

Roots of Resilience



Building Strong Foundations Through Early Relationships

Public Health Grand Rounds, April 15th, 2025

Lis Pordes, MD, MPH

Sr Health Manager Prenatal to Five Initiative, Health Department



Dr. Mildred (Millie) Stahlman
(1922-2024)
Neonatologist
Vanderbilt University



Not a new concept, just new **framing**



How could a focus on ERH improve the current & future health of people in our county?

How Early Relationship

SRFH 40% of teens in CMS surveyed felt sad or hopeless almost every day for 2 weeks (2)

Asthma is the leading cause of chronic-disease related school absenteeism (3)



YOUNG CHILDREN

who experience consistent and responsive interactions with caregivers have shown improved outcomes, including:

- Easier management and regulation of emotions
- Increased displays of positive emotions and decreased anxiety
- Increased ability to identify more complex emotions
- Increased ability to empathize with others

Well-Being



CAREGIVERS

who engage in responsive caregiving interactions with their young children have shown improved outcomes, including:

- Easier regulation of feelings of pleasure, satisfaction, and love
- Increased social understanding
- Decreased symptoms of maternal anxiety
- Decreased symptoms of depression

20% of adults in MC reported mental health not good for 8 or more days/month (1)

- Strengthened immune system
- Decreased risk for asthma, respiratory infections, and cardiovascular disease
- More consistent physical exercise
- Healthier eating and sleep habits

Health

- Increased cardiac health
- Increased stress resilience
- Quick recovery from infections
- Heightened serotonin

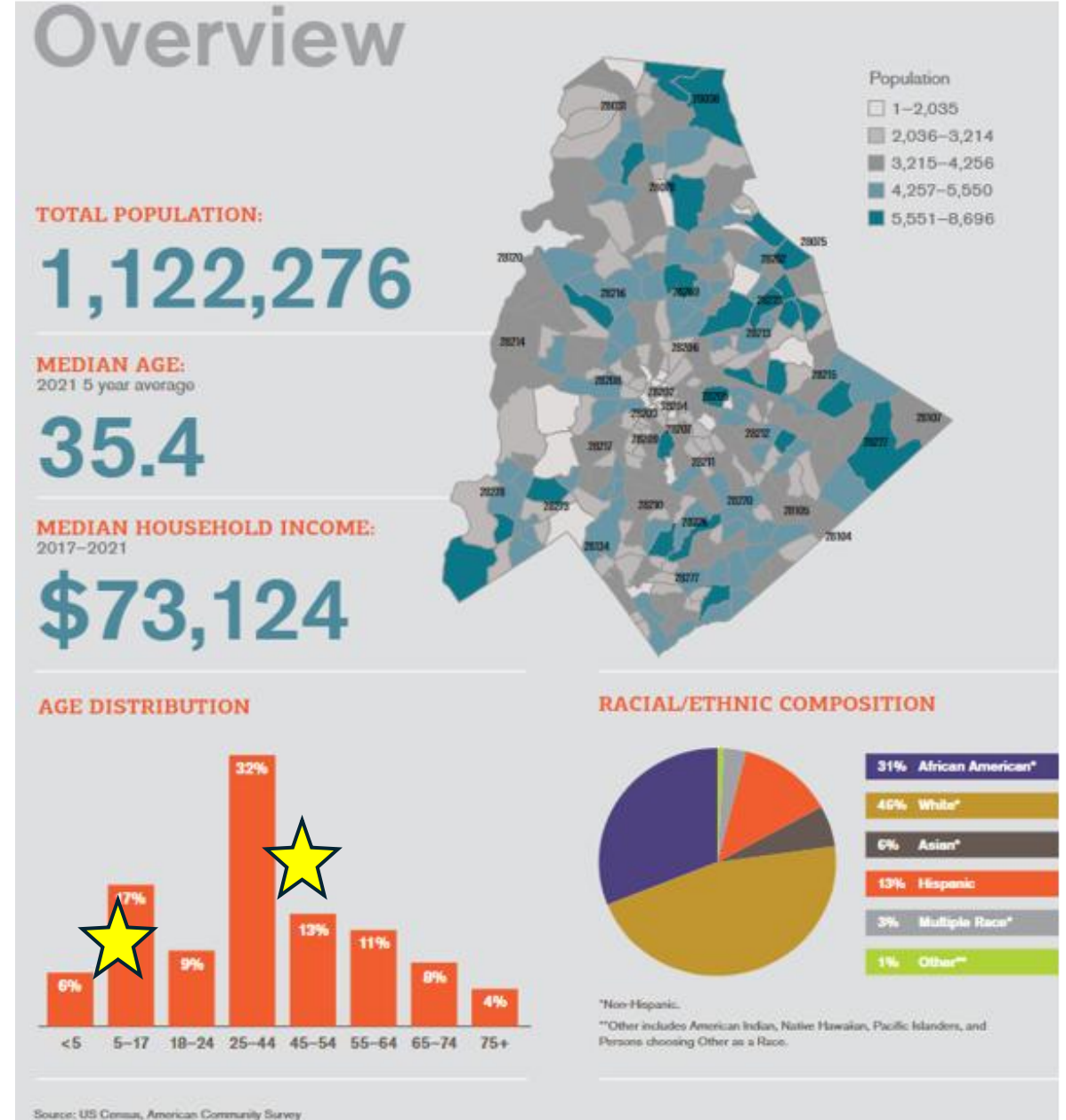
Cardiovascular disease is leading cause of mortality for adults in MC (1)

Why are we talking about this? **reach**

~ 15,000 babies born yearly

~ 460,000 reproductive age adults (18-44)

