

The Honorable Ricardo S. Martinez

**IN THE UNITED STATES DISTRICT COURT  
FOR THE WESTERN DISTRICT OF WASHINGTON  
AT SEATTLE**

WASHINGTON STATE ASSOCIATION OF  
HEAD START AND EARLY CHILDHOOD  
ASSISTANCE AND EDUCATION PROGRAM,  
ILLINOIS HEAD START ASSOCIATION,  
PENNSYLVANIA HEAD START  
ASSOCIATION, WISCONSIN HEAD START  
ASSOCIATION, FAMILY FORWARD OREGON,  
and PARENT VOICES OAKLAND,

*Plaintiffs,*

v.

ROBERT F. KENNEDY, JR., in his official  
capacity as Secretary of Health and Human  
Services; U.S. DEPARTMENT OF HEALTH  
AND HUMAN SERVICES; ANDREW  
GRADISON, in his official capacity as Acting  
Assistant Secretary of the Administration for  
Children and Families; ADMINISTRATION FOR  
CHILDREN AND FAMILIES; OFFICE OF  
HEAD START; and TALA HOOBAN, in her  
official capacity as Acting Director of the Office of  
Head Start,

*Defendants.*

Case No. 2:25-cv-00781-RSM

**DECLARATION OF  
MARTHA ZASLOW, PH.D.  
IN SUPPORT OF  
PLAINTIFFS' MOTION FOR  
A PRELIMINARY  
INJUNCTION**

NOTE ON MOTION CALENDAR:  
JUNE 13, 2025

1 I, Martha Zaslow, hereby declare:

2 1. I am currently an independent child development research consultant. I have  
3 spent my entire career focused on research, practice, and policy related to childhood  
4 development. I received my Ph.D. in Personality and Developmental Psychology from Harvard  
5 University in 1978. I then worked as a researcher at the National Institute of Child Health and  
6 Human Development of the National Institutes of Health, followed by serving as a consultant  
7 for the Committee on Child Development Research and Public Policy at the National Academy  
8 of Sciences and for the Carnegie Council on Adolescent Development. From 1993 to 2009, I  
9 worked in a variety of roles at a national research organization focused on designing,  
10 conducting, interpreting, and communicating rigorous, high-quality research on children's  
11 development. I retired four years ago after working in leadership positions at a membership  
12 association of child development researchers dedicated to advancing developmental science. I  
13 currently serve as a consultant on child development research projects with a particular focus on  
14 early development.

15 2. From 2010 to 2012, I was appointed to serve on the Advisory Committee on  
16 Head Start Research and Evaluation of the U.S. Department of Health and Human Services. I  
17 have served on numerous other committees or panels focusing on rigorous research in early  
18 childhood development and its use to inform early childhood practice and policy, including  
19 serving as an appointed committee member for the National Academies of Science, Engineering  
20 and Technology consensus committees on Developmental Outcomes and Assessments for  
21 Young Children. I have also served on technical working groups for the development of  
22 national surveys of early childhood care and education and for the development of measures of  
23 quality in early childhood care and education settings.

24 3. I have been the author or co-author since 2005 of 41 publications presenting  
25 original research and analyses of theoretical and methodological issues in child development  
26 research; 25 research, practice and policy briefs; and two compendia providing detailed  
27

1 summaries of child development studies. I have co-edited two volumes of child development  
2 research; and been a contributor as a committee member to two books and federal reports.

3 4. Attached as **Exhibit A** to this Declaration is a true and correct copy of my  
4 curriculum vitae.

5 **Background on the Head Start and Early Head Start Programs<sup>1</sup>**

6 5. Launched in 1965 as part of the War on Poverty, the Head Start program “is a  
7 comprehensive, national, and federally funded program that provides early childhood  
8 developmental services to disadvantaged children” ages 3 through 5 “and their families. Federal  
9 guidelines state that at least 90% of the children enrolled in each of the Head Start centers must  
10 be from families whose total annual income before taxes is less than or equal to the poverty line  
11 and at least 10% of the participants must be children with disabilities” (Anderson, Foster &  
12 Frisvold, 2010, p. 588).

13 6. The Early Head Start program, launched as part of the 1994 reauthorization of  
14 the Head Start Act, “was designed based on growing empirical evidence of the importance of  
15 the first three years of life for children’s neurological and brain development....” It “is a  
16 primary prevention program offering services to an at-risk...population of low income families  
17 including pregnant women and families with children through age three years.” Like the  
18 program for older preschool-age children, all Early Head Start programs “must follow the high  
19 standards for comprehensive services for families (including education, nutrition, health and  
20 mental health) set by the Head Start Performance Standards...but can be designed to fit the  
21 needs of local communities. Programs can offer child care, home visiting or a mixture of the  
22 two services” (Green et al, 2020, Program overview, first paragraph).

23 7. Head Start addresses children’s development in the early years when there is  
24 evidence both of particular malleability in development and the potential for long-term

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26 <sup>1</sup> In this document, the terms “Head Start program” and “Early Head Start program” will be used  
27 when the focus is specifically on these separately. The term “Head Start” without the word  
“program” will be intended to encompass all Head Start programs.

1 influence. Research suggests that the earliest years of life are a particularly promising time to  
2 intervene in the lives of low-income children, both because of relatively high  
3 neurodevelopmental plasticity during that time (Ludwig & Miller, 2007; Ludwig & Phillips  
4 2008), and because “[t]here is... strong evidence that early childhood socioeconomic conditions  
5 have long-term economic consequences, reinforcing and sustaining disparities over the life  
6 course” (Anderson, Foster & Frisvold, 2010, p. 587).

7 **Head Start’s “Whole Child” Approach**

8 8. Head Start takes a “whole child” approach, providing supports for multiple  
9 aspects of development, building on an understanding that these aspects are all important for  
10 subsequent development and that they have complementary and mutual influences. This means  
11 that Head Start, while clearly focusing on cognitive development, also aims to strengthen  
12 children’s health, social and emotional development, and the parent-child relationship. This sets  
13 it apart from early childhood programs that focus solely or primarily on cognitive development.

14 9. Because it is “based on a ‘whole child’ model,” Head Start “...provides  
15 comprehensive services that include preschool education; medical, dental and mental health  
16 care; nutrition services, and efforts to help parents foster their children’s development” (U.S.  
17 Department of Health and Human Services, 2010a, Introduction, first paragraph).

18 10. Anderson, Foster and Frisvold (2010) underscore the distinctive nature of Head  
19 Start as comprehensive, targeting multiple aspects of development in this way: “Increasing the  
20 cognitive achievement of the disadvantaged children in the Head Start program is clearly an  
21 important goal. However, because of the comprehensive services provided in the program,  
22 greater cognitive ability is likely to be only one of many outcomes” (p. 589).

23 11. Ludwig and Miller (2007) viewed the early childhood education component as  
24 one of Head Start’s six overall program components, accounting (at the time of publication) for  
25 approximately 40 percent of overall budget. The other major components include parent  
26 involvement, nutrition, social services to strengthen family life, mental health services, and  
27 health services. According to these authors, “this bundle of Head Start services might affect

1 schooling through a variety of causal channels. In addition to the direct effects on schooling  
 2 from early childhood education, nutrition and health services, Head Start may indirectly affect  
 3 children's schooling by influencing parents' schooling attainment or parenting practices" (p.  
 4 166).

5 12. As an example of the potential of Head Start to have mutual and complementary  
 6 influences, these researchers note that positive nutrition can affect other aspects of health, such  
 7 as susceptibility to infectious diseases in childhood. We note that this in turn may result in  
 8 higher attendance and actual participation in Head Start, which can augment the educational and  
 9 further developmental benefits of the program.

#### 10 **Head Start Provides Services to Families, Not Just Children**

11 13. A further distinctive feature of Head Start is its two-generation focus. Families  
 12 participating in Head Start receive services aimed at strengthening parenting, health practices,  
 13 parent psychological well-being and economic self-sufficiency.

14 14. Parents in Head Start work with a family support worker to articulate family  
 15 goals and identify services in which to participate relevant to these goals within Head Start or in  
 16 the community (Strassberger, 2024). As clearly indicated in each year's Program Information  
 17 Report provided by the Office of Head Start, parents as well as children receive program  
 18 services.

