

Welcome to Session I of Spring 2025 Community of Practice

ITRC Race to Resilience Initiative to Organize “Transformational Resilience Coordinating Networks” in North America and Worldwide for the C-E-B Crisis

April 1, 2025

Many Thanks to Our Partners and Co-Sponsors!



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Key Message

“Community is Medicine”

Throughout human history our ability to band together and cooperate has always been key to surviving, adapting, and remaining healthy and resilient during crisis, and solving complex problems!



By organizing TRCNs in communities we can do this again now for the C-E-B crisis—and many other adversities!

Goal of the 4-Session Community of Practice (COP)

To help you decide if you want to form a TRCN in your community and give you information and tools to do it.

Today's Focus

- Why it is vital to organize Transformational Resilience Coordinating Networks (TRCNs) everywhere.
- Basic principles of a public health approach to mental wellness and resilience.
- Basic steps involved with organizing a Transformational Resilience Coordinating Network (TRCN)

“Resilience Pause”

Identify Your Prevention and Healing Resources

Think back to a time when you experienced severe stress or were traumatized.

If you were able to prevent serious physical or emotional harm, or heal when you were harmed, what were the most helpful elements?

For example:

- Was it having family, friends or neighbors to help you and talk with?
- Specific skills or strengths you relied on?
- Specific practices or activities you engaged in?

Remembering the resources that helped you prevent distress and trauma and heal— and how you can strengthen and maintain them in the future, can be life saving.

Helping others remember and strengthen their resources will help them, and give your life meaning and purpose: This is what TRCNs can do!



Why Form Transformational Resilience Coordinating Networks (TRCNs)?

Because Distresses and Traumas Are Epidemic Today Worldwide

The Trump Administration's Cuts and Push Toward Authoritarianism

Racism and Other
Inequalities & Oppressions

Violence and
Fear of It

Social Isolation and
Loss of Close Bonds



Lack of Sufficient
Jobs and Income

High and Growing
Poverty

Vast Economic
Inequalities

Many Other Individual, Family,
Community, and Societal Traumatic Stresses

Added to These Stresses and Traumas Now Are Those Generated by The Climate-Ecosystem-Biodiversity (C-E-B) Crisis

- Global average surface temperatures have now risen by 1.5 C/2.7 F above pre-industrial levels for entire year, activating possible irreversible impacts!
- Emissions already in the atmosphere and other factors make limiting temperature rise to 2 C/3.6F now “dead” --- and we might hit 2C in just 20 yrs—by 2045 (recent report by Dr. James Hansen and colleagues).
- Much hotter temps. are now certain and every small increase will create more harm to individuals, families, groups, communities, and societies worldwide.
- On every continent & in every ocean, organisms are trying to migrate uphill, north or south away from the equator, and many are dying, which alters ecosystems
- Most impacts grow “gradually then suddenly” because they hit “tipping points.”

The Climate-Ecosystem-Biodiversity (C-E-B) Crisis Mixes More Frequent, Extreme & Prolonged Disasters that Traumatize Billions

Wind, Rain, and
Snow Storms



Heat Waves
and More Extremes



Sea Level Rise and
Storm Surges



Wildfires



Floods



Droughts



And many other surprise disasters...

With Compounding Damage to Ecological, Social, and Economic Systems Humans Rely on for Basic Survival Needs that Stress Everyone

- Damage and loss of residences and critical infrastructure
- Water, food, power, and other resource disruptions & shortages
- Job and income losses
- New diseases caused by migrating viruses and chronic health problems due to extreme heat, inhaling wildfire smoke & more
- Loss of place, community, culture, and natural environment
- Disruption of close family and friend social support networks
- Involuntary migration and in-migration by other migrants
- Disaster and stress-triggered crime, aggression, and violence
- Intensified racism, sexism, and other systemic oppressions
- Worries about our future and our children's future
- Many other surprising never-ending “stress pileups”



Just a Few of the Recent Impacts of the C-E-B Crisis

- In the U.S. the unprecedented L.A. wildfires were larger and more intense due to record drought, and 27 other record climate disasters in 2024 including Hurricanes Milton and Helene caused over 2300 deaths and over \$1 billion in damages.
- In Canada record heat waves, record flooding in Quebec and wildfires in Rockies.
- Worst drought ever-recorded in Southern Africa, heat waves, and intensified rainy season sparked deadly floods in many African countries.
- Hottest summer on record in Europe, with Greece, Italy, Spain, Portugal, France, and Morocco experiencing deadly heatwaves and widespread wildfires in July.
- Hottest temperatures ever, driest, and unprecedented wildfires in Brazil (and the Amazon) and other Latin America and South American nations.

