Executive Summary

Years of research suggest that Dual Language Learners (DLLs)—young children with at least one parent who speaks a language other than English in the home—stand to benefit disproportionately from early childhood education and care (ECEC) programs. However, substantial evidence also shows that DLLs participate in many ECEC programs at lower rates than non-DLL children, despite being significantly more likely to experience poverty and other risk factors that make them important targets for such programs. Examining the factors that can either help or hinder DLLs’ families from accessing ECEC programs is thus critical to supporting these children’s language development and future academic success.

Language can play a particularly important role in facilitating access. Nearly half of all DLLs, about 3.3 million children, have at least one parent who reports speaking English “less than very well.” For these Limited English Proficient (LEP) parents, language barriers to accessing early childhood services are often compounded by other obstacles, including lower levels of formal education and limited access to digital technology and the internet. Language access policies and services for LEP parents of young children, therefore, are a prerequisite to promoting the equitable participation of DLL children in public ECEC programs. Similarly, LEP workers in the early childhood field—professionals uniquely well positioned to provide linguistically responsive services to DLLs’ families—need adequate language services in order to remain and advance in the field. Across early childhood systems and programs in the United States, however, language services remain insufficient or nonexistent. And as the DLL population becomes increasingly linguistically diverse, LEP families who speak lower incidence languages are particularly unlikely to have access to sufficient translation and interpretation services to facilitate their participation in beneficial programs.

As the DLL population becomes increasingly linguistically diverse, LEP families who speak lower incidence languages are particularly unlikely to have access to sufficient translation and interpretation services.

Many ECEC programs lack the necessary data and accountability measures to demonstrate equal access for DLLs’ families, despite civil rights requirements to provide meaningful access to services for LEP beneficiaries. This is particularly true for the federal Child Care Development Fund (CCDF) and Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program and for state pre-kindergarten (pre-K) programs, all three of which do not require reporting on adequate translation, interpretation,
and other language services for all families and ECEC workers. These programs also do not require the collection and reporting of comprehensive data on children’s home languages at the state and/or program levels. As a result, the extent to which language services are or are not being provided in a way that meets family needs is impossible to know fully, though lags in the participation of LEP families and workers suggest that such services are significantly lacking. Moreover, even when LEP families are able to enroll, these programs are less likely to be able to provide high-quality, culturally and linguistically responsive services to these families due to an inability to communicate effectively with and provide basic program information that the families can understand.

Federal and state ECEC programs must give clearer guidance to grantees, build stronger accountability measures, and provide more robust language services if they are to close equity gaps for DLLs’ families. This analysis of ECEC programs’ language access policies and evidence of gaps in participation between DLL and non-DLL children point to a number of strategies that could help bridge these gaps, including that programs should:

- use reliable data to identify DLL children in state data systems to gain a clear understanding of language access needs and necessary information to improve accountability for this population,
- integrate language service requirements with clear accountability mechanisms into the design of new and existing programs,
- develop community hubs to centralize language access supports that are relevant to particular regions but that may be beyond the capacity of individual service providers to offer, and
- partner with skilled, culturally specific community-based organizations to provide linguistically and culturally responsive services to families and early childhood workers of different backgrounds.

By taking these initial steps, ECEC programs will be better equipped to not only address the language needs of LEP parents during their children’s enrollment and participation, but also to more effectively serve DLL families by making the program’s design more culturally and linguistically responsive.

1 Introduction

One-third of children ages 0 to 5 in the United States are Dual Language Learners (DLLs), meaning they have at least one parent who speaks a language other than English at home. These children, who also comprise a substantial proportion of the young child population across the majority of states, speak an increasingly diverse range of languages and have the potential to thrive as multilingual and multicultural individuals, given the appropriate supports. The home languages that DLLs are exposed to are an important strength and asset both for them as well as for their communities. However, for parents and other caregivers of DLLs who are Limited English Proficient (LEP), a lack of comprehensive language access policies and services in public early childhood systems can prevent them from participating in and benefiting from child care, early learning, and other essential programs that would help put their children on a trajectory for success in kindergarten and beyond. At the same time, immigrant and LEP workers with linguistic and cultural skills that are essential to serving families of diverse backgrounds face language barriers as they seek to enter and advance in the early childhood education and care (ECEC) field.
Beyond representing an important component of effective and inclusive early childhood policy, language access is also a requirement under federal civil rights law as well as some state and local laws. All federally funded and federally conducted programs must offer LEP individuals meaningful access to their services, regardless of how much federal funding they receive or how many LEP individuals they serve. Despite this requirement, equal access to government services for LEP individuals remains a goal, not a reality. In the early childhood field, as elsewhere, the existence of language access requirements and policies does not guarantee that all providers will take adequate steps to ensure LEP parents and DLLs have information about and access to programs. Indeed, language access provision is widely reported to be insufficient, and gaps in language services may be especially acute for families and ECEC workers who speak less common languages. Years of research demonstrate that DLLs access several publicly supported early childhood services at lower rates than their non-DLL peers, raising equity concerns about the services in question, particularly for children from less common language backgrounds. Moreover, the quality and relevance of early childhood services for DLLs may be affected by the programs’ level of linguistic responsiveness, posing additional barriers to equitable participation.

