



NEW JERSEY DEPARTMENT OF CHILDREN AND FAMILIES

Relational Health Across the Lifespan

Rebecca Bryan, DNP



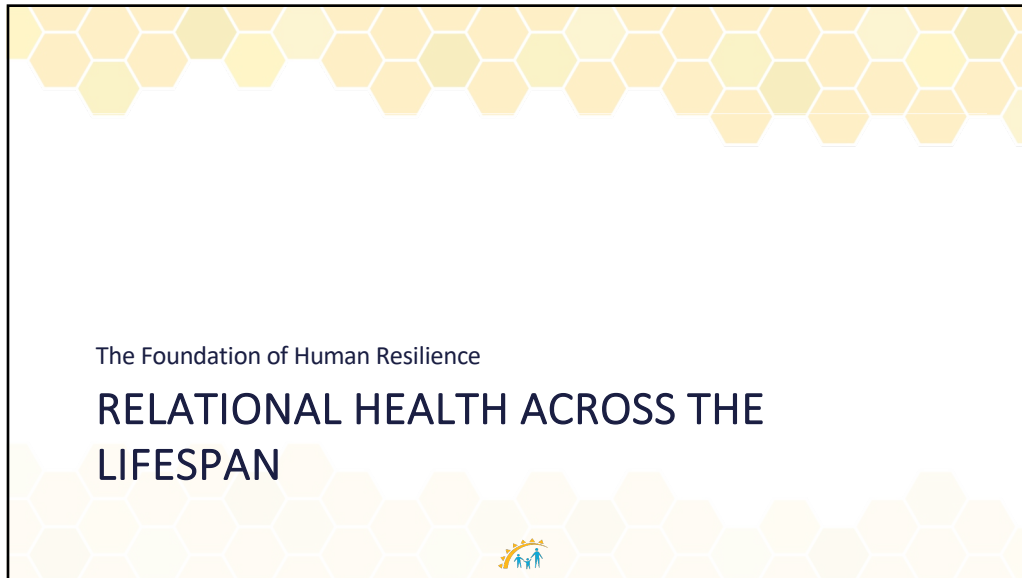
1



Vision: New Jersey is a **trauma-informed** and **healing-centered state**, creating opportunities to prevent, and empower healing from, individual, transgenerational, and community trauma.




2

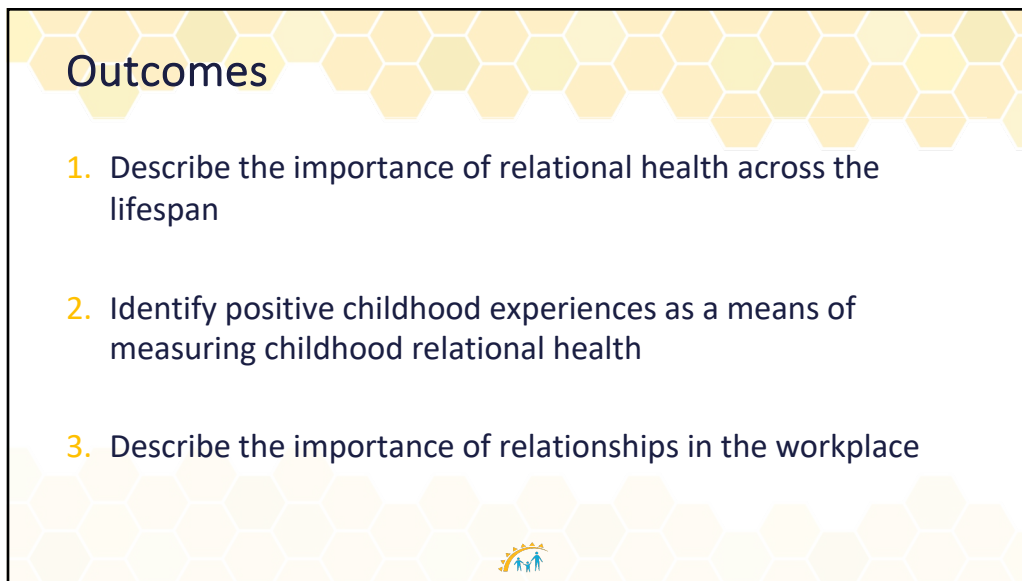


The Foundation of Human Resilience

RELATIONAL HEALTH ACROSS THE LIFESPAN




3



Outcomes

1. Describe the importance of relational health across the lifespan
2. Identify positive childhood experiences as a means of measuring childhood relational health
3. Describe the importance of relationships in the workplace



