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Illinois Chapter AAP
Reach Out and Read ERH Summit

Early Relational Health:

**Building the foundations for lifelong health
and wellbeing**



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I have no conflict of interest nor disclosures

Learning objectives

- To expand your understanding of **early relational health, flourishing** and **early childhood system building**
- To reflect on your **current mindset** about the promotion of connectedness by strong early relationships for future well-being and flourishing
- To consider opportunities for **emerging practices and new partnerships for systems changes** that may advance early relational health



**A baby's future
starts now.**



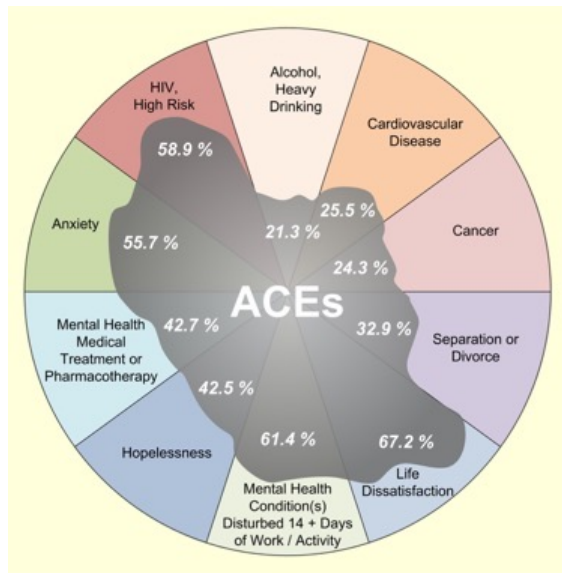
Key Elements for Child Development

- Early experiences in life build “brain architecture”
- Genes and environments together interact to shape the architecture of the brain
- Cognitive, emotional and social capacities are inextricably intertwined
- “Toxic stress” and adverse experiences derail healthy child development
- Brain plasticity and the ability to change behavior decrease over time
- Children develop in an **environment of relationships**



From ACEs to HOPE

(Health outcomes of positive experiences)



The Four Building Blocks of HOPE

are composed of key positive childhood experiences (PCEs)—and the sources of those experiences and opportunities—that help children grow into healthy, resilient adults.



RELATIONSHIPS

Relationships within the family and with other children and adults through interpersonal activities.



ENVIRONMENT

Safe, equitable, stable environments for living, playing, learning at home and in school.



ENGAGEMENT

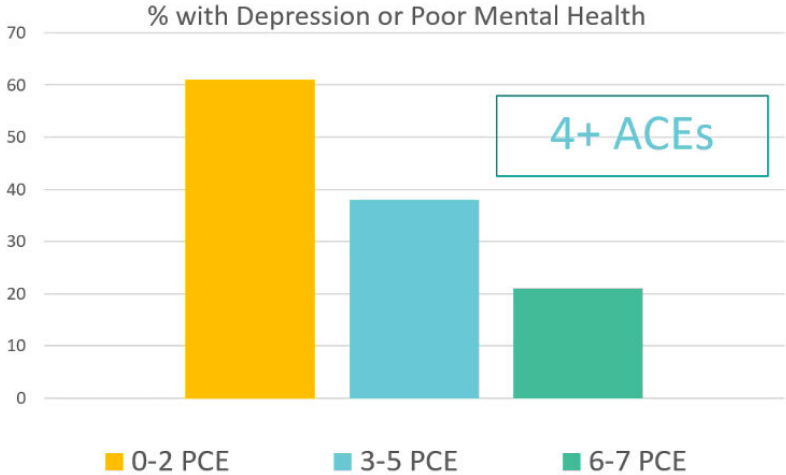
Social and civic engagement to develop a sense of belonging and connectedness.



EMOTIONAL GROWTH

Emotional growth through playing and interacting with peers for self-awareness and self-regulation.