**Despite this requirement, equal access to government services for LEP individuals remains a goal, not a reality.**

Providing effective language services in the early childhood field would mean that LEP parents: have equal access to information about programs that are available to their families; would not face language-related barriers to applying for and enrolling in ECEC programs; and, over the course of participating in a program, would have access to day-to-day communications with program staff and to routine program information and resources on par with what is available to non-LEP parents. LEP early childhood workers, similarly, should have ready access to information and resources related to licensing, subsidies, professional development, and program improvement opportunities. Unfortunately, these bedrock elements of language access requirements are far from being realized in many early childhood programs and systems.

This policy brief explores federal and state efforts to implement language access-related policies within the major programs in the early childhood field. It begins by highlighting the linguistic diversity of DLLs’ families and the need for data to inform language access measures. It then outlines the language access requirements of major ECEC programs and discusses evidence of disparities in access to them, underscoring the urgent need for action. The brief concludes with an exploration of opportunities to improve language access across early childhood services and to increase awareness of this essential but overlooked issue.

## 2 Linguistic Diversity among Families with DLLs

Across the United States, nearly half (44 percent) of DLLs had at least one LEP parent in 2015–19, according to an analysis of data from the U.S. Census Bureau’s American Community Survey by the Migration Policy Institute (MPI) National Center on Immigrant Integration Policy. These nearly 3.3 million children experience unique challenges to participation in government-funded ECEC programs due to the language barriers their parents face.
Such obstacles may be particularly pronounced for LEP parents who speak a less common language, since government agencies are significantly less likely to make appropriate language accommodations. The top language other than English spoken at home in the United States is Spanish, with 59 percent of DLL children living in Spanish-speaking households in 2015–19. The next most common languages in DLLs’ households were: Chinese (3 percent of households); Arabic (2 percent); Tagalog (2 percent); and German, Vietnamese, French, Russian, Haitian Creole, and Hindi (each at approximately 1 percent). This leaves 26 percent of DLLs—approximately 1.9 million young children—in households that speak dozens of other, less common languages that each accounted for 1 percent or less of the DLL population. As the United States’ immigrant population becomes more diverse in its countries of origin, the diversity of languages spoken is also increasing. This poses a growing challenge for efforts to ensure language access to government programs. At the state and local level, the diversity of languages spoken is often greater, and less commonly spoken languages often make up larger shares of the population. Data that enable policymakers and program administrators to understand the nature and extent of linguistic diversity at the state and even the local level are critical, as without such information many families’ language access needs will go unrecognized and unaddressed (see Box 1).

### BOX 1
**Explore State-Level Data**

To accompany this policy brief, the Migration Policy Institute’s National Center on Immigrant Integration Policy has produced state-level fact sheets to illustrate the linguistic and demographic diversity of families with Dual Language Learner (DLL) children for the 25 states with the largest DLL populations. They can be found here: [bit.ly/DLLfacts2022](https://bit.ly/DLLfacts2022)

## 3 Language Access Requirements Affecting ECEC Programs

All ECEC programs in the United States that receive federal funding must provide meaningful access to their services for both children and parents who are LEP. This requirement, which applies to all agencies and organizations that receive direct or indirect federal funding, stems from the *Civil Rights Act of 1964* and has been further built upon by Supreme Court rulings and an executive order from the Clinton administration. Title VI of the *Civil Rights Act* forbids discrimination in federally funded services on the basis of national origin, which includes not providing access to individuals on the basis that they do not speak English proficiently. In 2000, President Bill Clinton signed Executive Order 13166, which established more requirements and guidance on how federal agencies and recipients of federal funding should ensure the right to language access. Under the executive order, all federal agencies must develop a plan to support language access to the programs they directly manage as well as issue guidance on how recipients of funding from the agency, such as state government agencies and private grantees, can ensure compliance with Title VI language access requirements. Following Executive Order 13166, the U.S. Department of Justice (DOJ) also issued more detailed guidance on compliance with Title VI of the *Civil Rights Act* as well as what policies and practices can support effective language access in government services. Since this federal guidance was issued, many states and localities have also developed their own laws and policies to further govern language access across their jurisdictions.

