

Welcome to Session II 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 8, 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!

Summary of Key Points from Last Tuesday's April 1 Educational Session

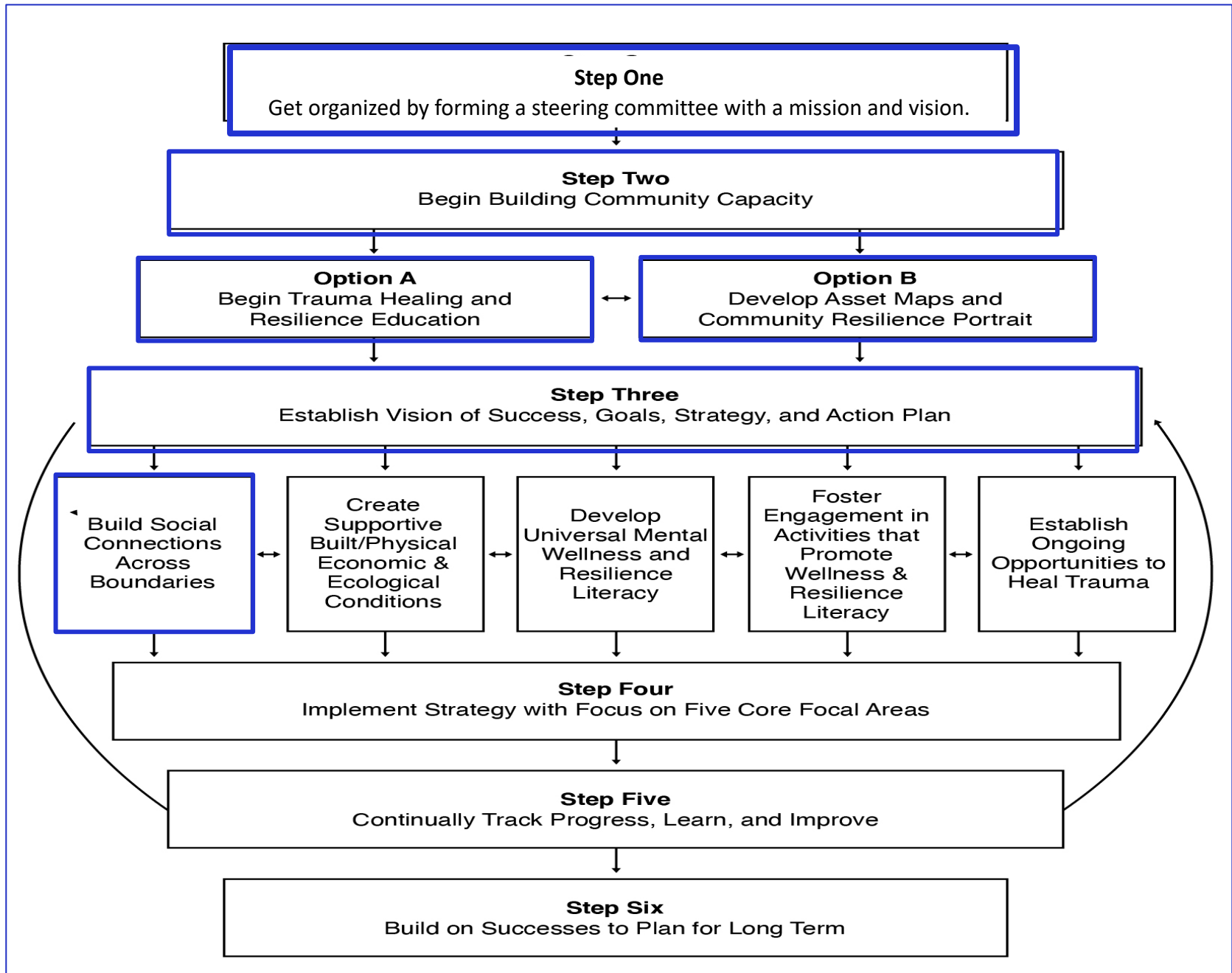
- On top of today's many other stressors, the rapidly accelerating C-E-B crisis will, in different times, ways, and magnitudes severely stress or traumatize everyone.
- This means we now have two urgent tasks in front of us:
 - Build the "horizontal social infrastructure" in communities--with a steering committee--that uses a public health approach to engage 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 also 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 this local social infrastructure.