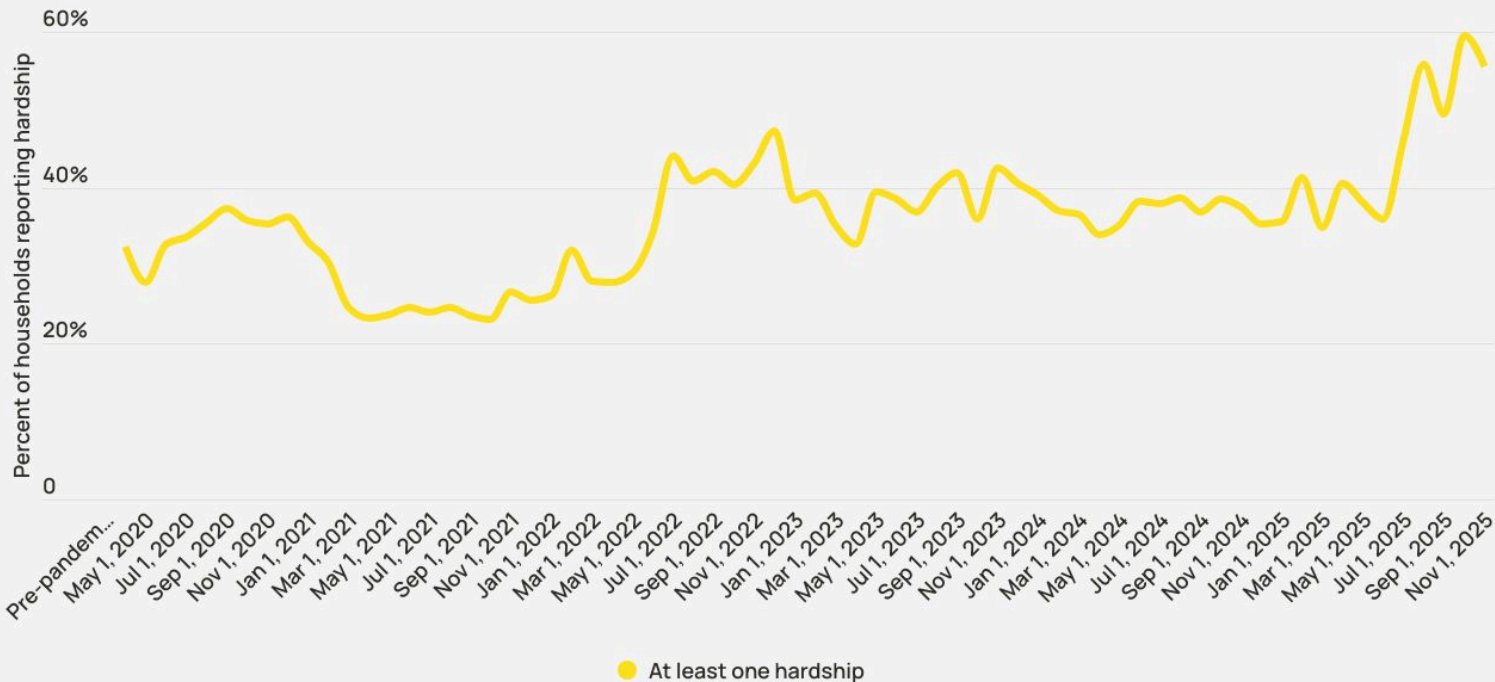
Positive Childhood Experiences Mitigate ACE's effects



Bethell C, Jones J, Gombojav N, Linkenbach J, Sege R. Positive Childhood Experiences and Adult Mental and Relational Health in a Statewide Sample: Associations Across Adverse Childhood Experiences Levels. *JAMA Pediatr.* 2019 Sep 9; e193007

Material hardship over time

Material hardship over time



We ask families to indicate whether they are having difficulty paying for basic needs in one or more of the following categories: Food, Housing (mortgage or rent), Utilities, Child care, Healthcare and Activities that support well-being (e.g. counseling). We present the percentage of participants who select one or more hardship.

*Analysis is weighted in order to adjust the samples to match the known population.

Population Health

- **Flourishing:** National Survey of Children's Health (NSCH) reports only 30% of children meet all four criteria of flourishing. Nearly one quarter of children are not flourishing.¹
- **Mental Health:** One in six U.S. children aged 2-8 years (17.4%) have a diagnosed mental, behavioral or developmental disorder.²
- **School readiness:** In 2022, only 63.6% of 3- to 5-year-old children were 'On Track' in 4-5 domains without needing support in any domain. (NSCH, Healthy and Ready to Learn)

¹ Bethell CD, Gombojav N, Whitaker RC. Family Resilience And Connection Promote Flourishing Among US Children, Even Amid Adversity. *Health Affairs*. 2019/05/01 2019;38(5):729-737. doi:10.1377/hlthaff.2018.05425

² The U.S. Surgeon General's Advisory on the Healing Effects of Social Connection and Community. Our Epidemic of Loneliness and Isolation (2023). Retrieved from: <https://www.hhs.gov/sites/default/files/surgeon-general-social-connection-advisory.pdf>

³ National Survey of Children's Health: School Readiness, 2022. Data Brief (2023). Available at: <https://mchb.hrsa.gov/sites/default/files/mchb/data-research/2023-nsch-hrtl-brief-oct-2023.pdf>