As required by Executive Order 13166, the U.S. Department of Health and Human Services (HHS),
which manages most of the federal programs supporting state and local ECEC systems, has developed its own language access plan and LEP guidance for grantees and funding recipients. The HHS guidance largely mirrors the DOJ guidance (as do most agencies’ LEP guidance), and it reinforces that any program that receives funding through HHS must provide access to their services for LEP individuals, including children, youth, and adults. This requirement covers all HHS programs, including early childhood programs, and applies to both direct recipients of HHS funding such as state agencies and Head Start providers along with those receiving federal funding through other entities, such as a local provider that receives federal funding passed through a state agency. In addition, providers that receive indirect federal funding from HHS programs (e.g., vouchers for child-care services) are covered by these regulations and Title VI. As laid out in the guidance, language access obligations also stretch across a “recipient’s entire program or activity, i.e., to all parts of a recipient’s operations. This is true even if only one part of the recipient receives the federal assistance.”

Beyond establishing which recipients of federal funding are covered by Title VI requirements, the HHS guidance also provides more details on how recipients can provide language access to LEP individuals. Although not mandatory, HHS advises recipients of its funding to determine the exact mix of language assistance services for LEP individuals based on a four-factor test that was established in the original DOJ guidance. The four considerations in this test are: (1) the number or share of LEP individuals likely to be served or encountered, (2) the frequency with which the program interacts with LEP individuals, (3) “the nature and importance of the program, activity, or service provided by the program to people’s lives,” and (4) the resources the recipient of federal funding has to provide language services such as interpretation and translation. Using this assessment—along with additional considerations laid out in the guidance for ensuring effective interpretation, accurate translation, trained staff, and appropriate planning—recipients of HHS funding can determine where, how, and to what extent to enact different measures to ensure language access.

It is difficult to gauge the extent to which these measures lead to consistent and effective outreach, access, and inclusion of LEP families by ECEC providers across the country.

Broadly speaking, these requirements and regulations mean that every ECEC program receiving any direct or indirect funding from the federal government must ensure that DLLs as well as LEP caregivers have access to their programs. On top of this basic framework, the three primary federal ECEC programs—the Child Care Development Block Grant (CCDBG); the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program; and Head Start—each have their own regulations and statutory language regarding the accommodation of LEP children and their families. Although reporting and accountability mechanisms around language access exist for all of these programs, it is difficult to gauge the extent to which these measures lead to consistent and effective outreach, access, and inclusion of LEP families by ECEC providers across the country.

A. Child Care Development Block Grant

The Child Care and Development Block Grant (CCDBG) Act of 2014, which reauthorized the Child Care Development Fund (CCDF) established in 1990, lays out specific requirements for state early childhood agencies (which it calls “lead agencies”) in ensuring access to programming for LEP families. Under
CCDBG’s statute and the subsequent regulations concerning CCDF, lead agencies are required to describe how they will provide outreach and services to LEP families and how they will “clearly communicate program information, such as requirements, consumer education information, and eligibility information” to LEP families.\(^\text{17}\) To further this communication, CCDF’s regulations also recommend that lead agencies translate public written materials associated with their programs into “frequently encountered languages” or use taglines (messages that advertise the availability of translated versions) on important public documents.\(^\text{18}\) As part of CCDF reporting requirements, lead agencies are required to note in their annual reports to HHS what strategies and steps they are undertaking to serve LEP families. These include steps such as providing information and materials in other languages, employing bilingual outreach and caseworkers, and partnering with community-based organizations.\(^\text{19}\) Although these steps are required to be included in state plans in the reporting process, the practices themselves are not defined as requirements for program operations. As a result, many states do not indicate they use all of the enumerated practices related to outreach and serving LEP families in their CCDF state plans.

As for accountability mechanisms around language access in CCDBG programs, lead agencies are responsible for monitoring the entities to which they provide funding, and lead agencies themselves are monitored by HHS’ Office of Child Care. Complaints related to discrimination under Title VI, including those related to language access, are referred to HHS’ Office of Civil Rights, which has the power to investigate state agencies and service providers that fail to provide language access and also to work to bring such entities back into compliance with civil rights requirements.\(^\text{20}\) Although there is a clear expectation that lead agencies and local providers will conduct outreach to LEP families and take efforts to allow access to programs and services, it is not clear the extent to which the practices of local providers are tracked outside of lead agencies’ annual reports and the Office of Civil Rights’ complaint process. This issue is further complicated by the fact that CCDBG funding flows through many actors on its way from HHS down to communities across the countries—first to states’ lead agencies and then to grantees, such as child-care resource and referral agencies,\(^\text{21}\) which are often primarily responsible for conducting outreach and serving LEP families on a local level; this makes it even more difficult to track the extent to which language access is realized in practice.