And many other C-E-B crisis-aggravated events that impacted billions of people, injured or killed thousands, and damaged residences, businesses, and communities.

Unless We Build Population-Level Transformation Resilience the Result Will Be a Global Epidemic of Mental Health & Psychosocial Issues

Psychological, Emotional, and Spiritual “Distress”

“Individual Trauma”

“Community Trauma”

“Societal Trauma”

Without initiatives to prevent and heal the impacts, the C-E-B crisis will be the greatest societal trauma modern society has ever experienced!

In Different Times, Ways, and Magnitudes *Everyone* Will Be Impacted

This is a *Global Population-Level* Problem

But in Near Term those at Greatest Risk include

- Many middle and lower-income nations that have added little to the C-E-B crisis—especially those near the equator
- BIPOC residents
- Low-income populations
- Migrants in almost any location
- Ethnic minorities
- Single women and young children
- People living alone
- The elderly
- People with insecure housing
- People with pre-existing conditions
- First Responders

C-E-B crisis impacts are **aggravating** existing **inequalities** and **injustices** and **adding new ones** that create even **greater impacts for these groups.**

But Be Very Careful About How “Vulnerability” is Framed and Addressed

A disrupted C-E-B system will often make assessments of who is “vulnerable” **flawed**

And focusing only on the “vulnerable” can allow wealthier people to think they are **immune** and thus **don’t need to cut emissions or change their policies and practices.**

How Do These Impacts Emerge?

External Stressors

Activate Fight, Flight, Freeze or Fawn Reactions From the Release of Cortisol and Adrenaline

Physical Reaction:

Increased blood pressure, pulse rate, difficult breathing, cold sweats, muscle tension, aches & pains, sleep disorders

Mental Reaction:

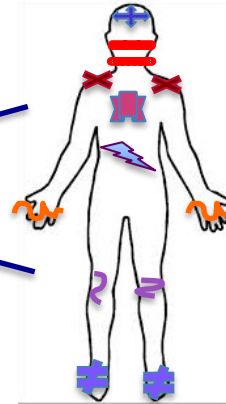
Excessive fear, worry, guilt, loss of trust, shattered beliefs and loss of meaning

If not discharged, what began as helpful adaptive reactions can become harmful



Individual Distress and Trauma and Maladaptive Coping

- Self-numbing/escape via legal or illegal substance, food, or tobacco abuse and more
- Seeking relief via diversions like hyper-vigilance, social media, electronic video games
- Seeking relief by turning distress on our spouse, children (ACEs), or others w/aggression or violence
- Dissociation, denial, neglect, and reenactment
- Less ability to think clearly, adapt, remain healthy & resilient, and meaningfully address the C-E-B crisis



Community and Societal Trauma and Collective Breakdown

- High distrust, despair, hopelessness
- Low empathy and compassion
- Authoritarianism and extremism
- 'We vs. Them' polarization
- Vast aggression, violence, crime
- No concern for environmental degradation
- Less ability to think clearly, adapt, remain healthy & resilient, & address the C-E-B crisis

If many people
experience these reactions

All Encompassing Personal Breakdown

- Physical health problems (e.g. cancer, heart)
- Psycho-emotion problems (e.g. anxiety, depression, PTSD, increased suicidality)
- Spiritual problems (e.g. hopelessness)
- Cognitive problems (e.g. memory loss)
- Behavioral problems (e.g. aggression or withdrawal)
- Less ability to think clearly, adapt, remain healthy & resilient, and address the C-E-B crisis

If It Continues



People who experience constant “Fight, Flight, Freeze or Fawn” reactions tend to withdraw into a self-protective survival mode that makes them

Less Adaptable

and can constrain cognitive abilities which leads them to

Deny and/or Oppose Solutions to the C-E-B Crisis!



Just when new

thinking, adaptation and many transformational changes are needed!

Individual Mental Health and Human Services Cannot Address These Challenges

Professional mental health and human services will remain important—
where, when, and for whom they exist.

But in many communities and nations, there are few or no providers ---
and due to fear of stigmatization, racism in system, conflicting religious beliefs,
high costs, and other factors 50% of people will not engage.

Mental health and human services are also reactive—
they mostly treat individuals with symptoms after they appear.

They do not proactively prevent widespread problems by
building resilience or activating transformational change.



There is No Community Resilience

Without Widespread Social, Psychological, and Emotional Resilience!

“Community Resilience” Has Mostly Focused on *External Physical Factors*

While important...

Most of this is done by NGOs, private firms, or public agencies and do not meaningfully involve local residents



And they rarely integrate building social, psychological, and emotional resilience into their work.