Today's Focus

- After a TRCN steering committee is formed, how it can begin to build community-capacity to enhance wellness and resilience.
- and
- The first foundational “protective factor:” Build social connections throughout the community, with a core element being to form mutual aid networks.

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



Let's Start With a Self-Care Resilience Pause



Take a moment to use the “skylight method” to notice what are you experiencing right now in your body, your mind, and your emotions.

Then Practice “Resourcing” (TRI)

- Bring-to-mind someone or something that helps you **get through difficult times**.
- Now, fill in some **details** about **why** this happens: what is it about this person or resource that **calms you** and **enables your resilience**?
- Now, try to create a **vivid image in your mind** of this resource: bring it to life **now!**
- Take a moment to use “skylight method” and **notice** what is happening within you.

We all need to remember our
resilience resources
because both
chronic pressures and
abrupt changes
can be extreme *stressors*

"TRANSITION" STRESSORS EXERCISE

Please add up the number of the **"transitions"** (small and large changes) you and your close family members experienced in the past 3 months and

Were some of those "transitions" **stressful** and, if so, how did you and your family **cope** with them?



**Now, think about how many more “transitions”
occurred in your community in past 3-6 months!**

**And how different residents likely coped
with those stresses.**



Transition “Task” Exercise

Select **one** of the transitions you identified and **count** the number of **“tasks”** you had to **add** to your responsibilities or **alter** from previous times as a result.

How did the additional or altered tasks **affect you** and/or **your family**—
and how did you and/or your family **cope?**



The C-E-B
Crisis
is the
Perfect
Storm

When cascading disruptions to essential systems mix with acute disasters and impact individuals, families, groups, and organizations

The number of “tasks” and “transitions” required can create traumatic stresses that affect entire communities and societies and lead to widespread maladaptive coping.

This Is Why the C-E-B Crisis Requires Us to *Redefine* Mental Health and Psychosocial Problems

What appear as mental health and psychosocial problems are usually coping mechanisms --- self-protective survival reactions --- gone wrong!

