Nurture Connection

The Early Relational Health Movement e-Newsletter

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New ERH Infographic Features Data to Guide Policy Change

By Kay Johnson, consultant to the Early Relational Health Hub at Center for the Study of Social Policy, President, Johnson Policy Consulting

A new early relational health (ERH) infographic shows that families who have basic supports are more likely to experience strong, positive, and nurturing relationships with their babies and toddlers and have a greater chance of having healthy, flourishing children. The infographic, available at <u>Nurture Connection</u>, uses national survey data and research to identify both challenges and opportunities for improving ERH in partnership with families, communities, providers, and policymakers. This infographic, developed for the Early Relational Health Hub at CSSP, highlights how ERH helps children flourish and how ERH can be promoted by ensuring that families' needs are met through income supports, access to mental health supports for parents, and high-performing medical homes for children. It also highlights the need to listen to parents and caregivers and ensure that systems and policies are designed to meet their expressed goals.

We know that social, racial, and economic inequities create and compound stressors for families, often taking a toll on ERH. The <u>National Survey of Child Health</u> (NSCH) and <u>American Community Survey</u> of the Census Bureau in particular provide data about the proportion of young children who experience stressors such as poverty, maternal depression, and lack of community supports. One-third of people living in poverty are children, and the youngest children are the poorest age group in the United States. Moreover, because of how racism has shaped public policies and systems, Black, Latinx, and Indigenous young children are two to three times more likely to be poor than their white counterparts. At the same time, <u>studies</u> of the impact of child tax credits and unconditional income support show improvements in child well-being, better development, and brain growth.

Similarly, spending to support high-performing medical homes and effective mental health services for parents and young children contributes to positive physical and mental health for parents and children. Yet in many states Medicaid and other public programs fail to support services needed to promote ERH (e.g., coverage of programs like DULCE or HealthySteps in primary care, early childhood mental health services, and maternal depression screening and treatment). For example, data from the NSCH show that only half of young children have a medical home that meets even basic criteria, and very few have a high-performing medical home with resources embedded to support healthy development, ERH, and family well-being.

Early Relational Health and Well-being

Early Relational Health (ERH) is the state of emotional well-being that grows from nurturing connections between parents and their babies and toddlers when they experience safe, stable, and nurturing relationships (SSNRs).* Social, racial, and economic injustices and challenges can overload families, often taking a toll on ERH. Family and community strengths, along with supportive programs and public policies, can help protect and promote ERH.

Flourishing Among Young Children 6 Months to 5 Years, by Federal Poverty Level (FPL)^1 $\,$



Mental-Emotional and Behavioral Conditions Among Children 3-17, by Relational and Social Health Risks²



Poverty Rate for Children Under 6, by Race/Ethnicity³



1/3 of the poor are children, the youngest are the poorest age group³

Flourishing

ERH helps children flourish—have more positive relationships, engagement, and resilience. It can improve lifelong health, mental health and well-being. The National Survey of Children's Health helps to measure aspects of flourishing among young children: 1) curiosity and interest in learning, 2) resilience, 3) relationship with parent, and 4) contentment with life.

Social & Relational Risks

ERH promotes resilience and helps protect from the harmful effects of stress and adversity. Children experience both social health risks (e.g., economic hardship, food insufficiency, neighborhood violence, and racial discrimination) and relational health risks (e.g., ACEs, poor or fair parent mental health, and high parental stress).

Income

Adequate income reduces parental stress and improves ERH. Ongoing stress associated with poverty has negative effects on parent-child relationships and development. Infants in families receiving child tax credits and unconditional income support show better development and brain growth.

Researchers Christina Bethell, Andrew Garner, and others have used the NSCH for <u>more</u> <u>complex studies</u> that show the interaction of social factors (e.g., economic hardship, food insufficiency, neighborhood violence, and racial discrimination) and relational factors (e.g., ACEs, poor or fair parent mental health, and high parental stress) on the mental, social, emotional, and behavioral health of children ages 3 to 17. Nearly 7 in 10 U.S. school-age children ages 3 to 17 with mental health conditions have experienced significant social or relational health factors. These results point to the need for more promotion, prevention, and intervention for both social and relational risks in the early years. This begins with economic security and includes an array of services and supports.

Specifically, research clearly demonstrates that safety-net investments help promote financial stability for families and contribute to positive health and well-being for parents and children. Families who can meet their basic needs and access essential services like health and behavioral healthcare are better able to ensure the safety, health, and well-being of their children. By expanding and improving foundational supports, including federal and state refundable earned income tax credit; the child tax credit; paid caregiving leave; the Supplemental Nutrition Assistance Program; the Special Supplemental Nutrition Program for Women, Infants, and Children, and Medicaid, and ensuring that systems work well for families, especially for Black, Latinx, Indigenous, and other families of color who have been repeatedly failed by systems, we can promote well-being for children and families.

