

ACEs & Resilience Champion Toolkit



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What is the Purpose of this Toolkit?

This toolkit was created by the ACEs Coalition of Guelph and Wellington to give ACEs & Resilience Champions resources to support their colleagues and community partners to take meaningful action to address adverse childhood experiences and build resilience. Actions can be taken through the programs they deliver, the policies they create, and/or their interactions with clients.

Adverse Childhood Experiences (ACEs) are potentially traumatic or stressful experiences that happen in a person's life before the age of 18. These experiences can have lasting effects on an individual's health and well-being.

Resilience is a person's ability to adapt to or rebound from difficult times¹.

You are likely reading this toolkit because you are aware of the [ACEs Coalition of Guelph and Wellington](#). You may have read a press release or completed ACEs & Resilience training. The messages about ACEs and resilience resonated with you, and you want to do more. You want to take an active role in preventing ACEs and building resilience in our community. **You are an ACEs & Resilience Champion.**

To learn more about ACEs, their effects, and what you can do to address ACEs and build resilience, visit [acescoalition.ca](#) to register for the [ACEs & Resilience Learning Modules](#).

Navigating the Toolkit

The toolkit gives space to reflect on your goals as an ACEs & Resilience Champion, provides guidance on how to start a conversation with your community about ACEs and resilience, presents ideas for action, and links to useful resources. The toolkit can be read in chronological order, or you may wish to focus on specific sections that are most relevant to you.

Section 1: What is an ACEs & Resilience Champion?

An ACEs & Resilience Champion has ideas for action to prevent and reduce the effects of ACEs and build resilience.

Section 2: ACEs & Resilience

This section provides a brief overview of ACEs, their effects, and the role of resilience in overcoming adversity. Additional information about ACEs and resilience can be found at [acescoalition.ca](#).

¹ Masten, A.S., Gewirtz, A.H., & Sapienza, J.K. (2013). [Resilience in development: the importance of early childhood](#). Retrieved March 15, 2018.

Section 3: Being an ACEs & Resilience Champion

Change takes time. This section provides an opportunity for you to think about your motivation and goals as an ACEs & Resilience Champion, and how they will influence your actions.

Section 4: Change the Way your Organization Approaches ACEs & Resilience

Organizations will benefit from taking the time to understand how their processes, policies and actions help or hinder the creation of an environment that prevents and reduces the effects of ACEs and builds resilience.

This section provides a step-by-step approach to identify how your organization might better approach ACEs and promote resilience.

Section 5: Facilitated Discussion Guide for Talking about ACEs and Building Resilience

This section will help you to drive change within your organization about how ACEs and resilience are talked about, how their effects are understood, and how people who have experienced ACEs are treated. It provides a framework for facilitating discussions about ACEs and resilience, and identifying concrete actions for change.

Section 6: Communication Resource Guide

This section provides facilitators with information to consider when hosting an event, and tips for ensuring success.

Section 7: Engaging Clients

Person-Centered Care and Trauma-Informed Care are two strategies for engaging clients in a way that considers their unique experiences. This section provides an introduction to these concepts.

What is the ACEs Coalition of Guelph & Wellington?

The ACEs Coalition of Guelph and Wellington (ACEs Coalition) aims to prevent and reduce the effects of ACEs in our community by building resilience at individual, family, and community levels.

We work together with our community to decrease risk factors that impact health and wellbeing and increase protective factors that build resilience.

We create change by:

- Raising awareness about ACEs, their effects, and resilience;
- Educating and advocating to support ACEs- and resilience-informed changes to systems, programs, and services;
- Conducting and using research to support evidence-informed interventions; and
- Collaborating with and aligning the work of community stakeholders to deliver interventions to achieve our shared outcomes.

For more information about the ACEs Coalition, including a full list of partner organizations, visit www.acescoalition.ca.



1. What is an ACEs & Resilience Champion?

Do you have ideas about how to prevent ACEs and increase resilience? Do you want to lead change in your organization and/or in your community? If yes, then you are an ACEs & Resilience Champion.

The actions of an ACEs & Resilience Champion may look different within and across organizations. Regardless of the intervention, champions are enthusiastic and confident in their ideas, get the right people involved, and persist despite adversity.

An ACEs & Resilience Champion informs others that ACEs can be prevented, and their effects can be reduced; they drive change by working to build healthy communities full of protective factors. A champion knows that ACEs awareness and action must be achieved individual-by-individual, organization-by-organization and community-by-community.

ACEs & Resilience Champions know that health includes physical, mental and social wellbeing. They have an understanding of ACEs and the impact of toxic stress on wellbeing. They understand that ACEs can have an impact on brain development, as well as physical and mental health. ACEs & Resilience Champions know that resilience can be built at any stage in life, and that people who have experienced ACEs can rebound and thrive.

ACEs & Resilience Champions understand that their interactions with other people matter, and that everyone has a right to feel safe and to be heard. They know that self-awareness and commitment to reflection and learning are critical to move them along their ACEs & Resilience journey.

An ACEs & Resilience Champion sees it as their role to help people in their own organization become informed about ACEs and resilience. They work to activate the organization to take action to address ACEs, and to implement ACEs- and resilience- informed practices within their sphere of influence.

ACEs & Resilience Champion Examples

Mike Anderson, Principal of Brant Avenue Public School in Guelph, Ontario is an ACEs & Resilience Champion. Mike understands that many students and their families experience ACEs and other forms of adversity. With an understanding of ACEs and the power of resilience, Mike works with his team to do really tangible things to support safe, stable, nurturing relationships and environments that are the foundation of a mentally healthy school.

Through simple policy and program changes (like no line-ups at recess!), Mike and his team prioritize physical and emotional safety for their students. They focus on teaching students, rather than subjects, and regularly remind students of their value and potential.

Dr. Melanie Bluhm, Family Physician at the Guelph Community Health Centre, is an ACEs & Resilience Champion. After a decade of practice, Dr. Bluhm was discouraged that she wasn't seeing more positive outcomes for some of her patients who were struggling with long-standing mental health and addictions issues, despite access to medical and psychotherapy treatment. Even more concerning, she was starting to see these issues passed down to the next generation, with her patients stuck in the cycle of trauma, parenting and attachment struggles, and poverty. With her knowledge of ACEs and resilience, Dr. Bluhm has shifted conversations with her patients away from, "what's wrong with you?" to "what happened to you?" and begun to think outside of the traditional medical model approach. Today, Dr. Bluhm practices Trauma-Informed Care. When it makes sense to do so, she asks her patients questions about their childhood experiences, using this information to guide conversations about health issues they and/or their children may be experiencing today. Her revised approach supports patients to:

- understand how childhood adversity can impact their health and wellbeing; and
- prevent ACEs from happening in their own families by increasing resilience through interventions and supports that make sense to them.



2. ACEs & Resilience

What are ACEs?