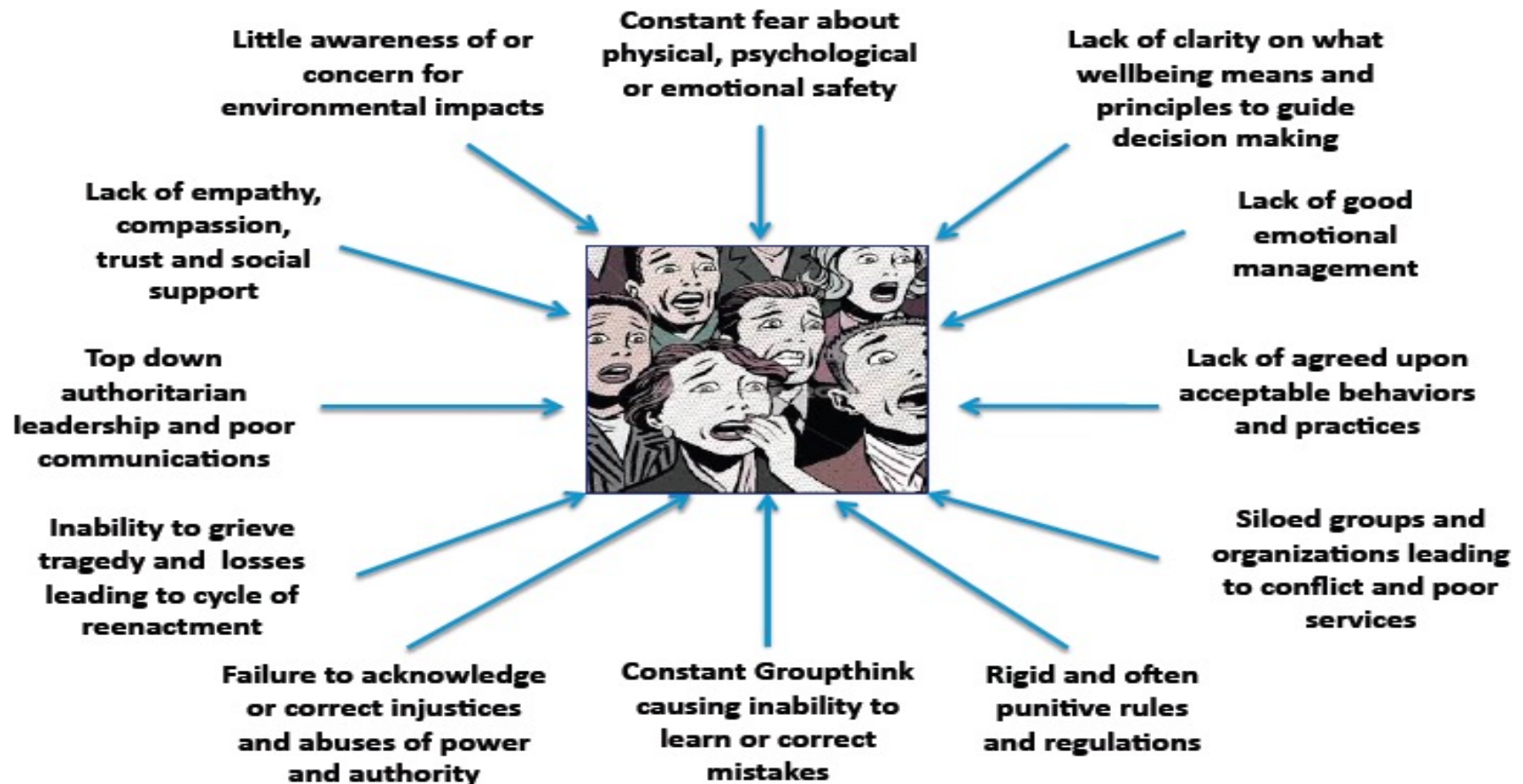


When traumatic stressors are continuous and/or overwhelming the mind often cannot distinguish between real and false threats and remains in state of hyper-inflated fear (F-F-F-F reactions).

This can cause people to fail to consider healthy options and adopt coping methods that end up harming themselves, other people, or the environment.

To address these stressors TRCNs should begin to build community capacity for wellness and transformational resilience

Common Traits of Trauma-Organized Communities



To Transform These Traits Into a
“Wellness and Resilience Enhancing Community”

TRCNs Should Begin

Building Community Capacity to Prevent & Heal Distresses & Traumas



TRCNs Should Choose An Approach That Resonates with Residents and Is Possible Given Existing Resources

- Engage residents in **group** events where they **learn information** and **resilience skills** that begin the healing process by releasing trauma.

Examples:

- The Trauma Resource Institute's Community Resilience Model (<https://www.traumaresourceinstitute.com/>)
- The Center for Mind-Body Medicine's community-minded public health approach to transforming trauma (<https://cmbm.org/what-we-do/>).

- Engage residents in **systems mapping** to see how trauma is **activated** and **transmitted** in their community.

Example: the Rural Opportunity Institute's trauma system mapping process (<https://www.ruralopportunity.org/>)

- Organize a trauma and resilience **conference(s)** keynoted by good speaker(s)

Example: The rural community of The Dalles, Oregon

<https://pacesconnection.crowdstack.io/blog/the-town-of-dalles-or-remakes-itself-as-a-trauma-sensitive-sanctuary>

Another Powerful Approach

Engage Residents in “Asset Mapping”

- Assets are Protective Factors residents believe are used to prevent severe stresses and traumas, heal them when they occur, and enhance wellness and resilience.
- Asset mapping actively engages residents in identifying and locating protective factors in their community.
- It does so through a strength-based wellness and resilience lens (not one focused on deficits or risks).