National Survey of Children's Health, 6 months-5 years

Four Components of the Child Flourishing Index:



Affectionate
and tender
with parent

**ENGAGED and
LOVING**



Bounces back
quickly when
things don't go
their way

**EMOTIONAL
REGULATION**



Shows interest
and curiosity in
learning new
things

CONFIDENT



Smiles and
laugh a lot

**POSITIVE
AFFECT**



National Survey of Children's Health, 6 months-5 years

Six Components of the Family Resilience and Connection Index:

Family Resilience and Connection Index (FRCI)

- Family works together to solve problems (vs. ignoring problems)
- Know they have strengths to draw on
- Stay hopeful even in difficult times
- Share ideas and talk about things that really matter
- Family reaches out and talks with each other when they face problems

- Parent coping well with parenting

The Flourishing Paradigm



- Family resilience and connection, early relational health (caregiver-child connection) and positive childhood experiences promote flourishing, even amid high adversity
- Child flourishing strongly predicts social-emotional wellbeing, school readiness and engagement, and positive mental health

National Survey of Children's Health

Prevalence of Mental, Emotional and/or Behavioral Health Problems

WHAT ARE KEY DRIVERS THAT DISRUPT FLOURISHING?



Relational health risks

- Adverse childhood experiences (ACE's)
- Low parental mental health
- Low parental social supports
- High caregiver aggravation

Social Health Risks

- Economic Hardship
- Food Insecurity
- Exposure to community violence
- Racism

Capita 2022 Survey in North Carolina



Parent Loneliness

“We found that 46 % of Gen Z parents of young children said they are lonely, which is about 12 % more than older parents.”

[The Ties That Bind and Nurture](#)



Together: The Healing Power of Human Connection in a Sometimes Lonely World

Surgeon General Vivek H. Murthy, MD, 2020

“Social connection stands out as a largely unrecognized and underappreciated force for addressing many of the critical problems we’re dealing with, both as individuals and as a society”



THE POWER OF HUMAN CONNECTIONS:

"Its all about the relationships"

