

Building the Bridge: How Early Relational Health Fuels Early Learning and Third-Grade Reading Success

October 28, 2025



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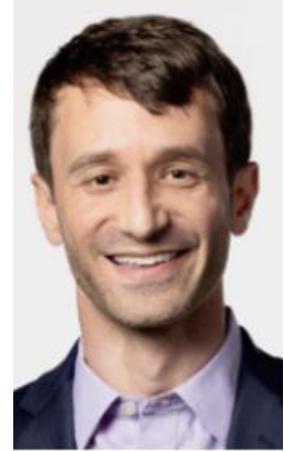
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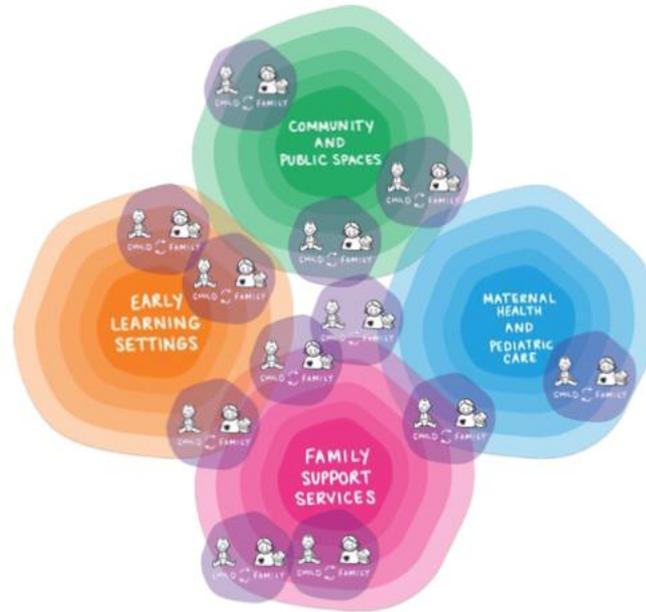
**A baby's future
starts now.**



***Early relational health is
foundational for health,
mental health,
educational readiness,
and flourishing***



early relational health ecology



**Simple
interactions**
Positive, supportive
and nurturing

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Early Relational Health

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

Campaign for Grade Level Reading



OCTOBER 28, 2025

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Trust for Learning

Statement of Task

1. What is the **link between ERH and long-term health** and wellbeing?
2. What is the **impact of ERH** on addressing a range of challenges at the multiple levels of behavior, biology, epigenetics, neurodevelopment, and communities, for addressing the needs of all children?
3. What are the **multiple roots of ERH** that are critical to understand, incorporate and address in public health initiatives?
4. What is the **evidence from family engagement and place-based initiatives in communities** that can guide new family support and systems to further advance ERH?
5. What are **best practices to advance ERH** and community resilience through community-level early childhood systems change across sectors, such as health and mental health systems, public health systems, family support programs, and early care and education systems?
6. What **federal and state policies and programs can support and advance ERH**?

Information-gathering Themes

- Both the science of human development and the importance of relationships are irrefutable
- Supporting the well-being of caregivers can create the conditions for ERH
- Relational approaches grounded in family, community, and cultural perspectives offer community-based pathways for flourishing
- Multiple influences on ERH (systems, policy, digital environment, etc.)
- Relational health requires advancing system-level supports
- Relationship-centered measurement and accountability are essential
- ERH is a public good with intergenerational returns

Multiple Roots of Early Relational Health

- Communities, families, and caregivers across cultures and backgrounds have long understood **the importance of connection and relationships for human development**
 - Various perspectives: collective caregiving, kinship, intergenerational continuity, connection with land
- Researchers, clinicians, and practitioners in disciplines across the developmental, educational, health and social sciences have focused on these **early relationships as a seminal source of wellness and flourishing**
- Concept of ERH has been introduced more recently as **an encompassing framework and orientation** anchored to families and communities as they care for their children and to the societal and policy choices that support them
 - ERH framework/orientation rooted in family and community perspectives and scientific understandings

Biological and Developmental Foundations

- Relationships are biologically necessary for healthy development, well-being, and flourishing
- Relational health evolves throughout the lifespan. However, the biological systems that support life course relational health develop during a sensitive period early in life
 - Early years = heightened brain plasticity
 - Neural circuits for stress regulation and attachment form rapidly
 - Caregiving experiences become biologically embedded
- **The absence of adversity is not sufficient to promote early relational health**
 - But the presence of adversity does not foreclose ERH
 - Supportive relationships, even in adverse contexts, can support healthy development and contribute to resilience

Early Relational Health: Basic Tenets



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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



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
 - Fewer internalizing and externalizing behavioral issues
 - Greater empathy and prosociality
 - Stronger peer and adult relationships
 - Respiratory and metabolic health
 - Lower inflammation and cardiometabolic risk decades later
 - Interventions improve stress physiology and cognition
- 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 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

Positive Childhood Experiences

- Much more is known about adverse childhood experiences and toxic stress than about positive childhood experiences and ERH
- Research on positive childhood experiences has grown in recent years
 - Includes relational elements such as emotional safety with caregivers, continuity in supportive relationships, community traditions, and a sense of belonging
- Research indicates positive childhood experiences are correlated with improved health and well-being
 - Attuned and responsive caregivers, opportunities for play and reading aloud, and participation in programs like Reach Out and Read and PlayReadVIP, associated with healthy lifestyles, academic success, and economic stability decades later

