

Successful Strategies Used to Manage Head Start Programs during COVID-19 to Improve Outcomes for Children and Families: A Systematic Literature Review

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Abstract: *This systematic literature review aimed to determine the strategies used by Head Start health professionals during COVID-19 restrictions. A search was conducted using PubMed, EBSCOhost, and CINAHL academic databases following the Preferred Reporting Items for Systematic Reviews and Meta-Analyses guidelines. Data from six relevant articles were analyzed using the screening criteria that were around answering the research question. Five themes emerged from the review that includes screenings, education, strategies, Head Start, and support. The results indicated that COVID-19 safety protocols were put in place by healthcare leaders for in-person evidence-based screenings that could not be completed virtually. In addition, increased health education was used as a strategy for health promotion and disease prevention due to healthcare facilities being closed to non-emergency patients. The implications of these findings provide healthcare leaders a better opportunity in the future to manage Head Start programs during a COVID-19 flareup and to continue to provide quality services to children and families.*

Keywords—Screenings; Education; Strategies; Head Start; Support

1. INTRODUCTION

The United States Department of Health and Human Services implemented the Head Start Program in 1965 (Deming, 2009). The Head Start and Early Head Start Program provide various services to low-income children, families, and pregnant mothers. These services include comprehensive early learning programs, health services, nutrition, and family support services (Deming, 2009). Child health and development are a crucial part of the education process (Rothstein, Olympia, 2020). Health services in the Head Start program include continuous monitoring to ensure all children receive the highest quality of health screenings (Deming, 2009). In addition, all children enrolled in the program receive health screenings, nutritious meals, mental health services, and connect families to local medical and dental homes of the highest quality service (Deming, 2009). The Head Start program also serves low-income pregnant mothers and serves as a community support system for all individuals seeking assistance within the community (Deming, 2009).

During the peak of the global pandemic, the Head Start program closed all facilities and provided virtual services to children and families (Lancker, Parolin, 2020). During the COVID-19 pandemic, some Head Start leaders have been challenged to effectively manage health programs, potentially impacting the health services provided to children and families. The Head Start program has created ways to help educate and provide services to children and families during the stay-at-home order. However, the problem is that some healthcare leaders lack successful strategies to manage Head Start programs during COVID-19 to improve outcomes for children and families. The purpose of this systematic literature review is to explore successful strategies that healthcare leaders use to manage Head Start programs during COVID-19 to improve outcomes for children and families.

2. METHODS

After utilizing Google Scholar to narrow down the research topic choice, we chose articles that were in line with the research question; What successful strategies do healthcare leaders use to manage Head Start programs during COVID-19 to improve outcomes for children and families? A search of the literature transpired using PubMed, EBSCOhost, and CINAHL databases following the Preferred Reporting Items for Systematic Reviews and Meta-Analyses guidelines (Moher, 2015). These Method phases included (a) searching for relevant studies, (b) screening for inclusion and exclusion criteria, (c) data extraction based on the screening criteria, (d) synthesis of the data to identify key themes, and (e) reporting and dissemination of the findings. Searching the academic databases utilizing keywords, *healthcare strategies, Managing Head Start programs, Head Start, Improving Health outcomes for children and families* provided consistent parameters in choosing the best articles to review the topic and answer the research question.

For inclusion of articles to review, publications had to meet all the following criteria (a) searches for works that were published between 2018 and 2021, (b) written in English, (c) published peer-reviewed journal articles, (d) full-text articles, and (e), with a focus on successful strategies that healthcare leaders use to manage Head Start programs during COVID-19 to improve service outcomes for children and families. The first academic database resulted in 1 article when the applied filters were in place. The second academic database resulted in 3 articles when the applied filters were in place. The third academic database resulted in 2 articles when the applied filters were in place (see figure 1). Excluded from this review are any articles that do not meet the inclusion criteria.

mentioned the Head Start program specifically in the literature [9, 12]. Six of six articles (100%) cited support for children and family’s overall health and well-being as the sole reason for many strategies [1, 2, 4, 9, 11, 12].