Benefits of Mapping Community Assets



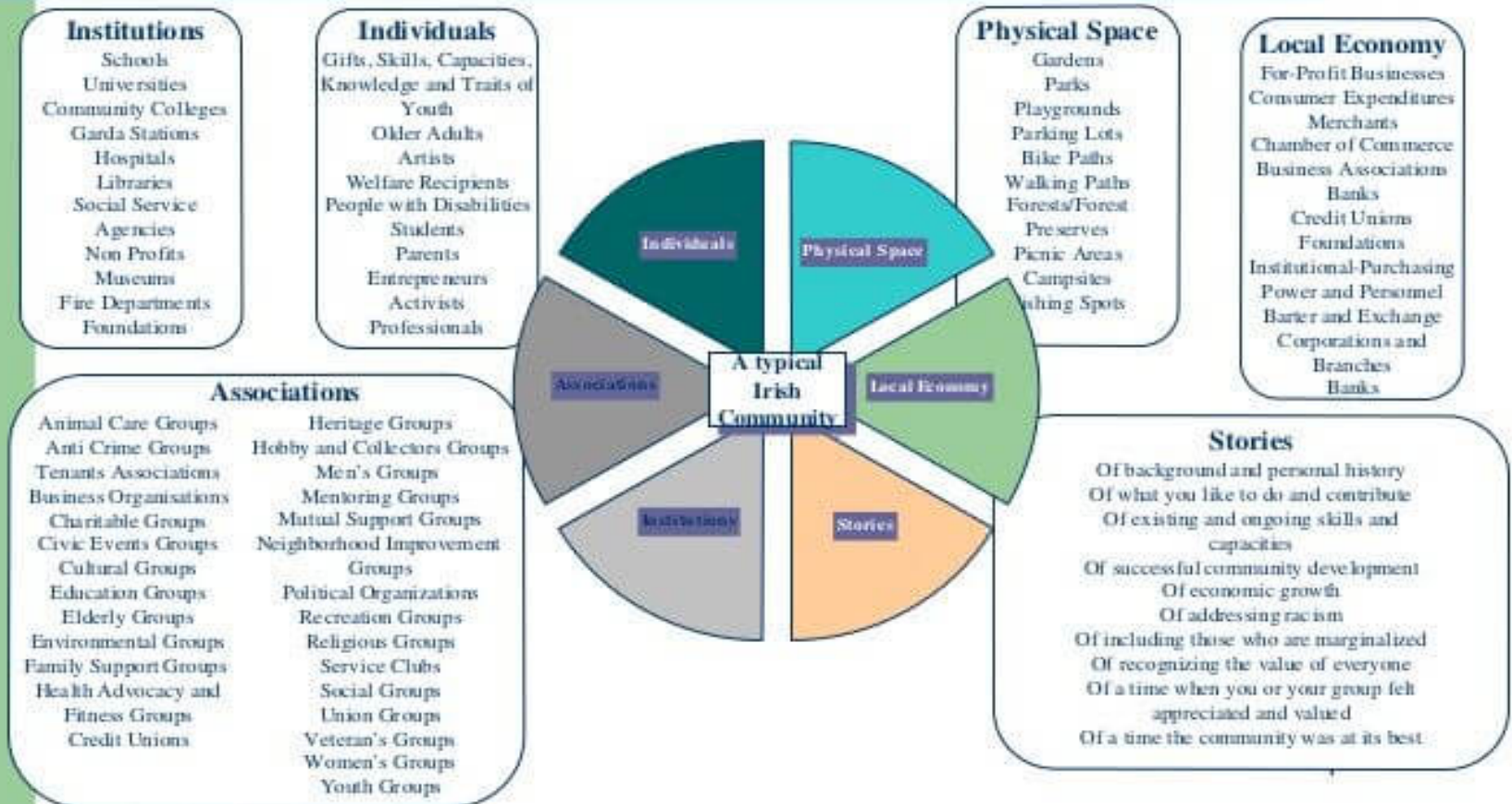
Once community strengths and resources are identified and located on a map

residents can more easily see and think about how to use them

and establish additional ones.