4

Resilience ...

- ...is a **process**, an adaptive response to stress or challenge
- ...is NOT a character trait
- ...the ability to embrace change
- ...needs a supportive environment



5

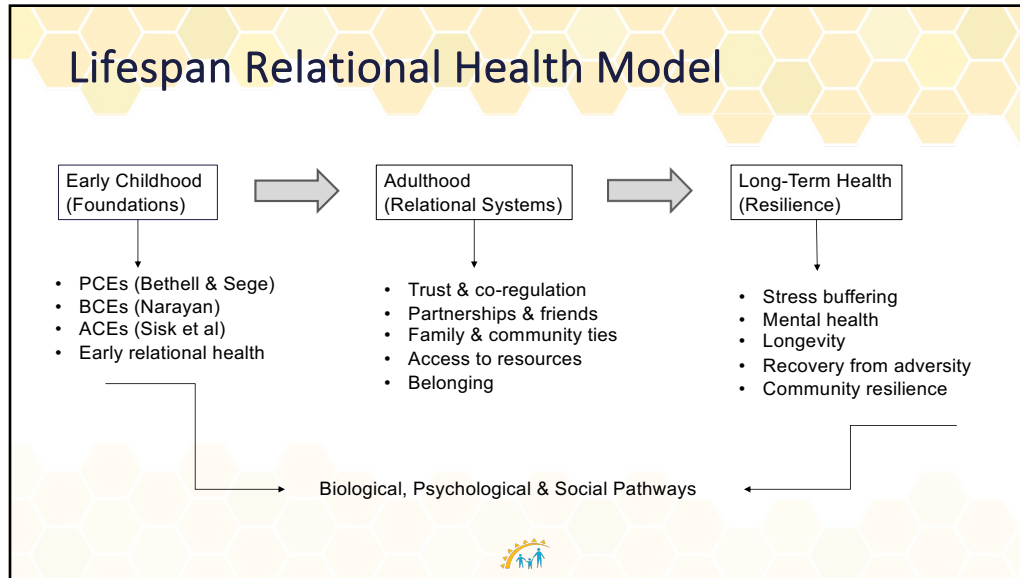
5

Why Relationships Matter

- Humans are biologically wired for connection
- Relational experiences shape stress systems, learning and emotional regulation
- Across the lifespan, relationships are the strongest predictors of resilience



6



7

Adversity Sets Context – Relationships Shape Trajectory

- Adversity is common, but it is **not** what builds resilience
- ACEs shape risk, but **relationships buffer stress** and change outcomes
- PCEs protect children even in high-adversity contexts
- Adult relational health continues to moderate stress across the lifespan
- Resilience emerges from **relational systems**, not from adversity itself.

a Partnership for Children © 2021

8

Early Relational Health (ERH)



- Safe, stable, and nurturing relationships build core regulatory systems
- Early relational experiences shape brain architecture and stress physiology
- ERH predicts flourishing, learning and long-term well-being



9

9

Serve and Return

- Children need to see both rupture and repair to develop a healthy, resilient nervous system
- It's in the repair process where they learn that conflict doesn't have to mean disconnection or danger




10

10

PCEs co-exist with ACEs and buffer their impact.

THE SCIENCE OF POSITIVE CHILDHOOD EXPERIENCES




11

Identifying Positive Childhood Experiences



Positive childhood experiences (PCEs) are protective and compensatory encounters that increase resilience and shield against risk for mental and physical illness.