~ 72,000 kids < 5 yrs

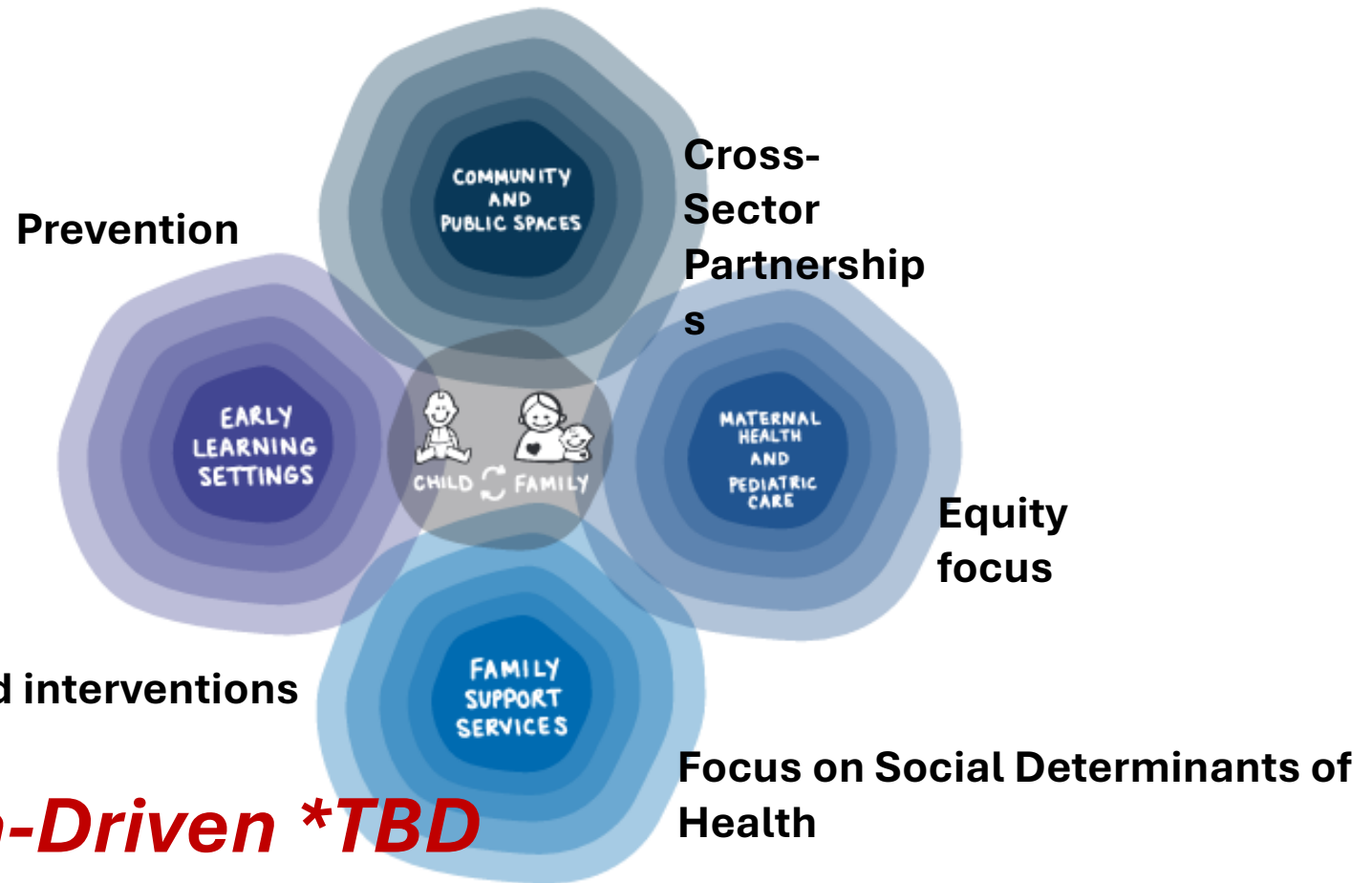


ERH Framework and Public Health 3.0 Overlap

FIGURE 6

Early Relational Ecosystem

Public Health 3.0:
emphasizes **collaborative engagement** and actions that directly affect the **social determinants of health inequity**.



Policies, Structures, Funding, to support an equitable system

Chief Health Strategist

The rippling impact of such a cohesive and connected network of quality programs and services enhances children's development, families' well-being, and the health of the entire community.

APRIL 11-17, 2025

HEALING LEGACIES: STRENGTHENING BLACK MATERNAL HEALTH THROUGH COLLECTIVE ACTION AND ADVOCACY



Maternal Health Conference April 17th, 2025



**Healing Root Stressors for Black
Maternal Health April 16th**



“To build public support for change, we do not need a new term, we need to tell a new story—one that changes the dominant narrative from “relationships are nice to have” to “relationships are fundamental.”

FrameWorks, Framing Early Relational

Let's have some fun!

Elisabeth.Pordes@Mecklenburgcountync.gov

A father having a conversation with his babbling baby boy about the 'Empire' finale broke the internet



By [Amir Vera](#), CNN

🕒 2 minute read · Updated 11:26 PM EDT, Fri June 7, 2019



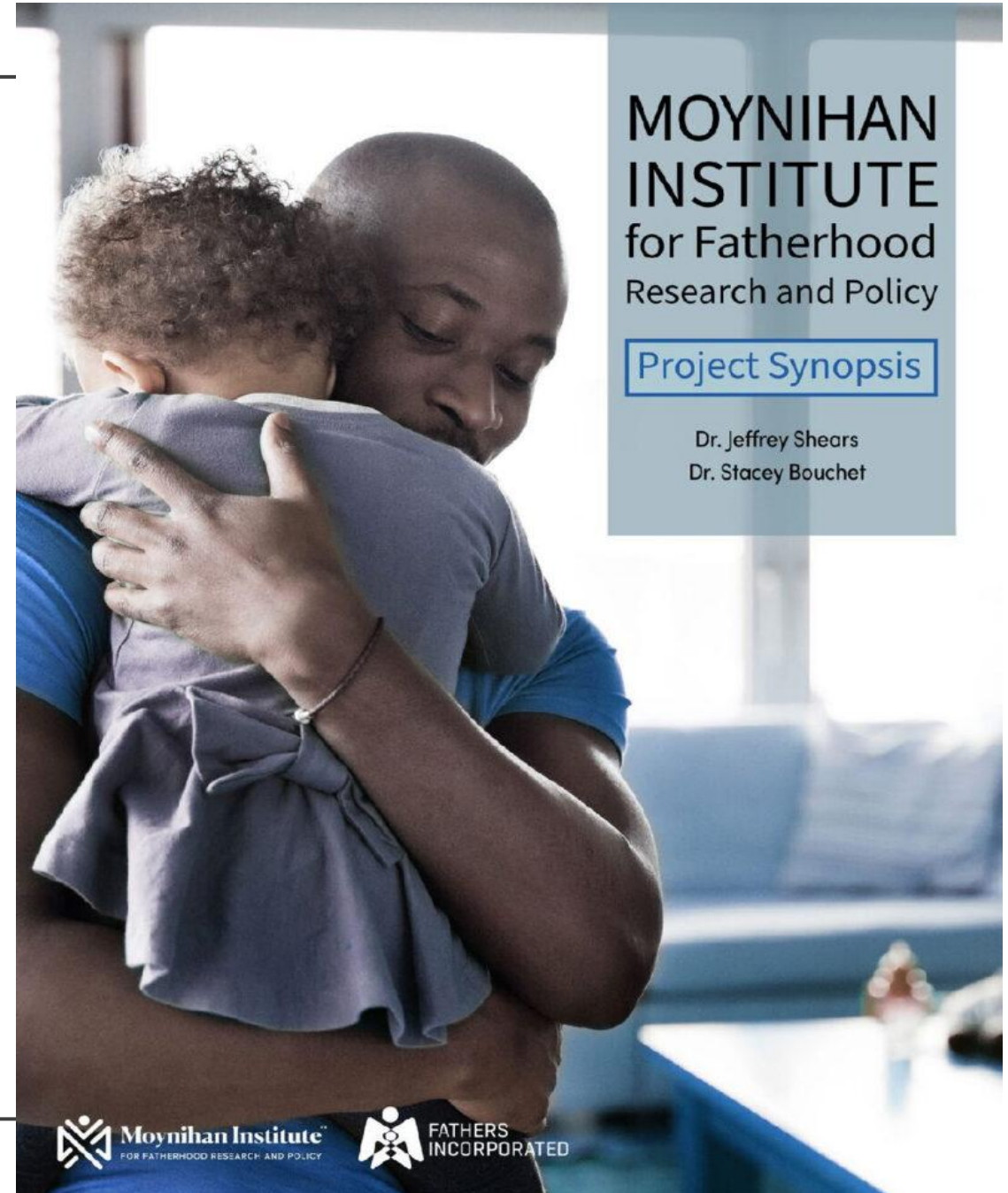
The Vital Role of Fathers in early infant development

Dr. Jeffrey Shears, Ph.D.
Co-Chair of Moynihan Institute
University of North Carolina at Charlotte
School of Social Work

