Head Start helps fill a critical void in early childhood education and service delivery in Iowa’s rural communities. This fact sheet examines the scope of services that the Head Start program provides to Iowa children and families, and highlights the key role that Head Start plays in the state’s supply of quality child care.

Child poverty in Iowa’s rural counties
Rural children in Iowa are facing significant and persistent poverty. Nineteen percent of rural Iowa children under the age of 5 live in poverty, compared with 17 percent of children living in metropolitan areas. In Iowa, there is one rural persistent child poverty county, where the child poverty rate has been greater than 20 percent since 1980.¹

Family supports in rural counties
At the same time, access to many of the services that help combat child poverty—such as quality child care and health care—is very limited, particularly for low-income rural families in Iowa. Thirty-seven percent of rural families live in a child care desert, where the supply of licensed child care does not meet demand.² All rural counties in Iowa are designated as a Health Service Professional Shortage Area, where there is a shortage of primary care, dental, or mental health providers.

Head Start in Iowa
• Across rural Iowa, Head Start operates 236 classrooms in 134 centers.
• Head Start funds enrollment for 7,604 children, 47 percent of whom attend rural programs.
• Head Start employs 2,027 staff, 48 percent of whom work in rural programs.

Head Start as a proportion of Iowa’s child care centers
Head Start plays an outsized role in filling Iowa’s rural child care shortage. In Iowa, Head Start makes up nearly one-quarter of the center-based child care programs in rural counties and one-third of the center-based programs in frontier counties.³ In contrast, Head Start represents just 13 percent of center-based programs in metropolitan areas.
**FIGURE 1**
Head Start fills a child care gap in Iowa’s rural and frontier counties

Share of child care centers that are Head Start grantees, by type of county

<table>
<thead>
<tr>
<th></th>
<th>Head Start</th>
<th>Non-Head Start</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frontier counties</td>
<td>33%</td>
<td>67%</td>
</tr>
<tr>
<td>Rural counties</td>
<td>24%</td>
<td>76%</td>
</tr>
<tr>
<td>Metropolitan counties</td>
<td>13%</td>
<td>87%</td>
</tr>
</tbody>
</table>

Note: Metropolitan counties have a rural-urban continuum code of 1 through 4; rural counties are coded as 5, 6, or 7; frontier counties are coded as an 8 or 9.


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**Head Start health and education service delivery**

Head Start delivers health and education services to rural children who may not otherwise have access and makes significant progress in connecting children to these services over the school year.

**FIGURE 2**
Iowa’s rural children entering Head Start are often behind on health screenings

Head Start service receipt rates, beginning and end of year

<table>
<thead>
<tr>
<th>Service</th>
<th>Rural</th>
<th>Metropolitan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children up to date on preventative and primary health care (EPSDT)*</td>
<td>60%</td>
<td>91%</td>
</tr>
<tr>
<td>Children up to date on all immunizations</td>
<td>81%</td>
<td>96%</td>
</tr>
<tr>
<td>Children with continuous dental care</td>
<td>94%</td>
<td>98%</td>
</tr>
</tbody>
</table>

*Note: “EPSDT” stands for Early and Periodic Screening, Diagnostic, and Treatment—the Medicaid program’s comprehensive benefit for children.


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**Head Start provides critical family services to Iowa families**

Among families enrolled in Head Start, 73 percent of rural families and 75 percent of metropolitan families in Iowa received some type of family service through Head Start. This includes services such as parenting education, health education, job training, and substance abuse prevention.

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**Endnotes**


3. Authors’ note: Frontier counties are a subset of rural counties and can be understood as the most remote rural counties.