How to Communicate Effectively About Early Relational Health: What It Is and Why It Matters
A Messaging Guide
Dear Friends,

The past few years have starkly exposed the inequities in our society and systems that are perpetuated by discrimination and racism. Research shows that significant stressors, such as poverty, violence, or housing instability, may have negative effects on development, mental and physical health, social well-being, and family relationships. So how do we mitigate those stressors and, as a result, create healthier and safer communities for every child, youth, and family?

I believe that a focus on Early Relational Health offers one answer. Early Relational Health—or the state of emotional well-being that grows from the positive emotional connection between babies and toddlers and their parents/caregivers when they experience strong, positive, and nurturing relationships with each other—is critical to creating healthy families, healthy communities, and a healthy society. We recognize that there is wisdom in every culture and every family about the importance of the bonds of love and connection between children and their parents/caregivers. Early Relational Health honors and celebrates that long-held wisdom and the variety of ways these emotional connections look and feel across families, communities, and cultures.

Practitioners, researchers, clinicians, advocates, and families all know that significantly improving outcomes in young children's health and well-being will take much more than scaling one new evidence-based program or simply investing more money into the current system. To positively influence children's developmental outcomes at the population level, we must improve their family's well-being, the neighborhood context, and family and child policies.

But accomplishing this broader yet requisite objective will require movement building by forging unlikely partnerships around a shared purpose. Fortunately, an interdisciplinary movement around Early Relational Health is growing and gaining momentum. Early Relational Health is becoming more widely and urgently recognized as central to building the health, educational capacities, and social well-being of the next generation.

Our success in building a movement rests on the strength of our partnerships and effective communications to tell a consistent story and to amplify key messages. This guide is a tool to help the many voices supporting and working alongside young children and families speak the same language to spread awareness, spark interest, advocate holistically, and accelerate change.

Please use this guide to support the work you do with children, families, and communities. And join us as we create a movement to advance Early Relational Health in every community so all families can experience the emotional well-being and joy that come from those first days, months, and years of connecting and nurturing.

With an abundance of gratitude and appreciation,

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About the Early Relational Health Messaging Guide

Communication—what we say and how we say it—is critical for sparking change. When we communicate clearly in ways that make issues relevant to stakeholders, we open doors to creating common understanding, shifting mindsets, and motivating action.

This guide was developed to help people working with or on behalf of young children and families communicate more effectively and persuasively about the importance of Early Relational Health and to advocate more powerfully for policies and supports that are more responsive to the needs of families.

Users of this guide will find:

- A definition of Early Relational Health
- An overarching core story about why attention to Early Relational Health matters and how we can effect change
- Key messages for specific stakeholders
- Framing strategies and language that users can leverage to support their communications needs

This guide offers multiple ways a user can approach pulling the guidance and language they need from this guide. This includes tailoring the core story: 1) to their work or experience; (2) by audience; and (3) by framing strategy.

What is Early Relational Health?

Early Relational Health is the state of emotional well-being that grows from the positive emotional connection between babies and toddlers and their parents/caregivers when they experience strong, positive, and nurturing relationships with each other. Early Relational Health is foundational to children’s healthy growth and development and their parents’/caregivers’ sense of competence, connection, and overall well-being. These resilient and enduring relationships also help to protect the family from the harmful effects of stress.
Throughout the guide we use the concept “strong, positive, and nurturing relationships” instead of the established concept of “safe, stable, and nurturing relationships.” This change in terminology comes from the advice of our Early Relational Health Family Network Collaborative, which represents the perspective of 66 parents across the United States, who believe that the language of “strong, positive, and nurturing relationships” resonates more with families.

We recognize that a variety of people hold the responsibility of parenting or caring for young children. Throughout this guide, we use the term “parent/caregiver” to be inclusive of whomever acts as the primary caregiver to the child. We understand that this can take many different forms, including the parent, grandparent, foster parent, extended family member, or anyone else acting as a primary caregiver and/or guardian.
Who is this guide for?

This guide was created to support the communications needs of a broad range of professionals who support the health and well-being of young children and their families through community-based programs and services, the health system, or policy and advocacy. This may include family support providers, healthcare providers, parent leaders, early childhood system leaders, community advocates and leaders, home visitors, community health workers and doulas, researchers, educators, public discourse influencers such as the media, the philanthropic community, and policymakers, among others.

Why is this guide needed?

Words matter. To make the most impact, those of us working with and advocating for young children and their families need to use consistent framing and language.

Although Early Relational Health is not a new concept and its importance is supported by decades of research, it is a relatively new term. We can use this term to align how the many sectors across the early childhood field talk about the importance of positive emotional connections between young children birth to three years old and their parents/caregivers.

The term also serves to focus attention on early foundational relationships as an essential factor in positive health and development outcomes for an individual child.

Why should we use consistent messaging and framing?

When everyone uses the same key messages, we create a clear narrative that can engage and motivate leaders and policymakers to understand the fundamental issue and take action. Consistency also creates a shared base of language and understanding from which to participate in the conversation.

“Framing” refers to the choices we make in what we say and how we say it. Framing matters because it affects how people hear us, what they understand, and how they act.
The Core Story of Early Relational Health

What is a core story?

A core story ties together all the key points we need to create change by building a shared understanding and sense of urgency around an issue. It helps everyone make the same key points over and over again. The way one person tells a story may be different from the way someone else tells it, but the key points will be the same and everyone will come to the same understanding in the end.

**Story A**
The sky was blue, and the air was warm.

**Story B**
The sun was shining, and the trees swayed in a soft breeze.

**Key point:** It was a nice day.

Why do we need to tell the core story?