Research shows that adults reporting high numbers of PCEs were 72% less likely to experience depression and/or poor mental health and were 3.5 times more likely to get the social and emotional support they needed as an adult.

<p>Feeling like you can talk about feelings with family.</p> 	<p>Feeling supported by family during difficult times.</p> 	<p>Enjoying participation in community traditions.</p> 	<p>A feeling of belonging in high school.</p> 
<p>Feeling supported by friends.</p> 	<p>Having at least two non-parent adults who take genuine interest in you.</p> 	<p>Feeling safe and protected by an adult in the home.</p> 	

Reif, C., Jones, L., Gurtman, A., Wassenaar, C., & Soper, A. (2015). Positive childhood experiences and adult mental health and well-being. *Child Abuse and Neglect*, 15(1), 1-10. <https://doi.org/10.1016/j.chab.2015.03.001>

OfficeofResilience@dclnj.gov

12

Positive Childhood Experiences (PCEs)



- HOPE framework: Personal experiences are active ingredients in healthy development
- PCEs predict mental health and flourishing even with high ACEs
- Key PCEs: belonging, supportive adults, safe caregiving, community engagement



13

13

Health Outcomes From Positive Experiences (HOPE)

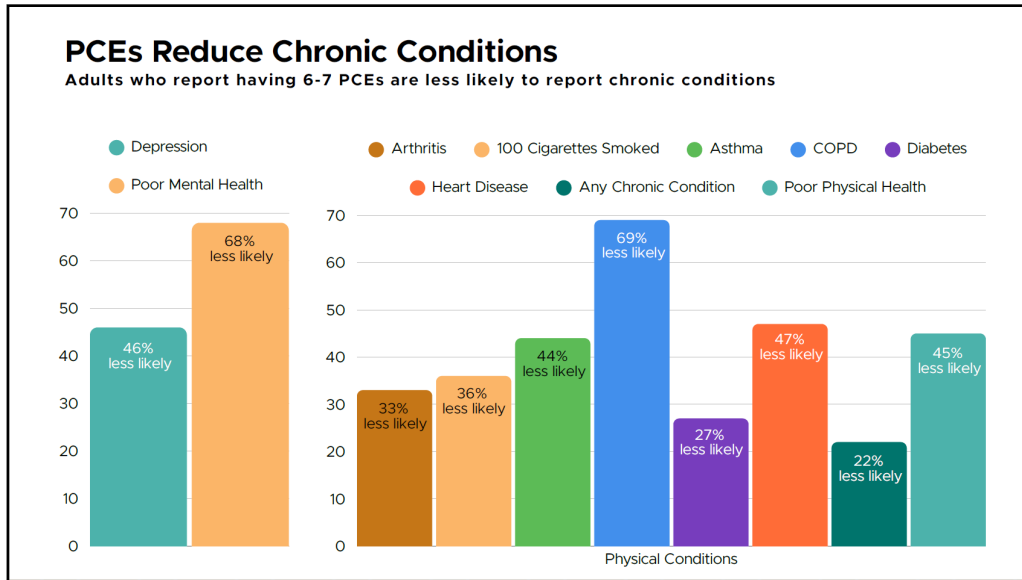
Guiding Principles

1. Positive and negative factors impacting child health exist in all domains of the social ecology
2. **Child and parent health and well-being are inextricably linked**
3. Child health incorporates physical, cognitive, social, and emotional outcomes