Adverse Childhood Experiences and Resilience

Adverse Childhood Experiences (ACEs) are potentially traumatic or stressful experiences that happen in a person's life before the age of 18. These experiences can have lasting effects on an individual's health and well-being.

ACEs can increase the risk of negative health behaviours and outcomes later in life.

Types of ACEs²

Abuse

- Physical abuse
- Emotional abuse
- Sexual abuse

Neglect

- Physical neglect
- Emotional neglect

Household Dysfunction

- Household member struggling with a mental illness
- Parent treated violently
- Parental separation or divorce
- Incarcerated household member
- Substance abuse by a household member

ACEs are associated with an increased risk of:³

- Injury (e.g., fractures and burns)
- Disrupted brain development
- Mental illness (e.g., depression, anxiety, suicide, PTSD)
- Maternal health outcomes (e.g., unintended pregnancy, pregnancy complications, fetal death)
- Chronic diseases (e.g., cancer, diabetes)
- Risky behaviours (e.g., alcohol and drug abuse, unsafe sex)
- Lack of opportunities (e.g., education, occupation, income)

² This is the list of ACEs that were studied by Felitti and Anda et al (1998). This is not an exhaustive list of all experiences that may be considered adverse in a child's life.

³ Centers for Disease Control and Prevention. (2019, March 27). *Adverse Childhood Experiences Presentation Graphics*. <https://www.cdc.gov/violenceprevention/childabuseandneglect/acestudy/ace-graphics.html>



Resilience

Experiencing persistent adversity can hinder positive development and well-being. Resilience is the ability to adapt to or rebound from adversity.⁴

Resilience helps us to understand why some individuals do better than others when faced with significant challenges or severe adversity.

Childhood is the best time to build resilience, but it can be strengthened at any stage of life.

⁴ Masten, A.S., Gewirtz, A.H., & Sapienza, J.K. (2013). [Resilience in development: the importance of early childhood](#). Retrieved March 15, 2018.



3. Preparing to be an ACEs & Resilience Champion

Anticipate your ACEs & Resilience Champion Journey

Being an ACEs & Resilience Champion may be challenging. You may encounter resistance to your efforts, or an idea may fail. However, your persistence can lead to important changes in your community, and may be a rewarding personal and professional experience for you. The ACEs Coalition of Guelph and Wellington will provide support and encouragement along the journey. As you begin, take some time to consider your intentions and goals to help you remain committed if or when challenges arise.

The change you seek will sometimes be hard to attain. People may not listen to you. Even if they do, behaviours and even systems may not shift.

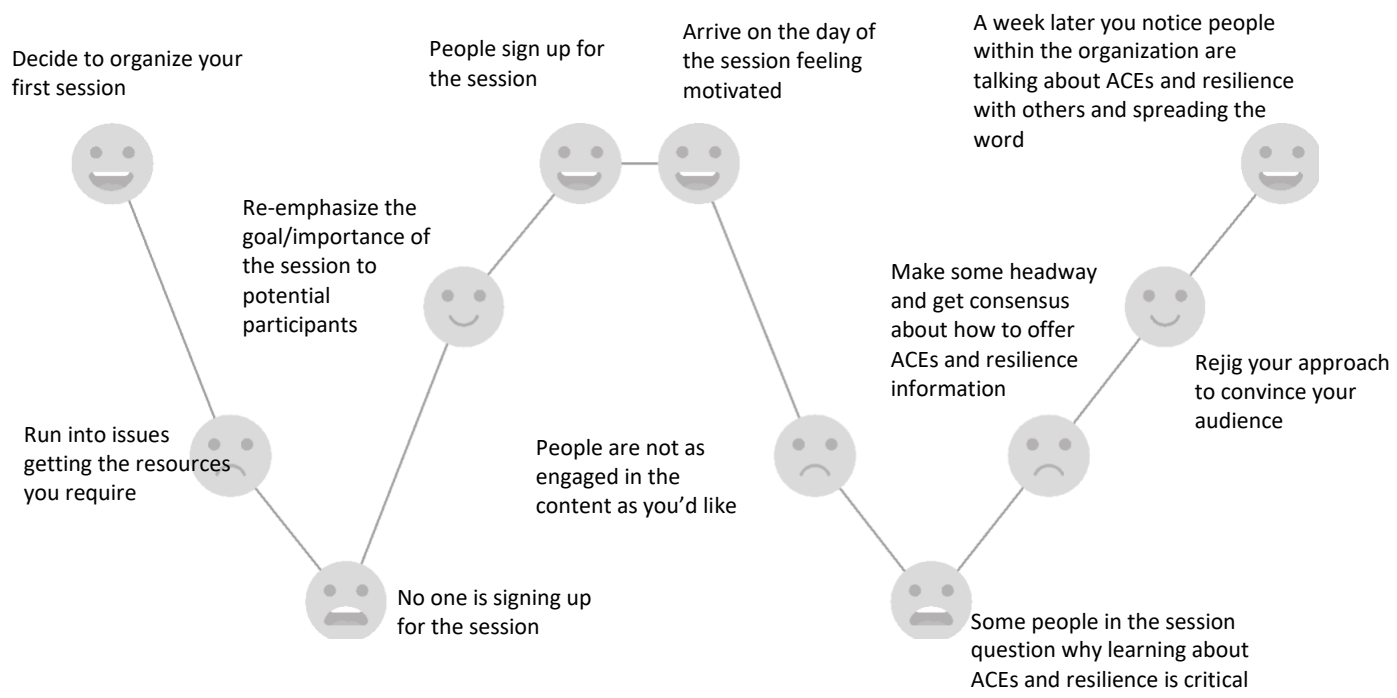
Other times, you'll feel energized that you made a difference. Seeing subtle signs of change will be extremely rewarding.

Example touchpoints

These run on a 5-point scale:

-  happy
-  above neutral
-  neutral
-  below neutral
-  dissapointed





Key Steps of Your ACEs & Resilience Champion Journey

Being an ACEs & Resilience Champion requires being strategic, setting goals to evoke small changes, and sticking with them. These five steps will help you start.⁶

Step 1: Start with WHY

Evoking change often requires making the status quo unacceptable. Activating others in your organization to prevent and reduce the effects of ACEs and build resilience will require showing them in a compelling way WHY taking action to address ACEs and build resilience is critical.

Articulating a specific and compelling narrative is always the best way to evoke change.

Take Action

Take some time to think about WHY your organization needs to take action related to ACEs and building resilience.

Start with thinking about the impact of ACEs on a specific person, and how you can build resilience. What will change for them if your organization has a better understanding of ACEs and their effects? What negative effects could they experience if your organization does not “get on board”?

At the organizational level, reviewing the vision, mission, and values of the organization may be a good place to start. Incorporating an understanding of ACEs and resilience into your strategic plan may help you to articulate why giving attention to ACEs and resilience is critical to fulfilling your organization’s mandate.