Stories help contextualize ideas and make ideas feel real. They help us make sense of how issues affect us. They make us interested in what can happen next. Most importantly, stories can broaden and shift our perspectives to help us see the world around us and those in it in a different light.

The core story about Early Relational Health gives communicators the key points to use to explain to anyone—healthcare providers, parents, caregivers, community builders, policymakers, and others—what Early Relational Health is, why it matters, what is getting in the way, and what we need to do to promote healthy early relationships in every community.

If we all tell the same core story, we can help everyone understand and address the same important points and challenges related to Early Relational Health.
The Core Story of Early Relational Health

Early Relational Health is the state of emotional well-being that grows from the positive emotional connections that babies and toddlers and their parents/caregivers experience with each other through everyday moments of caregiving and nurturing. Emotional connection—which comes from strong, positive, and nurturing relationships and can be restored after challenges or adversities—is fundamental for young children’s growth and development. Parents and extended family also experience joy, comfort, and meaning through positive activities like talking, playing, reading aloud, and singing together. These enduring relationships promote family resilience and protect children and adults from the harmful effects of stress.

All parents/caregivers know that positive connections with their children matter. However, social, racial, cultural, and economic injustices and challenges can overload families and communities, often taking a toll on parents/caregivers, young children, and their relational health. Because of barriers created by structural racism and a lack of policies designed to help families thrive, families do not have access to supports that are responsive to their needs.

To promote Early Relational Health in every community, we need to first listen to families to understand the challenges they are facing and what supports and services would work best for them. We must then work together with families to create a shared vision to transform our communities, systems, programs, and policies, so that each and every family can experience the emotional well-being and joy that develop during those first days, months, and years of connecting and nurturing.
### Breaking It Down: The Elements of the Core Story

#### Core Concepts
- Positive emotional connections between babies/toddlers + parents/caregivers
- Strong, positive, and nurturing relationships from birth
- Everyday caregiving activities such as talking, reading aloud, playing, and singing together

#### Why They Matter
- Baby/toddler healthy growth and emotional development
- Happier, healthier parents/caregivers and families
- Protections from harmful effects of stress

#### Barriers
- Racial, social, and economic injustices and challenges
- Lack of policies that ensure all families can thrive
- Supports that aren’t accessible or responsive to families’ needs
- Ineffective cross-sector coordination

#### Actions
- Engage in conversations with families to better understand challenges
- Identify what supports and services work best for them
- Create and implement a shared vision of transformed communities, systems, policies, programs
Diving Deeper: The Central Themes of the Core Story

How can promoting Early Relational Health integrate with different types of work? This section is intended to help a broad range of people who support the health, development, and well-being of young children and their families dive deeper into the components of the core story of Early Relational Health to better understand how to tell the story in a way that integrates with and supports their work.

Early Relational Health is fundamental to healthy early childhood development

All children need strong, positive, and nurturing relationships to grow and develop. These parent/caregiver-child relationships often begin at birth and are essential for healthy physical, cognitive, and emotional development. Strong relationships also buffer children from the effects of adversity and toxic stress and support resilience-building. In addition, healthy early relationships lay the foundation for children to build positive relationships throughout their lives.

For further reading:


Equity is critical to promoting Early Relational Health

Because Early Relational Health is important for every child and family, equitable access to Early Relational Health supports and resources is critical. Inequities in our society and systems, perpetuated by discrimination, racism, and poverty, can negatively affect health, well-being, and relationships, including between babies and toddlers and their caregivers.

In addition, biases can make it hard to see the strengths of families that look different from our own. For people working with young children and their families, it is important to recognize personal implicit biases, challenge racist policies and practices, and expose the root causes of disparate outcomes for children and families. Working to provide equitable, trauma-informed Early Relational Health supports and resources that acknowledge and respect cultural and community strengths and culturally different parenting practices can help close equity gaps. If one can center an appreciation of the human experience, recognizing the importance of individuals’ and communities’ social, cultural, political, ecological, and spiritual identities, we can move from a deficit mindset to an asset framework to support families to discover and strengthen their intrinsic relational capacities and strengths.

For further reading:


Early Relational Health creates a reciprocal benefit for the caregiver and child

Supporting Early Relational Health is not just good for babies and toddlers. Promoting Early Relational Health also benefits parents, family members, and other caregivers. The emotional connection babies and toddlers and their parents/caregivers experience can promote healing for the adult. Stable and nurturing relationships with very young children bring meaning, purpose, and happiness to their lives, positively affecting their mental health and well-being.

For further reading:


Early Relational Health comes from everyday moments of emotional connection between parents/caregivers and babies and toddlers

Promoting Early Relational Health involves supporting parents/caregivers as they learn about the importance of sharing positive, everyday activities and routines with their babies and toddlers from birth. These activities and routines help build the positive, nurturing relationships and provide opportunities for emotional connection that are essential for Early Relational Health. Activities can be as simple as playing, talking, and reading to babies and toddlers; regular routines can include bedtime activities and eating together that provide opportunities for eye contact, connection, and shared emotional moments. In addition, supporting parents/caregivers with practical strategies to help their child express and manage their emotions also strengthens the caregiver-child relationship.

For further reading:


Early Relational Health can facilitate societal change

With an Early Relational Health perspective, we can work to change or build systems and policies to support a more equitable society by advancing policies and practices that promote healthy parent/caregiver-child relationships and overall family well-being. Societal inequities, such as poverty, violence, or housing instability, can cause significant stress, which can negatively affect health, well-being, and family relationships. Understanding the connection between inequities, stress, and poor outcomes provides a pathway to addressing and fixing the root causes. Creating safer, more connected communities can mitigate the impact of these inequities and stressors. We also can help shift the dominant U.S. cultural narrative to one that balances valuing the individual while prioritizing supportive relationships and community cohesion and resilience.