19 15. As selected examples of the services families receive, for the 2023-24 enrollment  
 20 year, the Office of Head Start National Services Snapshot for All Head Start Programs<sup>2</sup> (Office  
 21 of Head Start, 2023-24) indicates that nearly two thirds of families (65.4%) received services  
 22 involving discussing their child's developmental screening and assessment results and their  
 23 child's progress, and over a third (39.2%) received services involving participation with a  
 24 research-based parenting curriculum. Health practices and nutrition were also a strong focus,  
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26 <sup>2</sup> The Office of Head Start National Services Snapshot for All Head Start Programs includes the  
 27 Head Start, Early Head Start, and Migrant and Seasonal Head Start programs.

1 with approximately half of families receiving services involving education on preventive  
2 medical and oral health (49.7%) and education on nutrition (46.9%), and 15.2% of families  
3 receiving services involving education on the health and developmental consequences of  
4 tobacco product use. Psychological well-being and economic self-sufficiency were also foci of  
5 services. For example, 14% of families received mental health services and 11.4% received  
6 assistance enrolling in an education or job training program.

7 16. Head Start focuses on families and children in populations at particularly high  
8 risk. As noted, at least 90% of the children enrolled in each Head Start center must be from  
9 families with annual incomes at or below the federal poverty line. Analyses of data from a  
10 nationally representative sample of Head Start program families in 2019 provide a more  
11 detailed picture of the kinds of material hardship (inability to pay for basic needs) families  
12 participating in Head Start programs had experienced in the past 12 months. Approximately a  
13 quarter reported having unmet medical needs (29%), experiencing food insecurity (27%),  
14 having difficulty paying for basic utilities (26%), and experiencing housing insecurity (23%).  
15 More than half reported facing at least one of these forms of material hardship over the past 12  
16 months (Doran et al., 2021). The Office of Head Start Program Services Snapshot for  
17 enrollment year 2023-24 indicates that 26.6% of Head Start families received family support  
18 services focusing on emergency or crisis intervention.

19 17. Further, at least 10% of participants in Head Start must be children with  
20 disabilities. The 2023-24 Office of Head Start Program Services Snapshot for all Head Start  
21 programs indicates that this percentage was exceeded. For this enrolment year, 14.8% of  
22 children enrolled in Head Start programs were children with an Individualized Education  
23 Program (IEP) or an Individualized Family Service Plan (IFSP), indicating they were  
24 determined eligible to receive special education, early intervention, and related services. It is  
25 noteworthy that in addition, 7.4% of children experiencing homelessness were served during the  
26 program year, and 3.2% of enrolled children were in foster care at some point during the  
27 program year.

**Evidence on the Short-Term Benefits of the Early Head Start and Head Start****Programs**

18. Evaluations of both the Early Head Start and Head Start programs have been carried out using rigorous experimental designs, that is, with families randomly assigned to be eligible or not eligible to participate in the program.

19. The Early Head Start impact evaluation was conducted with 17 of the first-funded programs, including center-based, home-based and mixed program models. 3001 children were randomly assigned to be eligible to participate in the Early Head Start program or to a control group. The study included waves of data collection when the children were 14 months, 24 months and 36 months (at the conclusion of eligibility). Follow-up data collected at kindergarten entry and grade 5 are discussed below. The evaluation included direct assessments as well as reports of children's development and observations of parent-child interactions (U.S. Department of Health and Human Services, 2002).

20. The evaluation of the Early Head Start program found benefits across a range of measures of children's development and parents' behaviors (both parenting and economic self-sufficiency behaviors) through the end of program eligibility. Focusing on the findings when the children were age 3:

- Early Head Start children scored higher on the Bayley Scales of Infant Development Mental Development Index, with a smaller percentage scoring in the at-risk range. Early Head Start children also scored higher on the Peabody Picture Vocabulary Test (PPVT-III), an assessment of receptive vocabulary, with fewer children scoring in the at-risk range for this measure as well. Children were rated by their parents to be lower in aggressive behavior than control group children.
- Direct observations of parent-child interaction found that Early Head Start children more often engaged with their parents, less often showed negative behavior towards their parents, and were more attentive to objects during play,

1 and that parents were more emotionally supportive during interactions.

- 2 • Early Head Start parents scored higher on a measure of how supportive and  
3 stimulating the home environment was for their children (Home Observation for  
4 Measurement of the Environment), including findings for a subscale indicating  
5 that Early Head Start families provided more support for language and learning  
6 in the home. Early Head Start parents were more likely to report reading daily to  
7 their children and less likely to report having spanked their children in the past  
8 week. Early Head Start parents were less detached and less likely to engage in  
9 negative parenting behaviors.
- 10 • Early Head Start parents showed more participation than control group parents in  
11 education and job training activities, and a higher percentage of program group  
12 parents were employed at some time during the follow-up through age 3.
- 13 • In a subset of 12 of the 17 study sites, fathers also participated in the evaluation.  
14 During observed interactions, Early Head Start fathers were less intrusive when  
15 interacting with their children and children were more able to engage their  
16 fathers during play. Fathers reported spanking their children less often and also  
17 reported participating more often in child development-related program  
18 activities.

19 21. In summarizing the program's short-term impacts, Vogel and colleagues (2010)  
20 note that "at the end of the program, when children were 3, Early Head Start was found to  
21 benefit families across a wide range of child parent and family self-sufficiency outcomes,  
22 although impacts were modest in size and Early Head Start children continued to perform below  
23 national norms on cognitive and language assessments" (p.8).

24 22. A rigorous evaluation of the Head Start program found positive impacts on a  
25 range of measures of children's development at the end of a year of eligibility for Head Start,  
26 both for children who were newly eligible to participate in Head Start as 3- and as 4-year-olds.

27 23. The Head Start impact evaluation was carried out in a nationally representative



sample of 84 grantee/delegate agencies. Approximately 5,000 newly entering eligible 3- and 4-year-olds were randomly assigned to a program group with access to the program, or to a control group that did not have access to the program but could enter other non-Head Start early care and education services. The Impact Study Final Report (U.S. Department of Health and Human Services, 2010a) is careful to note that about 60% of control group children participated in some form of early care and education. This makes it possible to ask whether the quality of early care and education differed for those participating in such settings in the program vs. control groups. At the same time this means that the contrast across groups is not one of the Head Start program vs. no early care and education. In addition, the evaluation does not consider one vs. two years of eligibility for the Head Start program for the 3-year-old group, but instead an earlier year of eligibility for the Head Start program.

24. According to the Final Report of the Impact Study (U.S. Department of Health and Human Services, 2010a), at the conclusion of one year of eligibility to participate in the Head Start program:

- In the spring of the first year of the study (at the conclusion of the year of Head Start program eligibility), having access to the Head Start program meant that children experienced higher quality early care and education across a wide range of measures, including teacher qualifications, engagement in instructional activities, teacher-child ratio, and observed measures of teacher-child interaction using the Early Childhood Environment Rating Scale-Revised (Harms et al., 1998).
- For the 4-year-old cohort, there were significant positive impacts on six direct assessments of children's language and literacy development, and parents reported that their children had stronger emerging literacy skills. In addition, access to the Head Start program increased children's receipt of dental care.
- For the 3-year-old cohort, there were positive impacts on five direct assessment measures of children's language and literacy development as well as on measures

1 of math skills and pre-writing skills. Parents also reported stronger emerging  
2 literacy skills for their children. For this cohort there were also impacts on social-  
3 emotional development. At the end of the Head Start year, children in the  
4 program group were reported by their parents to show fewer behavior problems  
5 overall and less hyperactive behavior. As in the 4-year-old cohort, having access  
6 to the Head Start program increased children's receipt of dental care. There was  
7 also moderate evidence of improved overall health as reported by parents at the  
8 conclusion of the Head Start year.