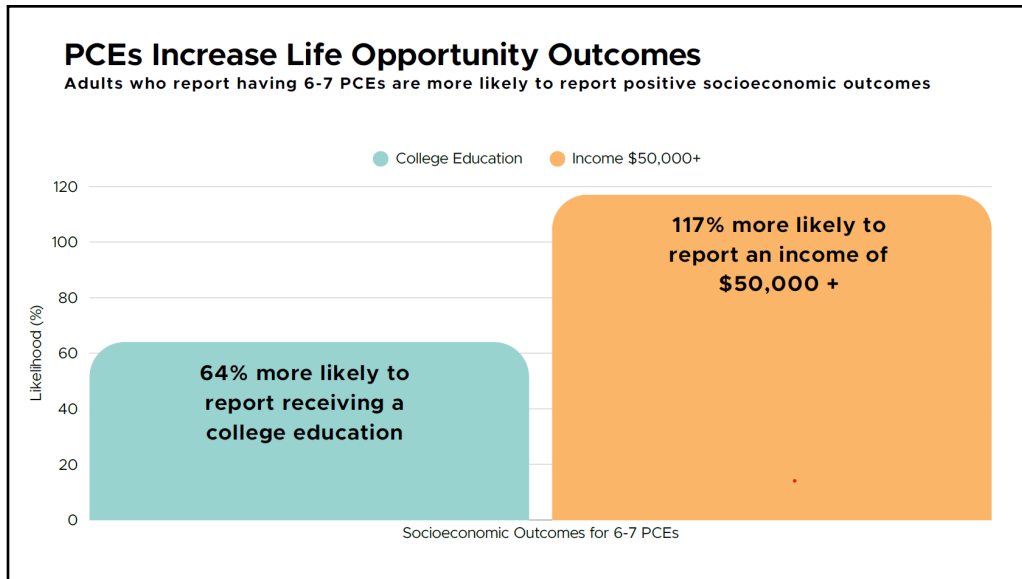


14

14




15



16

PCEs Reduce Economic Burden in Four States

Adults who report having 3+ PCEs



\$216B
SAVED in four states

\$3.1
BILLION

Lower Medical
Spending

\$28,000

Saved per adult with
3+ PCEs annually

\$212.8
BILLION

Savings due to additional
healthy life years

\$782,000

Saved per adult
over their lifetime

17

Trauma is not what happens to you, but what happens inside of you as a result of what happened to you.

- Gabor Maté



18

“Screening” for PCEs

Building Blocks for Health

These Four Building Blocks are important factors in growing up healthy. Share what is working and your provider will brainstorm with you for solutions to anything that is not working.

Engagement:

What is one thing you like to do as a family outside the home? Where do you feel the most connected to others?

Environment:

Describe a place you love to go or play. Where is your safe space?

Relationships:

What do you like to do at home with your family? Who is someone outside of your family that really cares about you?

Emotional Health:

What feelings do you talk about at home? Who can you talk to about feelings with? How can you take care of yourself when you have big feelings?

- Able to talk to family about feelings
- Felt family stood by you in difficult times
- Enjoyed participating in community traditions
- Felt belonging in high school
- Felt supported by friends
- Had at least 2 non-parent adults who took genuine interest
- Felt safe and protected by an adult at home



19

19

Promoting PCEs in School Settings

- Create emotionally safe encounters through warmth, predictability, and co-regulation
- Serve as a stable, caring adult using micro-moments of connection
- Strengthen belonging by partnering with teachers and supporting peer connection
- Support family communication: positive calls, simple stress-talk scripts
- Building student agency through choices and co-created wellness plans
- Reduce unnecessary exclusion with return-to-class scripts and teacher collaboration



20

BCE-Aligned Practices for School Nurses

- Reinforces strengths and competence: “You handled that well”
- Provide predictable check-ins for students with chronic conditions and/or anxiety
- Build relational continuity through warm handoffs to trusted adults
- Promote emotional safety by validating feelings and normalizing help-seeking



21

Tending to your relationships is a form of self-care.