As often seen many external physical efforts will have limited effect or fail—and as seen the impacts go Far beyond extreme weather events.

This underscores the urgency of placing an equal emphasis on strengthening The Human Social, Psychological & Emotional Dimensions of Resilience!

The Reality is Climate Traumas, and Most Other Traumas Today, Result From Interacting Individual, Family, Social, Economic, Built and Ecological Factors

The Social-Ecological Model

Environmental

Conditions of food and water, open space/green spaces, the built/physical, economic, and ecological systems

Structural

Policies, institutions, power relationships, type and level of services.

Community

Conditions of neighborhoods, work places, schools, voluntary and civic groups, religious and spiritual associations

Interpersonal

Connections with family, friends, and social networks, and their social norms and values

Individual

Knowledge, skills, attitude, childhood experiences, biology

An old Native American saying:

we are shaped by

“All Our Relations”

Bantu term in South Africa:

“Ubuntu”

“I am because we are--

Since we are, therefore I am”

We must address all of these interacting forces to help people survive and remain healthy and resilience during the long C-E-B crisis

This Means We Must Now Organize the *Social Infrastructure* in Communities to Address *Two Big Urgent Tasks*

- Provide the mutual aid and emotional support needed to help all residents remain physically, socially, psychologically, and emotionally safe, healthy, and resilient, as they use adversities to find new meaning, purpose, courage and hope and thrive.
- Interlinked with mobilizing local residents, groups, and organizations to do their part to reduce the C-E-B crisis to manageable levels, prepare for and adapt to the impacts of the crisis, and create safe, healthy, just and resilient local conditions.

These two interconnected tasks require

expanding beyond many long-held assumptions, beliefs, theories and practices,

including the reliance on the individualized biomedical model of mental health and direct human services.



We must all
think systemically and respond holistically!



If we do this and view the C-E-B crisis as a teaching tool we can
learn, grow, adapt, and activate

Deep-Seated Transformational Changes!

We Must Proactively Build Population-Level Mental Wellness and “Transformational Resilience”

When suffering is caused by previously unseen external forces that have no end point, resolution, or simple cure the priority must be to help everyone develop the capacity to...

- buffer themselves from and push back against the stressors and...
- Use adversities as transformational catalysts to learn anew, adapt, and find new sources of meaning, purpose, courage and hope in life.



“Transformational Resilience”

Help everyone strengthen their capacity for:

“Presencing” -- or *self-regulation and co-regulation* -- to calm their body, mind, emotions, and behaviors during traumatic stresses—and help others do so as well...

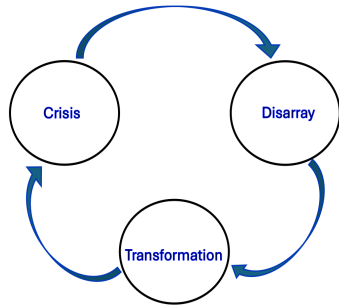
and

“Purposing” --or *adversity-based growth*--to learn and grow from adversities and find new meaning and direction that reveals new strengths, bonds, appreciation of life and more

Presencing and Purposing are Primary Prevention.