For further reading:


Early Relational Health supports resilient communities

Implementing more inclusive, community-driven policies, programs, and community resources supports both Early Relational Health and the health of the broader community. The supports and buffers needed for building more resilient communities, such as access to affordable housing, social services, and living wages, overlap with those important for promoting stable, nurturing caregiver-child relationships from birth. Putting an Early Relational Health lens on the work we do in our communities can help create space for prioritizing the importance of early caregiver-child relationships.

For further reading:


How to Talk to Different Audiences About Early Relational Health

This section provides the user with more detailed messaging for specific audiences, including:

- Parents/Caregivers
- Healthcare providers
- Family support providers
- Policymakers
- Early childhood system leaders
- Public discourse influencers (including media)

Under each audience you will see the messaging goal; the key message or the single, central idea you want your audience to walk away with; supporting points for your key message to dive into greater detail depending on your audience and your goals; and tips for more effectively communicating with that audience.

The messages provide the conceptual direction and inspiration to allow users to craft the messages and evidence that will most effectively change perceptions and build support for Early Relational Health.

Parents/Caregivers

When we say “parent/caregiver”...

We recognize that a variety of people hold the responsibility of parenting or caring for young children. Throughout this guide, we use the term “parent/caregiver” to be inclusive of whomever acts as the primary caregiver to the child. We understand that this can take many different forms, including the parent, grandparent, foster parent, extended family member, or anyone else acting as a primary caregiver and/or guardian.
**Messaging Goal**

Engage parents/caregivers in a dialogue about the essential role of the early positive emotional connections they experience with their child for their children's healthy growth and development and lifelong health and well-being.

**Key Message**

Young children’s growth and development depend on the positive emotional connection that babies and toddlers and their parents/caregivers experience with each other. These early positive relationships also support parents'/caregivers’ overall well-being by giving them joy, comfort, and meaning and are developed through the daily activities and routines they share with their children.

**Supporting Points for Key Message:**

1. **ERH Serves as the Foundation for Children's Lifelong Health, Development, and Well-being:**
   - All children benefit from positive, strong, and nurturing relationships to grow and thrive.
   - Healthy relationships in the beginning years of a child’s life are the building blocks upon which they create a healthy and productive life and a bright future.
   - Positive emotional connection with their parents/caregivers creates the necessary footing for babies and toddlers to learn about and engage in the world around them.
   - The relationships children build in the first three years of their lives create the foundation for all healthy development, including healthy brain architecture, which supports their ability to learn and engage in positive behaviors into adulthood.
   - These early healthy relationships are key for laying the groundwork for children to build and cultivate positive relationships throughout their lifetime.

2. **ERH Is Achieved Through Everyday Caregiving:**
   - Parents/caregivers can support Early Relational Health through everyday activities, routines, and moments of connection.
   - Positive emotional connection between young children and their parents/caregivers is formed through meaningful daily routines like mealtimes or getting ready for bed, and when they are talking, playing, reading aloud, and singing together. Finding just a few moments every day to connect with their young child can make a world of difference.
   - Parents/caregivers have to balance a lot on a daily basis, and it is important to remember that we are all human and doing our best. Continuously maintaining a positive emotional connection with a child is not always possible. That said, an awareness of the importance of Early Relational Health promotes the repair and restoration of the positive emotional connection that children long to feel.
   - By taking care of their young children's daily needs and engaging with them through everyday routines, parents/caregivers are doing what's essential for building healthy relationships with their children. These simple interactions that include eye contact, touch, or being emotionally attuned to their child help promote Early Relational Health.
It is important to recognize and celebrate the unique strengths and cultural wisdom of all families. For many, these are sacred experiences. There is no single blueprint for how parents/caregivers can build positive emotional connection with their children through everyday moments.

3. ERH Supports the Whole Family’s Well-being:

- Positive emotional connection early in life shapes the well-being of the child, the parent/caregiver, and the whole family.
- The back-and-forth, two-way nature of healthy early relationships affects the health and well-being of all family members, both in the moment and long term.
- Positive emotional connection enables young children and their parents/caregivers to get in sync with each other and to develop a trusting relationship and delight in the bond that builds between them.
- Caregiving for their children brings in-the-moment joy and delight to parents/caregivers.
- Feeling those moments of connection can regulate a parent’s/caregiver’s stress and buffer stress for their children.

4. The Right Supports Can Help Parents/Caregivers and Families Experience ERH:

- Parents/caregivers understand the importance of building positive emotional connections with their children.
- Parents/caregivers need services and supports to help them take care of their families.
- Parents/caregivers must be partners in identifying their unmet needs and the best strategies for strengthening emotional connection with their children.
- Listening and partnering with families is required to transform systems, policies, and communities, and design services and supports that are responsive to the needs of families.
- All families need a network of trusted support. Promoting positive relationships and connections between family members and with others in their communities creates a sense of belonging and support that helps to lessen the load families are carrying.

When Communicating with Parents/Caregivers:

- **Start with** reinforcing the importance of healthy positive relationships for young children to grow and thrive.
- **Augment with** messages that validate and acknowledge families’ lived experiences—their strengths as well as the challenges.
- **End with** empowering them to advocate for their families’ needs as a path to building resilient, thriving communities.
Healthcare Providers

Our Messaging Recommendations

Our messaging recommendations for healthcare providers are informed by the policy statement Preventing Childhood Toxic Stress: Partnering with Families and Communities to Promote Relational Health, from the AAP Committee on Psychosocial Aspects of Child and Family Health, the Section on Developmental and Behavioral Pediatrics, and the Council on Early Childhood; available at https://doi.org/10.1542/peds.2021-052582.