### B. Maternal, Infant, and Early Childhood Home Visiting Program

As with all federally funded activities, MIECHV—the federal home visiting program—carries the requirement to provide meaningful access to its services for LEP parents and children. However, the statute and regulations governing the MIECHV program do not contain language access requirements that are as specific as those for CCDBG or Head Start. This difference is likely due to the structure of the home visiting program, which allows providers to use a variety of approved models to serve families and these models consist of a variety of different services delivered in different ways. Some of these models have more specific requirements related to language access. For example, home visitors are specifically required to communicate in a LEP family’s home language or use an interpreter under the Early Head Start - Home Based Program Option.\(^\text{22}\) Though different models used by MIECHV providers may take steps to be culturally and linguistically responsive, immigrant and refugee families face long-standing challenges to accessing home visiting programs, including a lack of cultural competence and diversity among program staff.\(^\text{23}\)

The lack of uniformity among services provided through MIECHV also makes it difficult to identify the extent to which language access is occurring for
LEP caregivers. As a result of the use of different program models and a diffused system of funding similar to CCDBG, it is difficult to monitor and determine the degree to which home visiting programs across the country are taking steps to provide language access. Similarly, this dynamic suggests that states and the federal government may not be taking meaningful steps to ensure or collect evidence that language access requirements are being implemented and that LEP families are being equitably included in home visiting programs.

C. Head Start

Broadly speaking, Head Start has more specific requirements for its local providers related to language access and how to serve LEP families. Applicants for Head Start funding must show their plan to “meet the needs of limited English proficient children and their families, including procedures to identify such children, plans to provide trained personnel, and plans to provide services.”24 Head Start’s regulations also require providers to adopt several measures and practices to ensure language access for DLLs and their LEP caregivers, including using interpreters and bilingual staff and translating written materials where appropriate.25 For example, providers are required to “provide to parents of limited English proficient children outreach and information, in an understandable and uniform format and, to the extent practicable, in a language that the parents can understand” while also conducting family engagement activities in either a family’s preferred language or through an interpreter.26 In addition, as part of reviews of Head Start programs, review teams must consider outreach and access to programs for LEP families as well as whether programs are addressing “population and community needs (including those of limited English proficient children and children of migrant or seasonal farmworker families).”27

The fact that Head Start programs provide fairly uniform services across the country enables more prescriptive language access requirements as compared to the more varied service offerings of MIECHV and CCDBG programs.

These regulations represent a more developed framework around language access, laying out specific steps that providers must take to ensure language access and the participation of LEP families. Part of the reason these amplified language access measures exist for Head Start may be the fact that the program is directly administered through the federal government. Unlike the CCDBG, where funding passes through state agencies to providers in each state, Head Start providers apply for and receive their funding directly from HHS’ Office of Head Start. Consequently, language access in the program does not depend on each state agency’s capacity and willingness to monitor the access and inclusion of LEP individuals and can instead be overseen and regulated directly by HHS. Similarly, the fact that Head Start programs provide fairly uniform services across the country enables more prescriptive language access requirements as compared to the more varied service offerings of MIECHV and CCDBG programs. As Section 4 will discuss in more detail, this direct line between language access policies and their implementation correlates with more equitable participation of DLLs’ families in Head Start relative to other federally funded early childhood programs.

D. State Pre-K

In addition to federal ECEC programs, many states manage their own pre-kindergarten (pre-K) programs, which are typically funded primarily through state dollars. If these programs are supported
through federal funding, such as a Preschool Development Grant, they are required to comply with federal language access requirements, as with all other federally funded activities. In addition, some state pre-K programs may need to comply with state laws or policies governing language access in education or state services more broadly. Beyond these statewide regulations, some state pre-K programs have their own requirements for language access, similar to federal programs. For example, state pre-K programs in 19 states had policies that families must receive information about the program and the child’s progress in their home language in the 2019–20 academic year. Programs in only five states—Maine, Minnesota (one of two major programs), New Mexico, New York, and West Virginia—required providers to translate communications into all home languages spoken by families they serve, while programs in seven states required translation for only some languages. All other states’ programs either had no requirements to translate written communications for families or did not report any such requirements that year.