Take action by asking yourself the following questions:

⁶ This model comes from London, 2009 and is consistent with generic motivational, goal-performance models of behavior (Steel and Konig, 2006).



WHO will be negatively affected if ACEs and resilience knowledge/understanding does **NOT** permeate your organization?

WHAT is happening that shouldn't happen?

WHAT is not happening that should happen?

Exactly **WHY** does this gap matter (to the person affected, to your organization and to its success at achieving its vision)?



Step 2: Set specific and challenging goals to evoke change

Change does not happen in a straight line. It is more likely to happen if you form a clear and realistic sense of what you're trying to achieve within the organization. Develop clearly articulated, time-linked, and measurable goals to achieve as an ACEs & Resilience Champion.

Highly effective goals:

- Are specific and targeted
- Are measurable
- Are realistic and achievable
- Are time-linked
- Contribute in a meaningful way to the ACEs and resilience “big picture” within the organization

Take Action

Look at your organization and what you most need to achieve with respect to ACEs and building resilience. Start with some small, easily achievable goals, and also set yourself some stretch goals that may take a bit longer. As you articulate your goals, make sure they can be observed or measured so you can gauge your success.

A Bad Example

Increase awareness about ACEs in my organization

A Good Example

- Ensure people in my organization understand what ACEs are at the end of the month so that we are on our way to becoming ACEs-aware.*
- Every week, I will send out an email with ACEs related facts and ideas for building resilience, and I will track the open rate for the email. If there are any departments that are disengaged, I will reach out to the head of the department to add another push.*
- At the organizational meeting at the end of the month, I will test colleagues' understanding and offer further insight through a quick presentation.*



Step 3: Know yourself and how you see other people

Your implicit beliefs about how people behave will impact the way you interact with others and the strategies you use to present information about ACEs and resilience to inspire behaviour, program, policy change. People have general beliefs about whether others are:

- Able to change their attitude and behaviour;
- Sensitive to gains and losses; and/or
- Risk tolerant or risk averse

Being an effective ACEs & Resilience Champion requires first knowing who you are, and then understanding your beliefs about people in general. Consider these questions reflectively:

Take Action

Know yourself

What motivates you to be an ACEs & Resilience Champion?

Why do you believe that understanding ACEs and building resilience are important topics?

What unique skills or understanding do you bring to the ACEs and resilience discussion?



What are your beliefs, biases, and assumptions about other people?

What assumptions do you have about people (their behavior, motivation, ability to change etc.)?

What types of behaviours might challenge you as an ACEs & Resilience Champion (for example, criticism makes you defensive)?

What other biases do you carry with you?

What have you seen as the most effective way to shift how other people think?



Step 4: Tailor your approach to distinct individuals

Evoking change in your organization will require a range of different persuasive approaches. People can be resistant to shifting for different reasons, so you will need to tailor your messaging and your approach to each person's unique needs.

Take Action

Think about the people that you're trying to shift within your organization and about the avenues that will be most helpful to motivating them to shift. Keep in mind that throughout this process, it is important to give everyone the full picture. Some things you'll want to cover:

- *What are ACEs?*
- *What are their effects?*
- *What is resilience and what can you do about it?*

Consider the following perspectives that you might encounter:

Give Me the Facts and Figures (Cognitive) – *Some people like rational arguments and are looking for hard numbers before they will commit to change. For these people, for example, statistics about some of the negative effects of ACEs may be powerful.*

Help Me Empathize (Emotional) – *Other people may be turned off by facts and figures, but could be easily encouraged to think about the deep negative effects of ACEs. These people could be easily inspired by the resilience that people exposed to ACEs often show. Showing the real-world emotional stories of ACEs and resilience (both positive and negative) is critical to evoking change.*

Show Me What I Need to Do (Behavioural) – *People vary in their ability to jump from concepts and principles to action. This inability can look like resistance to change when it's not. As you're working to evoke change, make sure to provide clear direction about what ACEs and resilience-informed practice looks like. For some people it will be helpful to offer concrete examples of actions they can take.*



Examples of Using this Approach

What you do	Cognitive	Emotional	Behavioural
<p>Screen current policies and procedures to identify those that don't reflect an understanding of ACEs and resilience</p>	<p><i>Use information to express the need to change current policies and procedures</i></p> <p><i>Hold a meeting with colleagues where facts and information are used to facilitate the discussion</i></p>	<p><i>Use a personal story of an individual who experienced ACEs to warn of the dangers of adhering to current procedures</i></p> <p><i>Hold a meeting and create an emotional case for how new policies and procedures will influence positive change</i></p>	<p><i>Hold a focus group meeting to identify procedures that need to change</i></p> <p><i>Provide replacement policies and procedures</i></p> <p><i>Put plan into place to change procedures that don't adhere</i></p>
<p>Take public action</p>	<p><i>Hold a public meeting and use information to express viewpoint</i></p> <p><i>During the meeting, repeat key messages to help audience understand and remember the most critical information</i></p>	<p><i>Hold a public meeting and use persistence to get point across</i></p> <p><i>Don't take no for an answer</i></p> <p><i>Warn audience about potential consequences of not helping people with ACEs</i></p>	<p><i>Hold regular public meetings</i></p> <p><i>Participate in consultations, write letters and advocate to ensure an understanding of ACEs and resilience is embedded in policies, funding and resource decisions</i></p> <p><i>Upset the status quo; take people out of their comfort zone</i></p>
<p>Organize a ½ day long training session to raise awareness about ACEs and resilience and inspire behaviour change among staff</p>	<p><i>Use facts and data during session to show the percentage of people who have experienced ACEs and describe the research about the impacts of ACEs and the importance of resilience</i></p>	<p><i>During the session, use emotional narratives to warn of the pitfalls associated with being misinformed</i></p> <p><i>Express the positive effects their actions could have on individuals who have experienced ACEs</i></p>	<p><i>Organize the session with agency staff in mind</i></p> <p><i>Hold the session multiple times to ensure high level of participation</i></p> <p><i>During session, clearly identify actions to take</i></p>



What you do	Cognitive	Emotional	Behavioural



Step 5. Don't forget about the power of the situation

As you make your way through the planning steps, it's important to keep the situational information in the back of your mind. Each step will be dependent on the situational factors you encounter.

Great champions understand that evoking behavioural change is only one part of the equation. Many contextual factors will dictate the nature of advocacy and will influence the ability and motivation of people to direct change within their organizations. Some critical situational factors to consider:

- Is there access to the necessary resources to support the change?
- What is the organization's openness to change?
- Are there opportunities for having your voice heard?
- Are you finding yourself in situations that are supportive and clear or constraining and disorganized?

Supportive and clear situations will promote ambitious goals, strategies, and persistent effort until goals are reached. Low support and disorganized situations are likely to lead to less ambitious goals, limited strategies, and less effort.

Take Action

Think of your goal(s) from Step 2.

What are some possible situational factors you could encounter?