Messaging Goal

Educate and motivate healthcare providers to support Early Relational Health in their practice by understanding that early positive emotional connections improve health and developmental outcomes for children, support the overall well-being of the family, and make clinical practice more rewarding and meaningful.

Key Message

Early Relational Health refers to the capacity to develop and sustain the strong, positive, and nurturing relationships that babies and toddlers experience with their parents/caregivers. These healthy early relationships build the health, educational capacities, and social well-being of the next generation as well as mitigate the effects of stress and promote resilience. For this reason, it is important for healthcare providers to center their medical care and relationship building with families around the promotion of Early Relational Health.
Supporting points for the key message:

1. ERH Builds Resilience and Buffers Against Adversity:
   - “The American Academy of Pediatrics asserts that safe, stable, and nurturing relationships (SSNRs) are biological necessities for all children because they mitigate childhood toxic stress responses and proactively build resilience by fostering the adaptive skills needed to cope with future adversity in a healthy manner.” (AAP Policy Statement, August 2021)
   - Early Relational Health is the state of emotional well-being between young children and their parents/caregivers, and these enduring relationships promote family resilience and protect children and adults from the harmful effects of stress.

2. ERH Serves as the Foundation for Children’s Lifelong Health, Development, and Well-being:
   - Early-life experiences, both nurturing and adverse, are biologically embedded and influence outcomes in health, education, and economic stability across the life span.
   - All children—but particularly those experiencing adversity—need strong, positive, and nurturing relationships to mitigate stress and grow and thrive.
   - A positive emotional connection with their parents/caregivers creates the necessary footing for young children to optimally learn about and engage in the world around them.
   - The relationships children build in the first three years of life lay the foundation for healthy development, including healthy brain architecture, which supports their health, learning, and behavior into adulthood.
   - These early healthy relationships are key for laying the groundwork for children to build and cultivate positive relationships throughout their lifetime.

3. ERH Supports Building Trusting Relationships with Families:
   - Promotion of Early Relational Health requires a strengths-based approach that recognizes that every family has strengths, resilience, and their own story. This requires providers to work uniquely with each family to find ways of providing the care and support that will work best for the families and meet them where they are.
   - It is important to recognize and celebrate the unique strengths and cultural wisdom of all families. There is no single blueprint for how parents/caregivers can build positive emotional connection with their children through everyday moments of caregiving and nurturing.
   - Taking an Early Relational Health approach in their practice may require providers to recognize their own biases to support all families. Providers can reflect on how they perceive the strengths and capacities of all families and their perspectives about partnering with families.
   - Building trusting relationships with all families can support the uptake of guidance and treatment.
4. Provider Benefits from ERH:

- Providers may feel a greater sense of purpose and meaning in their work when they focus their efforts on Early Relational Health and build trusting relationships with families.

- Through a “parallel process,” providers will be more effective in promoting Early Relational Health in their patients’ families if they develop strong, positive, and nurturing relationships with their patients’ parents and caregivers.

- The strong, positive, and nurturing relationships that providers develop with young families form a strong foundation for supporting those same families in times of distress and turmoil.

- Nurturing strong relationships and positive connections with families is professionally rewarding and helps support provider well-being.

5. ERH Advances Equity:

- Inequities in our society and systems, perpetuated by discrimination, racism, and poverty, can negatively affect health, well-being, and relationships, including between babies and toddlers and their parents/caregivers.

- Biases can make it hard to see the strengths of families that look different from our own or face different challenges than we have.

- Early Relational Health is explicitly anti-racist and guided by both science and cultural, historical wisdom.

- Providers working with young children and their families must overcome personal implicit biases, challenge racist policies and practices, and expose the root causes of disparate outcomes for children and families.

- Working to provide equitable, trauma-informed Early Relational Health supports and resources that acknowledge and respect cultural and community strengths and culturally different parenting practices can help close equity gaps.

- All families have the capacity for strength and resilience, particularly within the cultural context of relationships, but racism continues to be “in the groundwater” as a disruptive and unjust counterforce.

When Communicating with Healthcare Providers:

- **Start with** reinforcing the importance of strong, positive, and nurturing relationships for young children’s healthy growth and development.

- **Augment with** the science of resilience and that strong foundational relationships buffer against adversity and toxic stress.

- **End with** inspiring them to change their practice to prioritize trusted relationships with families and support the parent/caregiver-child relationship.
Family Support Providers

Messaging Goal
Help family support providers recognize that Early Relational Health is at the heart of their work with families. Early positive emotional connections between babies and toddlers and their parents/caregivers are not only foundational to children’s healthy growth and development, but also promote the well-being and resilience of the parents/caregivers and the broader community.

Key Message
The positive emotional connection babies and toddlers and their parents/caregivers experience with each other is essential for healthy child development and promotes the emotional well-being of the parent/caregiver and the family. Positive, strong, and nurturing relationships that young children, parents, and family members experience with each other lay the foundation for healthy and resilient communities where every child can thrive and reach their full potential.

Supporting points for the key message:

1. ERH Serves as the Foundation for Children’s Lifelong Health, Development, and Well-being:
   - Healthy relationships in the beginning years of a child’s life are the building blocks upon which they create a healthy and productive life and a bright future.
   - All children—but particularly those experiencing adversity—need strong, positive, and nurturing relationships to grow and thrive.
   - Positive emotional connection with their parents/caregivers creates the necessary footing for young children to optimally learn about and engage in the world around them.
   - The relationships children build in the first three years of their lives create the foundation for all healthy development, including healthy brain architecture, which supports their ability to learn and engage in positive behaviors into adulthood.
   - These early healthy relationships are key for laying the groundwork for children to build and cultivate positive relationships throughout their lifetime.