4 Evidence of Disparities in Access

The existence of language access policies and requirements in a program’s design does not necessarily indicate that equitable access will be achieved, given limited measures to monitor and ensure effective implementation of these policies. Language access policies, moreover, are often not linked to sufficient funding and resources, despite the substantial work and expertise that providing adequate language services require.

Although there is considerable evidence that DLLs stand to benefit disproportionately from enrollment

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**BOX 2**

Multiple Barriers to ECEC Access for LEP Families

In addition to limited English proficiency, multiple, compounding factors can further prevent LEP parents of DLLs from fully benefiting from public funding for early learning and care.

Nationwide, DLL children are more than three times as likely as non-DLL children to have at least one parent whose highest level of educational attainment is less than a high school diploma or equivalent (29 percent vs. 9 percent, respectively, in 2015–19). Among parents without a high school diploma or equivalent, the challenges are compounded in households with a low income, defined as less than 200 percent of the federal poverty level. About half (51 percent) of DLL households were low income, compared to slightly more than one-third (38 percent) of non-DLL households.

Further, there are longstanding disparities in digital access among families with young children that can make it difficult for some parents to obtain information about ECEC programs and enroll in their services. DLLs were twice as likely as non-DLLs to live in a household with no access to the internet (12 percent vs. 6 percent, respectively). For DLLs who lived in low-income households, had at least one parent with limited formal education, and had at least one LEP parent, the gap was even greater; 26 percent of these young children lived in households with no internet access, reflecting the way these many challenges can compound barriers to access.

Source: Migration Policy Institute (MPI), National Center on Immigrant Integration Policy (NCIIP), “U.S. Young Children (ages 0 to 5) by Dual Language Learner Status: National and State Sociodemographic and Family Profiles” (data tables, MPI, Washington, DC, 2021).
in early childhood services, data on access and participation across major publicly funded early childhood programs indicate that DLL children enroll at notably lower rates than their non-DLL counterparts. Generally speaking, deficiencies in the collection of data on program participants’ home languages make it difficult to fully measure gaps in access for DLL and LEP families, raising concerns about accountability for these groups’ equitable participation. Within these constraints, this section reviews evidence of the disparities in access to government-funded ECEC programs.

A. Child Care Development Block Grant

In a landmark 2006 analysis of data from the Early Childhood Longitudinal Study’s Kindergarten Class of 1998–99, the Government Accountability Office (GAO) found that kindergarten-age children with LEP parents were less likely than other children to have received financial assistance from a social service or welfare agency for child care or to have participated in Head Start the year before kindergarten, after controlling for certain individual and family characteristics such as race and parent educational attainment. Whether or not the children who had participated in such services were enrolled in programs financed by the CCDF, however, could not be assessed as the 1998 national survey did not ask respondents to specify the source of assistance. At the time of the 2006 GAO report, the Child Care Bureau (now the Office of Child Care) did not require states to collect data on home language or English proficiency from families receiving federal subsidies for child care, which prevented analyses of access and enrollment rates based on DLL status. Indeed, GAO was asked to issue this report in response to questions about potential difficulties that LEP parents were encountering in accessing federal early childhood resources, including CCDF support, and the study provides useful proxy information on access rates and barriers from this period. Another key finding in the report was that disparities in formal child-care access between the children of LEP and non-LEP parents persisted even within racial and ethnic subgroups, pointing to the importance of language barriers and language services in influencing families’ levels of access. Children of LEP Latino parents, for example, were less than half (0.44 times) as likely as children of non-LEP Latino parents to receive any kind of financial assistance for child care.

In the years since the 2006 GAO study, access to federal funds for child care for LEP families seems to have improved incrementally, although it remains difficult to analyze precisely without consistent data. Beginning with a 2007 study that found insufficient language access for families seeking child-care financial assistance (among other public ECEC benefits) during field visits to New York City and Oklahoma City, the Center for Law and Social Policy (CLASP) has conducted periodic studies of the patchwork information that is available. In a 2012 study, for example, CLASP researchers concluded that CCDBG state plans for federal fiscal years (FY) 2012–13 indicated that many states intended to address the language needs of immigrant-background families, but that policies regarding DLLs lacked specificity and there was considerable room for states to improve how they support DLLs’ families.

More robust data collection on home languages and further data on English proficiency are required to thoroughly evaluate the accessibility of CCDF-funded programs for LEP families.