MOYNIHAN
INSTITUTE
for Fatherhood
Research and Policy

Project Synopsis

Dr. Jeffrey Shears
Dr. Stacey Bouchet

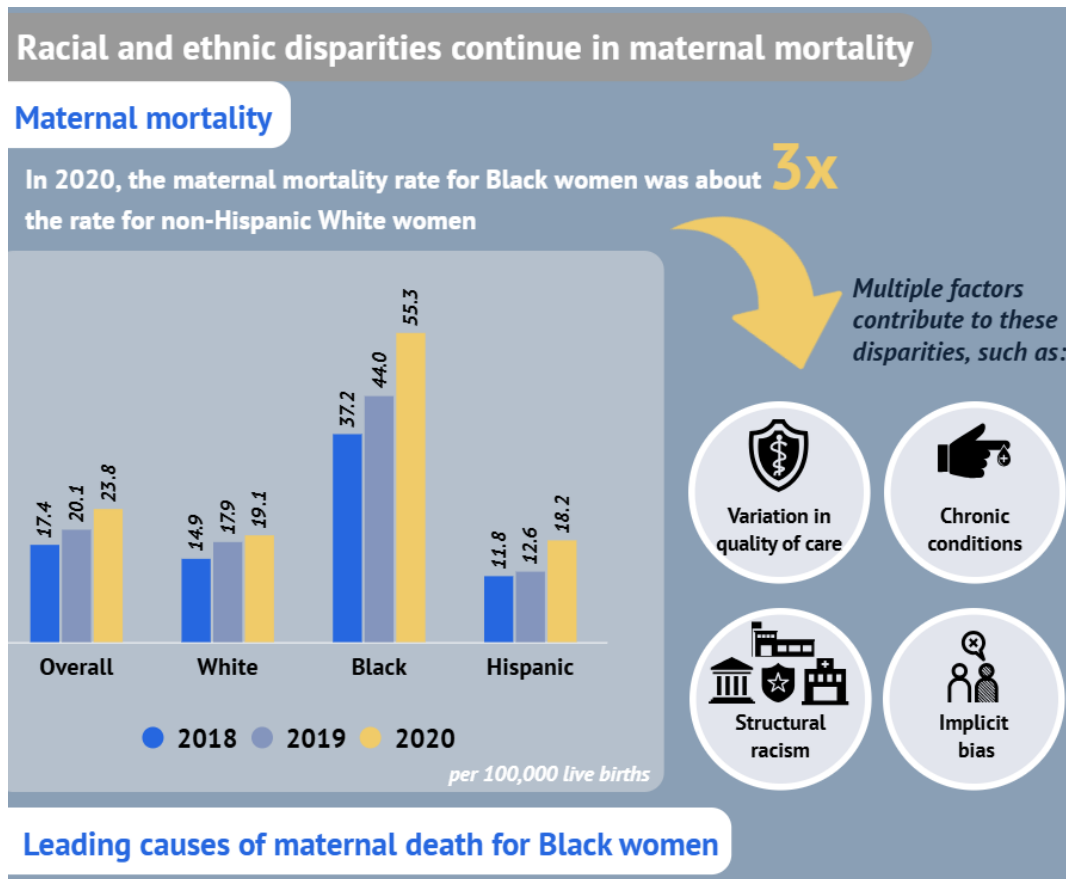


Moynihan Institute
FOR FATHERHOOD RESEARCH AND POLICY



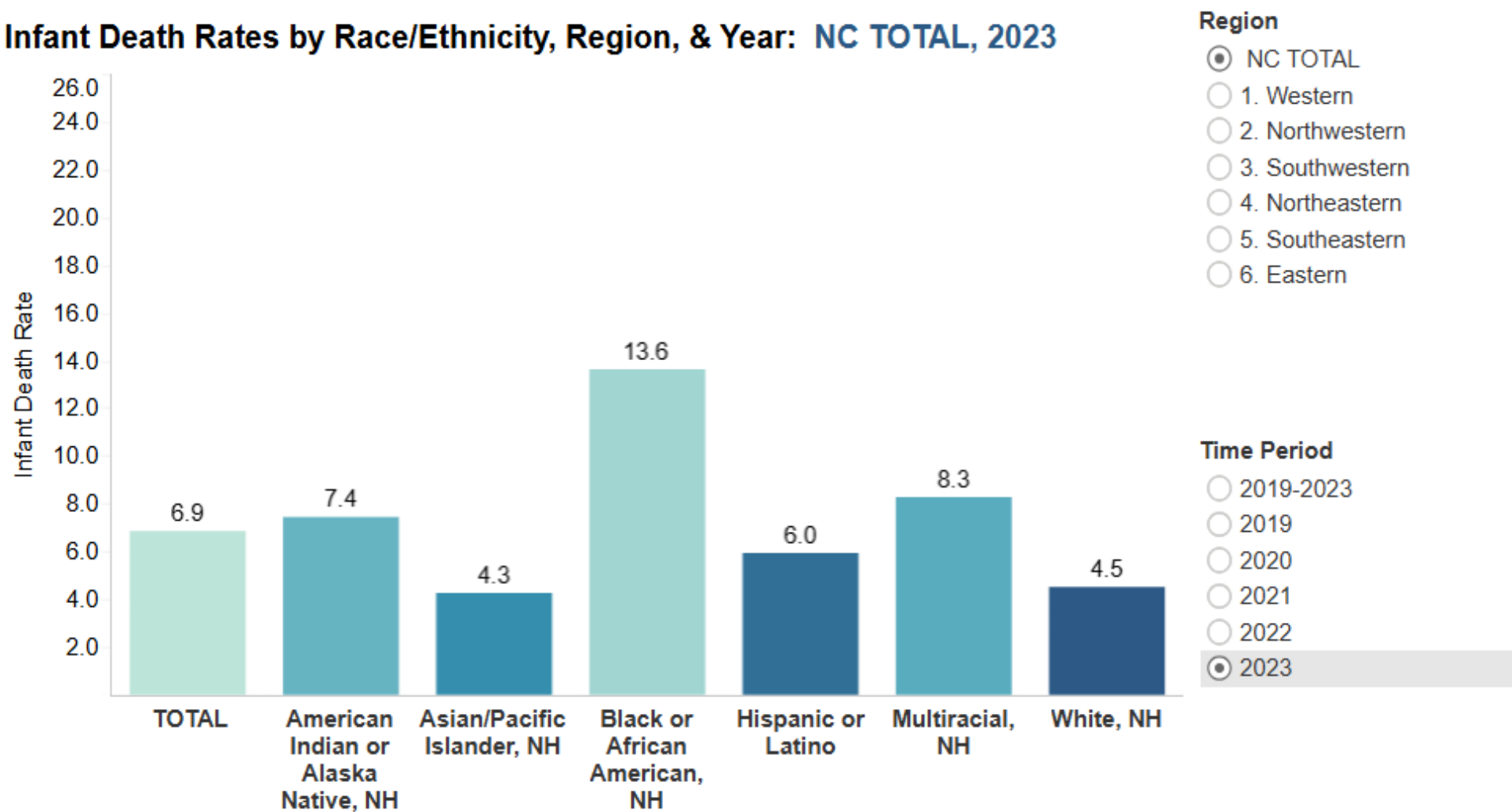
FATHERS
INCORPORATED

Current Mortality Trends for Infants in the U.S.