2. ERH Supports the Whole Family’s Well-being:
   - Positive emotional connection early in life shapes the well-being of both the child and the parent/caregiver.
   - The back-and-forth, two-way nature of healthy early relationships affects parents’/caregivers’ and children’s health and well-being, both in the moment and long term.
   - Positive emotional connection enables young children and their parents/caregivers to get in sync with each other and to develop a trusting relationship and delight in the bond that builds between them.
• Caregiving for their children brings in-the-moment joy and delight to parents/caregivers and can help regulate their own stress and buffer stress for their children.

3. ERH Supports Building Trusting Relationships with Families:

• Promotion of Early Relational Health requires a strengths-based approach that recognizes that every family has strengths, resilience, and their own story. This requires providers to work together with families to find ways of providing the care and support that will work best for the families and meet them where they are.

• It is important to recognize and celebrate the unique strengths and cultural wisdom of all families because there is no one blueprint for how parents/caregivers can build positive emotional connection with their children through everyday moments of caregiving and nurturing.

• Trust that each parent and caregiver can grow in their capacity to build relationships with their children. The professional-family relationship is built on this trust.

• Taking an Early Relational Health approach in their practice may require providers to recognize their own biases to support all families. Providers can reflect on how they perceive the strengths and capacities of all families and their perspectives about partnering with families.

• Building trusting relationships with all families can support the uptake of guidance and treatment.

4. ERH Mitigates the Impact of Adversity:

• Early Relational Health is the state of emotional well-being between young children and their parents/caregivers, and these enduring relationships promote family resilience and protect children and adults from the harmful effects of stress.

• Caregiving for their children brings in-the-moment joy and delight to parents/caregivers and can help regulate their own stress and buffer stress for their children.

• The supports and buffers needed for building more resilient communities, such as access to affordable housing, social services, and living wages, overlap with those important for promoting stable, nurturing parent/caregiver-child relationships from birth.

• Implementing more inclusive, family-driven programs and community resources supports both Early Relational Health and the health of the broader community.

5. ERH Advances Equity:

• Inequities in our society and systems, perpetuated by discrimination, racism, and poverty, can negatively affect health, well-being, and relationships, including between babies and toddlers and their parents/caregivers.

• Biases can make it hard to see the strengths of families that look different from our own or face different challenges than we have.

• Early Relational Health is explicitly anti-racist and guided by science and cultural and historical wisdom.
• Providers working with young children and their families must overcome personal implicit biases, challenge racist policies and practices, and expose the root causes of disparate outcomes for children and families.

• Working to provide equitable, trauma-informed Early Relational Health supports and resources that acknowledge and respect cultural and community strengths and culturally different parenting practices can help close equity gaps.

• All families have the capacity for strength and resilience, particularly within the cultural context of relationships, but racism continues to be “in the groundwater” as a disruptive and unjust counterforce.

When Communicating with Family Support Providers:

• **Start with** reinforcing the importance of positive emotional connection for the well-being of the whole family.

• **Augment with** mitigating the impact of adversities and promoting positive experiences through promoting Early Relational Health.

• **End with** inspiring them about how supporting Early Relational Health intersects with advancing health equity in communities.
Policymakers

Messaging Goal
Educate policymakers on the essential role that Early Relational Health plays in advancing health, development, and well-being for children and families and motivate them to advance policies that lessen the burden on families and support the building and nurturing of emotional connection between young children and their parents/caregivers.

Key Message
Many families face social, racial, cultural, and economic injustices and challenges that can overload families and take a toll on their relational health. Policymakers must seek to engage in dialogue and partner with families to develop and promote policies that reduce the stressors and remove the structural barriers that affect parents’/caregivers’ capacities and opportunities to develop strong foundational relationships with their babies and toddlers.

Supporting points for the key message:

1. ERH Supports the Whole Family’s Well-being:
   • Healthy relationships in the beginning years of a child's life are the building blocks upon which they create a healthy and productive life and achieve their full potential.
   • The relationships children build in the first three years of their lives create the foundation for future well-being, including healthy brain architecture, which supports their ability to learn and engage in positive behaviors into adulthood.

2. Remove the Barriers and Stressors Many Families Face that Get in the Way of ERH:
   • Inequities and challenges in our society and systems, perpetuated by discrimination, racism, and poverty, can negatively affect health, well-being, and relationships, including between parents/caregivers, babies, and toddlers.
   • Policies and strategies can reduce the burdens and stressors on parents/caregivers so that they have the time and space to focus on establishing and nurturing the essential healthy positive relationships with their babies and toddlers.

3. Investment in ERH Makes Connections Across Systems:
   • Many different types of policies can support and promote the foundational relationships that shape the health, development, and social and mental well-being of both the caregiver and the baby, perhaps for a lifetime.
   • Policy changes can offer unprecedented opportunities to reimagine our health, early childhood, economic, housing, and family-serving systems to reflect what children and families want and need.
4. ERH as a Recovery Strategy for COVID-19 and the Mental Health Crisis:

- COVID-19 has caused significant additional stress to millions of families with young children, especially those in under-resourced neighborhoods and communities. Virtually all families with young children are negatively affected by the pressures of the COVID-19 public health emergency.

- Funding for COVID relief efforts represents new investments in programs, services, and supports that can strengthen families and communities.

- Early Relational Health has positive impacts, improving health, mental health, and lifelong well-being. Investments in the mental health and well-being of young children and their families are also economic drivers—promoting economic mobility and self-sufficiency.

5. Supporting ERH Is an Investment in the Next Generation:

- Early Relational Health is essential for building the health, educational capacities, and social well-being of the next generation.