Identifying and building on assets has **far** greater impact than common approach of assessing and trying to fix deficits or eliminate risks.

A Sample Community Asset Map



(From DePaul University ABCD Institute)

Then (Possibly) Develop a "Community Resilience Portrait"

- One outcome of asset mapping can be a written "**Community Resilience Portrait.**"
- However, a written document is **not essential** -- even **more important** is to use the processes to **build the social connections** that are **vital** for the C-E-B crisis.
- There is no **one-size-fits-all approach** to this work. Each community should use a method that fits their local demographics, culture, and resources.

The **ABCD Institute at Depaul University** is good resource: <https://abcdinstitute.org/>

TRCNs should use the insights and information generated through these processes to develop a more refined

Vision of success

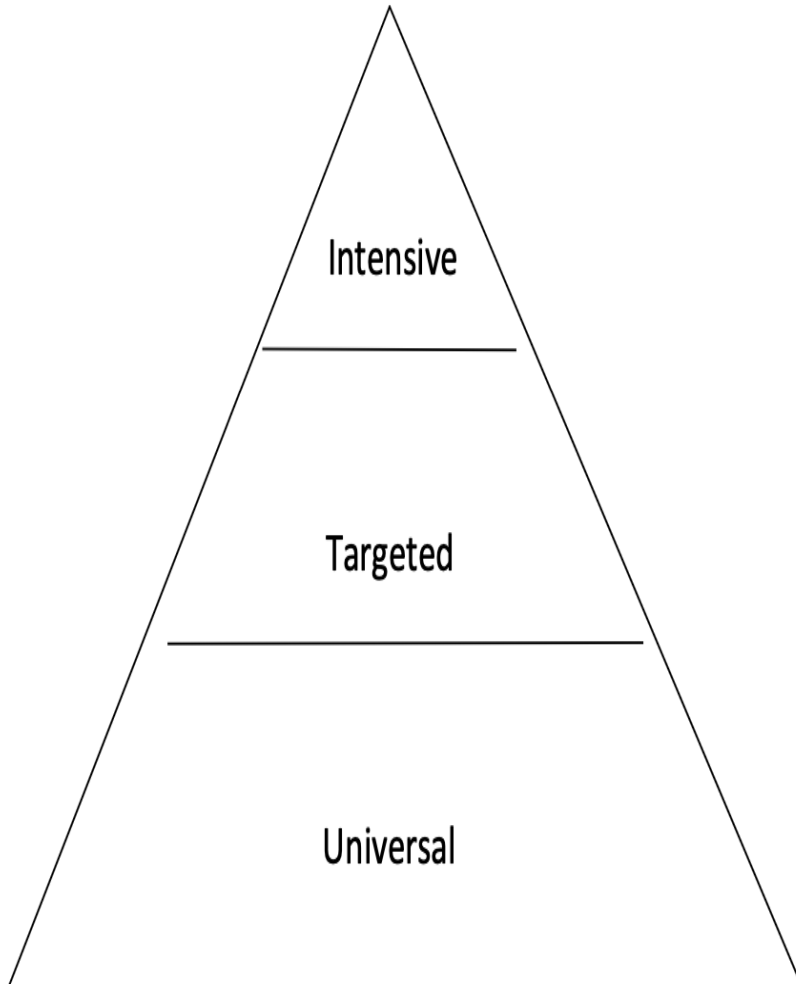
Specific goals

Multisystemic strategies

And action plans



A Public Health Strategy Focuses on *Population-Level Prevention*: This Requires Using “Proportionate Universalism”



Intensive (or indicative) prevention helps people who are **already experiencing** problems **control** and **reduce** their symptoms: e.g. helping people who misuse drugs or alcohol learn how to prevent relapse.

