care Research Network." American Journal of Public Health, 1999. doi:10.2105/AJPH.89.7.1072.

and toddlers, increased teacher interactions from smaller classrooms lead to stronger cognitive and language outcomes, better English communication skills, and social emotional competence.[10]

Center-based Service Duration

Similarly, the NPRM removes all duration requirements in Head Start standards, leaving programs only to reference the three-hour minimum class time in statute. Head Start serves working families, families in school, and families looking for work. Two thirds of all families in Massachusetts Head Start programs in the 2024-2025 program year were in job training, school, or employed. Reduced duration threatens their workforce attainment and threatens our economy at large. Longer class days reduce family stress, increase the likelihood of family employment, and lower overall childcare costs.[11] Our standards should encourage workforce attainment through school days that meet the workforce needs of our parents. Longer school days also best meet the needs of Head Start children, with research showing that children who participated in full-day preschool perform better academically in third grade.[12]

Home-Based Option

The removal of all standards for home-based services is problematic for our home-based programs. In the 2024-2025 program year, Head Start programs in Massachusetts served over 700 young children through Head Start home-based models and maintained 46 slots for pregnant women cumulatively serving 146 women. This program meets community needs and serves children and families together in an educational unit. If finalized as proposed, these standards would provide no framework for this vital program. The Office of Head Start's own website touts the vast research framework for home visiting, showing that home-based programs support family mental health, child learning and development, and social emotional skills.[13] In Massachusetts, no similar statewide standards for home-based services exist, threatening the outcomes for children and families in our community. Similarly, the NPRM also removes all Head Start standards for serving pregnant women which are critical for maternal and postpartum

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[10] Lee, JoonHo, and Alison Hooper. 2026. "Beyond the Null Effect: Unmasking the True Impact of Teacher–Child Interaction Quality on Child Outcomes in Early Head Start." Early Childhood Research Quarterly 76 (3rd Quarter 2026): 195–207. https://doi.org/10.1016/j.ecresq.2026.03.001.

[11] Atteberry, A., V. Grover, and K. P. Malhotra. 2025. "Research Brief: Effects of Full- vs. Half-Day Pre-K on Child and Family Outcome." University of Virginia EdPolicy Works, September. https://education.virginia.edu/documents/wps-family-and-home-outcomes-research-brief.

[12] Reynolds, Arthur J., Nicole E. Smerillo, Suh-Ruu Ou, Loveman-Brown Marley, and Nishank Varshney. 2023. "School Performance in Third Grade After a Full-Day Vs Part-Day Preschool Program." JAMA 330 (22): 2214–15. https://doi.org/10.1001/jama.2023.20010.

[13] HeadStart.Gov. 2025. "Research on Home Visiting Programs | HeadStart.Gov." March. https://headstart.gov/program-planning/home-visitor-supervisors-handbook/research-home-visiting-programs.

health and the caregiving of our youngest infants in Massachusetts. We urge your agency to maintain strong federal standards for Head Start home-based services.

Child Screenings and Assessments

The NPRM removes all requirements for educational assessments and screenings for young children. Early detection of developmental delays and disabilities are critical to allowing children to meet their highest potential, enter kindergarten ready to succeed, and decrease the need for special education in their elementary years. Head Start children are already more likely to have developmental delays and need further supports. Children living in poverty – the children Head Start is designed to serve – are more likely to experience worse health, developmental delays, and higher behavioral and emotional needs.[14] It is critical that these standards remain, guaranteeing that Head Start children access the assessments and developmental screenings that allow our programs to provide needed upstream services.

Parent and Family Engagement

Healthy Marriage

The NPRM includes a new standard requiring programs provide "educational material and instruction that demonstrate healthy marriage as a positive good." Head Start programs should continue to be encouraged to support healthy families and healthy relationships. We know that children learn in relationships and that the early relational wellbeing and health of our young children is formed in relationship with their caregivers. Strong family engagement, family supports, and qualified family advocates support this important work. We encourage the Administration to recognize the value and inherent worth of all families and the relationships they may hold, no matter their legal relationship status or the makeup of those families.

