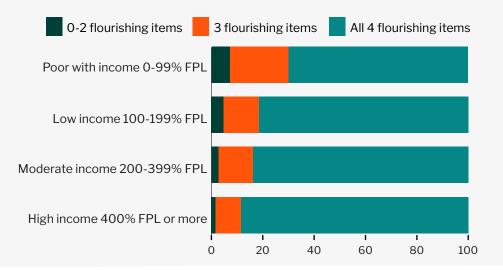
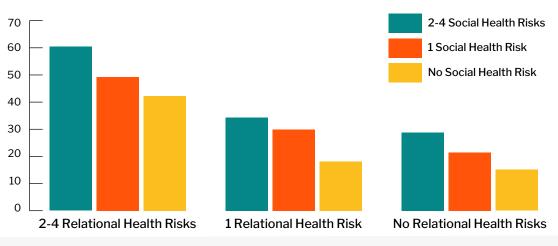
**Early Relational Health and Well-being** 

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)<sup>1</sup>



#### Mental-Emotional and Behavioral Conditions Among Children 3-17, by Relational and Social Health Risks<sup>2</sup>



#### Poverty Rate for Children Under 6, by Race/Ethnicity<sup>3</sup>



# 1/3 of the poor are children, the youngest are the poorest age group<sup>3</sup>

#### Maternal Depression Rates, by Race/Ethnicity<sup>4</sup>

## 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.

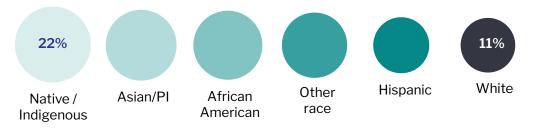
## Social & Relational Risks

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.

# **Parental Well-Being**



# **1 in 8** mothers report postpartum depression<sup>4</sup>

\*\*\*\*\* 1/2 of children under 5 have health care that meets criteria for a basic medical home<sup>1</sup>

45% of young children do not live in a neighborhood with social supports<sup>1</sup>

**86%** children 0-5 years live in families that report having resilience, strengths, and hope, even during difficult times<sup>1</sup>

The mental health of parents/ caregivers affects foundational relationships and ERH. Postpartum depression has a negative impact on mom and baby. While effective interventions exist, too many mothers experience undetected or untreated depression.

## **Medical Home**

Heath care is where families with young children are most likely to receive services. Yet only half even have a basic medical home. More high performing medical homes are needed to promote health and ERH.

## **Community Support**

We must listen to parents / caregivers to understand their needs and goals. Then, together, work to transform communities, systems, and policies, so every family can experience the well-being that grows from ERH.



www.nurtureconnection.org Conceived by the Center for the Study of Social Policy

\*Garner A, et a;/ Preventing Childhood Toxic Stress: Partnering With Families and Communities to Promote Relational Health. Pediatrics. 2021;148(2):e2021052582. https://doi.org/10.1542/peds.2021-052582

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