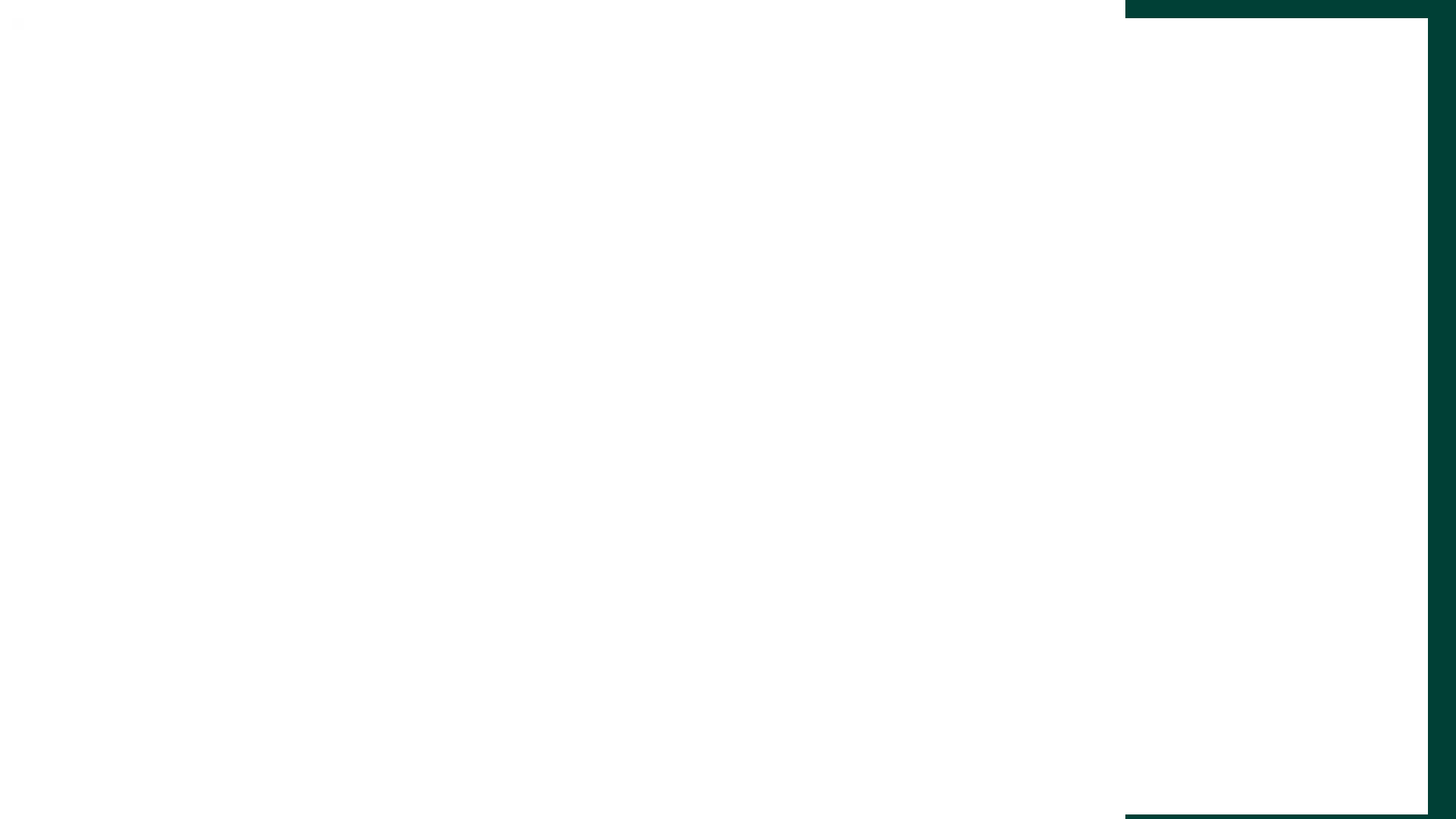
Early Relational Health

Not a new concept, but a new term

ERH builds upon decades of research from the fields of:

Child development
Infant mental health
Neurodevelopment

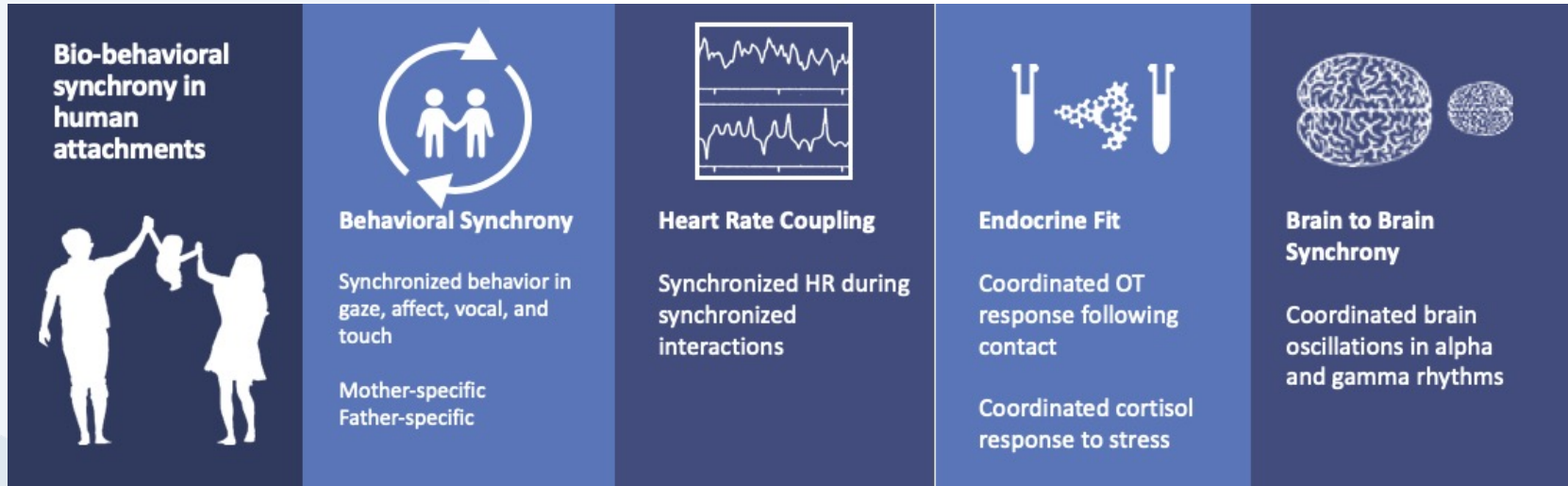






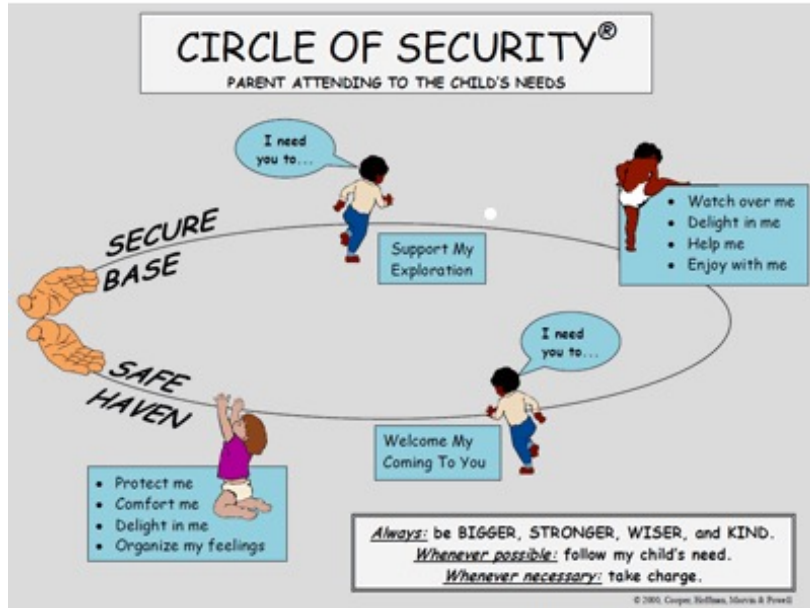


Bio-behavioral synchrony and dyadic neurodevelopment



Additional Principles within the Framework of Early Relational Health

Separation and reunion



Circle of Security Program

Rupture and Repair



Gold, C, and Tronick, E. (2020). *The Power of Discord: Why the Ups and Downs of Relationships are the Secret to Building Intimacy, Resilience, and Trust*, Little Brown and Spark, ISBN-10 : 0316488879

Bundle for Advanced, Team-based, High Performing Medical Homes for Young Children

Redesigned Well-Child Visits

- Holistic, **team-based care**
- Comprehensive **well-child visits** based on Bright Futures guidelines and EPSDT
- Family-centered, **strengths-based, relational**, holistic approaches
- **Recommended screening** for development, social-emotional health, maternal depression and social determinants of health (SDOH)
- Reach Out and Read as universal promotion

Relational Care Coordination

- **Routine** care coordination as part of medical home
- **Intensive care coordination** for more complex medical conditions or social risks
- **Relational care coordination staff** (e.g., community health workers, peer navigators)
- More **effective responses, completed referrals, and linkages** to community

Other Services and Enhanced Supports

- **Co-located programs in primary care** to promote ERH and development (e.g., DULCE, Healthy Steps, VIP)
- **Integrate mental health**
- **Families engaged** as advisors and partners
- **Referrals and/or linkages** to other services (e.g., home visiting, early intervention, dental care, early care and education, parent-child mental health therapy, nutrition programs)

Adapted from: Johnson K, Bruner C. *A Sourcebook on Medicaid's Role in Early Childhood: Advancing high performing medical homes and improving lifelong health*. Child and Family Policy Center. 2018. https://www.inckmarks.org/docs/pdfs_for_Medicaid_and_EPSDT_page/SourcebookMEDICAIDYOUNGCHILDRENALL.pdf
Willis DW, Paradis N, Johnson K. The paradigm shift to early relational health: A network movement. *Zero to Three*. 2022;42(4):22-30.



High Performing Medical Home To advance early relational health



DULCE
An initiative of CSSP



6 month Reach and Read Visit



NATIONAL
ACADEMIES

Sciences
Engineering
Medicine

Early Relational Health

Building Foundations for Child, Family, and
Community Well-Being



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Early Relational Health

- Dynamic process of mutual, meaningful, and affirming moments of connection in the youngest relationships
- Foundational in shaping lifelong physical, behavioral, and mental health



Impact of ERH

- ERH benefits children, families, and communities, shaping pathways for health and well-being across the life course
- ERH is associated with positive psychological, social, and physical health outcomes
- ERH is associated with children's outcomes by buffering the effects of stress on children



Moments of Connection

- Early relational health develops over time through moments of connection. These moments can occur anywhere children spend time and socialize: family, care, and community settings
 - Includes constructs: secure attachments; caregiver sensitivity; interactions with mutuality; shared attunement; biobehavioral synchrony; family resilience and connection; positive or benevolent childhood experiences; and safe, stable, and nurturing relationships
- ERH is dynamic, with ongoing cycles of relating, rupture, and repair
- Early relational health is experienced differently by each individual and manifests in person-, family-, and community- specific ways
 - What we feel, express, and value emerges from the social and cultural worlds we inhabit
 - Positive interactions may reflect communal and extended caregiving relationships