Targeted (or selective) prevention focuses on people with **characteristics** that place them at **high risk**: e.g. giving special attention to people who live in high-risk areas, or who are typically marginalized.

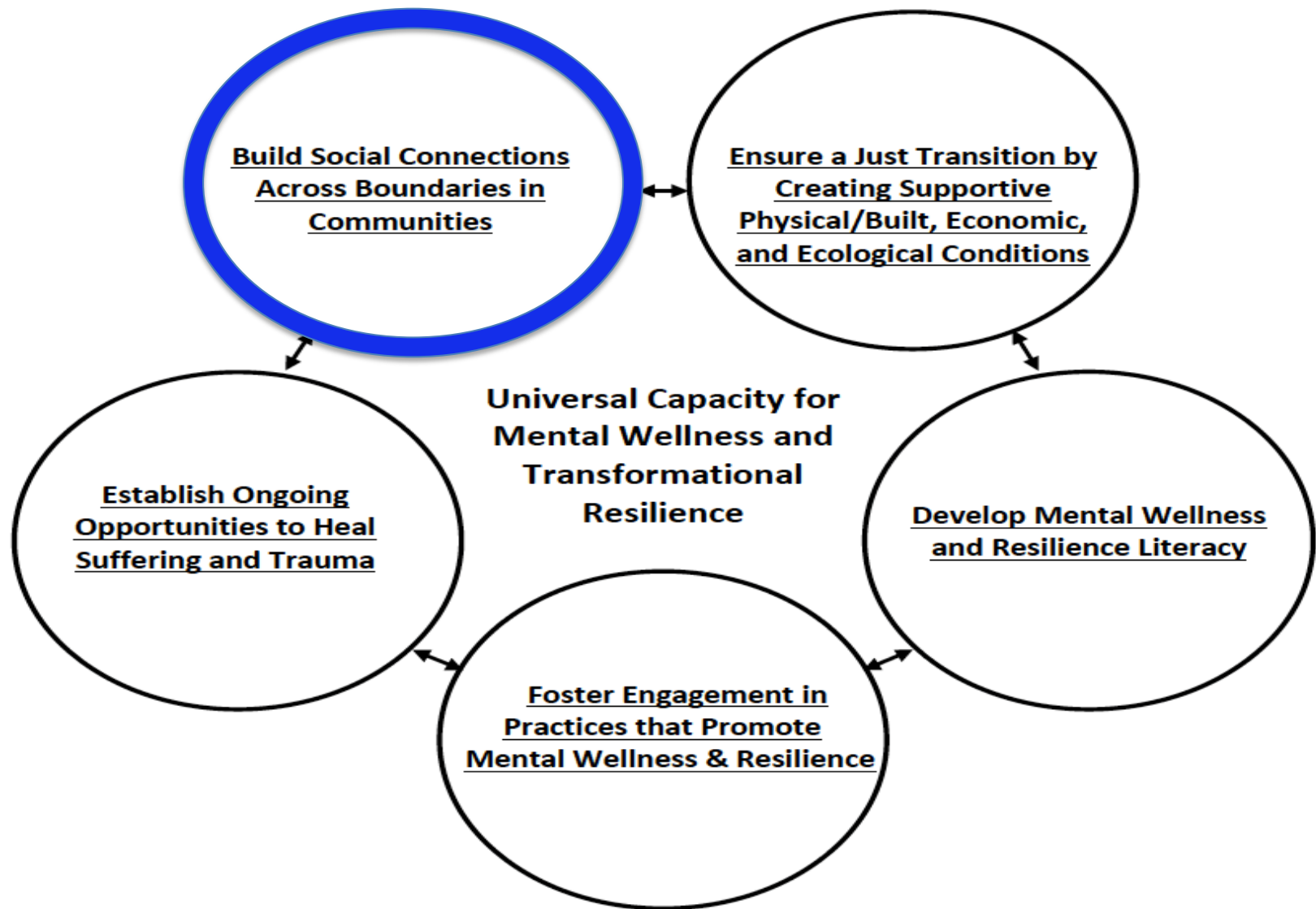
Universal (or primary) prevention focuses on helping **everyone** thwart problems **before** they appear: e.g. teaching all adults how perceived threats can activate instinctive fight, flight, freeze reactions, and then teaching them Presentencing and Purposing skills.