How will these either facilitate or hinder your goal achievement?



Do's and Don'ts of Being an Effective ACEs & Resilience Champion

The success of your work to address ACEs and build resilience will be influenced by how well you stay aligned with the path of a great champion. Reflect on the following Do's and Don'ts before you set off on your ACEs and resilience journey.

Do

- Facilitate ACEs understanding and the importance of building resilience among other professionals
- Have a clear purpose and strategy
- Become succinct, articulate, thorough and offer alternative ways of thinking
- Show empathy for the people/systems you're trying to shift
- Respectfully push for accountability
- Supportively push for even small changes
- Show openness to learn and change
- Provide the necessary tools and support to promote informed ACEs decision-making
- Talk about resilience whenever you talk about ACEs
- Stay open to feedback from your colleagues

Don't

- Lose patience, persistence and perseverance
- Overlook new ideas
- Belittle people with a different view
- Plant your feet – find consensus instead
- Make promises you can't deliver
- Underestimate the power of a motivated person to evoke change



4. Action for Change: Strengthening how your Organization Approaches ACEs and Resilience

Organizations benefit from taking the time to understand how their processes, policies and actions help or hinder the creation of an environment that prevents and reduces the effects of ACEs and builds resilience. Taking a more deliberate approach may help improve outcomes for clients, staff, and the community.

Stressful or potentially traumatic abuse, neglect or household dysfunction early in life are known as adverse childhood experiences (ACEs). ACEs can increase the risk of negative health behaviours and outcomes that can develop later in life.

What does action look like?

Preventing and reducing the effects of ACEs and building resilience requires all of us to take action within our spheres of influence.

At your job, you may spend most of your time working directly with clients, you may make decisions about the programs that are offered or policies that guide your organization. You may work in a setting that is focused on prevention, intervention and/or treatment. You may work for a small organization or a level of government. All of this helps to determine your sphere of influence – where you have the power to take action to address ACEs and build resilience.

Actions at all levels is critical to achieve the collective impact we are all working toward: *A resilient community that prevents and reduces the effects of ACEs.*

Actions to address ACEs and build resilience in your community may take many forms. The actions you take may depend on your role within an organization, input from your colleagues, and the resources available. Actions may affect service delivery and interaction with clients, and/or policies and procedures within your organization. Actions may also target change at a broader systems level (e.g., citizen engagement, municipal, provincial, or federal policies).

Below are examples of action that be taken at the individual, program and organization, community, and system levels:



Individual (clients you work with)

- Integrate principles of Trauma-Informed Care (TIC) and Person-Centered Care (PCC) into your interactions with clients (you will find more information about TIC and PCC in [Section 7](#) of this toolkit).
- If appropriate, talk with your clients about the impacts of adverse childhood experiences, other forms of adversity and toxic stress. Whenever you talk about ACEs also offer information about resilience.
- Share information and resources to support clients to build their own and/or their children's resilience.
- Teach skills and offer tools for parents, children and individuals to learn how to deal with stress, resolve conflict and manage emotions.
- Refer youth to mentoring programs.
- Consider the impact of raising awareness of ACEs, and the potential for staff to experience secondary trauma or trigger their own trauma histories while working with clients. Ensure counselling is available or implement mindfulness classes and other supports to help staff manage their stress.

Program and Organization

- Integrate principles of Person-Centered Care and Trauma-Informed Care into your organization.
- Organize a training session about ACEs and the role of service providers in building resilience to raise awareness and inspire behaviour change among staff.
- Refer your colleagues to acescoalition.ca to do an online training about ACEs and Resilience
- Modify existing programs and develop new program practices that aim to prevent and reduce the effects of ACEs and promote resilience. For example, add content regarding brain development to evidence-based home visiting and parenting education programs that support the healthy development of infants and young children (e.g., Healthy Babies, Healthy Children).
- Screen current policies and procedures to identify those that don't reflect an understanding of ACEs or resilience, and may inadvertently promote negative interactions with clients.
- Develop and implement organizational policies that create a welcoming and safe space for clients and program participants. Consider how policies can promote protective factors and positive experiences for clients.
- Review employee job descriptions, modify employee orientation sessions, and add professional development opportunities to ensure staff understand the impact of ACEs, the importance of resilience to buffer the effects of ACEs, and their role in promoting resilience.



Community

- Develop and implement a public education campaign to promote social norms that protect against violence and adversity. Public education campaigns are one way to shift social norms and reframe the way people think and talk about ACEs and resilience.⁷
- Provide leadership, decision-making and problem-solving opportunities for youth to meaningfully contribute to your community.
- Provide low or no-cost activities for families so that income is not a barrier to participating in their community.

System

- Find networks of strategic allies to advocate for systems and policy change:
 - Learn about the ACEs Coalition of Guelph and Wellington.
 - Develop a Coalition in your own community.
- Support policies and/or advocate for funding for interventions that support and enhance people's access to protective factors (for example, positive school environments, safe communities).

Ideas for action were developed by drawing on the experiences of others, including the [Centers for Disease Control](#) and the [Change in Mind](#) project.

Follow these steps to identify how your organization might take action on ACEs and build resilience.

Identification – Start at the Beginning

How are you a part of building resilience? This process will help you and your team identify, define, and analyze the current state to identify areas for improvement. Alone, or with your team, answer the following questions:

⁷ Centers for Disease Control and Prevention (2019). Preventing Adverse Childhood Experiences: Leveraging the Best Available Evidence. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.



How are people who have experienced ACEs treated by staff and considered in your processes and policies?

How do we talk about ACEs? How do we talk about resilience and protective factors?

How is an understanding of ACEs and resilience incorporated into our organization today?

What people, places and processes within your organization are impacted by your current approach to people who have experienced ACEs?

How are they impacted?



What are the consequences of those impacts to the people involved?

What are the consequences of those impacts to the organization?

What are the consequences of those impacts to the community?

What has been done to change this so far?

Who can help make the change happen?

Considering the above, write a statement that describes the current way your organization approaches ACEs and building resilience. This statement should be as complete and specific as possible. Stick to the facts, and focus on the **Who, What, Where, When, Why & How**.

This statement doesn't replace your earlier findings, instead, it should help you conceptualize where the biggest opportunities for improvement lie.

Justification –Develop a Rational and Emotional Case for Change

Considering the statement, you've created above, develop a rational and emotional case for change (Why do you want to see change in your organization?). Many people are capable of building a rational case for change, but are less adept at leveraging an emotional appeal. Understanding the emotional case for change will make people feel truly committed to the change instead of only creating another "program of the month". It will also help people connect to the goals personally, rather than only thinking about it from the organizational level. An emotional grounding will build momentum for a real transformation.

Rational Case for Change



Emotional Case for Change

Manifestation – Drive Real Change

Start with the end in mind. What does your organization look like when it addresses ACEs and resilience-building in the best way possible? Compose a SMART goal that outlines how you and your team can help your organization make ACEs and resilience priorities in the organization.