ADULT RELATIONAL HEALTH



22

How Early Experiences Shape Adult Relational Capacity

- Builds trust, emotional regulation, and relational flexibility
- Shapes the ability to form supportive relationships in adulthood
- Early relational safety → adult relational competence → resilience



23

Adult Relational Systems

- Key systems: partnerships, friendships, family networks, workplaces, communities
- Adults thrive when they have **belonging**, support and **meaning-making relationships**



24

24

Adult Relationships as a Public Health Determinant



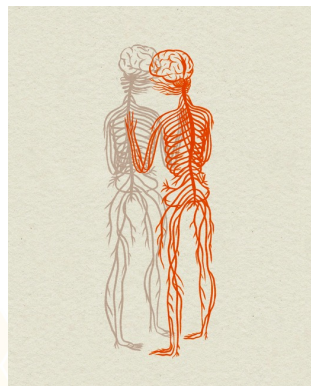
- Strong social relationships increase survival odds by about 50%
- Loneliness and isolation elevate mortality risk
- Relationship quality predicts cardiovascular, immune and stress outcomes
- Social connection is a core social determinant of health



25

25

Social Connection



- Public widely recognizes that social relationships have a strong influence on emotional well-being **however**, the association between **physical health and longevity** is largely unrecognized
- Humans are wired to be social, such that our brains and bodies **expect** proximity to others



26

26

Social Relationships and Longevity Across the Lifespan

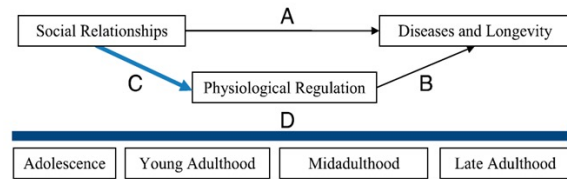


Fig. 1. A life course model of social relationship gradient in physical health: Mechanism and process. Empirical tests of the link represented in path C were applied in each stage of the life course trajectory D.

27

Social Connectedness Influences Health

- Chronic allostatic load
- Cardiovascular reactivity
- Blood pressure
- Oxidative stress
- Neuroendocrine dysregulation
- Immune functioning
- Inflammation
- Gut-microbiome interactions

28

Mechanisms of Relational Resilience

Psychological

- Identity
- Meaning making
- Coping
- Emotional regulation

Biological

- Stress buffering
- Vagal tone
- Inflammation reduction
- Neuroplasticity

Social

- Access to resources
- Belonging
- Collective efficacy



29

Lifelong Resilience Outcomes



- When relational health is strong across the lifespan, we see better mental health, lower chronic disease risk, longer life expectancy, and stronger recovery from adversity
- At the community level, relational health supports collective resilience and social cohesion

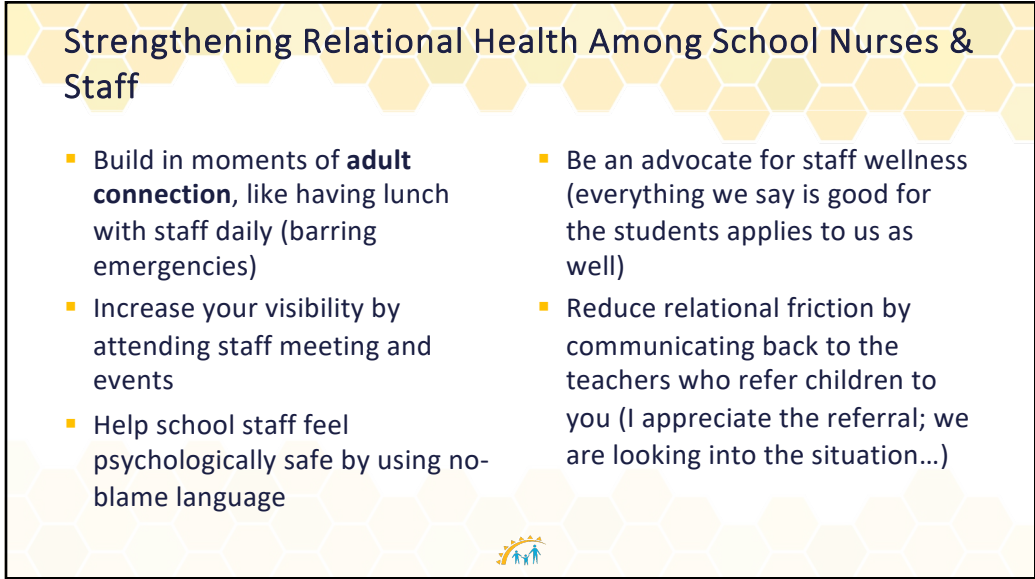


30

30



AS NURSES, HOW DO WE TEND TO OURSELVES?