After the reauthorization of CCDF by the CCDBG Act of 2014, a final rule published by HHS in 2016 amended the law to add a new requirement for lead agencies to report the primary language spoken
in the homes of children enrolled in funded programs, similar to data reporting requirements for Head Start. When presenting data collected in the first two years of the new requirement, the Office of Child Care disclaims it as “a snapshot of the progress states are making in meeting the new reporting requirements” that “should not be used to describe the national landscape of the languages spoken at home for children receiving child-care services.” However, based on data collected under the new requirement—which have only been published for FY 2017, FY 2018, and preliminarily for FY 2019 to date—it is evident that the majority of states cannot demonstrate that they are serving DLLs equitably. More robust data collection on home languages and further data on English proficiency are required to thoroughly evaluate the accessibility of CCDF-funded programs for LEP families.

As recently as 2019, CLASP found that access to CCDF-funded child care still varied significantly by race and ethnicity across states, with Latino and Asian families accessing subsidies at the lowest rates overall. The study notes that unique state policy decisions—particularly around language access in application, enrollment, and redetermination procedures—would affect LEP caregivers’ ability to obtain financial assistance for child care. With the onset of the COVID-19 pandemic in 2020, the United States still lacked adequate data collection and analysis to identify communities heavily affected by the health crisis, including immigrant families and families who speak a primary language other than English. As a result, states were limited in their ability to reach these groups with funding that the federal Coronavirus Aid, Relief, and Economic Security Act (CARES Act) dedicated to providing child-care support, both through additional CCDBG funding as well as through small business administration loans for child-care providers. Targeting federal child-care support to DLL families will remain difficult so long as home language and English proficiency information is not systematically gathered and fully reported.

B. Maternal, Infant, and Early Childhood Home Visiting Program

The participation of LEP families in early childhood home visiting services is disproportionately low as well. Despite the fact that 33 percent of U.S. children ages 0 to 5 were DLLs in 2015–19, only 23 percent of children served by MIECHV home visiting programs were primarily exposed to a language other than English in 2017, according to a study by the National Academies of Sciences, Engineering, and Medicine. In it, the authors raised concerns about this disproportionately low share, noting there may be language access barriers in MIECHV programs that constitute violations of Title VI of the Civil Rights Act of 1964. The 2017 study also included a review of MIECHV information fact sheets for each state across the country, with the study’s authors finding no explicit references to serving immigrant families or families with a home language other than English. HHS’ Health Resources and Services Administration has since published newer state-level MIECHV fact sheets, and analysis of those for FY 2020 yields a similar lack of explicit mentions of serving immigrant-background families or families who speak languages other than English.

Disparities in access to home visiting programs are further evidenced by the MIECHV needs assessments mandated for each state by Title V of the Social Security Act, as amended by the Bipartisan Budget Act of 2018. States were required to submit the most recent round of needs assessments to the Health Resources and Services Administration in 2020, a decade after the previous needs assessments were conducted in 2010. Several states’ 2020 assessments revealed that families speaking languages other than English were enrolled and remained in
programs at lower rates compared to families that primarily speak English in the home. A number of states also acknowledged that DLLs’ families face additional challenges, such as cultural or linguistic barriers, to accessing high-quality home visiting services. For instance, Region X—which is comprised of Alaska, Idaho, Oregon, and Washington—reported notably low rates of home visitors and home visiting supervisors sharing the same cultural and linguistic background as the families they served, particularly if families spoke a primarily language other than either English or Spanish. Several other states reported struggling to serve superdiverse communities in which a variety of less common languages are spoken, due to a lack of interpretation capacity, multilingual home visiting staff, and other limitations. These reports indicate ample evidence for concern that the civil rights of many LEP families are being violated by MIECHV programs.

C. Head Start

Through its annual Program Information Report (PIR) system, the Office of Head Start requires Head Start and Early Head Start programs nationwide to collect comprehensive data, including the primary home languages of families enrolled. The mandate for all grantees to submit this information via the PIR system on an annual basis since the 2009–10 academic year (with the exception of 2019–20, due to the pandemic) provides a sharp contrast to the deficient home language data collection requirements and practices for CCDBG and MIECHV.

Head Start’s mandatory data collection shows that in the 2020–21 academic year, 32 percent of families enrolled in Head Start or Early Head Start either spoke a primary language other than English at home or had participating children who were acquiring another language in addition to the primary home language of English. This is roughly proportionate to the share of children ages 0 to 5 nationwide who were DLLs in 2015–19: 33 percent. PIR data also show that between the 2009–10 and 2018–19 academic year, the share of participating children whose families spoke a primary language other than English at home was consistently between 27.5 percent and 29.9 percent. This suggests that DLLs have for more than a decade been served by Head Start programs at approximately a proportionate rate to their share of the total population of young children in the United States. Head Start’s relative success in providing equitable access to DLL families underlines the potential for other programs do the same, given that they all operate under the same federal civil rights mandates.