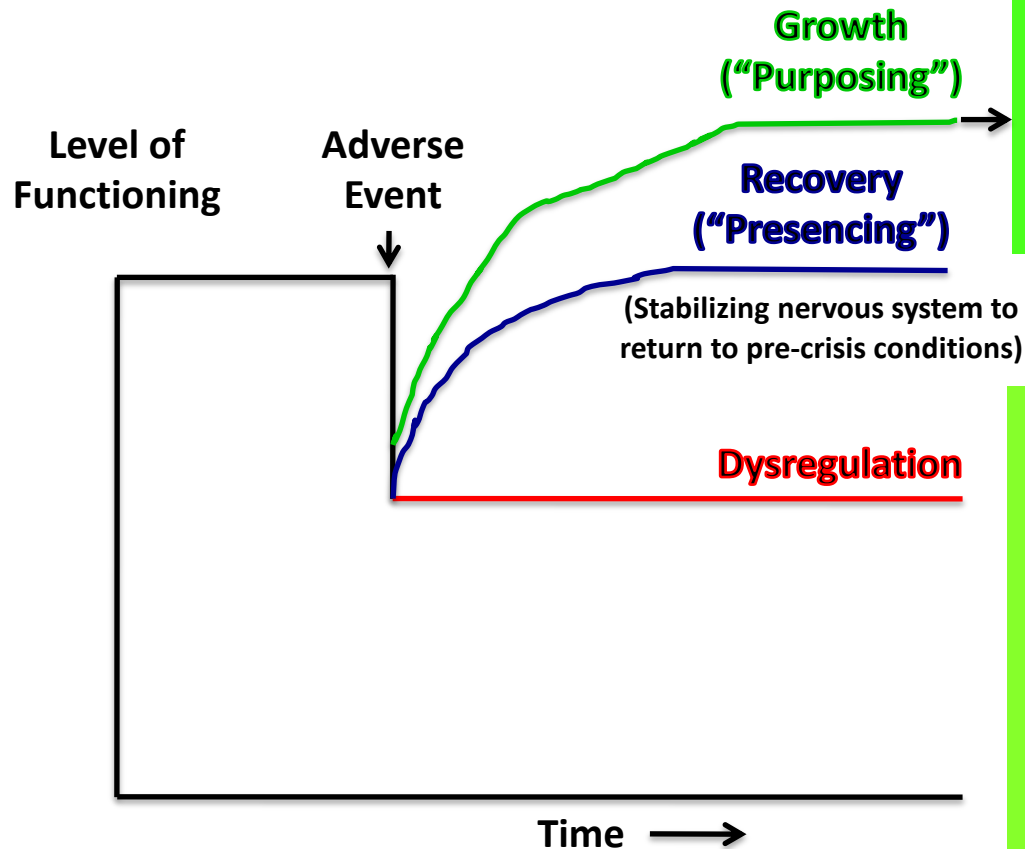
And the combination can rebuild faith and hope in the future.

The Transformational Resilience Cycle



Transformational Resilience

The Choices We Make In Response to Adversities Determine Our Path



Transformational Resilience:
moving beyond previous beliefs and practices while holding the pain of trauma

Requires a Choice:

Continue to suffer, or use the experience to honestly examine and learn anew about the world and self

and

find meaning in adversities by viewing them as lessons that transform pain into new constructive actions

TR is urgently needed to respond to the C-E-B crisis

Why Do This At The Population Level?

As the noted Pioneer Clinical Psychologist Dr. George Albee once said:

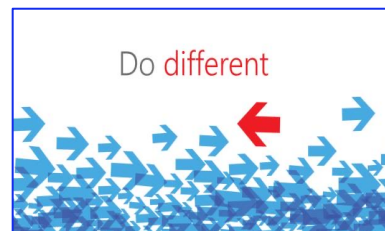
“No epidemic has ever been resolved by paying attention to the treatment of the affected individual.”

This underscores the urgent need to expand our approach to a prioritize a

Public Health Approach

to

Mental Wellness and Transformational Resilience



Core Principles of a Public Health Approach to Mental Wellness and Transformational Resilience

- Takes a population-level approach --- not one that merely focuses on individuals with symptoms of pathology or high-risk groups--though they are included by using “proportionate universalism” and “life-course” approaches:

Our mantra must be “*Leave No One Behind.*”

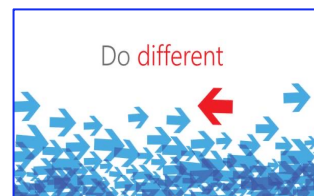
- Prioritizes preventing problems before they emerge --- not merely reacting to or treating them after they appear—and integrates group and community-minded healing methods into the prevention strategies:

We must always remember that “*Prevention is the Cure!*”

- Does so by strengthening “protective factors” –social supports, resilience skills, habits, local resources etc. that build and sustain healthy thinking and behaviors -- not just fixing deficits or treating individuals with symptoms of pathology:

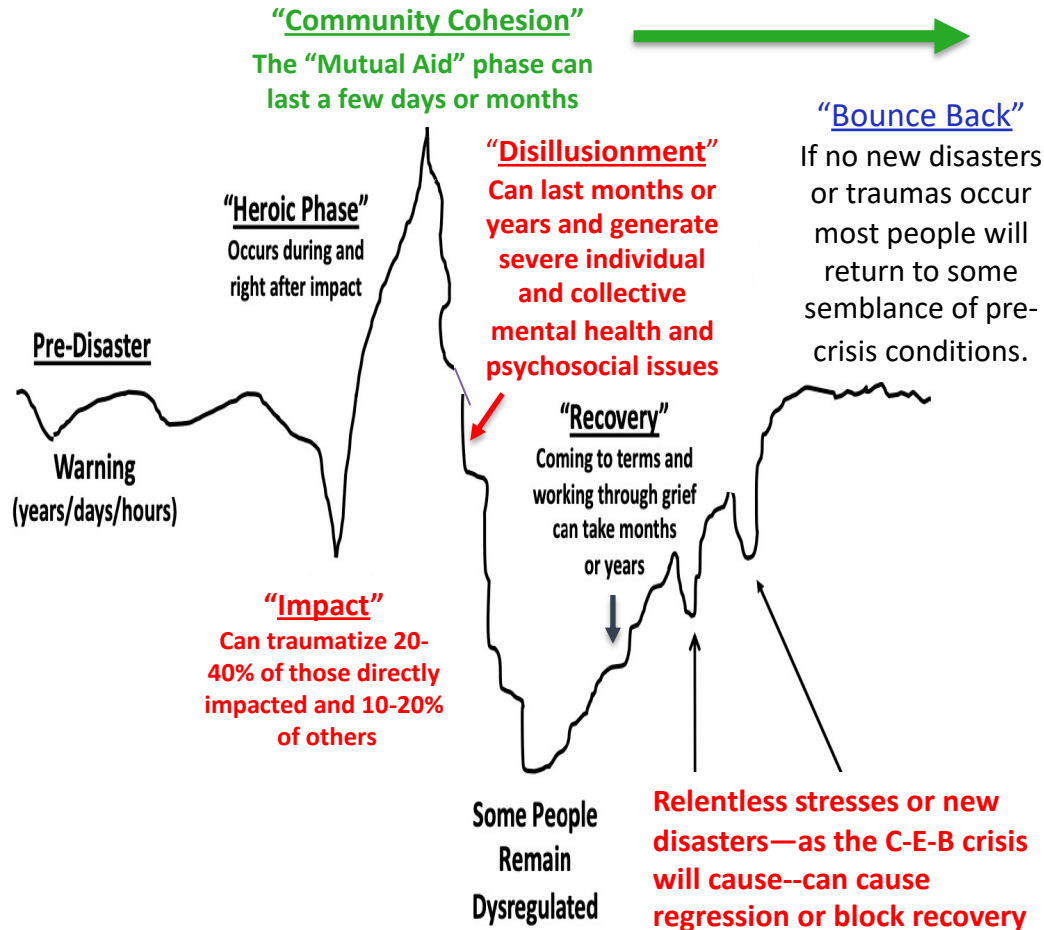
We must “*Build Strengths, Social Connections, and Resources*”

- Research shows that mental wellness and transformational resilience can be enhanced.
- The most effective way to do so is to:
 - establish the “horizontal social infrastructure” in communities—that we call a Transformational Resilience Coordinating Network (TRCN)--
 - that engages a broad and diverse array of grassroots, neighborhood and civic leaders, faith/spirituality, youth, education, mental health and human services, business, disaster mgt., and other non-profit, private, and public organizations
 - in jointly implementing strategies that mobilize residents to cooperatively provide mutual aid and emotional support to others, and strengthen as many “protective factors” as possible.



Why Permanent “Transformational Resilience Coordinating Networks” Are Vital

Common Phases of Disasters



Why? Because the C-E-B Crisis Will:

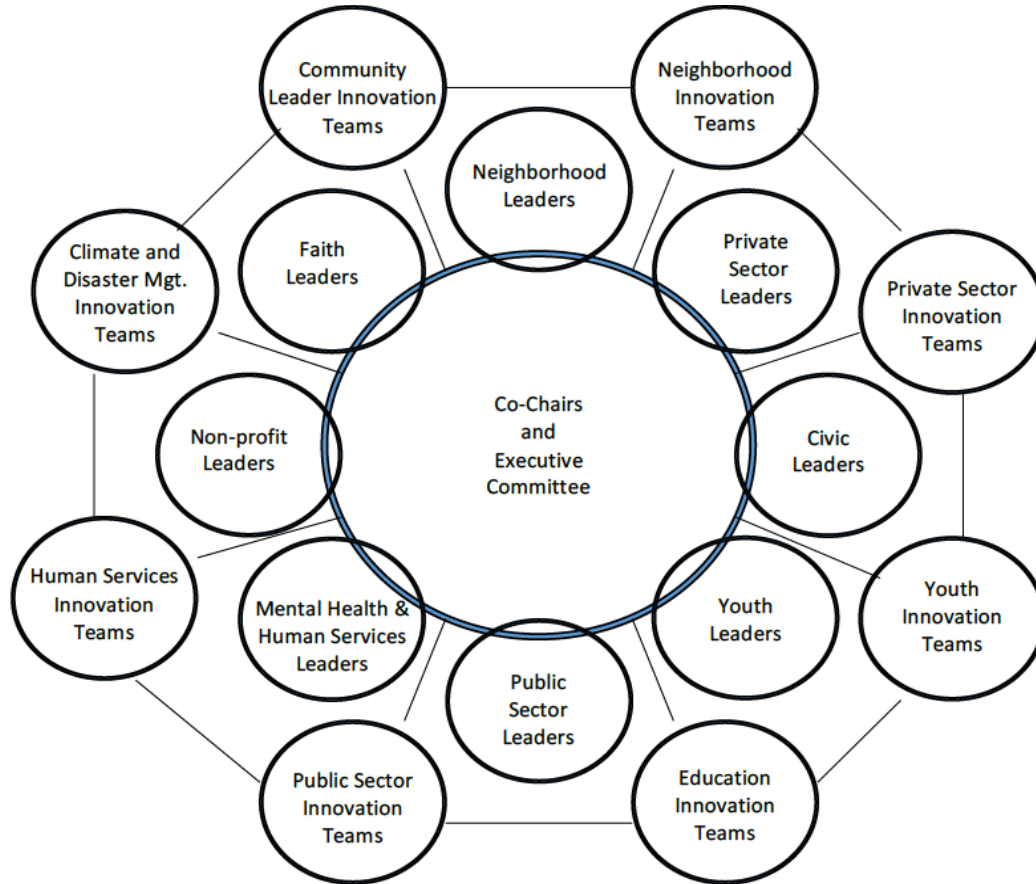
- Activate relentless toxic stresses, emergencies, and disasters for **decades** ...
- Most problems surface **months or longer after** the initial extreme stresses or disasters occur...
- So we need to construct the **horizontal social infrastructure** that helps residents **sustain** the **“community cohesion phase”** for **decades** to come.