Strengthening Relational Health Among School Nurses & Staff

- Build in moments of **adult connection**, like having lunch with staff daily (barring emergencies)
- Increase your visibility by attending staff meeting and events
- Help school staff feel psychologically safe by using no-blame language
- Be an advocate for staff wellness (everything we say is good for the students applies to us as well)
- Reduce relational friction by communicating back to the teachers who refer children to you (I appreciate the referral; we are looking into the situation...)



Build Your Own Meaningful Network

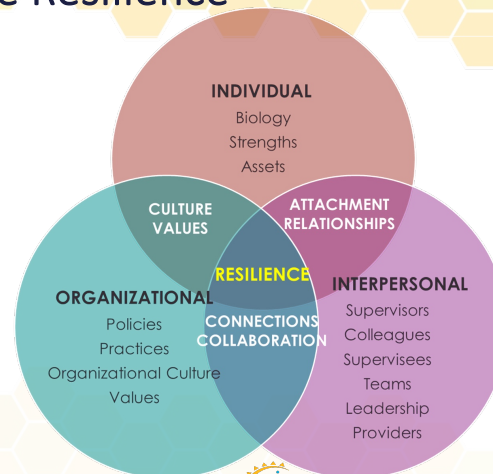
- Create a check-in ritual with another school nurse
- Join your regional school nurse group
- Notice “glimmers” – moments of okayness – throughout the day, especially when with others
- Remind yourself of who loves you



33

33

Workplace Resilience



34

Relational Health Check-In for Ourselves

- Intrapersonal: relationship with self
- Interpersonal: relationships with others
- Community: belonging and identity, safety and mutual support



35

Relational Health is a Clinical Intervention

- PCEs buffer adversity and predict long-term well-being
- School nurses are often the first **relational responder** in moments of stress
- Adult relational health shapes team functioning, burnout and student outcomes
- Small relational actions accumulate into measurable resilience effects
- Relational health is a **public health priority** – in childhood and adulthood



36

36

Identifying Positive Childhood Experiences

NEW JERSEY DEPARTMENT OF CHILDREN & FAMILIES OFFICE OF RESILIENCE

Relational Actions You Can Use This Week

You tell me!

Positive childhood experiences (PCEs) are protective and compensatory encounters that increase resilience and shield against risk for mental and physical illness.

Research shows that adults reporting high numbers of PCEs were 72% less likely to experience depression and/or poor mental health and were 3.5 times more likely to get the social and emotional support they needed as an adult.

- Feeling like you can talk about feelings with family.
- Feeling supported by family during difficult times.
- Enjoying participation in community traditions.
- A feeling of belonging in high school.
- Feeling supported by friends.
- Having at least two non-parent adults who take genuine interest in you.
- Feeling safe and protected by an adult in the home.

OfficeofResilience@dctf.nj.gov
37

37

Lifespan Relational Health Model

Early Childhood Foundations
Bethell, Sege, Narayan, Sisk

- Positive Childhood Experiences
- Adverse Childhood Experiences set context
- Early Relational Health
 - Attunement
 - Safety
 - Belonging

Adulthood Relational Systems
Unger

- Trust & Co-regulation
- Partnerships & Friendships
- Family & Community Ties
- Access to Resources
- Community Belonging, Safety, Identity

Long-Term Health Resilience
Holt-Lunstad

- Stress Buffering
- Physical Health
- Mental Health
- Longevity
- Recovery from Adversity
- Community Resilience

Early Relational Health → Adult Relational Capacity → Lifelong Resilience

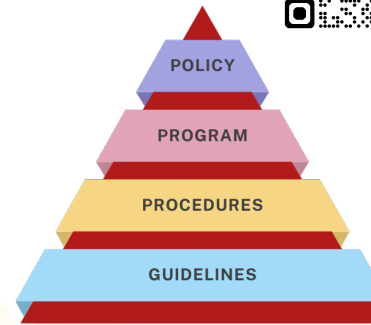
Relationships buffer adversity and change the trajectory.