The Physical Environment

Does your space have any barriers for people who have experienced ACEs? How does your space act as a protective factor for people? How does it not?

Training and Development

Do you provide adequate staff training on ACEs and resilience? Do you have ACEs and resilience resources for staff and/or clients?

Supervision

Do supervisors understand the effects of ACEs and the importance of resilience? Is there an opportunity to talk with a supervisor about how your efforts to prevent and reduce the effects of ACEs and build resilience are making a difference?

Communication

Are there any internal or external communication practices that may be detrimental to folks who have experienced ACEs? Could you start any new practices to emphasize resilience?

Team Environment

Is your team open to doing things differently to better address ACEs and build resilience? Do you have the necessary resources to support your efforts?



Leadership

Do organizational leaders understand their role in addressing ACEs and building resilience? Is there appropriate accountability for actions that may be detrimental to those living with and/or who have experienced ACEs?

Values

Do the current values of your organization support preventing and reducing the effects of ACEs and building resilience?

Overall

Drive Real Change by Identifying Roles

Making your goals a reality takes action. With your team, think about who will be responsible for each goal. Ambiguity at this stage can lead to missed opportunities to achieve your goals.

A good model for thinking about responsibility is the RACI model, though you can use your own model too. The RACI model helps you quickly work out the level of involvement required of various team members.



Responsible	<ul style="list-style-type: none"> ● The person who actually carries out the process or task assignment ● Responsible to get the job done
Accountable	<ul style="list-style-type: none"> ● The person who is ultimately accountable for process or task being completed appropriately ● Responsible person(s) are accountable to this person
Consulted	<ul style="list-style-type: none"> ● People who are not directly involved with carrying out the task, but who are consulted ● May be stakeholder or subject matter expert
Informed	<ul style="list-style-type: none"> ● Those who receive updates on the process or task, or who have a need to stay informed

Monitor and Adapt

Now, decide when you're going to follow up on your goals next. Will it be in a month? In a quarter? In a week? If your SMART goals are well written and time-bound, they may suggest a natural time to reconvene.

Write down the date of your next progress update here:

When you meet again, remember that momentum is the most important thing. Your first idea to solve an issue may not have worked as planned, but that's okay. This meeting is a great time to reassess strategy based on new information.

5. Facilitated Discussion Guide for Talking About ACEs and Building Resilience

Getting Started with Facilitation

Organizations rarely change on their own. Real change comes from dedicated, inspired people pushing their peers to improve. This guide will help you drive real change within your organization about how you talk about ACEs, how their effects are understood, how people who have experienced ACEs are treated and how you work together to build resilience. It will help you prepare for, have, and follow up on the coaching conversations that need to occur to improve your ways of working.

Use this guide whenever you need to initiate or facilitate an ACEs or resilience conversation within your organization. An ACEs & Resilience Champion aims to get everyone on the same page through education and guiding discussions about concrete actions that can be taken to prevent and reduce the effects of ACEs and build resilience.

What is Facilitation?

Facilitation is a way of working with groups that enables and empowers others to meet their goals. Skilled facilitators are less about “doing” themselves and more about using their skills to enable groups to reach decisions, set goals and/or learn skills. When done right, facilitation encourages people to share ideas, resources, and opinions while thinking critically.

Facilitators have **four primary functions** when facilitating group discussions:

- Bring out the opinions and ideas of individuals
- Offer evidence-based information
- Ensure a positive and healthy process
- Never take sides

A good facilitator recognizes when functions are achieved and not achieved, and where to take the conversation next.



The Principles and Values of Facilitation

Listening	Facilitation means listening to what people are saying (verbal communication) and tuning in to what they're not saying (non-verbal communication)
Confidentiality	Each person is confident that everything they discuss is safe within the bounds of confidentiality
Respect	Facilitator acknowledges and respects each individual of the group
Equality	Each person is regarded as having an equal right to contribute, influence and direct the group
Value of personal and/or professional experience	Each person feels their contribution to the discussion is valued
Trust and safety	Facilitator develops trust and safety to ensure maximum participation
Group process	Facilitator is aware of how the group is operating. They resolve conflict and difficulties as they arise
Inclusion and encouragement	Facilitator is intentional about creating an inclusive space. They encourage everyone to use their voice
Participation	Facilitation succeeds when there is a genuine belief in the value of candid participation



Planning a Session

Whether you're having a one-on-one conversation or a group session, think about the following to keep your discussion on track.

Reflect on Session Strategy

Take Action

Think about the person / group

How many people will be in your session?

If a group, do these people already know each other, do they work together or is this a new group?

What does the person/group already know about ACEs?

What does your person/group want or need to achieve?



Take Action*Think about the organization*

What is the organization's goal for these meetings?

What is the aim of the work according to the organization?

Take Action*Think about the equipment*

Do you have a room with enough space for your session?

What resources do you need and how will you acquire them?



Take Action

Think about the duration

How long will it take for the group to achieve the aim of the discussion?

Is this going to be a one-off session or the first of a series?

Take Action

Think through the process

How do you plan to ensure the needs of the group are met?

Facilitation Plan

Once you have reflected on all the preparation items, you are now in a position to plan your session. Helpful information on facilitation and communication styles can be found in the [Communication Resource Guide](#).

Overall Aim

What does the group/facilitator hope to achieve?

Specific Objectives

Break the overall goal into smaller parts. List them here:

Method

What are the techniques you plan to use (examples: group discussion, role playing, hands on activities)?



Clarify

Clarify facts (measurable, verifiable information) and any issues or concerns of the participants. Both are essential.

- Go over some of the facts needed before the discussion to ensure clarity
- Address any concerns before getting started

Develop

Ask questions and include others in the process. Before you start, plan what you'd like to do and when to share these ideas. Emphasize that you are seeking others' ideas too. People are already doing great work. Acknowledge what is currently happening and consider ideas that support, leverage, and/or scale existing actions and interventions. Use your Facilitation Plan from above as a guide.

- Address each question you'd like to cover using the **method** upon which you've decided

Agree

Before closing, support the group to develop a plan to follow through on ideas that were developed. What are the next steps or action items? Who will complete them? What is the timeline?

- Plan to follow through on the ideas that were developed

Close

Double check that everyone agrees about the next steps and is committed to following through. How are you going to do this?



Facilitated ACEs and Resilience Discussion Examples

Sample 1 - New Employee Training

1 hour

Situation

A group of new employees have joined your organization. You need to introduce the foundational elements of ACEs and Resilience, and how those concepts are applied in your workplace.