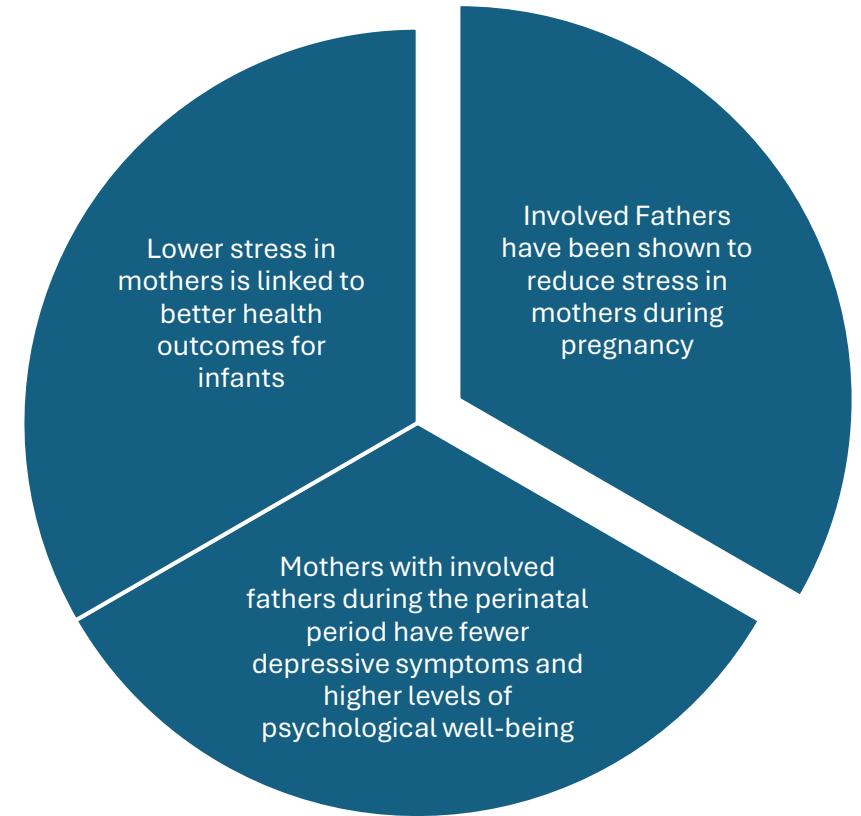
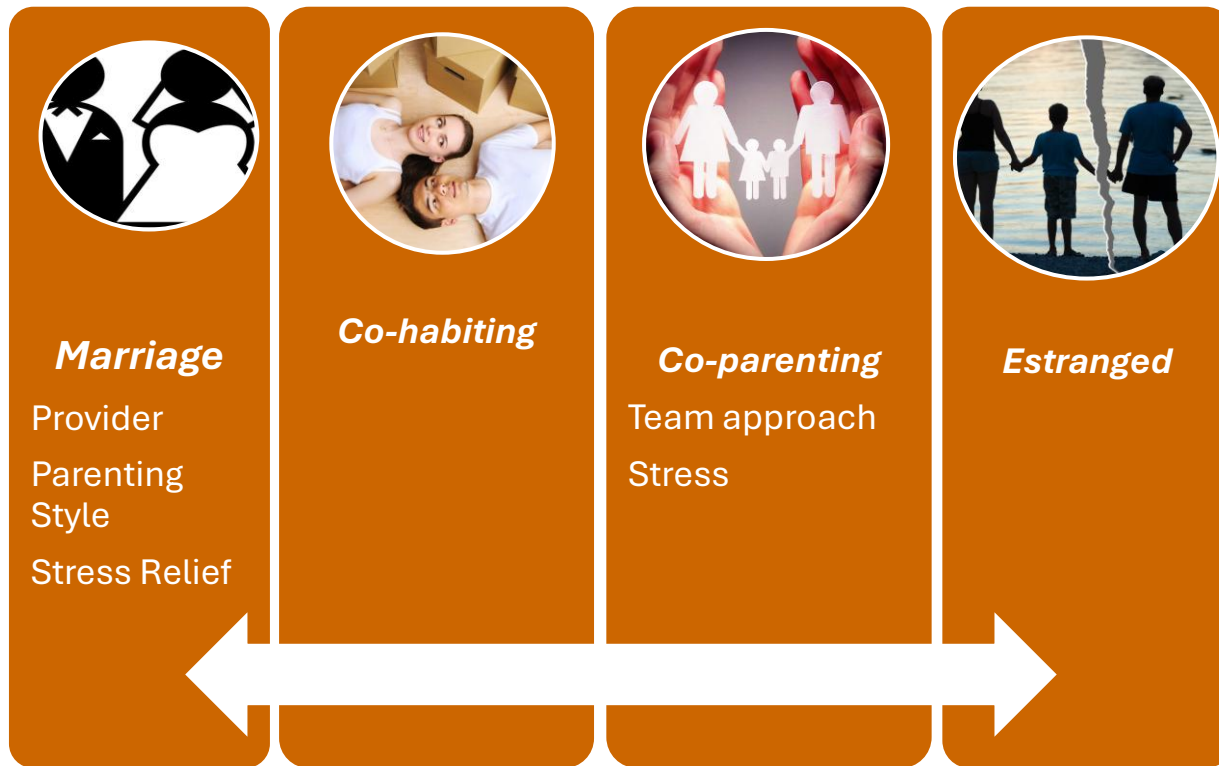


- North Carolina currently ranks 10th out of all 50 states for the highest infant mortality rates
- Black infants have the highest mortality rate of all infants in NC at 12.1 deaths per 1000 live births
- Black mothers also face higher rates of mortality, being 2.6 times as likely to experience fatal birthing complications when compared to White mothers.

Infant Death Rates by Race/Ethnicity, Region, & Year: NC TOTAL, 2023



Fathers as support for Mother & Children



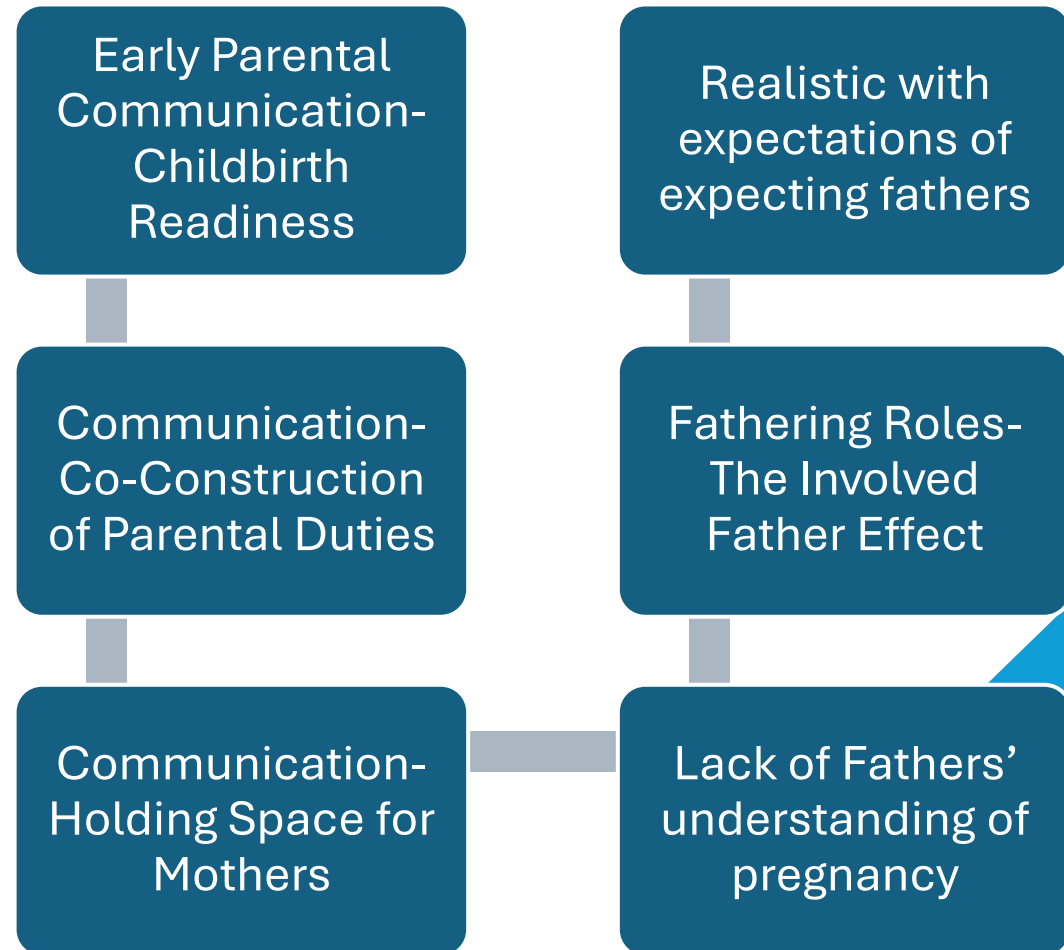
Vogel, C. A., Bradley, R. H., Raikes, H. H., Boller, K., & **Shears, J. K.** (2006). Relation Between Father Connectedness and Child Outcomes. *Parenting*, 6(2–3), 189–209.

Shears, J. K. (2007). Understanding differences in fathering activities across race and ethnicity. *Journal of Early Childhood Research*, 5(3), 245–261.

Boller, K., Bradley, R., Cabrera, N., Raikes, H., Pan, B., **Shears, J.**, & Roggman, L. (2006). The Early Head Start Father Studies: Design, Data Collection, and Summary of Father Presence in the Lives of Infants and Toddlers. *Parenting*, 6(2–3), 117–143.

Fathers' Role in Supporting Black Mothers During the Perinatal Period

Barriers to Father involvement, including systemic systems in Healthcare and Social Work, as well as interpersonal barriers within the family unit



Fathering ain't Mothering

Fathers engage in rough and tumble play that helps to teach children how to regulate their emotions and behavior

Children of Fathers who engage in active play from infancy have higher IQs, better social skills, and perform better academically

Shears, J. K. (2007). Understanding differences in fathering activities across race and ethnicity. *Journal of Early Childhood Research*, 5(3), 245-261.