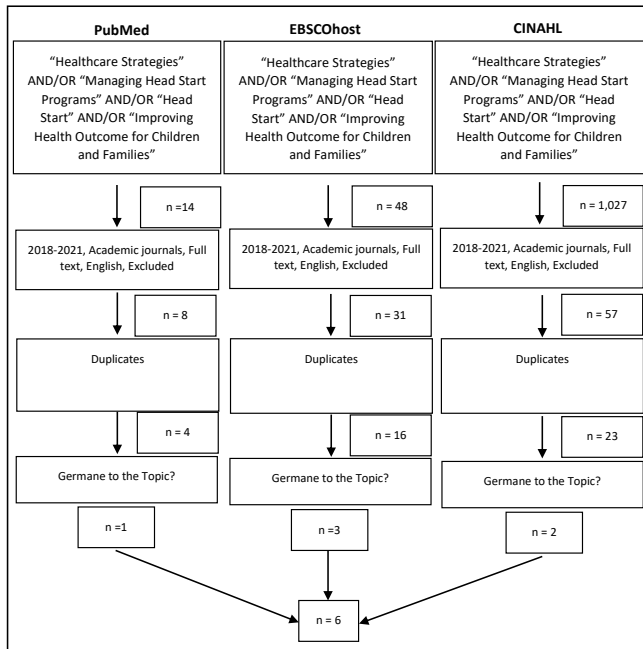


Fig. 1. PRISMA Diagram

3. RESULTS

The primary research question was: What successful strategies do healthcare leaders use to manage Head Start programs during COVID-19 to improve outcomes for children and families? An intense literature search and review transpired using EBSCOhost, PubMed, and CINAHL academic electronic databases. We used an established literature search, selection, and data analysis process (Moher, 2015).

A final decision transpired by comparing and finalizing the summary findings from each article (see table 1). Based on the data from 21 studies chosen, six research articles were relevant to the research question. Table 1 lists the title of the articles and essential summation finding from these six articles.

The data retrieved from the six articles connect to categorizing the variety of strategies used to promote health services during the mandated stay-at-home order focusing on children and families. Doing this led to the development of five main themes. Each theme directly relates to the research question. The following themes included (a) screenings, (b) education, (c) strategies, (d) Head Start, and (d) support.

From the research findings, two out of six of the articles mentioned (33%) provided strategies on conducted evidence-based screenings safely and effectively during COVID-19 [4,9]. Five of six articles (83%) discussed the increase in organization education created and implemented because of the COVID-19 restrictions [1, 2, 4, 11, 12]. Three of six articles (50%) discussed the many strategies health services staff used to safely provide health and nutrition services to children and families during COVID-19 [1, 2, 4]. Two of six articles (33%)

Table 1: Summarized findings of the literature

Title	Findings
Recommendations for Performing Hearing Screening Safely During COVID-19	Hearing screenings are an essential part of a child’s development, and during COVID-19, children may have missed their hearing screenings due to the many restrictions of contact. There are no evidence-based methods for virtually conducting these screenings. When conducting hearing screenings, to ensure the safety of staff, children, and families, it is recommended to screen for any COVID-19 symptoms, identify a space to conduct the screening, wear PPE, maintain a social distance, enforce hand hygiene, and clean and disinfect the screening materials and screening space.
Opportunities to support optimal health for children in Medicaid beyond the COVID-19 Pandemic	Healthcare access is a significant determinant of the overall growth and development of children. COVID-19 placed many restrictions on healthcare services for children and families to those with only emergencies. This impacted routine child health visits and regular vaccination schedules, meaning that children were out of date on well-child and annual physical exams as well as out of date on immunizations (nearly a 22% decrease from 2019). Almost one-third of all children enrolled in Medicaid experience chronic conditions such as asthma, diabetes, and physical or developmental delays. COVID-19 restrictions placed a massive barrier for Medicaid children needing to receive routine and preventative healthcare services that could potentially impact their health in the future.
COVID-19 pandemic and mitigation strategies: implications for maternal and child health and nutrition	There is a significant concern that COVID-19 has harmed the nutritional status of women and children. COVID-19 and the relation to the economic deterioration, food insecurity, and interruption of many beneficial programs could increase wasting by 10-50% with an excess of ~40,000-2,000,000 child deaths. Many strategies and COVID-related federally funded programs were placed by state and federal organizations to help families access nutritious meals at little to no extra cost to children and families. Currently, strategizing has been the primary goal of our nation, but noticing what programs work best for our children and family’s overall health is currently a priority.
Head Start and Families’ Recovery from Economic Recession: Policy Recommendations for COVID-19	This article examines whether the availability of Head Start during COVID-19 mitigated the impact on poverty rates among families and young children. Poverty rates among families with children increased after the 2008 recession and made this population more vulnerable to instability during COVID-19 due to job losses and lack of childcare availability. Head Start programs available to help children and families were closed to in-person services and provided family and children support during the global pandemic. The study results showed that states with higher Head Start enrollment had a slight increase in family poverty during the 2008 recession and a quicker and more stable recovery than states with lower Head Start enrollment.
COVID-19: Finding silver linings for dental education	Dental services were significantly impacted during COVID-19 and eliminated in-person dental care during the stay-at-home order. The stay-at-home demand has caused dental programs to adapt and collaborate to promote dental care at home virtually. Dental education has focused on many populations, including children, adults, and those who lost or did not have dental insurance coverage for dental care.
COVID-19 Pandemic Health Disparities and Pediatric Health Care-The promise of Telehealth	Telehealth and virtual health care visits have increased during the global pandemic to increase health education and make sure people have access to healthcare and needed resources to support health maintenance.