Aim	<ul style="list-style-type: none"> ● To begin a conversation about ACEs and resilience with newly hired employees
Objectives	<ul style="list-style-type: none"> ● Define ACEs and their effects ● Answer the question, what is resilience and how can it be promoted? ● Describe the CDC-Kaiser ACE Study ● Describe how ACEs are being addressed in your community ● Identify specific actions our organization can implement to prevent and reduce the effects of ACEs and promote resilience.
Methods	<ul style="list-style-type: none"> ● Group discussion ● Resilience game

Structure

Introduce the facilitator and the session plan

2-3 Minutes

Explain the learning objectives for the session today

- “We are going to talk about ACEs, in particular, what they are and how they can affect long-term health.”
- “We’re also going to talk about what resilience is and how it can buffer the effects of adversity.”
- “We are going to talk about the CDC-Kaiser ACE study and how it has become a landmark study for research related to adverse childhood experiences.”
- “Finally, we’re going to talk about how Guelph and Wellington are championing ACEs prevention and promoting resilience.”

Introduce participants

5 Minutes

Have everyone in the group introduce themselves by saying their name and a little bit about themselves

- Example icebreaker exercises to get everyone comfortable:
 - Say your name and what you hope to get out of this session
 - Say your name, your role and one thing you like to do for fun



What are ACEs?

15 Minutes

Information

- Adverse childhood experiences are potentially traumatic or stressful experiences that happen in a person's life before the age of 18. These experiences can have negative, lasting effects on health and well-being. Additional information to guide the discussion can be found at acescoalition.ca.
- There are ten broad categories of ACEs:

Abuse	Neglect	Household Dysfunction
<ul style="list-style-type: none"> ● Physical ● Emotional ● Sexual 	<ul style="list-style-type: none"> ● Physical ● Emotional 	<ul style="list-style-type: none"> ● Household member struggling with a mental illness ● Incarcerated household member ● Parent treated violently ● Substance abuse by a household member ● Parental separation or divorce

Questions for the group to facilitate discussion

- Has anyone heard of the term ACEs before?
- Will someone please define ACEs for the group?
- What can anyone tell me about the potential impacts of adverse childhood experiences?

Resilience: How can resilience help reduce the negative impacts of ACEs?

2-3 Minutes

Information

- Resilience is the ability of an individual to rebound from difficult times
- Go the Center for the Developing Child at Harvard University to find their InBrief: [What is Resilience? video](#). Consider playing this 2-minute video so people receive high-quality, easy to understand information about resilience.

Resilience Game

12 – 15 Minutes

This game is intended to do two things:

1. Introduce the complex and often unpredictable combinations of risk and protective factors that people accumulate
2. Prompt conversation about how your organization can better support people on a unique, case-by-case basis.

Create two children as stick figures on a white board or chalkboard for everyone to see. Label them child A and child B.



Write on small pieces of paper different protective factors and risk factors, and mix them up in a bowl. Explain that these are life experiences that accumulate over the years. Make sure you have the same number of risk factors and protective factors. Apply a ranking of -1 for ACEs risk factors and +1 for protective factors.

Example risk factors	Example protective factors
<ul style="list-style-type: none"> ● Witnessing domestic violence in the home (-1) ● Mother is emotionally abusive (-1) ● Chronic neglect (-1) ● Mother has a substance-use disorder (-1) ● Father has schizophrenia (-1) ● Father is incarcerated (-1) 	<ul style="list-style-type: none"> ● Meets a role model and has a healthy relationship with them (+1) ● Has a good relationship with a cousin (+1) ● Does well in school (+1) ● Lives in a safe neighbourhood (+1) ● Develops emotional regulation skills (+1) ● Develops a strong sense of self efficacy (+1)

Note: Make sure you have the same number of positive vs. negative factors

Go around the table and have each person pick one piece of paper and apply it to one of the two stick figure children, alternating between them. Use a magnet or tape to keep them organized and visible.

Once you've gone around the table once, review the factors that each child has. Add and subtract the numbers for each child, and determine a final score. If the child has a positive score, this child has experienced more positive experiences throughout life, and is more likely to experience fewer negative life outcomes than a child with a negative score.

Discuss how these factors might influence the life of this person, and how they might be manifested. Would you recognize the impact of these factors if the child was to visit your workplace? What about if they grew up and began working in your workplace? If not – what can you do to ensure that they're given the support they need regardless?

Critical information:

- Resilience is the ability to adapt or rebound from adversity.
- Resilience is not something someone 'has' or 'doesn't have'.
- Resilience is promoted by protective factors and inhibited by risk factors.
- When protective factors are present in a child's life, healthy development (social, emotional, and physical) is promoted even if that child may experience severe adversity.
- Resilience is built over time. It is not static.

[What is the CDC-Kaiser ACE Study?](#)

5 Minutes

Before going over study information:

- This study was conducted in the United States of America. What issues might arise when trying to apply the findings to our context here?
- Potential questions include:
 - Did the sample only include Americans?
 - Would the results look different globally and across different cultures?
 - Do we have local or Canadian data to compare to these results?
 - What research has been done since this study was conducted?



Give a brief overview

A study conducted in 1998, by Felitti et al., from the Centres for Disease Control (CDC) and Kaiser-Permanente published the results of a joint research project, "[The Adverse Childhood Experiences \(ACE\) Study.](#)"

This study has become a landmark study for research related to ACEs because of the findings:

- a) ACEs are common and universal.
- b) ACEs don't usually happen in isolation.
- c) There is a strong association between childhood adversity and negative health outcomes.
- d) There is a clear dose relationship between the level of exposure to ACEs and risk of poor health.

What can we do to address ACEs and build resilience in our community?

10 Minutes

Questions for discussion:

- What are organizations or community stakeholders already doing to address ACEs and/or build resilience?
- What is a first step you can take?
- What is a first step your organization can take?

Critical information (example from Guelph and Wellington)

- Several community leaders organized an ACEs Coalition
 - The ACEs Coalition started after a one-day call to action event that focused on strengthening partnerships, building a collective impact approach to ACEs prevention and reduction, and developing new ideas for how to best support families and individuals at-risk of ACEs and build community resilience.
- The ACEs Coalition:
 - Offers training for primary care providers, allied health professionals, and community partners
 - Creates resources to support raising awareness and behaviour changes related to ACEs and resilience
 - Supports and uses local research to guide our work
- Inform them about what your organization is currently doing for the ACEs and resilience community



Close meeting

5 Minutes

Critical information to review

- ACEs are common and universal – they are found across all cultures, genders, and socio-economic groups
- Early adversity can dramatically affect health across a lifetime
- Prevention and early intervention are necessary. Preventing and reducing ACEs and building resilience requires a whole community approach.

Final Questions

"One person can make a difference, and everyone should try." - John F. Kennedy



Sample 2 - ACEs Action Brainstorm

30 Minutes

Situation

A group of team members aware of ACEs and the importance of resilience gets together to identify actions they can take to address ACEs and build resilience more comprehensively.