9 25. In summarizing program impacts at the conclusion of one year of eligibility to  
10 the Head Start program, the Final Report Executive Summary notes: "The study shows that  
11 providing access to Head Start led to improvements in the quality of early childhood settings  
12 and programs children experienced...These impacts on children's experiences translated into  
13 favorable impacts at the end of one year in the domains of children's cognitive development and  
14 health as well as in parenting practices. There were more significant findings across the  
15 measures within these domains for 3-year-olds in that first year (and only the 3-year-old cohort  
16 experienced improvements in the social-emotional domain.)" (U.S. Department of Health and  
17 Human Services, 2010b, p. xxiv).

18 **Evidence on the Longer-Term Effects of the Early Head Start and Head Start**  
19 **Programs**

20 26. There are suggestive trends but few statistically significant impacts of the Early  
21 Head Start and Head Start programs when children in the two impact study samples are  
22 followed into elementary school. Nevertheless, a growing body of rigorous research provides  
23 evidence that adults who had participated in the Head Start program as children show positive  
24 effects on a range of key indicators of adult functioning, such as educational attainment,  
25 economic self-sufficiency and health. Below are summaries of (1) the follow-up studies into  
26 elementary school conducted with the Early Head Start and Head Start impact study samples,  
27 and (2) of the accumulating body of evidence showing benefits of participation in the Head

1 Start program into adulthood.

2 27. When a follow-up study was conducted in kindergarten and fifth grade with the  
3 Early Head Start Impact Study sample, while some differences remained at kindergarten entry,  
4 there was little indication of group differences in fifth grade:

- 5 • At kindergarten entry, Early Head Start continued to show impacts on children's  
6 social-emotional development, with decreased reported behavior problems.  
7 Children also showed more positive approaches toward learning. Early Head  
8 Start program group parents continued to show stronger scores on the measures  
9 of the home environment with more teaching activities and daily reading.  
10 Mothers were also at lower risk of depression (Love et al., 2013).
- 11 • However, "[t]he impact analyses show that for the overall sample, the positive  
12 effects of Early Head Start for children and parents did not continue when  
13 children were in fifth grade" (Vogel et al. 2010, p. 23). There was only one  
14 impact at the trend level on a summary index of children's social-emotional  
15 success, continuing the pattern of positive impacts in this area of development  
16 found at earlier ages. No impacts were found on academic outcomes, on  
17 parenting or family outcomes.

18 28. Similarly, few differences remained in outcomes in the follow-up study  
19 conducted with the Head Start Impact Study sample at the end of kindergarten and first grade:

- 20 • For the 4-year-old cohort, there were no impacts in the cognitive domain at the  
21 end of kindergarten, though there was a trend suggesting more positive  
22 vocabulary scores in first grade. There were no differences on measures of  
23 social-emotional development during kindergarten. In first grade, children in the  
24 Head Start program group in the 4-year-old cohort were rated by teachers as  
25 tending to be more socially reticent (in contrast with parents' reports that their  
26 children tended to show less withdrawn behavior) and teacher reports were also  
27 suggestive of more problematic teacher-child relationships. In kindergarten,

those in the 4-year-old cohort in the Head Start program group showed suggestive evidence of improvement in health status, and trends also pointed to more health insurance coverage in both kindergarten and first grade (U.S. Department of Health and Human Services, 2010a).

- For the 3-year-old cohort, there was no strong evidence of impacts on language or literacy at the end of kindergarten or first grade, though there was some suggestive evidence of a positive impact on oral comprehension at the end of first grade. At the end of the kindergarten year, there was a suggestive pattern in which parents of children in the Head Start program group in the 3-year-old cohort reported that their children tended to have better social skills and less hyperactive behavior as well as more positive approaches to learning, however teachers assessed math ability less positively for the children in the Head Start program group. By the end of first grade, parents of Head Start children in this cohort tended to report a more positive relationship with their child. Children in this cohort also tended to have more health insurance coverage (U.S. Department of Health and Human Services, 2010a).

29. Thus, both impact studies point to a pattern of convergence on outcomes for children in the program and control groups during the early school years. Despite this pattern, as noted earlier, when researchers use analytic approaches involving examining outcomes in adulthood in light of Head Start program participation during childhood, there is accumulating evidence of long-term benefits of participation in Head Start. These analyses generally reflect on the Head Start program rather than the Early Head Start program because this was the program in existence during the childhoods of the adult study participants. Researchers in these studies have used rigorous econometric approaches, for example, contrasting outcomes in adulthood for siblings who had or had not attended Head Start in childhood in longitudinal survey data, and looking at key adult outcomes in counties according to whether, as children, the survey participants were age-eligible or age-ineligible for Head Start before and after the

1 introduction of the program.

2 30. Regarding the evidence from these studies through 2012, the Advisory  
3 Committee on Head Start Research and Evaluation concluded that:

4 These nonexperimental studies of Head Start<sup>3</sup> capitalizing on longitudinal data  
5 and employing rigorous econometric analyses suggest that Head Start does  
6 confer a long-term advantage in adolescence and early adulthood when young  
7 persons face new developmentally challenging tasks. Taken together, there is  
8 evidence of long-term positive outcomes for those who participated in Head Start  
9 in terms of high school completion, avoidance of problem behaviors, avoidance  
10 of entry into the criminal justice system, too-early family formation, avoidance  
11 of special education, and workforce attachment. These and other findings also  
12 point to economic benefits of Head Start over the initial cost of the program.  
13 (p.33)

14 31. Some researchers hypothesize that even the small remaining differences found in  
15 elementary school in the impact study samples may be of sufficient magnitude to convey  
16 benefits into adolescence and adulthood (Ludwig & Phillips, 2008). As noted earlier,  
17 researchers also point to the potential complementarity of effects (Ludwig & Miller, 2007).  
18 Small remaining effects across multiple aspects of development may accumulate or interact to  
19 convey benefits into adulthood. It is also possible that early program impacts on parents'  
20 economic self-sufficiency and on how parents view their children's skills and behaviors (for  
21 example, the difference in parent perception of the children's early literacy skills in the Head  
22 Start Impact Study noted above), have enduring implications.

23 32. Studies published since the review of the Advisory Committee in 2012 have  
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25 <sup>3</sup> The use of the term "nonexperimental" here indicates that these studies do not involve random  
26 assignment of study participants to treatment and control groups. The Head Start and Early Head  
27 Start impact studies used random assignment to select families to be either eligible or not eligible  
to participate in the program.

1 continued to provide evidence of effects of the Head Start program into adolescence and  
2 adulthood. Examples of findings from the more recent studies include the following:

3 33. Schanzenbach and Bauer (2016) contrast long-term outcomes for siblings who  
4 did and did not participate in the Head Start program in the National Longitudinal Survey of  
5 Youth-Child Supplement sample (the data for children of the initial respondents), considering  
6 Head Start program participation during a more recent period than the focus of earlier studies  
7 reviewed by the Advisory Committee on Head Start Research and Evaluation. These  
8 researchers find that Head Start increases participation in higher education by between 4 and 12  
9 percentage points, while also resulting in an overall increase in postsecondary credential  
10 completion, defined as including a license or certificate, an associate's degree, or a bachelor's  
11 degree.

12 34. Bailey, Sun and Timpe (2021) improve on previous studies through linking data  
13 on exact date and location of birth (rather than relying on reported measures) for a large census  
14 data sample. Analyses look at county rollout of the Head Start program, contrasting data for  
15 children eligible to participate in Head Start when it launched (ages five and younger) or age six  
16 (over the age cutoff). Results indicate that Head Start program participants:

- 17 • participated in .65 more years of education,
- 18 • were 2.7 percent more likely to complete high school, and
- 19 • were 8.5 percent more likely to enroll in college, with college completion rates  
20 increasing 39%.

21 35. In addition to considering educational attainment, Bailey, Sun and Tempe (2021)  
22 also examined measures of economic self-sufficiency. Looking at adult outcomes they find  
23 Head Start participants:

- 24 • to be 5.3 percent more likely to have worked in the previous year,
- 25 • to have worked 2.3 weeks more in the previous year and 3 more hours per week  
26 on average.

27 36. In addition, they find evidence that participation in the Head Start program

1 reduced the likelihood of adult poverty by 23 percent and receipt of public assistance income by  
2 27 percent.