- Our nation’s greatest human resource is our next generation’s well-developed human capacities.

- Our nation can promote strong, positive, and nurturing relationships and environments that support families and communities, providing the opportunity to build health, protect from adversity, and heal those suffering from trauma and toxic stress.

6. ERH Advances Equity:

- Inequities in our society and systems, perpetuated by discrimination, racism, and poverty, can negatively affect health, well-being, and relationships, including between babies and toddlers and their parents/caregivers.

- Biases can make it hard to see the strengths of all families or that others face different challenges.

- Early Relational Health is explicitly anti-racist and guided by science and cultural and historical wisdom.

- Providers working with young children and their families must overcome personal implicit biases, challenge racist policies and practices, and expose the root causes of disparate outcomes for children and families.

- Working to provide equitable, trauma-informed Early Relational Health supports and resources that acknowledge and respect cultural and community strengths and culturally different parenting practices can help close equity gaps.

- All families have the capacity for strength and resilience, particularly within the cultural context of relationships, but racism continues to be “in the groundwater” as a disruptive and unjust counterforce. We must learn from cultural and historical wisdom that describes how healing and resilience are created through the power of community and relational health.
I. About the Early Relational Health Messaging Guide

II. The Core Story of Early Relational Health

III. How to Talk to Different Audiences About Early Relational Health

IV. Key Framing Strategies for Early Relational Health

V. Conclusion

When Communicating with Policymakers:

- **Start with** reinforcing the importance of Early Relational Health for young children's healthy growth and development and the well-being of the whole family.

- **Augment with** messages about the stressors and burdens families face that get in the way of building healthy early relationships.

- **End with** inspiring them about how supporting Early Relational Health connects the dots across policy silos to better promote the health and well-being of children, families, and communities.

The Current State of Parents and Young Children in the U.S.

- **21% of U.S. adults** experienced mental illness in 2020, and **20% of young children**, age 2-8, had diagnosed mental, behavioral, or developmental disorders.

- A recent RAPID-EC survey found that parents are struggling with well-being and emotional distress (42% of families) and this challenge was described more consistently than any other topic. This is also true across every demographic group—high income, lower income, White, Black, and Latinx (at least a third of families in each subgroup).

- 46% of Generation Z parents of young children in North Carolina said they are lonely and 25% of the parents surveyed felt they did not have anyone they could look to for parenting advice during their child’s earliest years, according to a new Capita Survey.

- A Cigna 2020 study of 10,000 adults in the U.S. found loneliness at epidemic proportions: 71% of Generation Z sometimes or always feel alone, compared to 50% of baby boomers. Generation Z are starting to become parents or are years away from having their first child.
Early Childhood System Leaders

**Messaging Goal**
To encourage early childhood system leaders to promote Early Relational Health as the lever for early childhood systems transformation to improve the health, development, and well-being of young children.

**Key Message**
The healthy early relationships babies and toddlers experience with their parents/caregivers are foundational to children’s healthy development and shape the parents’ and family’s overall well-being. Early Relational Health is the unifying concept that can drive early childhood system building, family engagement, and system coordination to ensure that every child can grow and develop in healthy ways and every family has the opportunity to thrive.

Supporting points for the key message:

1. **ERH Serves as the Foundation for Children’s Lifelong Health, Development, and Well-being:**
   - Healthy relationships in the beginning years of a child’s life are the building blocks upon which they create a healthy and productive life and reach their full potential.
   - All children—but particularly those experiencing adversity—need strong, positive, and nurturing relationships to grow and thrive.
   - Positive emotional connection with their parents/caregivers creates the necessary footing for young children to learn about and engage in the world around them.
   - The relationships children build in the first three years of their lives create the foundation for all healthy development, including healthy brain architecture, which supports their ability to learn and engage in positive behaviors into adulthood.
   - These early healthy relationships are key for laying the groundwork for children to build and cultivate positive relationships throughout their lifetime.

2. **ERH Supports the Whole Family’s Well-being:**
   - Positive emotional connection early in life shapes the well-being of both the child and the caregiver.
   - Positive emotional connection enables young children and their parents/caregivers to get in sync with each other and to develop a trusting relationship and delight in the bond that builds between them.
   - Caregiving for their children brings in-the-moment joy and delight to parents/caregivers and can help regulate their own stress and buffer stress for their children.

*How to Communicate Effectively About Early Relational Health*
3. ERH Respects Families’ Experiences and Strengths:
   • Promotion of Early Relational Health recognizes and celebrates the unique strengths and cultural wisdom of all families.
   • All families need a network of trusted support. Promoting positive relationships and connections between family members and with others in their communities creates a sense of belonging and support.

4. ERH Advances Equity:
   • Inequities and challenges in our society and systems, perpetuated by discrimination, racism, and poverty, can negatively affect health, well-being, and relationships, including between babies and toddlers and their parents/caregivers.
   • Policies and strategies can reduce the burdens and stressors on parents/caregivers so that they have the time and space to focus on establishing and nurturing healthy positive relationships with their babies and toddlers.
   • Biases can make it hard to see the strengths of families that look different from our own or face different challenges than we have.
   • Early Relational Health is explicitly anti-racist and guided by both science and family wisdom.
   • Providers working with young children and their families must overcome personal implicit biases, challenge racist policies and practices, and expose the root causes of disparate outcomes for children and families.
   • Working to provide equitable, trauma-informed Early Relational Health supports and resources that acknowledge and respect cultural and community strengths and culturally different parenting practices can help close equity gaps.
   • All families have the capacity for strength and resilience, particularly within the cultural context of relationships, but racism continues to be “in the groundwater” as a disruptive and unjust counterforce.