Table 2: Frequency of occurrence in the literature

Theme	Occurrences	Instances of Attributes (n)	Percentage (%)
Theme 1: Screening	4, 9	2	32
Theme 2: Education	1, 2, 4, 11, 12	5	83
Theme 3 Strategies	1, 2, 4	3	50
Theme 4: Head Start	9, 12	2	32
Theme 5: Support	1, 2, 4, 9, 11, 12	6	100

4. DISCUSSION

The study aimed to explore successful strategies that healthcare leaders use to manage Head Start programs during COVID-19 to improve outcomes for children and families. Twenty-one peer-reviewed articles published between 2018 through 2021 were considered in the study, which allowed for a current analysis on successful strategies used to manage Head Start programs during COVID-19. The data results shown in Table 2 display the main themes that emerged from the literature analysis. The five main themes found throughout our research included (a) screening, (b) education, (c) strategies, (d) Head Start, (g) and support.

Theme one generated data on strategies on conducted evidence-based screenings safely and effectively during COVID-19. Initial findings displayed several methods for conducting evidence-based screenings safely and effectively during COVID-19 [4,9]. Office of Head Start (2021) noted that program staff put COVID-19 friendly screening strategies that allow in-person screenings with a reduced risk of spreading germs. The protocol includes 1. screen for symptoms of exposure to COVID-19, 2. Identify a suitable space to conduct the screenings, 3. Use masks and other protective equipment, 4. Maintain social distance, 5. Enforce hand hygiene, 6. Clean and disinfect the screening space before and after use, 7. Maintain records of all children and family members entering the screening area. In addition, the Office of Head Start mentioned programs have avoided facing children's faces to help prevent the spread of COVID-19. The behavioral and developmental screenings were conducted in various ways by phone, video chat, email, appointment, and other creative ways.

In contrast, one author's results noted no evidence-based methods exist for virtually conducting various types of screenings. For example, when conducting hearing screenings, to ensure staff safety, children and families, it is recommended to screen for any COVID-19 symptoms first. Then identify a space to complete the screening, wear PPE, maintain a social distance, enforce hand hygiene, and clean and disinfect the screening materials and screening space [1]. Also, several authors believe that an increase in organization education is key to a successful strategy to managing Head Start programs during COVID-19.

Theme two and three generated data on education strategies used by head start program staff to enhance health promotion and disease prevention safely during COVID-19. According to the Office of Head Start, programs have been using various ideas to effectively teach and engage with children and families through all service areas. Initial findings concluded the most effective strategy used by health managers to promote and educate health and safety is by video chat with children and families (1,2,4,11,12). Other beneficial strategies are conversation by text or email, health flyers or letters, and

phone conversations (1,2,4,11,12). Virtual health education topics used within the Head Start programs include dental care, mental health care for children and parents, nutrition education, physical health, and more (OHS, 2021). Video chat has also been shown to enhance one-on-one support from staff members to families by asking questions or dispensing any concerns.

Theme four generated data on articles specific to the Head Start program health challenges during COVID-19. Finding concluded that during the COVID-19 stay-at-home order, children birth to five years of age were not consistent in obtaining up-to-date physical exams, screenings, and other important health and education screenings (9,12). Overdue health documentation was due to health care facilities being closed to the public for non-emergency needs. The 2020-2021 program year has left children behind on their preventative and primary health care schedules.

Despite the findings above, our review includes the following limitations (a) exclusion of non-English language articles, (b) the search strategies used, (c) the subjective nature of the reviewers, and (d) a twelve-week time constraint. The literature review was performed using a preliminary search strategy using Google Scholar first. An additional search strategy was then conducted using PubMed, EBSCOhost, and CINAHL academic databases for reviewing peer-reviewed journal articles. The search was keyword-guided, and articles may have been missed that could have been seized if different terminology was used when searching the academic databases.

To minimize the above limitations, the authors followed the PRISMA-based systematic review guidelines and protocol. Additionally, the search included filtering the information collected, starting at 1,089 from the PubMed, EBSCOhost, and CINAHL databases until there was no additional information to develop themes.

5. CONCLUSION

Future researchers can use the results of this systematic literature review as a basis for possibly conducting a mixed-method study. Researchers should consider incorporating data collection processes with qualitative and quantitative surveys from Head Start health managers to discuss further and prove the strategies used during the COVID-19 lockdown were beneficial in child growth and development. Health professionals can use these results to develop an implementation plan to enhance the findings of these virtual strategies on child health and wellness symptoms.

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