Aim	<ul style="list-style-type: none"> ● Begin a discussion about how your organization can address ACEs and build resilience more comprehensively
Objectives	<ul style="list-style-type: none"> ● To think critically about how your organization can become better at addressing ACEs and building resilience ● Initiate improvements within your organization
Methods	<ul style="list-style-type: none"> ● Group activity ● Discussion

Contents of the Discussion

Introduce the facilitator and the session plan

2 Minutes

Explain the learning objectives of the following session

- “Our goal is to start thinking about how we as an organization can become better at addressing ACEs and building resilience.”

Introduce group activity

5 Minutes

- “Today we’re going to use a brainstorming activity to get us thinking about the actions we can take as an organization.”
- Get into groups of two. Together, come up with 5 ideas about how our organization can address ACEs. Try to answer the following questions:
 - How can we as an organization become more ACEs- and resilience- aware?
 - How can we as an organization ensure we’re holding ourselves accountable?
 - How can we ensure we’re actively applying our ACEs and resilience knowledge in a way that’s making a difference?

Brainstorm

5 Minutes

- Pass out sticky notes and instruct participants to write down one action idea per sheet
- Respond to questions that arise. When appropriate, involve all participants to answer them

Reflect

5 Minutes

- When the groups are finished, get one member from each pair to arrange their posts on a wall or a large surface.
- As the facilitator, arrange any ideas that have similar actions together (if there are any)

Identify Actions

10 Minutes

- As the facilitator, call out any recurring themes and clarify any actions that might not be clear.
- Ask everyone to come together as a larger group to discuss. Let each pair vote on the actions they think are the most creative, and most practical. A cohesive group may be more focused on taking larger group actions, but others may be more at the individual reflection and action stage. Get a mix of ideas for individual and group actions. Prompt the group to identify:
 - The top 1-2 actions that are most creative
 - The top 1-2 actions that are the most practical
 - 1-2 that can be implemented right away (if there are any)

Close meeting

3 Minutes

Organize a time to have a session about putting these ideas into action.



Reflection for the Facilitator

Take Action

Take some time to reflect on your session. Consider your approach to facilitating and how you will champion the next steps identified by the group.

Facilitating the Group:

What went well?

What challenges did you encounter? How did you manage them?

What will you change the next time you facilitate a meeting or activity?

Consider your ACEs & Resilience Champion goals, how well did the session align with your goals? What needs to stay the same? What will you do differently to achieve your ACEs and resilience goals?



Ensuring Action

What happened during the session? Reflect on the key elements of the experience and discussion, draft a summary.

What were the most important ideas discussed?

What ideas require follow-up? (e.g., clarification, additional information, or consultation)

Who needs to know about the discussion? (e.g., debrief with your supervisor, share summary with meeting participants)

Now what? How do you plan to follow-up? Who needs to be involved? How will you include meeting participants in future action?

When will the actions occur?



What additional resources do you need?

How will you communicate your ideas?

Do you have a local committee, collaborative group or coalition (for example, the ACEs Coalition in Guelph and Wellington) that can help? If yes, how can they help?



6. Communication Resource Guide

Find Your Facilitation Style

There are many different styles of facilitation, and the style you use needs to be matched to the goals of the group, and your own skills and interests. As a facilitator, you will be more effective when you recognize the needs, roles and potential resistance of group members. Depending on this, the facilitator's role may be one or more of the following:

Directive	Instructing the group how to do something or giving them information.
Objective	Asking questions and encouraging people to voice their own opinions and ideas.
Methods	Assigning tasks and roles to individuals.
Participative	Taking part in the discussion, sharing personal experiences and encouraging others to do the same.

Basic Communication Strategies

Effective communication is a process of sharing knowledge and ideas with others through verbal and non-verbal communication. Anyone having discussions about ACEs and resilience needs to be aware of their communication strategies. This section provides a brief overview of communication strategies.

Verbal Communication Examples

- Comments toward others
- Expressions of values and attitudes
- Volume and tone of voice

The meaning of verbal communication is affected by several factors:

Tone of voice

- A powerful indicator to the group. You could convey contradictory messages if your tone of voice is inconsistent with the message you're trying to convey.
- For example, if you say "I'd like everyone to participate" in a deadpan voice that does not invite participation, the overt message could be undermined.

Volume and pitch

- High pitch indicates excitement, fear, or nervousness.
- Loud volume could signal anger, frustration, confidence, or fear.
- Altering the volume is helpful in indicating a change in direction, to gain/maintain attention, or to express enthusiasm.

Interpretation

- You must be aware of how your beliefs or values can influence your interpretations
- Instead of making pronounced statements of interpretation ("this is the best way to do that"), you should offer suggestions of interpretations ("I have found that this works well, but see what works best for you")

Language

- Any message can be communicated in many different ways
- Precise wording and language can help others understand our purpose
- Language can either build bridges or separate (e.g., inclusive vs. divisive language)
- Using jargon, acronyms or abbreviations that others don't understand can hinder communication

Nonverbal Communication Examples

Non-verbal communication (e.g., body language) is also a critical source of information in our interactions with others. Be aware of:

- Facial expressions and posture
- How and when a person chooses to sit, move, position themselves
- Implicit assumptions and biases toward gender, ethnic background, age and gender



Strategies for Managing Non-Verbal Communication

Match your state to that of the group

- Shared psychological states lead to synchronized brain states, essentially meaning that you're on the same page⁸

Synchronize your movements and facial expressions

- Try to make subtle imitations, matching the movements others are making
- This will lead to synchronized brain states, allowing you to get on the same page

Make eye-contact, but don't stare

- Eye-contact makes the experience more personal
- Failing to make eye-contact alerts the other person's brain that you're hiding something or lying
- You want to aim for intermittent eye contact (60-70% eye-contact) where you maintain contact for around 3-5 seconds at a time – any more than that can make the other person uncomfortable.

Express emotion on your face

- Emotions are a big part of nonverbal communication and being expressive can allow people to understand how you're feeling
- If you're smiling, make sure it's a real smile
 - Fake smiles lead to people seeing you as untrustworthy and less likable
 - Real smiles make the muscles around the eyes crinkle and, pull up the nose

Match your gestures to what you're saying

- Most of us do this naturally, but doing it consciously can enhance your communication ability and help you stand out
- Examples:
 - Indicating the number of fingers when listing off the number of ACEs
 - Hands pointing at yourself or toward another when indicating "you" or "me"
 - Hands going over a hump when explaining how people who have experienced ACEs can rebound

⁸ Lakin, J. L., & Chartrand, T. L. (2003). Using nonconscious behavioral mimicry to create affiliation and rapport. *Psychological Science*, 14, 334–339.



Choose the direction of your lean depending on what message you want to convey

- Lean forward to show interest, engagement, and motivation
- Lean back with an open position to show you're receptive to another person's idea
- Do not lean back with your arms and legs crossed, this signals that you're closed off

Ensure consistency between your words and your actions. Non-verbal actions can either enhance or contradict verbal statements.