ERH and Health and Well-being

- Large and robust evidence base provides clear evidence for linkages between ERH and children's short- and long-term health and well-being
- ERH is associated with positive outcomes in multiple domains, including (1) social-emotional well-being and mental health, (2) relational outcomes, and (3) physical health
- A small body of literature, including some randomized control trials, suggests that early relational experiences may be associated with the development of brain structure and connectivity throughout childhood, adolescence, and young adulthood
- ERH serves as a buffer to adversity
- Research indicates positive childhood experiences are correlated with improved health and well-being

ERH as a Buffer Against Adversity

- Growing evidence that ERH—and positive relationships during childhood more generally—can serve as a protective factor that buffers against the adverse impacts of stressors on children’s stress biology, physical health, and psychosocial functioning
 - ERH mitigates effects of poverty, trauma, parental adversity
 - Caregiver presence regulates stress responses

Principles for Embedding ERH in Systems

- Co-design local resources and solutions to challenges with family participation in a way that is community driven and culturally specific
- Prioritize relationship-building and relational-practices within program design and evaluation, implementation studies, and improvement science
- Provide sustainable reflective supervision and practices, including reflective video feedback, to practitioners at all levels of the early childhood system
- Adopt a relational abundance and positive family and community assets-based mindset using relationally focused, healing-centered practices for communities
- Strengthen and sustain family leadership infrastructures in communities

Principles to Guide Policymaking for Early Relational Health

- ✓ Promotes early relational health for **every child and family**
- ✓ Supports family **economic security** and mobility for two-generational success
- ✓ Helps to scale and sustain **community-driven** supports and solutions to problems with **demonstrated success** in homes, clinics, early childhood settings, or communities
- ✓ Supports co-design of local services **with family participation**
- ✓ Advances a **relational workforce**
- ✓ Increases access to **parent/maternal, infant, and early childhood mental health services**, beginning prenatally

Future Research Agenda

- Interdisciplinary approaches
 - Integrate methods and findings across disciplines and expand interdisciplinary studies
- Participatory research with families & communities
 - Support longitudinal and participatory research designs that center families and communities
- Population health measurement infrastructure
 - Common metrics, indicators, and public messaging that retain real-world relevancy across communities

Concluding Thoughts

- ERH foundational to lifelong health and well-being
- ERH is a national imperative
 - Supports workforce readiness, economic stability, and lifelong health
 - Builds resilience and social cohesion
- Advancing ERH requires:
 - Efforts at all levels: families, communities, systems, policies
 - Shift from risk- to strength-based approaches
 - Support for family-driven policies
 - Investments in systems enabling strong relationships



About Nurture Connection

A national impact network that partners with families and communities to promote Early Relational Health

<https://nurtureconnection.org>

Nurture Connection



Strategic Priorities

1. **Parent leadership as a key equity strategy**
2. **Advancing ERH across place-based EC community initiatives**
3. **Multisector and cross-sector workforce development**
4. **Measurement, research, and evaluation**
5. **Policy advancement**
6. **Widespread messaging and dissemination**

BUILDING EQUITY DRIVEN PARENT COLLABORATION



Equitable approach = PAYING PARENTS for their insights
Replication or adaption of product may be used by giving credit

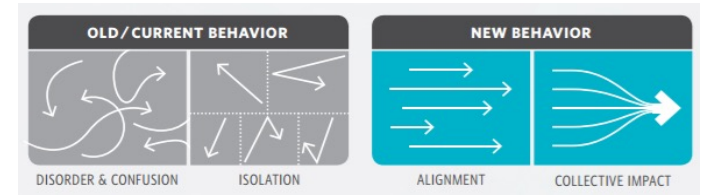
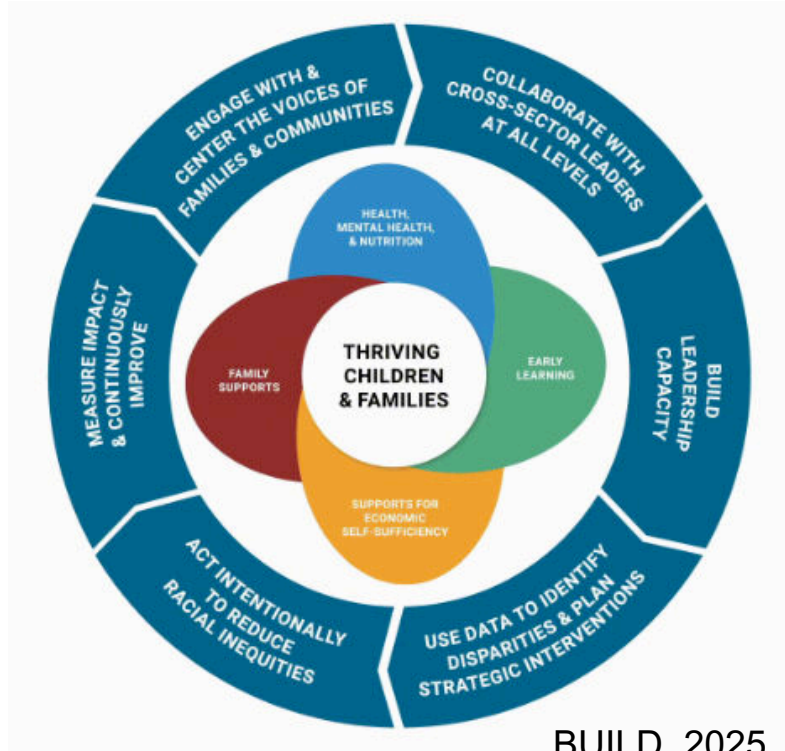