3 37. Deming (2009) had reported earlier that Head Start participants were less likely  
4 in adulthood to be idle, defined as not being in school and not reporting wages. More recent  
5 work by Carneiro and Ginja (2014) focusing on males also finds a difference according to Head  
6 Start participation for idleness at ages 20-21.

7 38. Morrissey (2019) notes that there is a growing body of evidence indicating that  
8 early care and education programs in general have effects on children's health, and that Head  
9 Start is particularly important to consider in this context because unlike other early childhood  
10 programs it has an explicit focus on providing nutrition and health services. Morrissey's review  
11 of research on the health effects of early care and education includes two more recent studies  
12 focusing specifically on the Head Start program. Carneiro and Ginja (2014) found that that for  
13 males, Head Start reduced the likelihood of being obese and having a health condition requiring  
14 the use of special equipment at ages 12 and 13, while reducing obesity at ages 16-17. The  
15 Morrissey summary also points to findings from Thompspon (2018) indicating that Head Start  
16 participants were less likely to have a health condition at age 40. These more recent studies  
17 complement and extend earlier work showing effects on smoking (Anderson et al., 2010),  
18 percent in poor health (Deming, 2009), and mortality (Ludwig & Miller, 2007).

19 39. The long-term effects of Head Start on such outcomes as increased long-term  
20 earnings and decreased smoking have contributed to analyses indicating that Head Start's  
21 economic benefits surpass its costs (Bailey et al., 2021; Anderson et al., 2010 respectively).

22 40. Ludwig and Miller (2007) note that the timing of data collection for the studies  
23 of effects in adulthood necessarily consider children's participation in Head Start as it operated  
24 decades earlier. They note that there have since been improvements to the Head Start program,  
25 which could mean that the estimates of long-term benefits are conservative. Yet they caution  
26 that the experiences of children who did not participate in Head Start may have changed for the  
27

1 better over time as well, as other early childhood programs, such as state sponsored pre-  
2 kindergarten, expanded.

3 41. Timing of data collection is also important to keep in mind for the Early Head  
4 Start and Head Start Impact Studies. The former was initiated soon after the launch of the Early  
5 Head Start program with 17 of the first-funded sites. Data collection for the Head Start Impact  
6 Study started in 2002 and continued through 2006. Subsequent data on nationally representative  
7 samples of both Head Start and Early Head Start programs indicate that there have been  
8 program-wide improvements on key measures of quality (see summary of this evidence below).  
9 Evidence for sustained impacts into the school years might therefore also be stronger for  
10 children who participated in Head Start and Early Head Start programs more recently. Here  
11 again though, the caution raised by Miller and Ludwig about expanding options for early care  
12 and education for children not participating in Head Start in more recent years is relevant.

13 **Head Start's Monitoring and Quality Improvement Processes**

14 42. The Advisory Committee on Head Start Research and Evaluation (2012)  
15 concluded that "Head Start has been and continues to be a leader...in its commitment to  
16 accountability for program quality" (p.2).

17 43. The Committee noted that Head Start has built:  
18 an infrastructure to support quality, an effort for which there was little precedent.  
19 Head Start published its first set of Program Performance Standards in 1974,  
20 along with implementation of a rigorous on-site monitoring process for ensuring  
21 that standards were being met. Head Start Program Performance Standards  
22 (Performance Standards) have been revised several times with an increasing  
23 emphasis on the quality of services for children and families. Head Start has also  
24 provided training and technical assistance (T/TA) to support programs in  
25 providing professional development to staff members and program managers,  
26 and in remedying deficiencies in quality. Further, Head Start has expanded  
27 accountability to include replacement of grantees that were unable or unwilling



1 to provide high quality services and sound management practices. (p.2)

2 44. This focus on quality is particularly important in a program that prioritizes  
3 serving children and families who experience instability due to such issues noted above as  
4 homelessness and placement in foster care, or who are experiencing ongoing financial stress.

5 45. Reports on program quality for nationally representative samples of Head Start  
6 and Early Head Start programs provide examples of two key patterns: (1) They have  
7 documented that a large national program, implemented at scale, can show significant  
8 improvements in program quality over time when this combination of training and technical  
9 assistance supports, clear standards, and monitoring are in place; and (2) The reports  
10 consistently identify next steps for improving quality, reflecting a view of quality improvement  
11 as an ongoing process.

12 46. One key example of evidence of improvements in quality in a national program  
13 implemented at scale is provided in the report *Tracking quality in Head Start classrooms:  
14 FACES 2006 to FACES 2014* (Aikens et al, 2016). As part of recurring data collection in  
15 nationally representative samples of Head Start programs, classrooms and families for the  
16 Family and Child Experiences Survey in Head Start (FACES), classroom quality was observed  
17 in Head Start program classrooms in 2006, 2009 and 2014 (and subsequent to this report, has  
18 continued to be observed periodically). The observations of classroom quality in a nationally  
19 representative sample of Head Start program classrooms were conducted using two widely used  
20 measures of quality in early childhood classrooms: The Early Childhood Environment Rating  
21 Scale-Revised (ECERS-R; Harms et al., 1998), and the Classroom Assessment Scoring System  
22 for Pre-kindergarten (CLASS Pre-k; Pianta et al., 2008).

23 47. Results indicate that:

- 24 • Average scores on two of the key factors on the Early Childhood Environment  
25 Rating Scale-Revised, Provisions for Learning and Teaching and Interactions,  
26 improved significantly, both between 2006 and 2014.
- 27 • Average Scores also improved on the Classroom Assessment Scoring System for

Pre-kindergarten Instructional Support domain between 2006 and 2014.

- There was also progress in terms of diminished proportions of classrooms scoring in a low range and increased proportions of classrooms scoring in a good- or excellent-range according to publisher-developed cut points on each of these measures. For example, between 2006 and 2014 fewer classrooms scored in the inadequate- and minimal-range and more in the good- or excellent-range for the Provisions for Learning and the Teaching and Interactions factor scores on the Early Childhood Environment Rating Scale-Revised. On the Classroom Assessment Scoring System, between 2006 and 2014, fewer classrooms scored in the low range and more in the mid- to high- range on Instructional Support.

48. Key indicators of quality in the Early Head Start program also show improvements over time in nationally representative samples. A 2024 report provides illustrations not only of quality improvement but also of the articulation of where to focus further improvement efforts (Baxter et al., 2024).

- Using the Quality of Care for Infants and Toddlers (QCIT) measure (Atkins-Burnett et al., 2015) in Early Head Start classrooms, this study found that in 2022, nearly all classrooms (96%) were providing either mid- or high- levels of social and emotional support, and that there was a significant increase over time from 2018 to 2022 in the percent of classrooms providing high levels of social and emotional support (from 19% to 32%).
- This study found that most classrooms (83%) were providing either mid- or high- levels of support for language and literacy development in 2022, with no significant change from 2018.
- However, in 2022, 57% of classrooms were found to be providing mid-levels of support for cognitive development with only a small percentage providing high- levels of support in this area, and 41% providing low levels (also with no changes from 2018).

- The report concludes that attention should be considered to providing professional development for teachers of infants and toddlers in the area of stimulation for cognitive development.

49. For Early Head Start programs providing a home-based model, which involves weekly home visits as well as periodic group socialization rather than participation in center-based early care and education, between 2018 and 2022 there was a statistically significant increase from 65% to 76% in the percentage of families who followed through on home visits, completing all of the activities, discussions and referrals that were covered in the last home visit (Baxter et al., 2024).

50. These periodic studies of nationally representative samples of Head Start and Early Head Start programs also include surveys of program directors, center directors and teachers that regularly provide information not only about reported indicators of quality, such as staff educational attainment and ongoing professional development, but also reflect the ongoing participation of programs in monitoring and quality improvement and by providing information about the areas in which the staff would most appreciate support for quality improvement. As examples, in 2022, center directors indicated that 88.4% of their centers had been inspected or monitored for quality in the past 12 months and that 72.3% of centers were participating in a state or local Quality Rating and Improvement System (a system that provides summary ratings of quality to inform consumer choice and provide updates for policymakers and the public about early care and education in a geographical area). The top three areas in which center directors indicated a need for additional support to lead more effectively were program improvement planning, staffing and hiring, and working with and partnering with the community (Doran et al, 2022). The recent Information Memorandum from the Office of Head Start (April 2025) encourages the participation of Head Start programs in Quality Rating and Improvement Systems and underscores the importance of parent input in the process of program improvement.