Best Practices – Facilitation

Facilitating involves effectively balancing information and emotion. Here are some of the best practices to keep in mind:

1. Listen actively
2. Reflect on what you know
3. Focus on the facts (not personalities)
4. Respond with concern for the individual or group's success
5. Maintain awareness and control over your feelings
6. Establish the facts in advance
7. Decide on the minimum action required
8. Keep an open mind to new information

People assign value to the words they hear. Encourage participation by using neutral, or positively-framed words and expressions. See examples in the table below.

Words/Phrases to Lose	Use these Words/Phrases Instead
But	And
Should	Next time
You'll have to...	From now on... OR In the future...
You'll need to	If you could... OR Could you please...
Can't because	Sure, as soon as...
There is no way... OR There is nothing...	I wish OR I hope



Facilitation Checklist

You have an understanding of the three basic responsibilities of the facilitator

1. Design and plan the process
2. Implement and record the discussion
3. Take time to reflect and identify strategies to take action on the suggestions identified by the group

Use the three basic principles of facilitation

- Bring out the opinions and ideas of group members
- Focus on how people participate in the process, not just on what gets achieved
- Never take sides

BEFORE

Set the conditions for successful discussions - In planning a good process, have you considered:

- Climate and environment
- Logistics and room arrangements

DURING

Encourage participation:

- Ensure everyone feels comfortable speaking
- Propose a structure that allows all ideas to be heard
- Ensure that members feel good about their contributions
- Ensure that ideas and decisions of the group are nominated, not leader dominated
- Refrain from criticizing anyone for what they've said

Decide what successful facilitation of this discussion would achieve:

- Improved planning
- Sustained member involvement
- Aid in creating leadership opportunities
- Increasing the skills of group members
- Better communication
- Conflict resolution
- Identification of concrete action



As a facilitator, you:

- Understand the goals of the meeting and the organization
- Keep the group and the agenda moving forward
- Involve everyone in the meeting
- Make sure decisions are made democratically

AFTER

Take time to reflect on the discussion and how you will champion the next steps identified by the group.

- Document key ideas and elements of the discussion
- Share your report with other champions and changemakers



7. Approaches to Client Care

Practitioners often interact with children and adults experiencing the negative effects of ACEs when they are at their most vulnerable. Creating safe spaces without triggering trauma responses can take effort, practice and skill. Person-Centered Care (PCC) and Trauma-Informed (TIC) are complementary approaches to working with clients that emphasize the ‘whole’ person and consider each client as an individual with unique experiences, living conditions and needs.

Module 4: Taking Action to Prevent and Reduce the Effects of ACEs and Build Resilience of the ACEs Coalition ACEs & Resilience Training provides more information about TIC and PCC.

What is Trauma Informed Care?

Trauma-Informed Care emphasizes:⁹

- the “whole person”; and
- providing care within the context of each individual’s life.

Trauma Informed Care shifts the way organizations view and approach trauma. It involves validating and recognizing the effects of traumatic events, coping strategies and effective treatments. A program, organization, or system that is trauma informed:

1. **REALIZES** the widespread impact of trauma and understands potential paths for recovery
2. **RECOGNIZES** the signs and symptoms of trauma in clients, families, staff, and others involved with the system
3. **RESPONDS** by fully integrating knowledge about trauma into policies, procedures, and practices
4. Seeks to actively **AVOID RE-TRAUMATIZATION**.^{10,11,12}

⁹Harris, M. & Fallot, R. (2001). Envisions a trauma-informed service system: a vital paradigm shift. *New Directions for Mental Health Services*, 89, 3-22.

¹⁰ Bolton, M., Buck, S., Conners, E.A., Matthews, C., Proulx, J., Wall, T., Willette, C., MacPhee-Sigurdson, M. & Stewart, P. (2013). *Trauma-informed: The Trauma Toolkit*. http://trauma-informed.ca/wp-content/uploads/2013/10/Trauma-informed_Toolkit.pdf

¹¹ Melz, H., Morrison, C., & Ingoldsby, E. (2019). *Review of Trauma-informed Initiatives at the Systems Levels*. https://aspe.hhs.gov/system/files/pdf/262051/TI_Approaches_Research_Review.pdf

¹² Substance Abuse and Mental Health Services Administration (SAMHSA)’s Trauma and Justice Strategic Initiative (2014). *SAMHSA’s Concept of Trauma and Guidance for a Trauma-Informed Approach*. <https://store.samhsa.gov/system/files/sma14-4884.pdf>



Clients want professionals who can provide information in a way they can understand. They need professionals who are open to listening and responding to questions and concerns, and make a noticeable effort to meet their client's needs.

What are the Principles of Trauma-Informed-Care^{13,14}

- **Safety:** Staff and clients feel physically and emotionally safe.
- **Trustworthiness and Transparency:** Organizational decisions and operations are as transparent as possible, with the intention to build trust.
- **Peer Support:** Opportunities for peer support are provided. Peers are individuals with lived experience of trauma.
- **Collaboration and Mutuality:** Active efforts are made to balance power differences between staff and clients, and across different levels of the organization.
- **Empowerment, voice, and choice:** Person-Centered Care is provided through a strengths-based, hopeful approach that gives clients a voice in decision-making and goal setting.
- **Cultural, historical and gender issues:** Create an organizational environment that reflects and responds to the diverse experiences and needs of people who live in your community and access your services.

¹³ Substance Abuse and Mental Health Services Administration (SAMHSA)'s Trauma and Justice Strategic Initiative (2014). *SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach*. <https://store.samhsa.gov/system/files/sma14-4884.pdf>

¹⁴ Oral, R. & Ramirez, M., Cooney, C., Nakada, S., Walz, A., Kuntz, A., Benoit, J., & Peek-Asa, C. (2016). Adverse childhood experiences and trauma informed care: the future of health care. *Pediatric Research*, 79, 227–2



What is Person-Centered Care?^{15,16,17}

Person-Centered Care views the client as a “whole person”, takes into consideration each client’s unique needs and gives the client a voice in their care. PCC also encourages engaging the client, those who are important to the client (e.g. partner, relatives) and their various service providers as active partners in care.

PCC involves:

- “advocacy,
- empowerment,
- mutual respect and
- an understanding of a person’s right to be autonomous, to self-determine, and to actively participate in decisions about their health”¹⁰

¹⁵ RNAO. (2015). *Person-and-family-centered care*. International Affairs and Best Practice Guidelines. https://rnao.ca/sites/rnao-ca/files/FINAL_Web_Version_0.pdf

¹⁶ Calisi, R., Boyko, S., Vendette, A. & Zagar, A. (2016). What is Person-Centred Care? A Qualitative Inquiry into Oncology Staff and Patient and Family Experience of Person-Centred Care. *Journal of Medical Imaging and Radiation Services*, 47, 309-314.

¹⁷ Cancer Care Ontario. (2015). *Person-Centred Care Guideline*. <https://www.cancercareontario.ca/en/guidelines-advice/types-of-cancer/38631>