Furthermore, the data highlighted in the infographic point to the share of children who are flourishing and live in families that report having resilience, strengths, and hope, even during difficult times. These positive experiences show the way to change. Listening to parents/caregivers is essential to understanding their strengths, supporting their goals,

and addressing their needs. The lived experiences of families can point to supportive programs; identify barriers, inequities, and gaps in services and supports (based on race/ethnicity, income, health status, and gender); and help to identify ways to address these challenges.

Fortunately, many of the challenges that are highlighted by these data can be alleviated through policy change. Advocates, program leaders, and researchers are encouraged to use the facts in this infographic as a starting point for making the case for investments in policies and programs to support families and promote ERH. For leaders at state and local levels, some state- and community-specific data are also available. Together, we can work to transform communities, service systems, and public policies, and in doing so, center equity and families, so that every family can experience the well-being that grows from ERH.

For more information about Nurture Connection's work to advance policies that expand and sustain early relational health, visit <u>nurtureconnection.org</u> and read the CSSP policy brief "<u>Policy Change to Promote Early Relational Health</u>."

Parent Perspective

Question: What do you see in the infographic that matters for Nurture Connection/ERH?

Family Network Collaborative response: "Investing in ERH is money well spent for children and their family's well-being."

To learn more about the Family Network Collaborative at Nurture Connection, visit our website <u>here</u>.



Explore More



Nurture Conversations Special Episode: Chat with Leonard Burton

> Wednesday, July 5th | 2 pm ET Live on Facebook and YouTube



Nurture Conversations Special Episode: Chat with Leonard Burton

In a special bonus episode of Nurture Conversations, Leonard Burton, CSSP's new president, spoke about his background, connection to the work of Nurture Connection, and vision for the future of CSSP.

Watch the Recording Here



What is Early Relational Health?

Early Relational Health is

the state of emotional wellbeing that grows from emotional connection between babies and toddlers and their parents and caregivers when they experience strong, positive, and nurturing relationships with each other.

ERH is foundational to children's healthy growth and development and parents' and caregivers' sense of competence, connection, and overall well-being. These strong and enduring



From Adverse Childhood Experiences to Early Relational Health in Canada

A new blog by Robin Williams, MD, FRCPC, the Chair of the Canadian Paediatric Society Early Years Task Force, shares the work of the Task Force to advance their goal of transforming healthcare practices to advance equity and honor parents, and their journey of shifting to an Early Relational Health frame to achieve that.





Wednesday, June 14 2 PM ET Live on Facebook and YouTube



Nurture Conversations June 2023 HealthySteps' Policy to Support Relationships

June's Nurture Conversations featured Johanna Lister, JD, MPH, and Jennifer Tracey, MHA, from HealthySteps at ZERO TO THREE. The conversation included discussion of the HealthySteps model and recent policy advancements at both the state and federal levels that support Early Relational Health.

Watch the Recording Here

relationships also help to protect the family from the harmful effects of stress.

Core ERH Resources

Frameworks Institute. <u>Building</u> <u>Relationships: Framing Early</u> <u>Relational Health</u>. Prepared in collaboration with the Center for the Study of Social Policy. May 2020.

Willis D, Chavez S, Lee J, Hampton P, Fine A. <u>Early</u> <u>Relational Health National</u> <u>Survey: What We're Learning</u> <u>from the Field</u>. Center for the Study of Social Policy. 2020.

Willis D, Sege R, Johnson
K. <u>Changing the Mindset:</u> <u>Foundational Relationships</u> <u>Counter Adversity with HOPE</u>.
(Blog) Center for the Study of Social Policy. May 2020.

Perspectives on ERH Video Series. <u>Perspectives on Early</u> <u>Relational Health Series</u>. Center for the Study of Social Policy. 2022.

Center of the Study of Social Policy and Health+ Studio. <u>How to</u> <u>Communicate Effectively About</u> <u>Early Relational Health: What It</u> Is and Why It Matters. 2022.

Find additional resources on our website.

What We're Reading and Listening

- Chaney, M. & Waters, J. (April 2023). What to expect as Gen Z starts to parent. Capita. <u>Read here.</u>
- Partanen, A. (June 2017). The Nordic Theory of Everything: In Search of a Better Life. <u>See book here.</u>
- Robertson, H., et al. (May 2023). Leveraging the Expertise of the Community: A case for expansion of peer workforce in child, adolescent, and family mental health. *International Journal of Environmental Research and Public Health.* <u>Read here</u>.
- Reeves, R. (September 2022) Of Boys and Men: Why the modern male is struggling, why it matters, and what to do about it. <u>See book here.</u>

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Contact info@nurtureconnection.org

The Center for the Study of Social Policy (CSSP), which conceived Nurture Connection, is a national, non-profit policy organization that connects community action, public system reform, and policy change to create a fair and just society in which all children and families thrive. We work to achieve a racially, economically, and socially just society in which all children and families thrive. To do this, we translate ideas into action, promote public policies grounded in equity, support strong and inclusive communities, and advocate with and for all children and families marginalized by public policies and institutional practices.



The Center for the Study of Social Policy | 1575 Eye Street, NW, Suite 500, Washington, DC 20005

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