Family Service Worker Caseload

Family service workers play critical roles on Head Start teams. Family service workers provide assessments, individualize services and referrals, and meet families where they are. A ratio of 40:1 is already stretching this workforce thin and cannot be stretched further. The proposal to remove this ratio requirement shifts burdens to struggling families to navigate a system that was not designed for them, rather than allowing Head Start programs to tailor resources and services. Strong family services strengthen family units to best support child learning and this proposal weakens that strong system.

Health and Nutrition

[14] Johnson, S. B., J. L. Riis, and K. G. Noble. 2016. "State of the Art Review: Poverty and the Developing Brain." Pediatrics 137 (4): e20153075–75. https://doi.org/10.1542/peds.2015-3075.

Health, nutrition, and mental health services in Head Start speak directly to Head Start's statutory mandate to provide comprehensive services that support our nation's and our communities' most vulnerable children. The NPRM would remove standards overseeing these critical services, which we strongly oppose.

Health, mental health, and oral health services 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 Standards, Head Start programs improve health outcomes for hundreds of thousands of families. These services have a demonstrated impact on child health outcomes such as increasing children's access to preventive care and dental check-ups, increasing healthy eating, and improving mental health. By removing Standards on health, the Department undermines the quality of a core component of Head Start's comprehensive services model. Under the proposal, 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.

Head Start's health services start in the earliest days of a child's enrollment, with health screenings. The NPRM would remove requirements to conduct these screenings quickly upon enrollment, which identify health needs early and allow our programs the time to identify resources to meet the needs of the child in our care. Whether that is eyeglasses, hearing supports, or connecting families with a medical home, early intervention is critical. The NPRM would remove other key health service standards including health determinations, and supporting families in accessing health care, roles that underscore the comprehensive nature of our programs that fully wrap around the families in our communities.

Massachusetts Head Start programs make a strong impact on children's health. In the 2024-2025 program year, programs cut the number of children with no health insurance by 60 percent from enrollment to the end of the year. Health screenings also provide early detection for needed services. 19 percent of all children in the 2024-2025 program year in Massachusetts were diagnosed with a chronic condition by a health care professional. The proposal undermines these critical services to child and family health.[15]

[15] Kaneb, Nancy, and Elisabeth Wright Burak. 2026. "Proposed Head Start Rule Would Further Undermine Child and Family Health." Georgetown University McCourt School of Public Policy Center For Children and Families, September 11. https://ccf.georgetown.edu/2026/09/11/proposed-head-start-rule-would-further-undermine-child-and-family-health/.

The NPRM also removes all mental health requirements from Head Start Program Performance Standards. Head Start children express mental health needs in many ways, and the mental health services provided by Head Start individualize supports to meet the needs of each child in our care. Mental health consultants, developmental supports, and the Health and Mental Health Advisory Committee work collectively to identify needs and support children and educators to meet their goals. The wellbeing of young children is inherently interconnected with mental health services, screening and developmental supports, consistent caregivers, and relational attention. Standards underpin and support this work and the proposed standards threaten the long-term mental health of young children and their families.[16] Infant and early childhood mental health services also provide long-term savings to our society. Every dollar spent on mental health prevention leads to $1.80-$3.40 in savings in healthcare, education, criminal justice, and more.[17] The longer we wait as a society to address these needs, the more costly it becomes for us all.

Safety and Transportation Practices

Safety Standards

The Proposed Rule eliminates nearly all existing safety standards. Under the proposal, no longer will the Standards require all staff, consultants, contractors and volunteers abide by a code of conduct that protects children, including corporal punishment or physically abusive behavior, sexually abusive behavior, emotionally harmful or abusive behavior, neglectful behavior, and basic child supervision. Nor would Head Start programs be required to ensure facilities are free from firearms, pollutants, and drowning hazards; conduct staff background checks; train staff on safety; and create a disaster preparedness plan. Other than lead exposure, the Proposed Rule leaves all other safety issues up to states and CCDF. The Office of Head Start has recently maintained high standards and priority for health and safety of the young children in our care, and this proposal is entirely incongruous with this focus. These proposed changes are unacceptable and will decrease child safety in Head Start programs.