D. State Pre-K

Nationwide, 44 states and the District of Columbia offered state-funded pre-K programs as of the 2019–20 academic year. In its latest State of Preschool Yearbook, the National Institute for Early Education Research stated that while 40 state pre-K programs reported that they were required to collect home language information for enrolled children, only 31 were able to report the actual number of children whose families spoke a language other than English. Examining these data, 18 of the 31 states that reported home language data had programs that enrolled a disproportionately low share of children with a home language other than English compared to the DLL share of the state’s young child population. Programs in a further three states reported enrolling DLLs at a rate just slightly below the DLL share of the state’s young child population, and only eight states reported enrollment data indicating they were serving DLLs proportionately.

Data from the 2020 State of Preschool Yearbook also indicate that programs in only 22 states identified “home language other than English” as a risk factor that could be used to determine a child’s eligibility for enrollment (others include family income). The same number of states reported that their pre-K programs utilized children’s home languages to support
learning. These practices are foundational strategies that can help states prioritize outreach, accessibility, and program quality for DLL families that are frequently underserved.

5 Recommendations and Conclusion

Persisting disparities in access across some of the major early childhood programs demonstrate that inclusion of language access in law and policy, while essential, is not sufficient to achieve equitable results for DLLs’ families. Operationalizing equitable access for families with limited English proficiency requires resources, data collection, and ongoing mechanisms to ensure accountability across all levels of early childhood programs and systems. Moreover, explicit efforts to overcome language barriers must extend well beyond initial enrollment processes, since these barriers can also undercut the relevance, quality, and effectiveness of early childhood services themselves and their ability to equitably serve DLL children and their families.

The fact that DLLs comprise a large and increasing share of the young child population across the majority of states points to an urgent need to develop truly inclusive services that are responsive to the characteristics of the families they serve. States as well as federal agencies have many opportunities to center equity for DLLs’ families by meaningfully addressing language access needs in early childhood systems. Areas for potential action include the following:

► **Include robust language access requirements, with appropriate funding and accountability measures, in new ECEC funding streams across the federal, state, and local levels.** As all levels of government consider new investments in early childhood education and care, integrating robust language access requirements into program designs is a critically important strategy to promote equitable access and participation in services. Moreover, language access requirements should be funded and appropriately resourced so that laws and policies can be translated into practice. Finally, measures requiring ongoing monitoring and accountability should be meaningfully included in program evaluation and reporting processes to ensure successful implementation of language services.

► **Identify DLLs in state early childhood data systems to help policymakers and program administrators understand and respond to shifting demographics and needs.** States need robust information about DLLs’ home languages and other characteristics to provide appropriate language access and other supports for families. As this brief illustrates, a lack of data makes it difficult to track whether DLLs and their families are being equitably and effectively served. It is particularly important to collect these data at the program level because languages that account for small shares of the DLL population at the national or even state level may be prominent in certain localities or even particular programs, and such data can support more accurately targeted language services. Gathering information about children’s home languages and the languages they speak and integrating this information across programs and systems (across preschool and kindergarten, for example) can provide important context that helps ECEC systems and providers better serve all DLL families. Growing concerns about the systematic undercounting of the children of immigrants in Census data, moreover, underscore the need for robust state data...
that promote responsiveness to community needs and characteristics.63

► **Integrate language access accountability into state ECEC systems.** Language access considerations should be built into state early childhood systems in a standardized way that promotes ongoing accountability. For example, state Quality Rating and Improvement Systems (QRIS) should include indicators that ensure programs provide information to families being served in their home languages.64 In light of federal civil rights requirements, such indicators should be included across all rating levels and not only at the top tiers, reflecting the importance of linguistic responsiveness as foundational to effective family engagement. QRIS indicators can also be structured to incentivize the hiring and retention of staff with linguistic skills and cultural diversity to promote language access as well as program quality for DLLs’ families. In this way, programs can be evaluated based on their ability to provide equitable services for these families and can also be appropriately rewarded for their capacity to effectively communicate and partner with families of diverse backgrounds.