Always Remember

Our ability to cooperate and provide mutual aid and emotional support have always been key to human survival, wellness, and resilience!

A Sample “Ideal” Transformational Resilience Coordinating Network (TRCN):

‘Well-Coordinated Decentralization’ using a ‘Ring Team’ or ‘Hub & Spoke’ approach



Why Do We Need

Well-Coordinated Decentralization?

Because without it there is often:

- disconnected groups that end up
- working on siload issues
- competing for attention and funding
- and not providing everyone with mutual aid and emotion support needed to help them survive, and remain healthy and resilient as they continually adapt and engage in vital transformational changes.

We must cooperate in new and expanded ways to respond to the C-E-B crisis and today’s many other challenges!

A Few Examples of U.S. “TRCNs”

(Many start with Adverse Childhood Experiences, physical health, community violence, and expand from there)

- North Carolina SmartStart Healthy and Resilient Communities Initiative: Has 50 focused on “4 ACEs”: Adverse Child, Community, Climate, and Cultural Experiences.
- Virginia’s Trauma-Informed Community Networks has 32 “building resilience and preventing and mitigating the impacts of trauma in their communities.”
- Peace4Tarpon in Tarpon Springs, Florida
- Community Resilience Initiative, Walla Walla, Washington.
- Rhode Island Health Equity Zones
- Over 200 associated with MARC: Mobilizing Action for Resilient Communities, (mostly focused on ACEs).

Many International Examples:

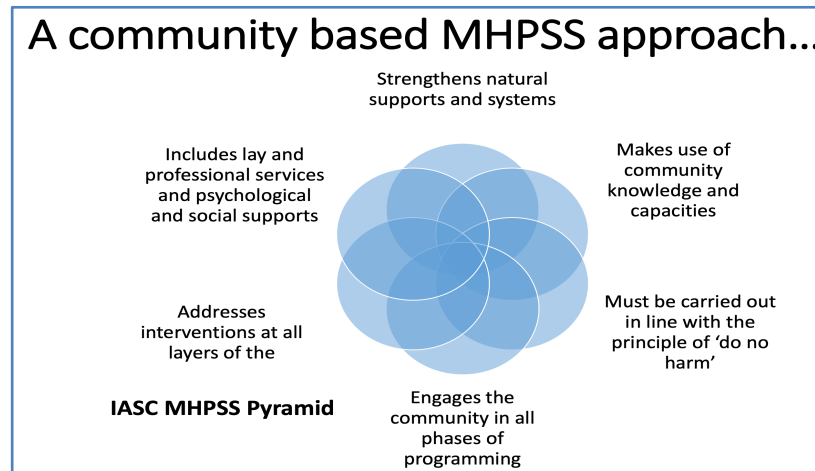
Mental Health and Psychosocial Support Groups (MHPSS)

Most focus on humanitarian issues, child protection, and emergency settings.

“A Community-Based MHPSS approach puts individuals, communities and social systems at the centre of the intervention, in all phases of the response.”