Biological • Psychological • Social-Ecological Pathways

38

Implications for practice and policy

- Build relationally rich environments in families, schools, workplaces and communities
- Prioritize connection and belonging in system design
- **Treat relational health as a physical priority**
- Invest in programs that strengthen relational capacity across the lifespan



39

39

Resilience is relational.

Across the lifespan. Across systems. Across communities.

40

Healing & Resilient NJ – check it out!



41

- Resilience-boosting resources for individuals, communities and organizations
- De-stress in our **Resilience Room**
- Add your trauma informed business to our **Resource Directory**

41

References

Positive Childhood Experiences

- Bethell, C. D., Jones, J., Gombojav, N., Linkenbach, J., & Sege, R. (2019). Positive childhood experiences and adult mental and relational health in a statewide sample: Associations across adverse childhood experiences levels. *JAMA Pediatrics*, 173(11), e193007. <https://urldefense.com/v3/https://doi.org/10.1001/jamapediatrics.2019.3007> :|||B30X0ZrnC1cQtbAlMrdiaMlSlnNz9EYf6i6Pza8Qke1bFJscNv7baaRVDcQ4cX7y_DdDEbdomuKtCh272ekih0Z9a68p2a6eW9y8f9Q5
- Sege, R., & Harper Browne, C. (2017). Responding to ACEs with HOPE: Health Outcomes from Positive Experiences. *Academic Pediatrics*, 17(7), S79–S85. <https://urldefense.com/v3/https://doi.org/10.1016/j.acap.2017.03.009> :|||B30X0ZrnC1cQtbAlMrdiaMlSlnNz9EYf6i6Pza8Qke1bFJscNv7baaRVDcQ4cX7y_DdDEbdomuKtCh272ekih0Z9a68p2a6eW9y8f9Q5
- Bethell, C. D., Solloway, M., Guinasso, S., Hassink, S., Srivastav, A., Ford, D., & Simpson, L. A. (2017). Prioritizing possibilities for child and family health: An agenda to address adverse childhood experiences and foster the social and emotional roots of well-being in pediatrics. *Academic Pediatrics*, 17(7), S36–S50. <https://urldefense.com/v3/https://doi.org/10.1016/j.acap.2017.06.002> :|||B30X0ZrnC1cQtbAlMrdiaMlSlnNz9EYf6i6Pza8Qke1bFJscNv7baaRVDcQ4cX7y_DdDEbdomuKtCh272ekih0Z9a68p2a6eW9y8f9Q5

Benevolent Childhood Experiences

- Narayan, A. J., Rivera, L. M., Bernstein, R. E., Harris, W. W., & Lieberman, A. F. (2018). Positive childhood experiences predict less psychopathology and stress in pregnant women with childhood adversity: A pilot study of the Benevolent Childhood Experiences (BCEs) scale. *Child Abuse & Neglect*, 78, 19–30. <https://urldefense.com/v3/https://doi.org/10.1016/j.chiabu.2017.09.022> :|||B30X0ZrnC1cQtbAlMrdiaMlSlnNz9EYf6i6Pza8Qke1bFJscNv7baaRVDcQ4cX7y_DdDEbdomuKtCh272ekih0Z9a68p2a6eW9y8f9Q5
- Narayan, A. J., Lieberman, A. F., & Masten, A. S. (2021). Intergenerational transmission and prevention of adverse and benevolent childhood experiences. *Child Development Perspectives*, 15(1), 28–34. <https://urldefense.com/v3/https://doi.org/10.1111/cdev.12338> :|||B30X0ZrnC1cQtbAlMrdiaMlSlnNz9EYf6i6Pza8Qke1bFJscNv7baaRVDcQ4cX7y_DdDEbdomuKtCh272ekih0Z9a68p2a6eW9y8f9Q5
- Narayan, A. J., et al. (2023). The Multisystem Benevolent Childhood Experiences Scale: Development and validation. *Development and Psychopathology*. <https://urldefense.com/v3/https://doi.org/10.1017/S095457942300001X> :|||B30X0ZrnC1cQtbAlMrdiaMlSlnNz9EYf6i6Pza8Qke1bFJscNv7baaRVDcQ4cX7y_DdDEbdomuKtCh272ekih0Z9a68p2a6eW9y8f9Q5

