

Putting Principles into Action: Building an Early Relational Health Ecosystem

Charlyn Harper Browne, Junlei Li, Cailin O'Connor, Jenna E. Russo, and David Willis



Executive Summary

Early relational health is a paradigm that integrates science-based and experience-informed ideas, values, and practices which elevate the significance of the earliest attentive, responsive, nurturing, and reciprocal caregiver-child interactions in promoting children's healthy development and well-being.^{1,2}

Early relational health is not a new idea. It is grounded in and reflects decades of research in infant and early childhood mental health, pediatrics, neuroscience, and developmental science; professional practice across multiple disciplines and professional sectors; and the experiences and insights of generations of parents and caregivers from diverse cultures as well as helping professionals who work with young children and their families. What is new is integrating the breadth and rigor of cross-disciplinary academic scholarship with the richness and depth of cross-cultural wisdom and experiences. The early relational health paradigm brings expanded opportunities for early childhood policymakers, advocates, practitioners, and researchers to incorporate relational principles into the design of early-relational-health-promoting ecosystems, including everyday routines and specialized practices.

This report outlines the actionable implications of 10 foundational principles of the early relational health paradigm:

1. Nurturing caregiver-child interactions establish strong, meaningful, and enduring or consistent relationships and provide immediate and long-term benefits for both young children and their caregivers.
2. Simple and everyday human interactions are "good enough" early relational experiences.
3. Research and practice are strengthened by integrating family experience and cultural wisdom into the science of early childhood development.
4. Connectedness, belonging, and mattering are essential for parents.
5. The early relational health paradigm emphasizes the strengths and resources of parents and young children.
6. A social-ecological perspective enables a comprehensive focus on conditions, circumstances, and characteristics that advance or impede early relational health.
7. A broad range of helping professionals and community members can provide experiences which promote early relational health.
8. Collaborative decision-making and power-sharing between families and early relational health professionals can lead to better outcomes for children and parents.
9. Early relational health embraces diversity of practices and knowledge and resists reductionism about human development.
10. A society built on respectful and equitable relationships is a society in which all young children and their families can thrive.

¹ Nurture Connection. (2023). How to communicate effectively about early relational health: What it is and why it matters. A messaging guide. <https://nurtureconnection.org/resource/how-to-communicate-effectively-about-early-relational-health-what-it-is-and-why-it-matters/>

² Osher, D., Cantor, P., Berg, J., Steyer, L. & Rose, T. (2018). Drivers of human development: How relationships and context shape learning and development. *Applied Developmental Science*, 24(1), 6-36. <https://doi.org/10.1080/10888691.2017.1398650>