Inter-Agency Standing Committee:

Community-based Approaches to MHPSS Programmes



For more information go to:

Mental Health and Psychosocial Support Network (<https://MHPSS.net>)

- Only a few of these initiatives describe their work as a public health approach.
- They each start and seek to address issues present in their community.
- Each is unique— there is no one-size-fits-all approach.
- None address all five of the foundational “protective factors” we will discuss.
- Only a few are explicitly focused yet on the C-E-B crisis.



But they show how

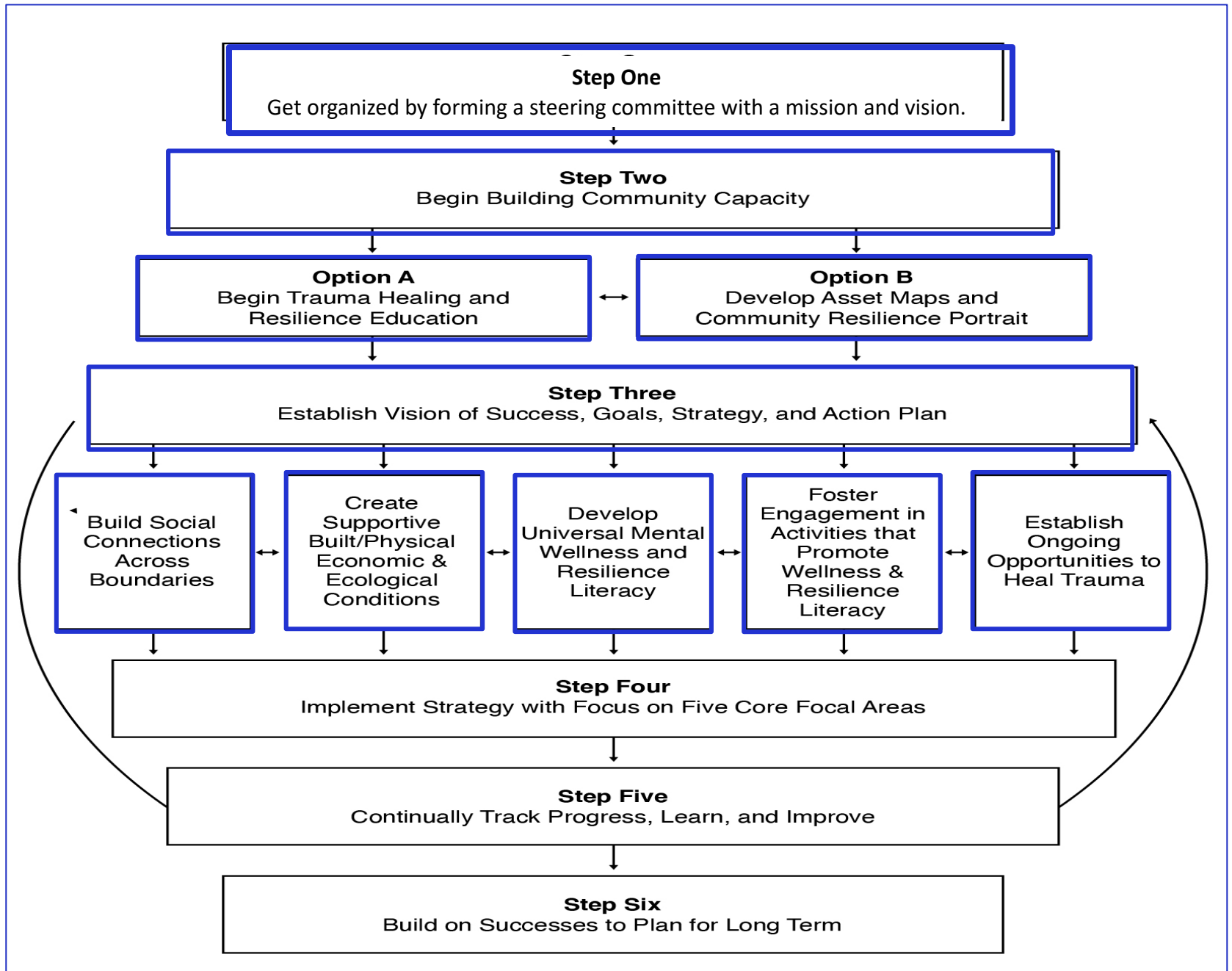
Community is Medicine



If those not focused on the climate catastrophe expand to address it,
and thousands of new community initiatives are launched,

we **CAN** build universal capacity for transformational resilience!

A Process For Forming and Operating a TRCN for the C-E-B Crisis



How Can You Form a TRNC?