5. ERH Acts as a Lever for Systems Transformation:
   • Make Early Relational Health central to prevention, health promotion, and education services available to all families, as early as possible.
   • Early Relational Health can connect sectors, providers, and families to work as a team to strengthen the earliest relationships between babies and toddlers and their parents/caregivers.
   • Early Relational Health is a unifying concept that spans the early childhood system.
   • Many different types of policies, programs, and services can support and promote the foundational relationships that shape the health, development, and social and mental well-being of both the caregiver and the young child.
   • Policy changes can offer unprecedented opportunities to reimagine our health, early childhood, economic, housing, and family-serving systems to reflect what children and families want and need.
• Implementing more inclusive, community-driven policies, programs, and community resources supports both Early Relational Health and the health of the broader community.

**When Communicating with Early Childhood Systems Leaders:**

• **Start with** reinforcing positive early relationships as a core driver to young children’s health, development, and well-being.

• **Augment with** messages that Early Relational Health recognizes the importance of acknowledging and removing the barriers and stressors families face as well as leveraging the strengths they bring to the table.

• **End with** inspiring them to promote Early Relational Health as a framework to advance equity and create systems integration and transformation and deliver real and sustainable results for families.
Public Discourse Influencers (including Media)

**Messaging Goal**

Raise awareness and engagement with public discourse influencers to promote and expand the Early Relational Health movement by communicating a sense of urgency and timeliness.

**Key Message**

Given the stress and challenges that our nation's families are experiencing, we must prioritize the building of connections in our society. This begins with supporting and nurturing the earliest connections and relationships between babies and toddlers and their parents/caregivers that set the trajectory for lifelong health and well-being. A national movement to promote Early Relational Health is underway to ensure that all children develop their social, mental, and physical well-being for a more connected future.

**Supporting points for the key message:**

1. **Healthy Early Relationships Are Essential to the Child and Family’s Health and Well-being:**

   - Healthy relationships in the beginning years of a child's life are the building blocks upon which they create a healthy and productive life and a bright future.
   - The relationships children build in the first three years of their lives create the foundation for all healthy development, including healthy brain architecture, which supports their ability to learn and engage in positive behaviors into adulthood.
   - Positive emotional connection early in life shapes the well-being of both the child and the caregiver.
   - The back-and-forth, two-way nature of healthy early relationships affects parents'/caregivers' and children's health and well-being, both in the moment and long term.
   - Positive emotional connection enables young children and their parents/caregivers to get in sync with each other and to develop a trusting relationship and delight in the bond that builds between them.
   - Caregiving for their children brings in-the-moment joy and delight to parents/caregivers and can help regulate their own stress and buffer stress for their children.

2. **ERH Acts as a Response to the Difficulties Many Families Are Currently Facing:**

   - COVID-19 has caused significant additional stress to millions of families with young children, especially those in under-resourced neighborhoods and communities. Virtually all families with young children are negatively affected by the pressures of the COVID-19 public health emergency.
   - Many different types of policies, programs, and services can support and promote the foundational relationships that shape the health, development, and social and mental well-being of both the caregiver and the young child.
³. **ERH Creates a Paradigm Shift in the Importance of Relationships and Connection to Health and Well-being:**

- The science and cultural knowledge of human development clearly tells us that strong, positive, and nurturing relationships within supportive communities create the state of Early Relational Health.
- Given the reality of our times, the stress and challenges that our nation’s families are experiencing, and the need for connection and healing, the Early Relational Health movement has never been more urgent.
- With an Early Relational Health perspective, we can work to change or build systems and policies to support a more equitable society by advancing policies and practices that promote healthy parent/caregiver-child relationships and overall family well-being.
- Early Relational Health can help shift the dominant U.S. cultural narrative to one that balances valuing the individual while prioritizing supportive relationships and community cohesion and resilience.

**When Communicating with Public Discourse Influencers (Including Media):**

- **Start with** naming the Early Relational Health concept and explaining the importance of healthy early relationships.
- **Augment with** messages to reinforce that to support children we must support parents/caregivers.
- **End with** a call to action about mobilizing a movement with the potential to improve the health and well-being of each and every child.
This guide is grounded in the research and findings in *Building Relationships: Framing Early Relational Health*, a FrameWorks Institute strategic brief that was developed in collaboration with the Center for the Study of Social Policy with support from the Perigee Fund.

The following framing strategies were summarized from *Building Relationships: Framing Early Relational Health*, a FrameWorks Institute strategic brief.

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<th>Recommendation</th>
<th>Why it works</th>
<th>Ready-to-use language</th>
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| 1. Explain the concept of “foundational relationships” to communicate that relationships are central to future development, health, and well-being. | Sparks discussion about the positive ways the relationships we have early in life set the stage for our long-term health and well-being. | • Just as a strong foundation supports a sturdy house, healthy early relationships between babies and toddlers and their parents/caregivers matter for future healthy development.  

• Strong and stable relationships between babies/toddlers and parents/caregivers are the building blocks for healthy development and well-being.  

• When we focus on this foundation and support these relationships, children and their parents/caregivers thrive—now and in the future.  