Early Childhood System

A well-functioning early childhood system reaches families with the help they need, improves the coordination of services and supports, promotes a climate of support for early childhood, and increases parent engagement and equity.

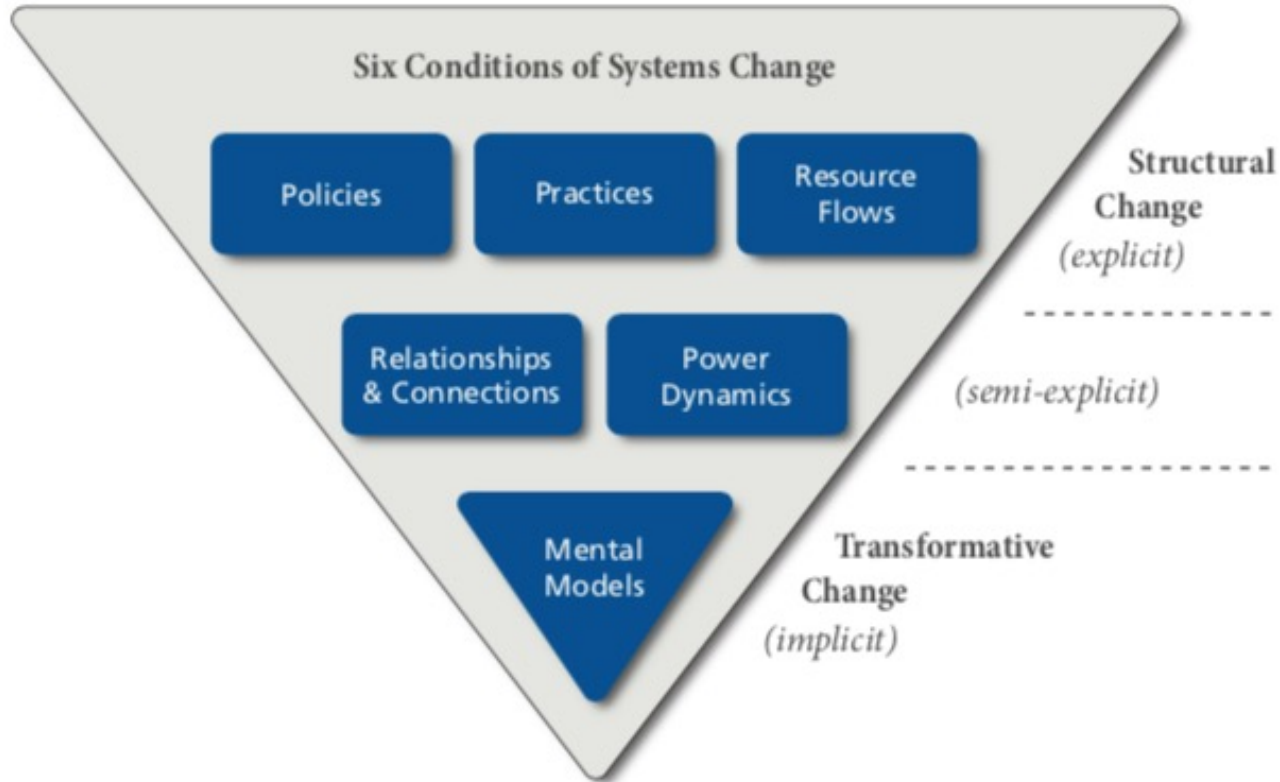
CSSP ECS Performance Assessment
Toolkit, 2019

Early Childhood System Buildingand an emerging place-based agenda



“Together We are Stronger than the Sum of Our Parts”