By Using the Ladder of Engagement

8. Create a community-led and centric culture
7. Set metrics, measure, and keep adapting
6. Start small and seek & promote small wins
5. Invite everyone to fun kick-off meeting(s)
4. Contact 3-10 possible co-founders
3. Build the case for forming a TRCN
2. Create mission and vision of success
1. Assess current conditions & starting point



Keep expanding participation & embed community-led & resident-centric thinking into all activities.

Continually track progress, learn, and improve to ensure effective and widely embraced strategies.

Do a few pilot projects, decide how to communicate, and identify what works before scaling-up.

Hold a fun kick-off meeting(s) where people meet, discuss vision, have fun together, and choose name.

Reach out to many, introduce mission and vision, discuss different roles, and help them see benefits.

Highlight benefits like multisectoral participation, stronger relationships, and empowered residents.

Determine what you want to achieve and how it will be different from current conditions.

Evaluate if and how wellness and resilience are addressed and what organizations are engaged.

Who Can You Speak With About Forming a New TRCN?

Name 1-3 Grassroots, Neighborhood, or
Civic Leaders You Can Talk With

- 1.
- 2.
- 3.

Name 1-3 Non-Profit, Private, or Public
Sector Leaders You Can Talk With

- 1.
- 2.
- 3.

Who Can You Speak With if You Want to *Expand* an Existing Group or Network to Become a TRCN to Address the C-E-B Crisis?

Name 1-3 People Involved With the Group You Can Talk With

- 1.
- 2.
- 3.

Breakout Rooms

- Each person please briefly introduce yourself
- Then as a group discuss:

What have you taken away so far today?

Who can you reach out to and discuss forming a new TRCN, or expanding an existing group you belong to become a TRCN?

Please have someone post key issues that arose and questions in chat

Our UN High Level Climate Champion Race to Resilience Initiative To Help Form and Operate “TRCNs” in Communities Globally

Phase I: “Prospective” Transformational Resilience Coordinating Network

- When people apply to form a new TRCN or expand an existing group or coalition to address the C-E-B crisis, we will designate them a “Prospective” TRCN.
- We will provide them with a handbook, technical assistance, and involvement in a Community of Practice to help them form a wide and diverse steering committee with a mission, vision, goals, and operating procedures.

Phase II: “Emerging” Transformational Resilience Coordinating Network

- Designated when a steering committee is formed and want to develop a strategy.
- We will provide them with a handbook, technical assistance, and involvement in a Community of Practice to help them develop a multisystemic strategy.

Phase III: “Commissioned” Transformational Resilience Coordinating Network

- Designated when an Emerging TRCN is ready to implement its strategy.
- We provide a handbook, technical assistance, and involvement in a Community of Practice to help them implement and continually improve their strategy.

Focus of Next Tuesday's April 8 CoP:

The First and Most Important Foundational Protective Factor Needed to Build Population-Level Mental Wellness and Transformational Resilience:

Build Social Connections and Mutual Aid Networks Throughout the Community

To Consider Before Next Tuesday's CoP

- Outline your vision of a local TRCN—what would it do, who would be included, how would this be different from what currently exists etc.?
- Develop a 1-minute “elevator speech” describing your mission and vision.
- Think of 3-7 people you can share the elevator speech with, hold a discussion, and ask them if they will join you in forming a TRCN.

Also, Remember the Thursday April 10
“Skills Training Open Session”

The focus will be determine based on suggestions you give us.

It will also be an opportunity to meet and talk with others, pose questions,
and get feedback on issues.

If you want to apply to form a TRCN go to: <https://www.ctipp.org/presson/trcn>

Summary of Today's Key Points

- On top of many other stressors, the C-E-B crisis is rapidly accelerating and in different times, ways, and magnitudes will severely stress or traumatize everyone.
- This means we now have two urgent tasks in front of us:
 - Build the “horizontal social infrastructure” in communities that engages residents in providing the mutual aid and emotional support needed to help them survive and remain healthy and resilient during the long C-E-B crisis
 - While motivating residents to do their part to reduce the crisis to manageable levels, adapt to the impacts, and greatly enhance social, economic, and ecological conditions.
- TRCNs are most effective way to build and sustain the local social infrastructure.
- TRCNs can be organized by a few committed people—and **YOU CAN DO IT!**

Key Message

“Community is Medicine”

Throughout human history our ability to band together and cooperate has always been key to surviving, adapting, and remaining healthy and resilient during crisis, and solving complex problems!



By organizing TRCNs in communities we can do this again now for the C-E-B crisis—and many other adversities!

See you next Tuesday April 8!