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The Involved Father Effect

Despite all the data pointing to the fathers' importance in health outcomes for mothers and children, little is known about the needs of fathers or how to further engage them

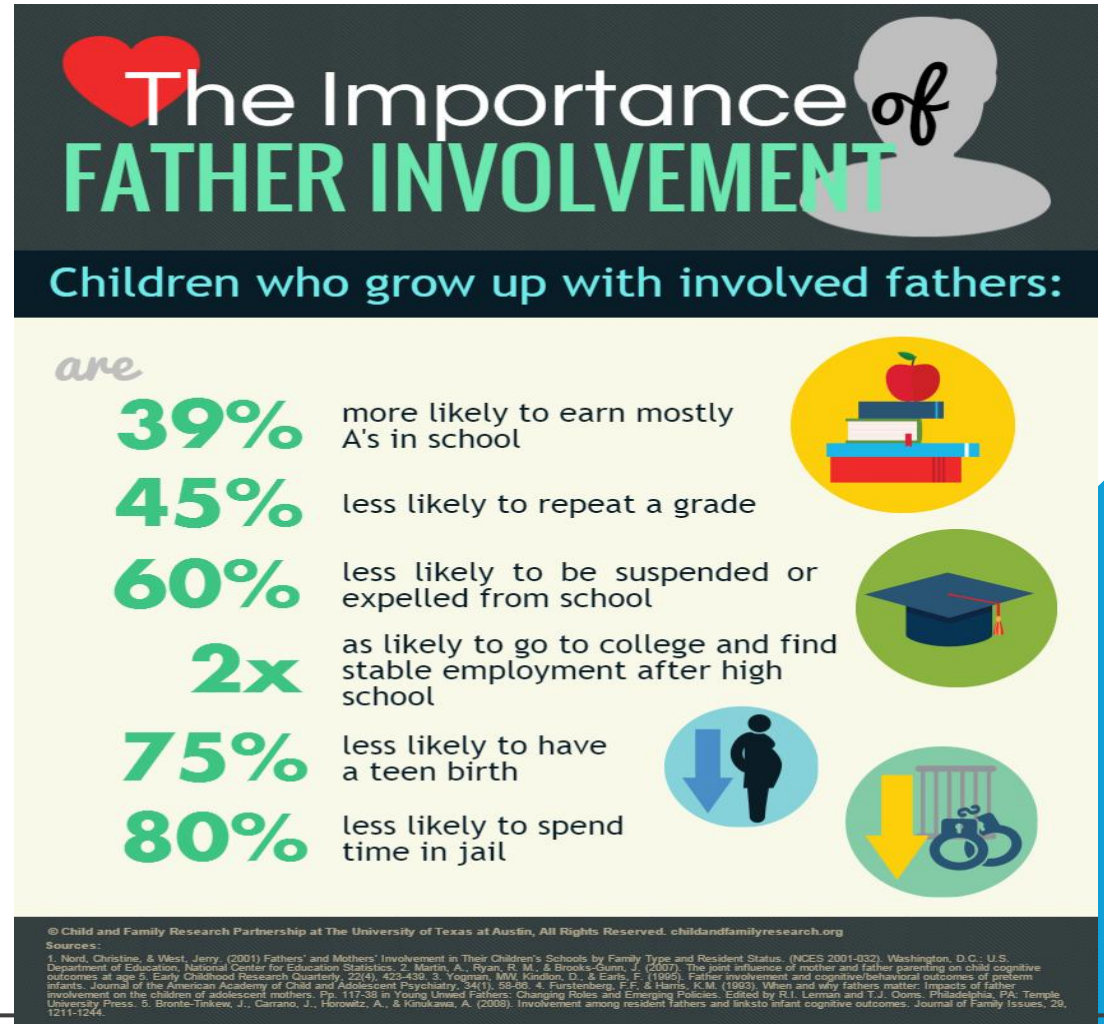
Most historical research focused on maternal outcomes and did not address paternal outcomes

Positive emotional wellbeing

Protective factors for girls

Self-concept in boys

Intergenerational impact of fathering



The Experiences and Needs of Atlanta's Young NPU-V Black Fathers: An Exploratory Study

Lack of resources for fathers

Trouble accessing existing resources and services

Lack of community support

“We do not have the community supports to be the type of fathers we want to be”



Encouraging Father Engagement

01

Studies show fathers are more likely to engage in services if their initial contact is male

02

Centering services around father engagement

03

Education on the importance of fathering and the role of fathers in their children's lives



How to Support Fathers

Better support for fathers



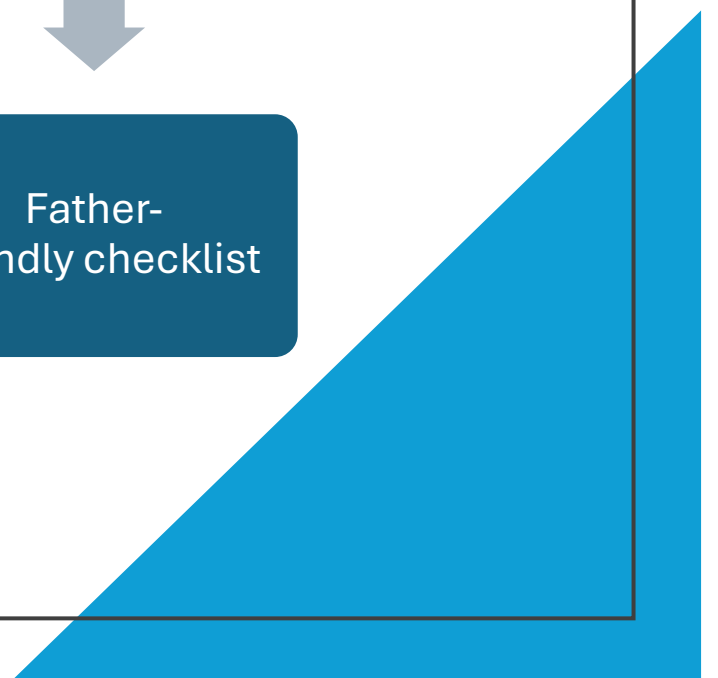
Better training of students and professionals



Training - how to increase your capacity to work with fathers



Father-friendly checklist



Study Participants Needed

Researchers at UNC Charlotte are looking for participants to share about **Black mother's experiences with fathers' support during pregnancy**. We want to understand how to increase father support and provide services.

Who can participate?

- Black Mothers - with a child under 3
- Fathers
- Both parents will separately receive compensation
- Participating individuals should live in the Charlotte Metro Area

Please scan
for more information



To participate text or call
(704) 687-5453

What will I do?

You will attend a **1 hour** Zoom interview where you will be asked to share your experiences about pregnancy.

This will be audio recorded.
You will receive a **\$30 Amazon giftcard** for completing the study.



Current Study

Thank You

The image features a light gray rectangular border. Inside, on the left, is the text "Thank You" in a large, black, sans-serif font. To the right of the text is a thin vertical black line. In the bottom right corner, there is a solid blue right-angled triangle pointing towards the center of the slide.



ROOTS OF RESILIENCE:

Building strong foundations
through early relationships

A CONVERSATION ON EARLY RELATIONAL HEALTH

Candace A. Howell, MD, FAAP

General Pediatrician

Atrium Health Levine Children's

Davidson Pediatrics

What is early relational health?

The positive, observable, nurturing relationships that advance physical health and development, emotional well-being, and resiliency.

- David Wallis, MD

What is early relational health?