Early Relational Health / Developmental Science

- National Academies of Sciences, Engineering, and Medicine. (2025). *The promise of adolescence: Realizing opportunity for all youth*. National Academies Press.
- National Scientific Council on the Developing Child. (2015). *Supportive relationships and active skill-building strengthen the foundations of resilience*. Center on the Developing Child, Harvard University.
- Sisk, L.M., Keding, T.J., Ruiz, S., Odrizola, P., ..., Gee, D.G. (2025). Person-centered analyses reveal that developmental adversity at moderate levels and neural threat/safety discrimination are associated with lower anxiety in early adulthood. *Comm Psych*, 3(31), 1-16. <https://doi.org/10.1038/s44771-025-20193-z>



42

References

Adult Relational Health & Multisystem Resilience

- Unger, M. (2011). The social ecology of resilience: Addressing contextual and cultural ambiguity of a nascent construct. *American Journal of Orthopsychiatry*, 81(1), 1–17. <https://urldefense.com/v3/https://doi.org/10.1111/1433-9015.2010.01067.x> <https://doi.org/10.1111/1433-9015.2010.01067.x>
- Unger, M. (2012). Social ecologies and their contribution to resilience. In M. Unger (Ed.), *The social ecology of resilience* (pp. 13–32). Springer.
- Unger, M. (2021). *Multisystemic resilience: Adaptation and transformation in contexts of change*. Oxford University Press.

Adult Relationships, Social Connection, and Health

- Holt-Lunstad, J., Smith, T. B., & Layton, J. B. (2010). Social relationships and mortality risk: A meta-analytic review. *PLoS Medicine*, 7(7), e1000316. <https://urldefense.com/v3/https://doi.org/10.1371/journal.pmed.1000316>
- Holt-Lunstad, J., Smith, T. B., Baker, M., Harris, T., & Stephenson, D. (2015). Loneliness and social isolation as risk factors for mortality: A meta-analytic review. *Perspectives on Psychological Science*, 10(2), 227–237. <https://urldefense.com/v3/https://doi.org/10.1177/1745691614568352>
- Holt-Lunstad, J. (2021). A pandemic of social isolation? *American Psychologist*, 76(3), 293–305. <https://urldefense.com/v3/https://doi.org/10.1037/amp0000851>
- Holt-Lunstad, J. (2023). Social connection as a public health issue: The evidence and a systemic framework for prioritizing the “social” in social determinants of health. *American Journal of Health Promotion*, 37(3), 403–414. <https://urldefense.com/v3/https://doi.org/10.1177/08901171221149716>

Attachment & Adult Relationship Science

- Mikulincer, M., & Shaver, P. R. (2016). *Attachment in adulthood: Structure, dynamics, and change* (2nd ed.). Guilford Press.

Community & Social Integration Research

- Berkman, L. F., Glass, T., Brissette, I., & Seeman, T. E. (2000). From social integration to health: Durkheim in the new millennium. *Social Science & Medicine*, 51(6), 843–857. [https://urldefense.com/v3/https://doi.org/10.1016/S0277-9536\(00\)00065-4](https://urldefense.com/v3/https://doi.org/10.1016/S0277-9536(00)00065-4)

