

Early Relational Health: Principles and Applications

The vision of Early Relational Health recognizes both the *universal needs* of children and families and the *unique practices and partnerships* essential in each community. Through conversations with families and professionals, we identified principles that are universally applicable while not prescribing one-size-fits-all solutions for families and communities. Here is a summary:

OVERARCHING PRINCIPLE

Embedding Equity within Early Relational Health

Equity of participation, resources, supports, and opportunities is both a goal and process for Early Relational Health initiatives.

Applications to Practice and Program:

- Engage, recognize, and compensate families for their knowledge, participation, and leadership in developing initiatives, improving programs, and deciding investments.
- Balance evidence-based interventions with community-based strategies to adapt to and meet the diverse needs of families and communities.



PRINCIPLE 1 Trust Parents

Effective Early Relational Health interventions trust that all parents want to, are capable of, and strive to provide the care their children need.

Applications to Practice and Program:

- Reframe communication and messages away from family and community deficits to strengths and assets.
- Focus professional practice and programming on identifying, affirming, and strengthening the knowledge, skills, and capacities families already have.



PRINCIPLE 2

Focus on Simple, Everyday Interactions

Simple, everyday human interactions are the essential building blocks of Early Relational Health.

Applications to Practice and Program:

- Help parents recognize the impact of simple, ordinary moments with children.
- Create opportunities for trusted professionals to observe and affirm families' everyday, routine interactions.



PRINCIPLE 3

It Takes a Village to Raise a Child

All families and children need and benefit from familial, community, and professional supports and resources.

Applications to Practice and Program:

- Develop messaging and communication approaches to normalize all families' need for social and relational supports.
- Cultivate and invest in formal and informal networks of support among parents and community members.
- Recognize and support parent and community leaders who serve as important connectors and hubs for families.





PRINCIPLE 4

Meet Families Where They Are

A robust system to promote Early Relational Health must identify and meet families across a range of geographical, logistical, and developmental touchpoints.

Applications to Practice and Program:

- Locate and integrate services in places where families already visit and trust.
- Adapt flexibly to families' evolving needs rather than imposing one-size-fits-all interventions.



PRINCIPLE 5

Build Parallel Relationships

A child needs trusted, reciprocal, and responsive relationships to grow in a healthy way, as do the parent and caregiver and the professionals who support them.

Applications to Practice and Program:

- Develop and integrate relational principles into professional practice – whether in direct service, professional development and supervision, program management, or grantmaking – that are congruent with the broad vision of relational health.
- Build communities of practice with professionals across service sectors, roles, and credentials.

Braiding Together Principles of Early Relational Health Practice