51. Regarding the importance of adherence to Head Start Program Performance

Standards, a noteworthy example comes from the Early Head Start impact evaluation (U.S. Department of Health and Human Services, 2002). As noted earlier, this evaluation was conducted among a group of 17 of the first Early Head Start programs. These programs were found to vary according to whether the programs had implemented the Head Start Program Performance Standards for Early Head Start early on during the evaluation period, later during the evaluation period, or as yet incompletely. The evaluation found that “[i]mplementing key elements of the Head Start Program Performance Standards fully is important for maximizing impacts on children and parents” (U.S. Department of Health and Human Services, 2002, p. 6).

**Head Start as a Leader for Early Care and Education Programs Nationally**

52. The Advisory Committee on Head Start Research and Evaluation (2012) concluded that “the Head Start program has provided leadership to the early childhood field in many...ways” (p.3).

53. As one key example, the Advisory Committee highlighted the role of the Performance Standards in calling for increases in professional development for teachers in Head Start, noting the influence such increases have had on the early childhood field overall:

In 1972 Head Start initiated development of the Child Development Associate (CDA) credential, with the goal of increasing the competency of Head Start teachers. The CDA soon became a foundation for professional development in Head Start and in the ECE [early childhood education] community at large. The CDA continues to serve as a valuable entry certification for early childhood teachers, as Head Start has continued to raise the bar by requiring all teachers to possess associate and/or bachelor’s degrees in child development or ECE. (pp. 2-3)

54. The studies tracking changes in quality document the increases over time in Head Start teachers’ qualifications and professional development activities. For example, between 2006 and 2014 there was a significant increase in nationally representative samples of Head Start program classrooms in the percentage of classrooms with a teacher with a bachelor’s

1 degree or higher, from 40% in 2006 to 70% in 2014 (Aiken et al., 2016).

2 55. These studies also examine the linkage between increases in teacher education  
3 and observed classroom quality. In this study, the increase in the percentage of teachers with a  
4 bachelor's degree helped to some extent to explain the improvement in observed CLASS  
5 Instructional Support. More specifically, "whether the teacher has at least a bachelor's degree  
6 explains approximately 12 percent... of the increase in CLASS Instructional Support scores"  
7 (Aikens et al., 2016, p.8).

8 56. In light of the commitment of the Head Start program nationally to higher  
9 education for its teachers, it is noteworthy that the consensus committee convened by the  
10 National Research Council to develop a report on "Transforming the workforce for children  
11 birth through age 8: A unifying foundation" (National Research Council, 2015) recommended  
12 that the early childhood field as a whole move towards requiring all early childhood teachers to  
13 have a bachelor's degree with specialized knowledge in early childhood.

14 57. Head Start has also served in a leadership role in providing a framework for the  
15 development and evaluation of quality improvement steps that involve enhanced program  
16 models. Evaluations of programs that have built on but gone beyond the Head Start Program  
17 Performance Standards for both Early Head Start (the Educare program; Yazijan et al. 2020;  
18 Horm et al., 2022; ) and Head Start (the Head Start CAP program in Tulsa Oklahoma; Phillip,  
19 Gormley & Anderson, 2016) provide evidence that (1) it is feasible to implement enhanced  
20 models at scale; and (2) such approaches show promise in terms of broader and more sustained  
21 impacts on child outcomes.

22 **Cuts to Head Start Programming Will Have Immediate and Longer-Term Negative**  
23 **Effects on Children and Families and Will Have Implications for Early Care and**  
24 **Education in the United States More Broadly**

25 58. **Reductions to Head Start Programming Would Immediately Harm**  
26 **Children and Families Through the Loss of Stable and Higher Quality Early Care and**  
27 **Education.** The evidence from the Head Start Impact Evaluation indicates that children in the

Head Start program were receiving higher quality early care and education than children in the control group. Children's daily experiences matter particularly if they are experiencing the stressors of family economic hardship, homelessness, being placed in foster care or having a disability. The prevalence of such stressors for families and children currently participating in Head Start would mean that losing the stability and support of the program would be a loss felt immediately and daily both by children and by their families.

**59. Reductions to Head Start Programming Would Mean Loss of the Programs' Short-Term Positive Effects on Children's Development and Family Functioning.**

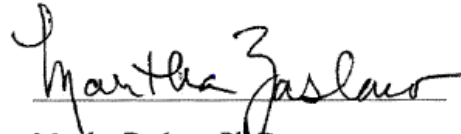
Evaluations indicate that having access to the Early Head Start and Head Start programs results in a range of positive impacts on the development of children, on parenting behavior, and on families' economic self-sufficiency activities as the children transition from the program. Reductions in Head Start programming would mean the loss of this boost to children's health and development, families' participation in Head Start services, and improvements in family functioning.

**60. Discontinuing the Program or Severely Hindering Program Functioning Would Mean Loss of Positive Effects on Longer-Term Outcomes Including Key Indicators of Adult Functioning.** While the boosts in children's development and family functioning found at the conclusion of the program appear to wane during the school years, there is a growing body of evidence that participation in the Head Start program nevertheless has important benefits to functioning in adulthood. Studies show positive effects of Head Start program participation on such important areas of adult functioning as educational attainment, employment activities, and health. The benefits in adulthood on such key outcomes as earnings and reduction in smoking contribute to analyses indicating that Head Start is cost effective: that the economic benefits of the program to society outweigh its costs.

**61. Reducing Program Functioning Would Negatively Affect Not Only Children and Families Participating in Head Start, But Early Care and Education Nationally.** Head Start has provided leadership to other early care and education programs in the United States in

1 requirements for teacher education, its approaches to supporting programs in ongoing efforts to  
2 improve quality, and in program monitoring. The Head Start Program Performance Standards  
3 provide a framework for programs seeking to further enhance program quality. Loss of the  
4 program or hindering program functioning would be a loss felt not only by Head Start programs  
5 and participating children and families but for early care and education in the United States.

6  
7  
8  
9 I declare under penalty of perjury under the laws of the United States that the foregoing  
10 is true and correct. Executed on May 14, 2025, at Bethesda, Maryland.

11  
12  
13   
14 Martha Zaslow, Ph.D.

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 21 440.

# **EXHIBIT A**

**CURRICULUM VITAE  
MARTHA ZASLOW**

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Martha Zaslow, Ph.D., is an independent child development research consultant. Her research focuses on effective approaches to strengthening quality in early childhood programs and on the professional development of the early childhood workforce. She has been asked to serve on multiple advisory committees and panels that focus on using research to inform early childhood practice and policy, including:

- Being appointed to the Advisory Committee on Head Start Research and Evaluation of the U.S. Department of Health and Human Services, which prepared a report for the Secretary assessing the existing research and providing recommendations for the highest priorities for future research focusing on Head Start.
- Serving as a Scientific Advisor for the Administration for Children and Families National Research Conference on Early Childhood, contributing to the planning of the research content at this biennial conference of researchers, policymakers and practitioners in early childhood.
- Leading the Research Advisory Group for the Evaluation of the Early Childhood Policy in Institutions of Higher Education (ECPIHE) project, which is piloting the introduction of graduate degrees and certificates focusing on early childhood policy in colleges and universities.
- Being appointed as a member of the National Academies of Science, Engineering and Technology consensus committees on Developmental Outcomes and Assessments for Young Children, which reviewed the evidence and made recommendations for the appropriate use of assessments for young children.
- Serving on the Advisory Board for the Early Childhood Education Institute, University of Oklahoma-Tulsa, participating in a periodic review of research conducted by this research center and providing input into next steps.
- Serving on the Technical Expert Panel for the Professional Development Tools to Improve the Quality of Infant and Toddler Care, helping to address the need for better measures of quality in settings for the youngest children.
- Serving on the Advisory Group, Saul Zaentz Early Education Initiative, Harvard Graduate School of Education helping to plan for rigorous research on early childhood initiatives in Massachusetts.
- Serving on the Advisory Committee for the Science and Technology Policy Fellowship Program of the American Association for the Advancement of Science, including helping to plan for an evaluation of their fellowship programs.
- Serving on technical working groups for the development and implementation of national surveys focusing on early childhood, including the Family and Child Experiences in Head Start (FACES), the FACES survey for Early Head Start (Baby FACES), and the National Survey of Early Care and Education.