Six Conditions of System Change



THE WATER OF
SYSTEMS CHANGE

JOHN KANIA, MARK KRAMER, PETER SENGE

June 2018

ERH Policy Goals Aim to Increase



ERH MILESTONE

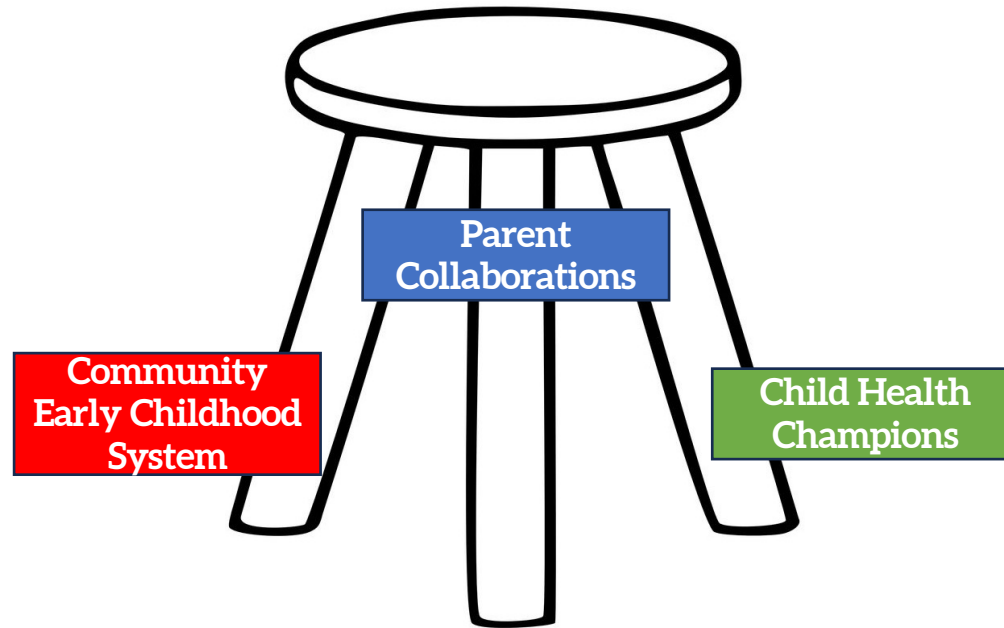
Reach Out and Read and Nurture Connection

National Summit 2025

Nov. 5-6, 2025 • Washington D.C.



The 3-legged stool of Early Relational Health



An Early Relational Health Ecosystem

The Relational Health Workforce

High performing medical home
Relational care coordinators
Family development specialists
Family service workers
Community health workers
Home visitors
Family coaches
Promotores
Douglas
Family navigators



Connection as a Social Determinant of Health

Research repeatedly demonstrates that social connection strongly influences health. Feeling connected to a community was one of the strengths identified in the community engagement data from this assessment.

“The work of creating health is the work of creating connection.”

- DIDI PERSHOUSE

Strategic Plan 2026-2028

Nurture Connection
works with communities
and systems leaders to
foster the connections
that support child and
family flourishing

- ❖ Accelerate community-powered transformation
- ❖ Elevate knowledge and practice transformation
- ❖ Mobilize philanthropic will

Mindsets and narratives shift to prioritize the needs of families and caregivers

Family-centered policies (e.g., Medicaid, paid family leave) are passed to create the conditions needed to foster and sustain positive emotional connections

Strategic Plan 2026-2028

Key Strategies

1. Taskforce to develop ERH Field Indicators for child, family and community flourishing
 - Family developed, meaningful indicators
 - Field testing
 - Explore AI data collection App
2. Expand the ERH parent leadership model (FNC) and its influence
3. Commit to continued field convenings
 - ERH Communities (network of networks)
 - Parent leadership network
 - 2nd Annual summit

Active ingredients that advance ERH flourishing within community-powered transformation

1. Authentic family partnerships

“Radically different way of engaging families”

“Families are telling us the answers.”

2. Evidence-based concepts/promising innovations

“Meaningful shared moments of connection”

“Sharing narratives, stories and reflection”

“Sitting at the feet of the storytellers”

The future of relational clinical care

Beyond biomedical knowledge advancements

- Reflective practice (Facilitated attuned interactions – FAN)
- Beyond the integration of AI into medicine, the growing requirement of creating trusted, clinician-family relationships
- Harnessing the power of narrative and healing social networks
- Building empathic and therapeutic alliance skills for greater patient influence and healing

The ERH developmental journey



“Don’t meet parents where they are. Meet parents where they dream.”

*Janine McMahon, 2023
Ascend Parent Advisor*



Thank you!

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<https://nurtureconnection.org>