• The relationship between babies/toddlers and parents/caregivers is at the center of the critical activities that support healthy development, from play to reading. |
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<td>2. Make it clear that early means early.</td>
<td>Keeps the discussion focused on the earliest months and years of life (vs. preschool- and school-aged children) as a critical time for forming relationships.</td>
<td>• It starts at birth: Babies’ and toddlers’ relationships with their parents/caregivers, from the moment they’re born, are critical to their development.</td>
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<td></td>
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<td>• When babies and toddlers have strong relationships with their parents/caregivers starting from birth, it benefits their health, development, and well-being.</td>
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<td>• Before they can even crawl, babies need strong, stable relationships with their parents/caregivers to support healthy development.</td>
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<td>3. Show adults participating in, and benefitting from, relationships.</td>
<td>Makes the connection that parents and other caregivers, who are critical to the baby/toddler’s healthy development, need support too.</td>
<td>• Strong early-life relationships between babies/toddlers and parents/caregivers benefit the well-being and health of both the child and caregiver.</td>
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<td></td>
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<td>• The everyday ways parents/caregivers interact with their babies/toddlers, such as playing, talking, and reading, are key to supporting healthy development.</td>
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<td></td>
<td></td>
<td>• Foundational relationships between babies/toddlers and parents/caregivers build strong bonds and bring mutual benefits for health and well-being.</td>
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<td>• Supporting the well-being of parents/caregivers is essential for strong caregiver-child relationships.</td>
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| 4. Use the value of “Inclusive Opportunity” to talk about equity. | Focuses attention on the racist and structural barriers that prevent healthy relationships from forming in families and redirects the conversation to supportive policies and practices. | • Everyone should have what they need to experience healthy relationships, but many families and communities do not.  
• We need more inclusive policies, programs, and community resources to make sure everyone can create and sustain strong early-life caregiver-child relationships. |
| 5. Use the “overloaded” metaphor to explain the impact of systemic inequalities on the development of healthy relationships. | Focuses the discussion on external factors that hamper parents’/caregivers’ capacity to care for their children. | • Just as a boat can hold only so much weight before it sinks, parents/caregivers can be weighed down by difficult life circumstances, which makes it hard for them to spend quality time with their children.  
• If we can help take some of the weight and stress off by providing community supports and services to counter systemic factors and inequalities outside of parents’/caregivers’ control, parents/caregivers can have more capacity for developing stronger relationships with their children. |
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<td>6. Avoid deterministic language and emphasize parents’/caregivers’ self-efficacy and resilience.</td>
<td>Breaks through deterministic and fatalistic ways of thinking (it’s too late to change); and helps boost parents’/caregivers’ sense of agency and hopefulness.</td>
<td>• People are incredibly resilient. With equitable and responsive supports, safe and stable environments, and supportive communities, families can thrive despite challenging life circumstances.</td>
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<td>7. Share examples about what changes when relationships are central.</td>
<td>Creates a shared vision for positive change and gives concrete examples of what changes look like in practice.</td>
<td>• Building families’ resilience and strength allows relationships between children and parents/caregivers to thrive. • Strong and stable caregiver-child relationships are powerful engines for healing and growth.</td>
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<td>Include 3 key elements:</td>
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<td>• Current state: Description of an existing system or practice where relationships are not taken seriously or are not central. • Action: Explanation of how the implementation of an Early Relational Health perspective would change that system or practice. • Outcome: Statement about how outcomes will improve once an ERH perspective is adopted into an existing system or practice.</td>
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### Recommendation

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| 8. Emphasize that relationships are intrinsically rewarding and gratifying. | Using messages that highlight the immediate joy and pleasure of building caregiver-child relationships motivates change. | • Strong early-life relationships between babies/toddlers and parents/caregivers not only support a child’s development but also playing together and interacting is fun—providing joy, happiness, and delight for both.  
• Bonding with babies/toddlers is a wonderful experience. It can bring joy, happiness, and meaning for both parents/caregivers and children. |
Conclusion

The goal for this communications tool is to provide evidence-informed and actionable guidance that is easily accessible for anyone working to promote Early Relational Health. We took a deeply collaborative and iterative approach to developing this guide, basing the approach, messaging, and framing on the authentic experiences of the families and other experts we spoke with in numerous interviews, input sessions, and reviews.

This guide is grounded in the research and findings in Building Relationships: Framing Early Relational Health, a FrameWorks Institute strategic brief that was developed in collaboration with the Center for the Study of Social Policy with support from the Perigee Fund.

In addition, we are grateful to the many people who contributed their expertise and experience to this guide, including the ERH Family Network Collaborative, which brings the perspective of parents across the United States, with special thanks to Bryn Fortune, who facilitates this group. In addition, the ERH National Network shared its scientific and research expertise, with special recognition to Andrew Garner, MD, PhD, FAAP, Case Western Reserve University; Junlei Li, PhD, Harvard Graduate School of Education; Alan L. Mendelsohn, MD, New York University School of Medicine and Bellevue Hospital Center; and Robert Sege, MD, PhD, Tufts Children’s Hospital. To Moira O’Neil, PhD, FrameWorks Institute, for bringing her framing research expertise. To the EC-LINC network, which shared its systems perspective, with special thanks to Patsy Hampton, Center for the Study of Social Policy. Next, to our colleagues leading the Strengthening Families initiative at the Center for the Study of Social Policy, Cailin O’Connor and Charlyn Harper Browne. To our colleague Wendy Ellis, DrPH, George Washington University, who brings the resilient communities perspective. And finally, to Dayna Long, MD, UCSF Benioff Children’s Hospital Oakland; Kay Johnson, Johnson Consulting Group; Ira Hillman, Einhorn Collaborative; and Nikki Shearman, PhD, Reach Out and Read, for their leadership in the Early Relational Health movement building work.

Closing Thoughts

We developed this guide as a tool for the field, and we encourage you to utilize language and ideas from this guide to support the work you do.

As the work evolves and communications needs shift, we will continue to produce new iterations of this guide. While messaging continuity is important, evolution is natural as efforts progress and expand to include new audiences and new priorities.

Feedback is welcome; we hope you will let us know your experience using the guide and how we might improve it to support your needs. You can email us at ERH@cssp.org.

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