Transportation

Current standards require that Head Start programs ensure that all children on Head Start transportation are supported by at least one bus monitor. Bus monitors are not optional. They

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[16] Biel, Matthew. 2026. "Head Start Is Essential for Early Childhood Mental Health." Georgetown University Thrive Center for Children, Families, and Communities, August 18. https://thrivecenter.georgetown.edu/news/head-start-is-essential-for-early-childhood-mental-health/.

[17] Oppenheim, Jennifer, and Jessica Dym Bartlett. n.d. Cost-Effectiveness of Infant and Early Childhood Mental Health Treatment. Georgetown University Infant & Early Childhood Mental Health Technical Assistance Center. Accessed September 23, 2026. https://gucchd.georgetown.edu/Docs/iecmh/Cost-Effectiveness%20of%20Infant%20and%20Early%20Childhood%20Mental%20Health%20Treatment.pdf.

provide critical safety support to bus drivers whose sole focus should be on driving the bus. This is an all too risky proposal that will leave very young children without the supports and resources they need, and make the already difficult job of bus driver more challenging. This threatens child safety as well as programs' ability to recruit and retain bus drivers. The Regulatory Impact Analysis estimates that as a result of the NPRM, Head Start programs will reduce bus monitors by 50 percent. This unnecessarily puts children in harm's way.

Family Engagement and Program Transitions

The Proposed Rule undermines Head Start's commitment to continuity of care for our youngest learners and their families by removing all standards supporting program transitions. In particular, the proposal deeply impacts programs that meet the needs of children whose families migrate to perform agricultural work, providing the necessary labor to feed our nation. Under the proposal, the Standards would no longer require Head Start programs to support effective transitions to other migrant or seasonal Head Start programs when children move seasonally. The proposal will also eliminate the requirement that teachers conduct home visits to engage the family in the child's learning and development. Head Start teacher home visits support strong family relationships and allow teachers and caregivers to work collectively as a team throughout the year to support a child's learning and development. These changes harm some of our most vulnerable families for whom Head Start is designed to serve.

Services for Children with Disabilities

Head Start's statute ensures that at least 10 percent of enrolled children in each program are children with disabilities, yet the proposed standards strip all standards that oversee how to serve those children, making it difficult for programs to comply with their statutory mandate. The proposal removes the requirement that Head Start programs fully accommodate children with disabilities and include them in all aspects of the program and removes all standards related to individualized learning, developmental supports, and meaningful peer participation for children with and without disabilities. All children deserve inclusive access to educational environments and Head Start standards should protect these services. Other impacts of the proposed changes will disproportionately harm children with disabilities including larger class sizes, less direct teacher engagement, and loss of comprehensive services. We oppose these changes.

The Proposed Rule shockingly eliminates all standards for meeting the needs of children with disabilities and 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 disabilities." 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 IDEA eligibility, assisting parents to obtain services

under the IDEA, and providing transportation for children with disabilities. Services for children with disabilities in Head Start begin well before a diagnosis or Individualized Education Plan (IEP). Across Massachusetts, families face long waits for both diagnoses and services for disabilities. Families are often expected to travel far across the state and may face waits of more than 6 months for appointments. It is critical that standards remain that allow our programs to fully serve these children with suspected needs while they encounter these long waits. The Head Start Act requires the Secretary to establish policies and procedures to ensure children who may have disabilities receive early support services.

In Massachusetts, Head Start programs have a strong record of supporting children with disabilities. In the 2024-2025 program year, over 1,000 children were referred for an evaluation to determine eligibility under IDEA, and 1,058 Head Start children in Massachusetts, or 12 percent of all preschool children, had an IEP. These children deserve and are mandated to receive critical health and disability services.

Management Systems and Administrative Costs

Throughout these comments, we have focused on the vast impacts of the NPRM to the children and families in our communities. However, our programs can only provide these high-quality services because of the dedicated and qualified staff we employ. Head Start programs in Massachusetts employ over 4,000 dedicated employees who care for children, serve families, and support our communities. The proposed changes for Head Start staff would threaten the already fragile Head Start workforce and the work they are able to do. We oppose these changes.