► **Build language access considerations into regular ECEC program reporting and evaluation.** States and HHS should increase the attention paid to LEP families’ access to federally funded programs in their evaluation and review, particularly for CCDBG and MIECHV, and states should do the same for state pre-K programs. To comply with language access requirements, ECEC providers should be required to provide evidence of compliance with language access requirements, such as those related to collecting data on LEP parents in their service areas and demonstrating having completed the four-factor analysis to evaluate the proper mix of language services they should be providing. For providers in areas with significant LEP populations, state agencies should require evidence of the existence, scale, and quality of language services, such as language access plans, certification of bilingual employees, interpreting and translation contracts, budgeted expenses for language access, and routine monitoring and evaluation reports associated with agency and program language access plans. Building off the example of Head Start’s PIR system, states and HHS should also consider how regular reporting and planning for language access in services can be incorporated into broader strategies to achieve and measure equity in ECEC programs.

► **Provide language access support through regional or community hubs.** Providing adequate language access supports can be resource intensive, especially in contexts where a wide variety of lower-incidence languages are spoken. To improve capacity across early childhood systems or within specific programs, states can create hubs to meet particular language access needs, such as translation and interpretation for less commonly spoken languages in a particular geographic region.65

► **Partner with trusted community organizations.** Informed by relevant demographic data and other information, states should engage in targeted outreach to DLL families who are less likely to be engaged with early childhood services. Trusted community-based organizations have valuable cultural and linguistic skills and deep relationships with specific communities that can be supported and leveraged to achieve goals of equity and inclusion in early
childhood programs. Partnering with cultural intermediaries can also reduce barriers beyond language and promote bridge-building with communities considered “hard to reach” by mainstream institutions that may lack the relevant cultural skills and knowledge. Reducing the complexity of requests for proposals when identifying grantees for program implementation is one strategy to increase partnerships with smaller, culturally specific community organizations that have the capacity to successfully engage with LEP families but may have more limited administrative resources.

In many states and communities with linguistically diverse populations, there has long been a need to overcome language barriers to critical early childhood programs and services, yet it remains a seriously underdeveloped and often overlooked area of program and system design. As is the case with any significant policy or program design element, a mandate alone is not sufficient to achieve necessary system capacities. Policy, planning, and coordination efforts sufficient to meet the language access challenges facing early childhood programs must be prioritized, along with efforts to create and sustain quality services and to ensure ongoing monitoring and evaluation. Though unaddressed language barriers currently prevent early childhood services and systems from equitably and effectively serving the large and growing population of DLLs and their families, actors across all levels of government have multiple options for addressing system design flaws and thereby ensuring that investments in early childhood services can reach this important segment of the United States’ young child population.

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*Actors across all levels of government have multiple options for addressing system design flaws and thereby ensuring that investments in early childhood services can reach this important segment of the United States’ young child population.*
Endnotes

1 Migration Policy Institute (MPI), National Center on Immigrant Integration Policy (NCIIP), “U.S. Young Children (ages 0 to 5) by Dual Language Learner Status: National and State Sociodemographic and Family Profiles” (data tables, MPI, Washington, DC, 2021).


3 MPI, NCIIP, “U.S. Young Children (ages 0 to 5) by Dual Language Learner Status.”

4 MPI, NCIIP, “U.S. Young Children (ages 0 to 5) by Dual Language Learner Status.”

5 MPI, NCIIP, “U.S. Young Children (ages 0 to 5) by Dual Language Learner Status.”

6 MPI, NCIIP, “U.S. Young Children (ages 0 to 5) by Dual Language Learner Status.”


10 The 2002 DOJ guidance also contains the well-known four factor test for recipients of federal funding as well as extensive information and recommendations on effective practices around interpreting, certifying bilingual employees, training staff on serving Limited English Proficient (LEP) individuals, developing language access plans, and translating vital documents, among other key aspects of language access. See DOJ, “Guidance to Federal Financial Assistance Recipients.”

11 For more details on which states and localities have language access laws/policies and what the most common features of these regulations are, see Jacob Hofstetter, Margie McHugh, and Anna O’Toole, A Framework for Language Access: Key Features of U.S. State and Local Language Access Laws and Policies (Washington, DC: MPI, 2021).


18 HHS, ACF, “CCDF Program,” 67475.


21 Child-care resource and referral agencies support families in finding child care and also provide resources and training to child-care providers. For more information, see Child Care Aware of America, “Child Care Resource and Referral,” accessed October 3, 2022.


29 Friedman-Krauss et al., The State of Preschool 2020, 325.

30 Friedman-Krauss et al., The State of Preschool 2020, 325.


HHS, ACF, Office of Child Care (OCC), “*Child Care and Development Fund Statistics*,” accessed August 15, 2022.


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