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observable



Positive Early Experiences Study

Matched data from *Panel Study of Income Dynamics* (a nationally representative study from 2017) to its 2014 *Childhood Retrospective Circumstances*

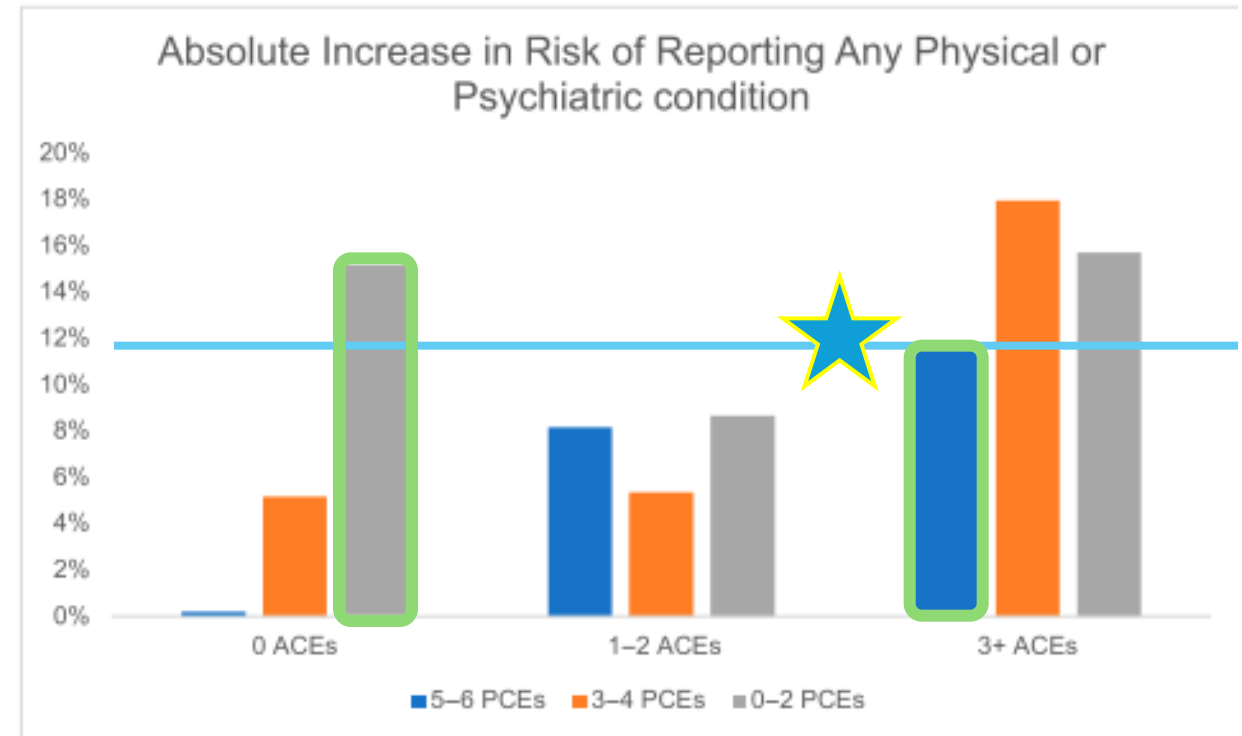
Study population: ~ 7500 people

- Education: 66% any college or vocational
- Race: Non-Hispanic White 80%, non-Hispanic Black 11%, Hispanic 6.1%
- In their 50s

Results:

- Positive Childhood Experiences provide a dose-dependent buffering against poor overall health and mental health conditions, even when controlling for ACEs

Having Positive Childhood Experiences is more important for well-being than having NO Adverse Childhood Experiences



Percent Flourishing by Family Resilience & Connection

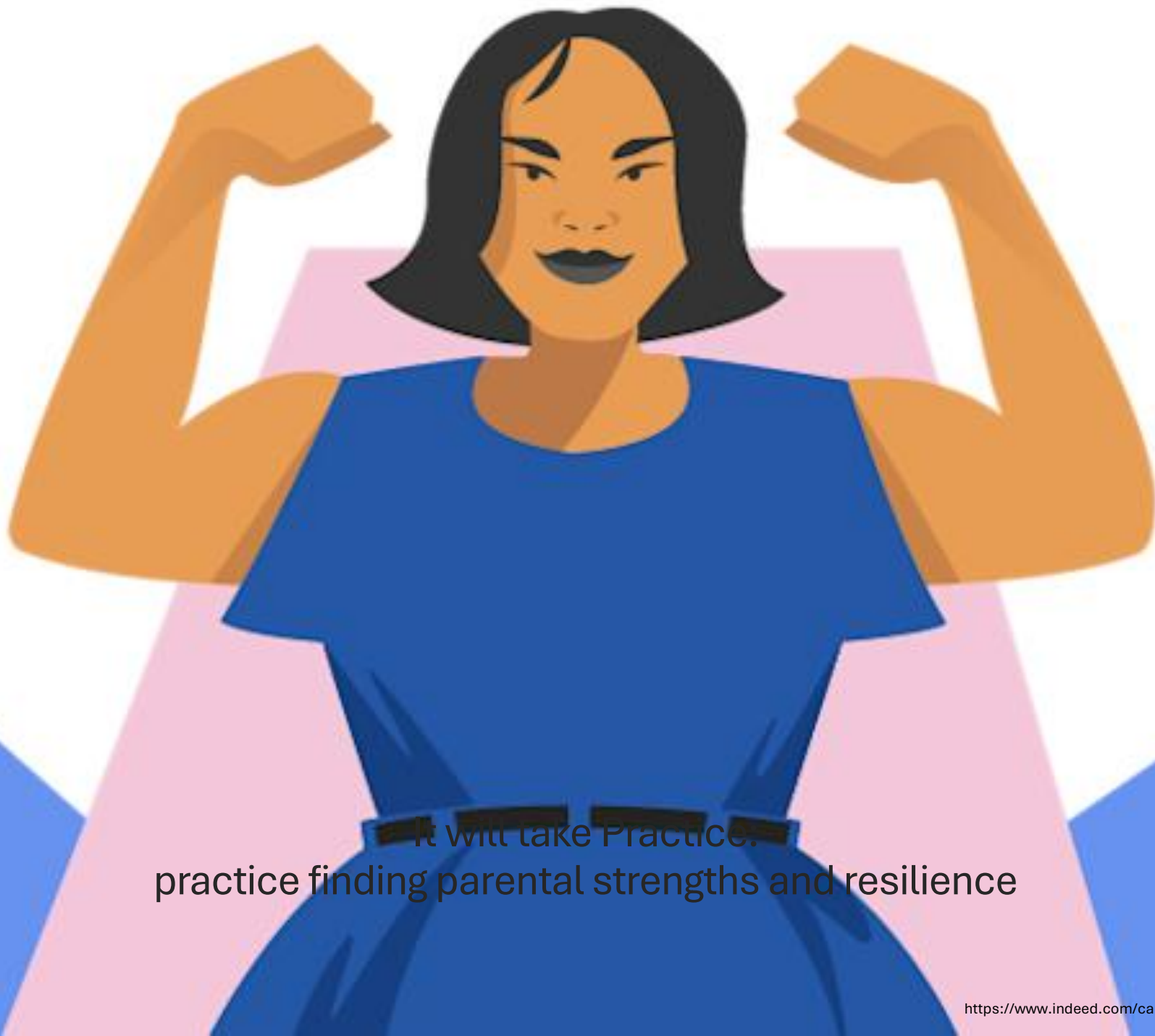
(curious, complete tasks and in control when faced with a challenge)

Family Resilience & Connection Index Score

	0 or 1	2 or 3	4-6
All Children:	21.5	38.1	51.5
Number of ACES:			
0	26.8	44.3	57.6
1	20.1	36.6	48.4
2 OR 3	16.8	30.6	40.8
4-9	11.9	21.6	30.5

Bethell et al., 2019. Health Affairs 38:729-737

**If we are ONLY looking at adversity, we're missing the point:
ALL children need relational health to flourish!**



It will take Practice.
practice finding parental strengths and resilience



“The more healthy relationships a child has, the more likely he will be to recover from trauma and thrive. Relationships are the agents of change, and the most powerful therapy is human love.”

– Bruce Perry

Thank you!

ROOTS OF RESILIENCE:

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through early relationships

Ellen McNeill, MA, LCMHC, RPT™

NC Association for Play Therapy Board Member

Zola Counseling

Co-regulation: “Chaos to Calm”



What is Co-regulation?

“...co-regulation means what happens when a caregiver regulates a child’s (or other person’s) behaviour and feelings through interactive, bi-directional signals: adjusting their tone of voice, facial expressions, body language, and gestures and soothing word.”

-“When Their Storm Meets Our Calm, Co-Regulation Occurs” Feb 17, 2023

Co-regulation is necessary first to survive and then to thrive. It is a biological imperative—a need that must be met to sustain life. Through reciprocal regulation of our autonomic states, we feel safe to move into connection and create trusting relationships...Through co-regulation, a foundation of safety is created, and nourishing connections follow. Co-regulation creates a physiological platform of safety that supports a psychological story of security that then leads to social engagement. The autonomic nervous systems of two individuals find sanctuary in a co-created experience of connection.”

