

Mr. DELLENBACK. Let me ask, on the second level, do you feel that that which should be supplied is the full range or a minimum beyond which they would be required to go for themselves, a minimum which would supply the adequate necessities?

Mr. SHRIVER. As somebody said in the health field, half health care is no bargain. In fact unless you get at least adequate if not "full range," whatever you mean by that, unless you get at least adequate-quality care, you are getting short-range and as a matter of fact maybe worse.

I think the problem really arises between what you call "full range" and what you are also defining as, let's say, being minimal or adequate.

Mr. DELLENBACK. I suspect we have definitional difficulties. "Full range" was actually a phrase used by one of your witnesses last week.

Mr. SHRIVER. If you mean by "full range" that you get the whole spectrum of medical service, yes, we do believe that the full range should be available to the family. In other words, you shouldn't have just an obstetrician and gynecologist one place and a pediatrician one place; that is a full range. If you say that you ought to have up to \$10,000 a year in medical service, that is another matter.

Mr. DELLENBACK. Let me ask one final question. You indicated earlier that your goals include reaching families and not just individuals and then you talked in terms of success in dealing with the individual children in large part being indicated by statistics of 5- to 10-percent increase in certain scores achieved on tests. That testing of success goes only to the individual involved, to the child. If the goal is to reach the family, how are you attempting, through Headstart or OEO, to measure success?

Mr. SUGARMAN. I think there are a number of answers to that question, Congressman. No. 1 is the degree of participation of the parent; how often does he physically take part in the school's activities or in the center's activities; how often does he cooperate with the staff in doing things at home that might be helpful to the child; what advantages does he take; what programs does he take advantage of himself in terms of things that might help him as a parent or head of the family?

Mr. DELLENBACK. Do you have any studies that measure this?

Mr. SUGARMAN. Yes, very brief. As I indicated before, I think that the participation in PTA is substantially higher on the part of parents of children who have been in Headstart.

Mr. DELLENBACK. Do you have quantitative measurements?

Mr. SUGARMAN. Yes; but very sparse.

Mr. SHRIVER. It is also true, I think, that parents who have been in the Headstart classrooms with their kids have a greater tendency to go into adult education than those who have not. In other words, they create some familiarity with the system.

Mr. SUGARMAN. We have had any number of cases where parents have returned to high school themselves.

Mr. DELLENBACK. Let me close by saying, would you make available to the committee whatever you have in this particular field?

Mr. SUGARMAN. We would be happy to.

(The information referred to follows:)