## **EDUCATION**

Cornell University, College of Arts and Sciences

B.A., Magna Cum Laude in Psychology, with Distinction in All Subjects, 1972

Harvard University, Department of Psychology and Social Relations,

Ph.D., Personality and Developmental Psychology, 1978

## **EMPLOYMENT**

National Institute of Child Health and Human Development of the National Institutes of Health,  
Staff Fellow, Child and Family Research Section, 1977-1984

National Academy of Sciences

Senior Research Associate/Consultant, Committee on Child Development Research and  
Public Policy, 1985-1990

Carnegie Council on Adolescent Development

Consultant, 1990-1992

Child Trends

Senior Research Associate, 1993-1995

Assistant Director for Research, 1995-2002

Content Area Director, Welfare and Poverty, 1999-2003

Program Area Director, Early Childhood Development, 2001-2009

Vice President for Research, 2002-2009

Distinguished Visiting Fellow, 2009 to present

Society for Research in Child Development

Director, Office for Policy and Communications, 2009 to 2016

Director for Policy, 2017 until retirement, May 2019

Interim Executive Director, July 2020-March 2021

Independent Child Development Research Consultant

Consulting on specific research projects, March 2021 to present

## **HONORS AND FELLOWSHIPS**

Phi Beta Kappa

College Scholars Program, Cornell University

President, Women's Honors Society, Cornell University

United States Public Health Traineeship

Kent Fellowship, Danforth Foundation

## **PROFESSIONAL MEMBERSHIPS AND ACTIVITIES**

### **Memberships**

- Society for Research in Child Development

Board on Children, Youth and Families; National Research Council; National Academies of Science

- Member, Committee on Family and Work Policies

- Member, Committee on Developmental Outcomes and Assessments of Young Children, National Academies of Science
- Planning Group for Workshop on Early Years to Early Grades
- Planning Group for Forum on Investing in Young Children Globally

#### Manuscript Reviews

*Ad hoc reviewer for: Child Development; Developmental Psychology; Early Childhood Research Quarterly; Maternal and Child Health Journal*

#### PUBLICATIONS (From 2005)

##### Articles, Chapters and Reports on Original Research

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### Research, Policy and Practice Briefs

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- Chien, N., Daneri, P., Darling-Churchill, K., Goldhagen, S., Halle, T., Lippman, L., Moodie, S., & Zaslow, M. (May 2013). Characteristics of existing measures of social and emotional development in early childhood suitable for use in federal data collections. Paper prepared for project on Early Childhood Measures of Social and Emotional Development for Consideration by the Interagency Forum on Child and Family Statistics.
- Yoshikawa, H., Weiland, C., Brooks-Gunn, G., Burchinal, M.R., Espinosa, L.M., Gormley, W.T., Ludwig, J., Magnuson, K.A., Phillips, D., & Zaslow, M. (October, 2013). Investing in our future: The evidence based on preschool education. New York: Foundation for Child Development and Washington, DC: Society for Research in Child Development Office for Policy and Communications.
- Zaslow, M. & Tout, K. (October, 2014). Reviewing and clarifying goals, outcomes and levels of implementation: Toward the next generation of Quality Rating and Improvement Systems (QRIS). OPRE Research Brief #2014-75. Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.
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- Survey of Early Care and Education (OPRE Report #2015-93). Washington, DC. Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.
- Epstein, D., Halle, T., Moodie, S., Sosinskyk, L., & Zaslow, M. (May, 2016). Examining the association between infant/toddler workforce preparation, program quality and child outcomes: A review of the research evidence (OPRE Report #2016-15). Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.
- Madill, R., Blasberg, A., Halle, T., Zaslow, M. & Epstein, D. (May, 2016). Describing the preparation and ongoing professional development of the infant/toddler workforce: An analysis of the National Survey of Early Care and Education data (OPRE Report #2016-16). Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.
- Workgroup on the Early Childhood Workforce and Professional Development (May, 2016). Proposed revisions to the definitions for the early childhood workforce in the Standard Occupational Classification: White paper commissioned by the Administration for Children and Families, U.S. Department of Health and Human Services (OPRE Report 2016-45). Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.
- Burchinal, M., Tarullo, L. & Zaslow, M. (July, 2016). Best practices in creating and adapting Quality Rating and Improvement System (QRIS) rating scales. OPRE Research Brief #2016-25. Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.
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- Cohen, R. C., Zaslow, M, Raikes, H., Elicker, J., Paulsell, D., Dean, A., & Kreiner-Althen, K. (March, 2017). Working toward a definition of infant/toddler curricula: Intentionally furthering the development of individual children within responsive relationships. OPRE Report #2017-15. Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, US DHHS.
- Zaslow, M. (December, 2017). A research perspective: Commentary in Tout, K., Magnuson, K., Lipscomb, S., Karoly, L., Starr, R., Quick, H...& Wenner, L. Validation studies of the quality ratings used in Quality Rating and Improvement Systems (QRIS): A synthesis of state studies. OPRE Report #2017-72. Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, US DHHS.
- Zaslow, M. (2022). Early childhood education and care workforce development: A foundation for process quality, OECD Education Policy Perspectives, No. 54, OECD Publishing, Paris.
- Zaslow, M., Halle, T., Madill, R., & Forry, N. (2024). *History of the National Survey of Early Care and Education, Part I: The Development of the 2012 NSECE*. OPRE Report #2024-009. Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services

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### **Edited Volumes**

Zaslow, M. & Martinez-Beck, I., (Eds). (2006). *Critical issues in early childhood professional development*. Baltimore: Brookes Publishing.

Zaslow, M., Martinez-Beck, I., Tout, K., & Halle, T. (Eds.) (2011). *Quality measurement in early childhood settings*. Baltimore: Brookes Publishing.

### **Contributions as a Committee Member to Books and Federal Reports**

Snow, C. & Van Hemel, S. (Eds.), Committee on Developmental Outcomes and Assessments for Young Children, National Research Council of the National Academies of Science (2008). *Early childhood assessment: Why, what and how*. Washington, DC: National Academies Press.

Advisory Committee on Head Start Research and Evaluation (August 2012). *Final report*. Submitted to the U.S. Department of Health and Human Services.

### **Compendia**

Halle, T., Zaslow, M., Wessel, J., Moodie, S., & Darling-Churchill, K. (2011). Understanding and choosing assessments and developmental screeners for young children: Profiles of selected measures. Washington, D.C.: Office of Planning, Research and Evaluation, U.S. Department of Health and Human Services.

Madill, R., Moodie, S., Zaslow, M., & Tout, K. (2015). Review of selected studies and professional standards related to the predictors of quality included in the National Survey of Early Care and Education (OPRE Report #2015-93b). Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, US Department of Health and Human Services.

### **PRESENTATIONS (From 2010)**

Zaslow, M. (May 2010). Introductory comments at congressional briefing on the report Healthy Development: A Summit on Young Children's Mental Health. Washington DC, Dirksen Senate Office Building.

Zaslow, M. (June 2010). Emerging conceptualizations of early childhood professional development. Presentation as part of panel on Increasing the Effectiveness of Training of Early Childhood Professionals, at Head Start's 10<sup>th</sup> National Research Conference, Washington, DC.