-Deb Dana, rhythmofregulation.com

Other National Data around ERH

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.

What happens when the caregiver is not doing well?

“One response to a world in which success and fulfillment feel increasingly out of reach has been an intensifying culture of comparison—often propagated by influencers and online trends—with unrealistic expectations around the milestones, parenting strategies, achievements and status symbols that kids and parents must pursue. Chasing these unreasonable expectations has left many families feeling exhausted, burned out, and perpetually behind.”

Source: Parents Under Pressure: The U.S. Surgeon General's Advisory on the Mental Health & Well-Being of Parents.

<https://www.hhs.gov/sites/default/files/parents-under-pressure.pdf>

“Parents are running on fumes. With the **endless demands** of child care, parents are at particular risk for exhaustion—which can take a toll on both the parent and the child. The most important thing when facing parent burnout, is doing something to help yourself. You cannot be the parent your kids need when you’re running on empty.”

<https://washingtonparent.com/parent-burnout/>





***Roots of Resilience:
Building Strong
Foundations Through Early
Relationships***



Who We Are

Smart Start of Mecklenburg County's vision
All children enter kindergarten healthy and ready to succeed

Four focus areas



HEALTH



EARLY CARE & EDUCATION



FAMILY SUPPORT



LITERACY

Our History

Smart Start of Mecklenburg County is part of a powerful statewide network impacting children and families.



Smart Start is a nationally recognized early childhood education initiative to expand and improve services for children ages birth to five and their families.

Smart Start was established in 1993, under the leadership of then Governor Jim Hunt, as a state-wide, public/private partnership to help all North Carolina children enter school healthy and ready to succeed.

Local Smart Start partnerships, comprised of community members, fund programs within their own communities based on each county's particular needs and resources. Local partnerships operate in all 100 North Carolina counties through funding from the North Carolina legislature, corporations, foundations, and individual donors.

The Mecklenburg County Partnership for Children, better known as Smart Start of Mecklenburg County, is the local partnership organization serving children and families throughout Mecklenburg County.

Statewide oversight of all Smart Start programs is provided through The North Carolina Partnership for Children (NCPC).

Tools

INVEST

FUND EB/EI MODELS

Manage MECK Pre-K universal model

COLLABORATE & CONVENE

Systems Change

Advocacy

DRIVE INNOVATION

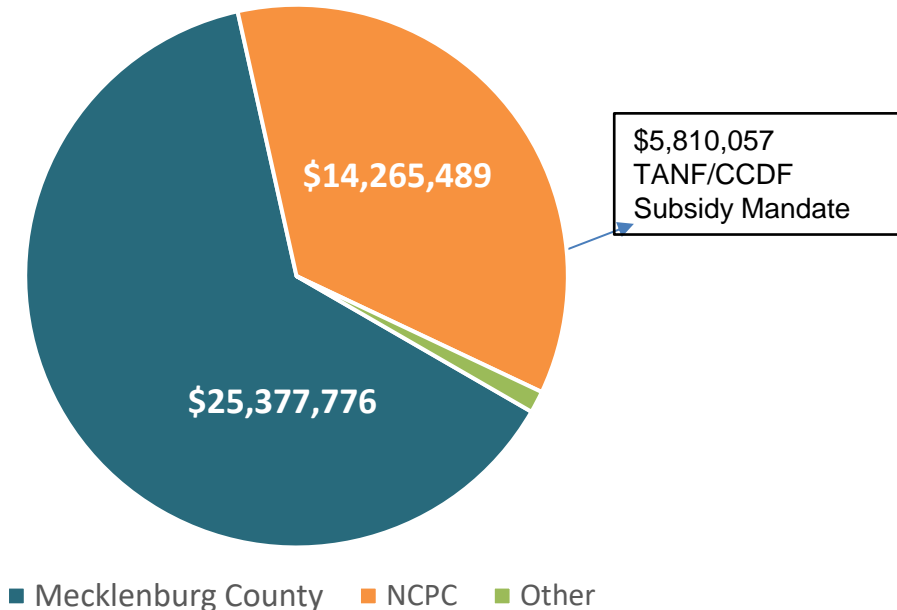
Research



BUDGET

Majority of Smart Start revenues come from State and County funding.

FY23-24 Revenue
\$40,167,452



\$14,265,057 – Funding
EB/EI models, research,
systems change activities &
outreach

\$25,377,776 - MECK Pre-K

Early Relational Health: Smart Start Investments

Early Care and Education settings

- Fund **social-emotional teacher consultation (SETC)** using the evidence-based Pyramid model.
- MECK Pre-K provides **family support services** for enrolled children.
- Funded **Polliwog**, integrated program providing specialized services (speech, occupational, physical therapy) and behavioral intervention for children ages 0-5 with therapeutic needs or those whose challenging behavior impacted their childcare placement (preschool suspension/expulsion.)

Early Relational Health: Smart Start Investments

Family Support Services

- ***The Basics Mecklenburg*** – evidence-informed brain development campaign
- Fund **evidence-based home visiting models** – YMCA Parents as Teachers, Safe Journey Parents as Teachers and Nurse-Family Partnership