Staff Qualifications and Professional Development

The NPRM restrictions on requiring or incentivizing postsecondary education for staff are harmful to current Head Start staff, future Head Start staff, and the learning outcomes for Head Start children. Our workforce is already in a difficult balance. Salaries remain much lower than public schools and other industries can offer and fewer individuals are interested in working in this field. Professionalizing our workforce, building career pathways, and making Head Start a career worth joining is how we work to ensure we have enough employees and educators to maintain access for children in our communities. We must continue to encourage employment in this field. Less access to educational opportunities and fewer career pathways do not increase our workforce, instead it threatens it. Without offering this career path, we risk losing our workforce to industries that do provide such a path. The Act requires the Office of Head Start to guarantee that 50 percent of all educators hold bachelor's degrees; this proposal will make that statutory mandate nearly impossible to meet over time.

The NPRM also proposes to remove all staff and wellness regulations, including staff breaks. Similarly, this proposal risks employees choosing to leave Head Start or identify other fields if

they feel that they cannot comfortably work in a Head Start setting. The data shows that to support retention in Head Start, programs must provide meaningful places to work with access to professional development opportunities, professional recognition, and strong wages.[18] Our standards should encourage recruitment and retention in our programs, not threaten it.

The Proposed Rule also would eliminate the vast majority of existing standards concerning personnel policies that help to support children of diverse backgrounds and their families. The combined effect of eliminating requirements for bilingual personnel and cultural competence while requiring all education to be only conducted in English may reduce participation, weaken family engagement, delay identification of developmental concerns, and undermine school readiness outcomes for dual-language learners.

Limitations on Administrative Costs

Finally, the NPRM proposes to reduce the allowable administrative cost from 15 to 5 percent. This change would undermine the critical work of our Head Start programs across every domain and we strongly oppose this proposal.

The Head Start Act provides that up to 15 percent of total program costs may be used for developing and administering the program. The Proposed Rule would establish a blanket cap for administrative and development costs of just 5 percent of total program costs, which include both federal and non-federal funds. This is a massive change. The preamble acknowledges that currently, only 3.7 percent of programs operate at or below a five percent administrative cost threshold. The Department does not explain its basis for believing that a 5 percent cap on development and administrative costs is adequate for Head Start programs.

In Massachusetts, most Head Start programs are operated by nonprofit organizations with deep knowledge of their local communities and, in many cases, many supportive programs that collectively serve families and community members with Head Start and more. Our community, and our Head Start families, benefit from our local providers. Nonprofit agencies cannot run on 5 percent administrative overhead. Massachusetts Head Start programs use their administrative cost rate to support fiscal and accounting, human resources, executive and program leadership, information technology, legal support, facilities management, internal controls, data systems, procurement, and ongoing monitoring. These expenses are essential. 75 percent of Head Start programs in Massachusetts surveyed by MHSA shared that if the proposed 5 percent administrative cost cap were finalized, their program could not comply without reducing staffing, program operations, quality, scope, or services to children and families. Programs would be forced to eliminate or combine key positions, reduce training for staff, reduce capacity, or reduce

[18] Vicente, Delia, Melanie Venegas, and Alma D. Guerrero. 2024. "Turn-Over and Retention Among Head Start Educators." Early Childhood Education Journal 53 (5): 1467–78. https://doi.org/10.1007/s10643-024-01685-x.

services to children and families. The proposal is particularly likely to make it difficult for small Head Start agencies, single purpose agencies, and rural programs to keep their doors open.

The harm of the proposed rule does not come from any one of the above changes alone, it comes from the compounding impact of removing services and protections for the most vulnerable children and families. Children learn best when their health and mental health are sound, when their teachers are consistent and qualified, when their unique needs are identified early, and when their families have the resources and tools they need to thrive. The Act requires the Secretary to ensure that revisions to the standards will not reduce quality, scope, or services provided by Head Start. This rule would reduce the quality, scope, and services provided by Head Start. It would threaten a child and a family's overall wellbeing and experience in Head Start. For these reasons, we respectfully urge HHS to withdraw this proposed rule.

Thank you for considering these comments.

Signed,
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