- Zaslow, M. (June 2010). Chair, Panel on Mentoring and Coaching for Teachers in Head Start, at Head Start's 10<sup>th</sup> National Research Conference, Washington, DC.
- Zaslow, M. (June 2010). Chair, panel on Recent Developments and Next Steps in the Measurement of Quality in Early Childhood Settings, at Head Start's 10<sup>th</sup> National Research Conference, Washington, DC.
- Zaslow, M. (June 2010). Discussant at Poster Symposium on Recent Findings from the Early Head Start Evaluation: Contributions to Child Outcomes in 5<sup>th</sup> Grade, at Head Start's 10<sup>th</sup> National Research Conference, Washington, DC.
- Halle, T., Zaslow, M., Wessel, J., Moodie, S., & Churchill, K.D. (June 2010). Improving the Selection of Child Outcome Screening and Assessment Instruments Used by Head Start Programs. Presentation as part of panel on Learning from Assessment: Improving the Use of Child Assessment Data in Early Childhood Programs, at Head Start's 10<sup>th</sup> National Research Conference, Washington, DC.
- Zaslow, M. (August 2010). What do we know about practices that work for children's development? Presentation at Early Childhood 2010: Innovation for the Next Generation meeting co-sponsored by US Department of Health and Human Services and US Department of Education, Washington, DC.
- Zaslow, M. (November 2010). Contrasting findings on early maternal employment and child outcomes. Discussant comments as part of panel on Employment Among Mothers of Infants at the fall research conference of the Association for Public Policy Analysis and Management, Boston, MA.
- Zaslow, M. (November 2010). Emerging approaches for assessing the presence of thresholds of quality in early care and education. Discussants comments as part of panel on Ensuring Quality Investments in Early Childhood: Linking quality Measurement to Positive Child Outcomes at the fall research conference of the Association for Public Policy Analysis and Management, Boston MA.
- Zaslow, M. (November 2010). Policy implications of recent research on effective professional development. Presentation at Leadership Symposium of the National Center for Research on Early Childhood Education on Effective Professional Development in Early Childhood Education, Arlington, VA.
- Zaslow, M., Hutcheon, S., & Mandell, S. (February 2011). Fostering a bi-directional bridge between research and policy. Colloquium at George Mason University, Applied Developmental Psychology, Fairfax, VA.
- Zaslow, M. (February 2011). Using data from early childhood assessments to strengthen children's school readiness. Presentation at National Head Start Summit, Baltimore, MD.
- Zaslow, M., Tout, K., & Isner, T. (March 2011). On-site quality improvement approaches in early childhood settings. Plenary address at the BUILD conference, Arlington, VA.
- Zaslow, M., Anderson, R., Wessel, J., Redd, Z., Tarullo, L., Burchinal, M. (March 2011). Building on previous literature in the study of quality dosage, thresholds and feature: The literature review within the Q-DOT project. Presentation at the biennial meeting of the Society for Research in Child Development, Montreal, Canada.
- Zaslow, M. (April 2011). Challenges and opportunities in science policy: Perspectives from the Society for Research in Child Development. Invited presentation at the American Educational Research Association national conference, New Orleans, LA.
- Zaslow, M. (April 2011). Emerging issues in early childhood professional development. Presentation at Secretary's Advisory Committee for Head Start Research, Arlington, VA.



- Zaslow, M. (June 2011). Links among child care (quality stability and decision-making) and family economic well-being. Discussant's comments at the Welfare Research and Evaluation Conference, Washington, DC.
- Zaslow, M. (June 2011). An overview of impacts on parenting and family outcomes in the Head Start and Early Head Start Impact Studies. Presentation at the Secretary's Advisory Committee for head Start Research, Washington, DC.
- Forry, N., Tout, K., Zaslow, M., & Martinez-Beck, I. (June 2011). Seeking and benefitting from coaching and consultation: Results from recent research. Invited symposium at NAEYC's Professional Development Institute, Providence, RI.
- Zaslow, M. (June 2011). Discussant's comments: Invited symposium on effective teaching in early care and education, NAEYC's Professional Development Institute, Providence, RI.
- Zaslow, M. (October 2011). Recent developments in the research on coaching: Taking stock and identifying next steps. Invited presentation as part of panel on The Big Picture: Coaching, Mentoring and Systems Building at meeting on Working Together: Coaching and Mentoring in Early Childhood sponsored by the Administration for Children and Families, US Department of Health and Human Services, Washington, DC.
- Zaslow, M. (November 2011). Building pathways and partnerships to support children's development: discussant's comments. Plenary at the meeting of the Child Care Policy Research Consortium, sponsored by the Office for Planning, Research and Evaluation, Administration for Children and Families, US Department of Health and Human Services, held in Bethesda, MD.
- Zaslow, M. (November 2011). Looking across the NAS Workshop on the Early Childhood Workforce and the National Survey for Early Care and Education: Discussant's comments on implications for research. Presentation at the meeting of the Child Care Policy Research Consortium, sponsored by the Office for Planning, Research and Evaluation, Administration for Children and Families, US Department of Health and Human Services, held in Bethesda, MD.
- Zaslow, M. (June 2012). Society for Research in Child Development efforts to bridge research and policy. Presentation at the meeting of the National Association for the Education of Young Children Professional Development Institute, Indianapolis.
- Zaslow, M. (June 2012). Themes from the Advisory Committee on Head Start Research and Evaluation. Presentation at Head Start's 11<sup>th</sup> National Research Conference, Washington, DC.
- Zaslow, M. (June 2012). Discussant comments at panel on Linkages Between Quality and Child Outcomes: Deepening our Understanding at Head Start's 11<sup>th</sup> National Research Conference, Washington, DC.
- Zaslow, M. (June 2012). Discussant comments at panel on Implementing Evidence-Based Coaching Models at Scale: Early Lessons from MyTeaching Partner at Head Start's 11<sup>th</sup> National Research Conference, Washington, DC.
- Zaslow, M. (June 2012). Preconference session on Bridging Research and Policy at the National Research Conference on Child and Family Programs and Policy, Bridgewater State University, MA.
- Zaslow, M. (July 2012). Issues to consider in working towards a common core of quality indicators for QRIS. Presentation at the Quality Initiatives Research and Evaluation Consortium Meeting, sponsored by the Office of Planning, Research and Evaluation, U.S. Department of Health and Human Services, Washington, D.C.

- Zaslow, M. (October 2012). Suggested revisions to the definitions of occupations used in federal surveys to describe the early childhood workforce. Presented on behalf of the Steering Committee of the Workgroup on Early Childhood Professional Development and the Workforce, convened by the Office of Planning Research and Evaluation to follow up on the Workshop on the Early Childhood Workforce convened by the Board on Children, Youth and Families, National Academies of Science and Institute of Medicine. Briefing for Senior Staff of the Administration for Children and Families, US Department of Health and Human Services, Washington, DC.
- Zaslow, M. (October 2012). Issues to consider in examining quality indicators in Quality Rating and Improvement Systems. Plenary presentation at the meeting of the Child Care Quality Policy Research Consortium, Washington, DC.
- Zaslow, M., (November 2012). Purposeful early childhood assessment. Presentation for the Office of the Deputy Mayor for Education, Washington, DC.
- Zaslow, M. (November 2013). Chair, panel on State longitudinal Educational Datasets at the annual Colloquium of the Consortium of Social Science Associations, Washington, DC.
- Zaslow, M. (January 2013). Breaking into the “black box:” Measurement, workforce, interventions, and collaborations in the service of infants and toddlers. Meeting of the Network of Infant/Toddler Researchers, convened by the Office of Policy, Research and Evaluation, Administration for Children and Families, U.S., Department of Health and Human Services, Washington, DC.
- Zaslow, M. (January 2013). Introductory comments at opening plenary of the meeting on International Children’s Rights Frameworks and Research sponsored by the American Association for the Advancement of Science (AAAS) Science and Human Rights Coalition, Washington, DC.
- Zaslow, M. (March 2013). Discussant comments for panel on Impacts and Implementation: Making the Transition from Research to Practice at Scale at meeting on Quality Improvement in Early Childhood Education, sponsored by the National Center for Research on Early Childhood Education, sponsored by the US Department of Education, Institute of Education Sciences, Washington, DC.
- Zaslow, M. (April 2013). Panelist at Roundtable on Beyond a Sole Focus on Child Outcomes: Clarifying a Conceptual Framework for Early Care and Education Quality Improvement Initiatives at the Biennial Meeting of the Society for Research in Child Development, Seattle, Washington.
- Zaslow, M. (April 2013). Chair of symposium on Focusing on the “R” in QRIS: Modeling State Rating Systems and Links to School Readiness at the Biennial Meeting of the Society for Research in Child Development, Seattle, Washington.
- Zaslow, M. (April 2013). Discussant of panel on Testing for Thresholds in Associations Between Child Care Quality and Child Outcomes: Innovative Methodological Approaches at the Biennial Meeting of the Society for Research in Child Development, Seattle, Washington.
- Zaslow, M. (April 2013). Chair of panel on Enhancing Diversity in Science: Working Together to Develop Common Data, Measures and Standards. Featured session on research and science policy at the Annual Meeting of the American Educational Research Association, San Francisco, California.
- Zaslow, M. (April 2013). Panelist at session on Findings and Recommendations from the Advisory Committee on Head Start Research and Evaluation at the Second National Birth