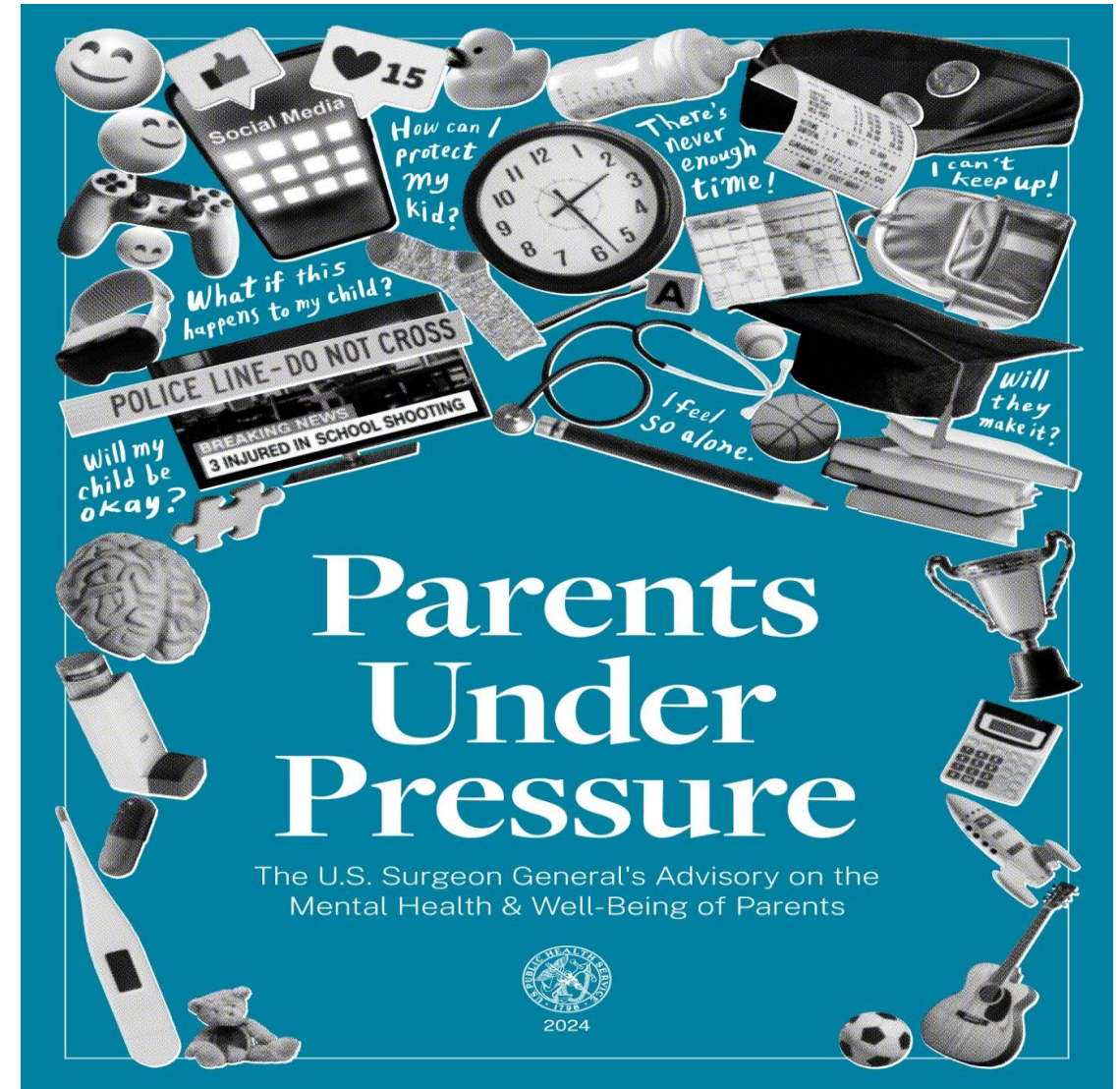
Research

- *Maternal Health Resources study* – in progress
- *2023 Home Visiting Landscape Analysis: Opportunities for Growth, Expansion and Building Infrastructure*
- *Taming the Octopus: Landscape of Services for Children with Special Health Care Needs*
- *PN-3 Landscape Study of Services, Mecklenburg County*
- *NC Preschool Exclusionary Discipline Pilot Study w/UNC Chapel Hill*

Parents Under Pressure

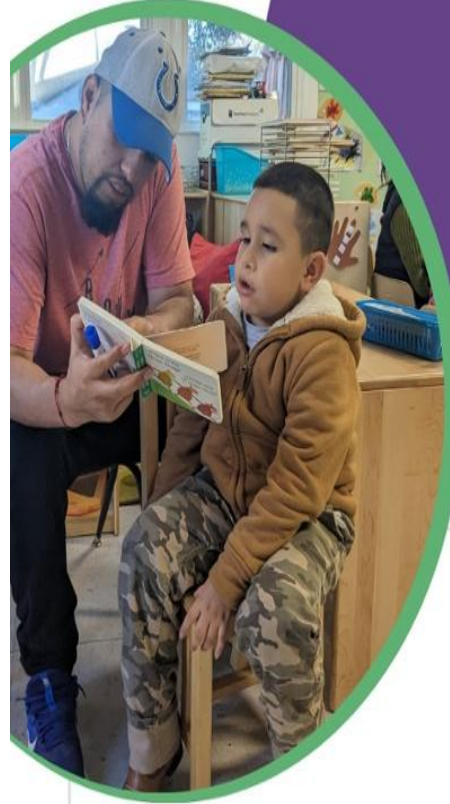
- In Mecklenburg County, **68%** of children under age 6 live in families with all parents working.
- Research identified positive parenting as a resilience factor buffering youth against the deleterious impact of stressful childhood experiences on problem behaviors and brain development.

“Parents have a profound impact on the health of our children and the health of society. Yet parents and caregivers today face tremendous pressures, from familiar stressors such as worrying about their kids’ health and safety and financial concerns, to new challenges like navigating technology and social media, a youth mental health crisis, an epidemic of loneliness that has hit young people the hardest.” - U.S. Surgeon General Dr. Vivek Murthy.



Parents Under Pressure

*In 2023, Smart Start earned the **Family-Friendly Workplace Certification** from the NC Early Childhood Education Foundation. To become a Family Forward Certified Employer, organizations are assessed using best practice policies including paid leave and living wages, accommodations for pregnant and breastfeeding workers, childcare, health and wellness benefits, and scheduling practices.*



**Lunch & Learn | Monday, Dec. 9
12-1 pm**

**Topic:
Parents Under Pressure**

Infant and Early Childhood Mental Health Team (IECMH)

Presented by Shannon Winsjansen
MSW, LCSW, IMH-E®



Question

What is Infant and Early Childhood Mental Health?

The developing capacity to:

- Form close, satisfying relationships
- Experience, manage, and express a range of both positive and negative emotions
- Ability to explore the environment and learn

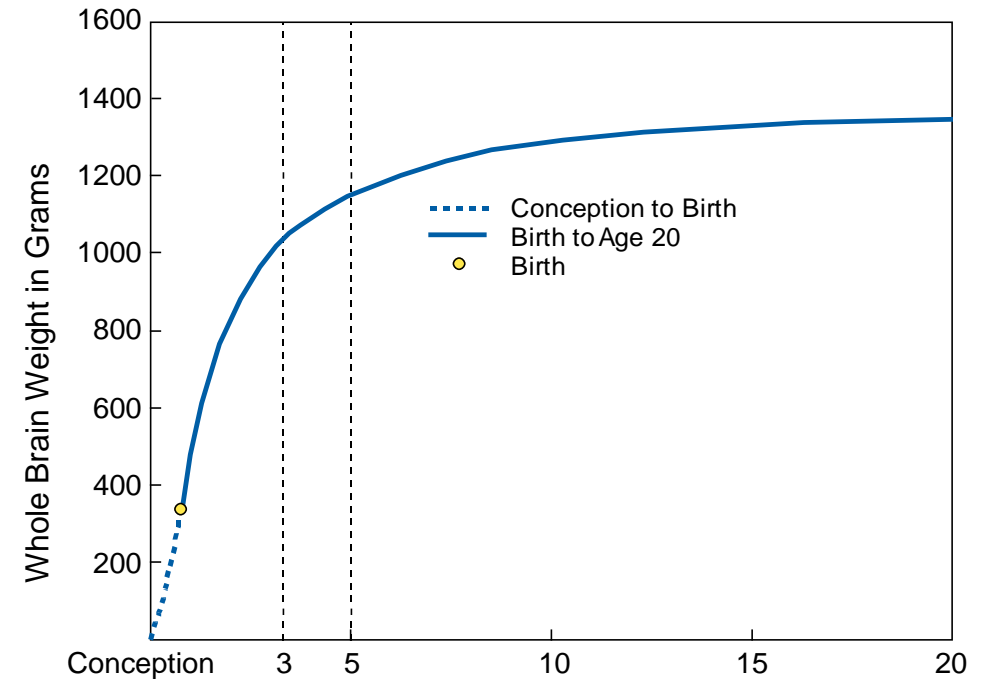
These critically important capacities are rooted in our earliest social experiences.



Growth of the Brain

Brain “Rules”

- Repeated use strengthens brain connections
- If connections are not used, they are more likely to be “pruned” away
- The brain “grows itself” for the environment it is experiencing.



Toxic Stress



Toxic stress, or extended or prolonged stress, from ACEs can negatively affect children's brain development, immune systems, and stress-response systems. These changes can affect children's attention, decision-making, and learning.

Children growing up with toxic stress may have difficulty forming healthy and stable relationships.

- Preventing adverse childhood experiences requires understanding and addressing the factors that put people at risk for or protect them from violence.
- Creating safe, stable, nurturing relationships and environments for all children can prevent ACEs and help all children reach their full potential. We all have a role to play.

Promoting Mental Health

Parent/Caregiver Role

- Children learn about trust and safety from the care he/she receives from a primary caregiver.
- For most children, development does not just happen. It happens through relationships with others and is impacted based on their responsiveness.

How a parent or caregiver responds to their children impacts

- how children feel about themselves
- how they will do in school
- how competent they will feel as adults.
- how successful future relationships will be

IECMH Team Creation

- Limited infant mental health services within Mecklenburg County
- American Rescue Plan Act (ARPA) funds are designated to meet five priority areas and specific goals.

County Goal: Behavioral Health and Health Equity.

- To improve outcomes by increasing access to resources, services, and programming
- To expand the county's mental health and related support services.

What do we provide?

- Families who are referred are offered a comprehensive clinical assessment. Based on assessments, families are offered services, and a plan of care is created.
- Families enrolled in the program will receive short-term services (10-16 sessions)
 - Child and Family Counseling
 - Child Parent Psychotherapy (this service can take longer than 16 weeks)
 - Attachment Biobehavioral Catch-up Infant and Early Childhood
- Following services, families will complete post-testing to determine the next steps