Influences on Early Relational Health



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Influences on ERH

- ERH develops through a **complex, dynamic, and cumulative process** that includes a child's genetic predisposition and social, physical, community, and societal experiences
- ERH is **shaped by many levels of influence:**
 - Individual, Familial, and Extrafamilial Relationships
 - Resource and Community Factors
 - Public Policy & Macro-level Influences



Individual & Relational Influences on ERH

- Sensitive, responsive caregiving predicts secure attachments
- Parental mental health, attachment history, and emotion-regulation skills linked to quality of caregiving and child attachment
- Dynamics within the family (couple relationship, co-parenting relationship) associated with ERH
 - cooperation and social support bolster positive relational health
- Non-parent caregivers (e.g., childcare providers, grandparents) contribute to children's emotional and social development and ERH
- Children's characteristics (e.g., emotionality, temperament) associated with ERH

Resource & Community Influences on ERH

- Includes economic stability, education access and quality, health care access and quality, neighborhood and built environment, and social and community context
- Communities can serve as powerful positive influences on parenting, child development, and ERH
 - Social networks, cultural traditions, faith-based organizations, and informal systems of support often provide families with essential resources that buffer stress and foster resilience
 - Strong community ties can support caregiver well-being, promote positive parenting practices, and offer children consistent models of trust, belonging, and collective identity
 - Neighborhood assets (safe public spaces, opportunities for community engagement, access to green space, reliable transportation, and quality local services) create supportive environments that foster children's learning, play, and relational security
 - Poor conditions can place chronic stress on families, contributing to emotional distress in caregivers, including heightened levels of anxiety and depression

Supporting ERH in Early Childhood Systems



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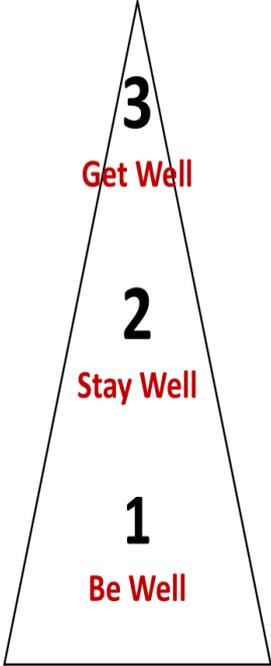
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Supporting ERH in Early Childhood Systems

- Systems, programs, and initiatives intended to promote ERH need to **facilitate and maintain connections at multiple levels**
 - Interpersonal
 - Familial
 - Community
 - Societal

Public Health Framework

- A tiered, multifaceted, and cohesive approach is needed
- *Societal, universal supports* for promoting healthy relationships
- *Preventive and targeted interventions* across sectors
- *Indicated treatments* in case of difficulties

Public Health Level	Types of Prevention	Approaches and Population Served	Primary Objectives	Relational Health Strategy
 <p>3 Get Well</p>	Tertiary	Indicated treatments for those with defined symptoms and diagnoses	Treat disease and prevent progression	Repair strained or compromised relationships
<p>2 Stay Well</p>	Secondary	Targeted interventions for those at higher risk of disease	Identify risks for early disease	Identify and address potential barriers to safe, stable, and nurturing relationships (SSNRs)
<p>1 Be Well</p>	Primary	Universal preventions for everyone	Prevent disease and promote wellness	Promote SSNRs by building 2-gen relational skills

Adapted from *Thinking Developmentally: Nurturing Wellness in Childhood to Promote Lifelong Health* (2nd ed.), Garner and Saul, 2025

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

Family Leadership

- Research and practice are strengthened by **building family and caregiving voices, experiences, and cultural perspectives** into the understanding of early relational health
- Investments are needed to ensure that **resources and solutions to challenges are family-driven and community-based and available to all families.**
- **Shared power and decision-making of families and communities,** together with practitioners, are critical for creating supportive relational systems and environments

Parent Perspectives

*“When a family knows they have medical insurance for both the mother and baby for the first year of life, it **allows them to feel more peaceful**. Not having insurance after the baby is born could impact your family finances and potentially your child’s access to medical care, adding **additional stress** for the family. **Relationships shouldn’t depend on having insurance**, but the impact can affect their well-being”*

*“The **best way** for a doctor to promote ERH is by living it and demonstrating the importance of building emotional connection in the way you listen and talk to the families you serve... **Role model it** for the families. **Never underestimate the power of your actions when you are a trusted partner with the families you serve.**”*

Policy and Financing Opportunities



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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

Policy and Investment Opportunities

- Leveraging Medicaid financing to serve child-parent/caregiver relationships (modernize EPSDT, home visiting, pediatric primary care models)
- Help meet families' basic needs (paid parental leave, ECE, minimum wage, nutrition programs like SNAP and WIC)
- Cross-sector collaboration at all levels (e.g. high-performing medical home models as a care and coordination hub)
- Support 'relational' workforce development and well-being (e.g. ECE workforce, doulas, community health workers)

Future Research & Data Needs



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Future Research Approaches

- 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

Final 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

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