- to Five Leadership Institute, sponsored by the Office of Head Start, Administration for Children and Families, US Department of Health and Human Services, National Harbor, MD.
- Zaslow, M. (June 2013). Summary Comments on Directions for PreK-3<sup>rd</sup> Evaluation and Research at meeting on PreK-3<sup>rd</sup> Research and Evaluation sponsored by the Foundation for Child Development, Washington, DC.
- Zaslow, M. (July 2013). Discussant's Comments on Number and Characteristics of ECE Workers and Caregivers: Initial Findings from the National Survey of Early Care and Education at the meeting of the State and Territory Administrators Meeting (STAM), Washington, DC.
- Zaslow, M., & Tout, K. (August 2013). QRIS: A Framework for Quality Improvement in Support of Multiple Outcomes. Plenary Presentation at the 2013 BUILD Initiative QRIS National Learning Network Meeting, August 1, 2013, Washington, DC.
- Zaslow, M. (November 2013). Discussant comments at meeting on The Role of Instability in Children's Success: A Dialogue Across Research, Policy and Practice, The Urban Institute, Washington, DC
- Zaslow, M. (January 2014). Thinking about QRIS. Presentation at the 26<sup>th</sup> Annual Meeting of national and State Child Care Advocates, Baltimore, MD.
- Zaslow, M. & Forry, N. (January 2014). Update from the National Survey of Early Care and Education. Presentation at the meeting of the Network of Infant/Toddler Researchers Third Annual meeting, Washington, DC.
- Zaslow, M. (January 2014). Overcoming Key Issues and Challenges in Dissemination, Translation and Outreach. Keynote Speaker at Science of Learning Symposium and Symposium on Excellence in Teaching and Learning in the Sciences, Johns Hopkins University, Baltimore, MD.
- Zaslow, M. (April 2014). Chair, Session on Linking Early Childhood Research with Policy, Child Care Aware National Symposium, Washington, DC.
- Zaslow, M. (June 2014). The Evidence on Preschool Education. Presentation at the Meeting of the Coalition for Psychology in Schools and Education, American Psychological Association, Washington, DC.
- Zaslow, M. (June 2014). Summary Comments at meeting on Transitions, Continuity and Alignment from Preschool to Third Grade, sponsored by the Office of Planning, Research and Evaluation, Administration for Children and Families, US Department of Health and Human Services, Washington, DC.
- Zaslow, M. (July 2014). Discussant's Comments, Opening Plenary at Head Start's 12<sup>th</sup> National Research Conference, Washington, DC.
- Zaslow, M. (July 2014). Discussant's Comments, Panel on A National Picture of Participation in Professional Development by the Early Childhood Workforce: Matches and Mismatches with the Research on Effective Professional Development Approaches. Head Start's 12<sup>th</sup> National Research Conference, Washington, DC.
- Zaslow, M. (October 2014). New findings on professional development from the National Survey of Early Care and Education. Meeting of the National Workforce Registry Alliance, Columbus, Ohio.
- Zaslow, M, Tarullo, L., & Burchinal, M. (November 2014). Thresholds of quality in early care and education. Colloquium at University for Maryland Center for Children, Relationships and Culture, College Park, MD.



- Zaslow, M. (November 2014). Early care and education in the United States: Selected findings from the National Survey of Early Care and Education. Presentation at the meeting of the Child Care Policy Research Consortium, Washington, DC.
- Zaslow, M. & Martinez-Beck, I. (November 2014). Suggested revisions to the definitions of occupations used in federal surveys to describe the early childhood workforce. Presentation at the meeting of the Child Care Policy Research Consortium, Washington, DC.
- Zaslow, M. (March 2015). Moderator, SRCD Policy Fellowship panel at the Biennial Meeting of the Society for Research in Child Development, Philadelphia, PA.
- Zaslow, M. (March 2015). Expectations about children's outcomes in Quality Rating and Improvement Systems: Perspectives on an expanded conceptual framework. Roundtable at the Biennial Meeting of the Society for Research in Child Development, Philadelphia, PA.
- Zaslow, M. (December 2015). Presentation as part of panel on "What does curriculum mean in the context of working with infants and toddlers and how do we verify implementation?" at the meeting of the Child Care Policy Research Consortium, Washington, DC.
- Zaslow, M. (December 2015). Presentation as part of panel on "State and national data on the early childhood workforce: Comparing state workforce registries with findings from the National Survey of Early Care and Education" at the meeting of the meeting of the Child Care Policy Research Consortium, Washington, DC.
- Zaslow, M. (December 2015). Presentation as part of concluding plenary on "The Child Care Policy Research Consortium: Looking forward" at the meeting of the Child Care Policy Research Consortium, Washington, DC.
- Zaslow, M. (February 2016). Presentation as part of webinar for the Promise Zones Early Childhood Peer Learning and Action Network: Building an Early Childhood Workforce to Support Quality.
- Zaslow, M. (January 2017). Quality thresholds, features and dosage in early care and education: Initial exploration and implications. Guest lecture as part of the Virginia Education Sciences Training Program supported by the U.S. Department of Education, Institute of Education Sciences at the University of Virginia Curry School of Education.
- Zaslow, M. (March 2017). Presentation as part of panel: Implications of new research and policy for Quality Rating and Improvement Systems (QRIS) design, implementation and evaluation. Meeting of the Child Care Policy Research Consortium sponsored by the Office of Planning, Research and Evaluation, Administration for Children and Families, US Department of Health and Human Services, Washington, DC.
- Zaslow, M. (March 2017). Discussant comments as part of Plenary: Research-to-policy translation for generating evidence-based child care and early education policy. Meeting of the Child Care Policy Research Consortium, Office of Planning Research and Evaluation, Administration for Children and Families, US Department of Health and Human Services, Washington, DC.
- Zaslow, M. (March 2017). SRCD's role in bridging research and policy. Colloquium in the Department of Applied Developmental Psychology, George Mason University.
- Zaslow, M. (March 2018). Bridging research and policy on children's development. Colloquium in the Department of Human Development and Quantitative Methodology, University of Maryland.

- Zaslow, M. (March 2019). Panelist: From dissertation to day Job: Pre-doctoral, early, mid and advanced career fellowships and funding opportunities. Panel at Biennial Meeting of the Society for Research in Child Development, Baltimore, MD.
- Zaslow, M. (March 2019). Moderator, SRCD Policy Fellowship panel and reception. Biennial Meeting of the Society for Research in Child Development, Baltimore, MD.
- Zaslow, M. (March 2019). Panelist on Access to early care and education. Roundtable at the Biennial Meeting of the Society for Research in Child Development, Baltimore, MD.
- Zaslow, M. (March 2019). Participant as a leader at Lunch with the Leaders mentoring session. Biennial Meeting of the Society for Research in Child Development, Baltimore, MD.
- Lombardi, C. M., Chazan-Cohen, R., & Zaslow, M. (June 2022). Unpacking comprehensive services in Early Head Start. Paper presented at the National Research Conference on Early Childhood, virtual.
- Lombardi, C. M., Chazan Cohen, R., & Zaslow, M. (November 2022). Understanding comprehensive services in Early Head Start for children and families with greater needs. Paper presented at the annual meeting of the Association for Public Policy Analysis and Management, Washington, DC.
- Lombardi, C. M., Chazan Cohen, R., & Zaslow, M. (March 2023). Understanding comprehensive service referrals among families in Early Head Start. Paper presented at the biennial meeting of the Society for Research in Child Development, Salt Lake City, UT.
- Zaslow, M. (May 2023). Research on the use of evidence in policy and practice. Presentation prepared for the Convening of the Foundation for Child Development Young Scholars Program, Washington, DC.