Integrate Proportionate Universalism with a “Life-Course” Approach

- This means using different methods with different age groups.
- This is important because people are typically exposed to different stressors at different stages of their lives, so different protective factors should be emphasized for children, adolescents, working age, and older adults.



The Five Foundational Protective Factors TRCNs Should Focus Strategies on to Build Pop-Level Wellness and Transformational Resilience for the C-E-B Crisis



How much does your happiness, fulfillment, and meaning in life depend on

connections with others?

Social connections are by far the most important protective factor for all aspects of life, and especially during times of stress and trauma



Loneliness and Social Isolation Are Today Profound Drivers of Many Types of Problems

- Research shows that **loneliness** and **social isolation** are widespread worldwide today and produce anxiety, depression, suicidality, aggression, violence, and more.
- Lack of social connections and loneliness can lead to **loss of self worth**, and **loss of meaning** and **purpose** in life—which are **essential** human needs.
- Loneliness also inhibits the **immune system**, **promotes inflammation**, and aggravates the **stress response**, making it **twice as harmful** to both **mental** and **physical** health as **obesity** and greatly increases risk of **premature mortality**.

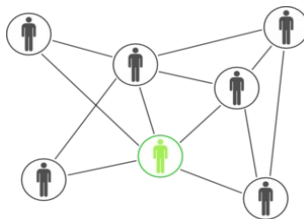


Conversely, Good Social Connections Prevent Mental Health Problems, Strengthen Physical Health, and Increase Chances of Longevity by 50%

- People who feel connected to others have lower rates of anxiety & depression.
- They also have higher self-esteem and more empathy for others.
- People with good social connections tend to be more trusting and cooperative which makes others more open to trusting and cooperating with them.

In Other Words:

Social connectedness generates a positive feedback that enhances social, psychological, emotional and physical wellness.



Social Connections are also *Vital* During Toxic Stresses and Disasters



- In the 5 five days (or often more) of disasters, survival often depends largely on family, friends, and neighbors, not emergency responders.
- Social connections are key to helping people move to safe places and obtain food, water, shelter, and other basic needs
- And they are key to providing a vital sense of safety and emotional support during and after extreme stresses or disasters.



- Research on 2021 Pacific Northwest record heatwave found that socially isolated people were much more apt to have died.
- The same dynamic applies to most other disasters.

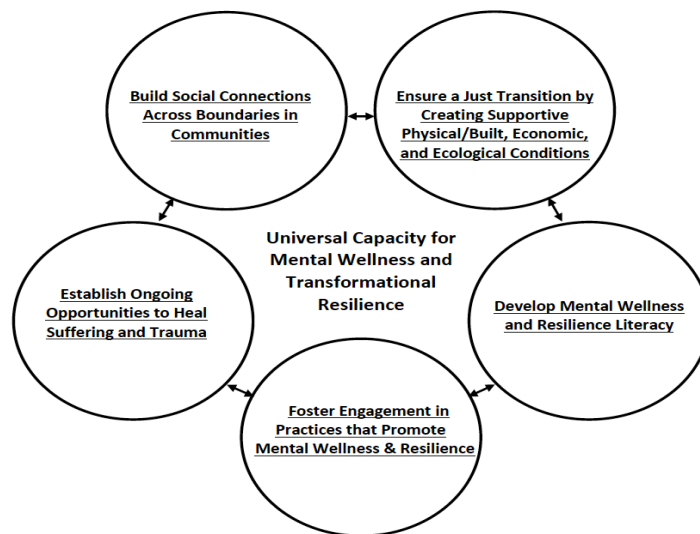
This is why building social connections is By Far the
Most Important Protective Factor

TRCNs should focus on
for the C-E-B crisis and today's many other adversities.

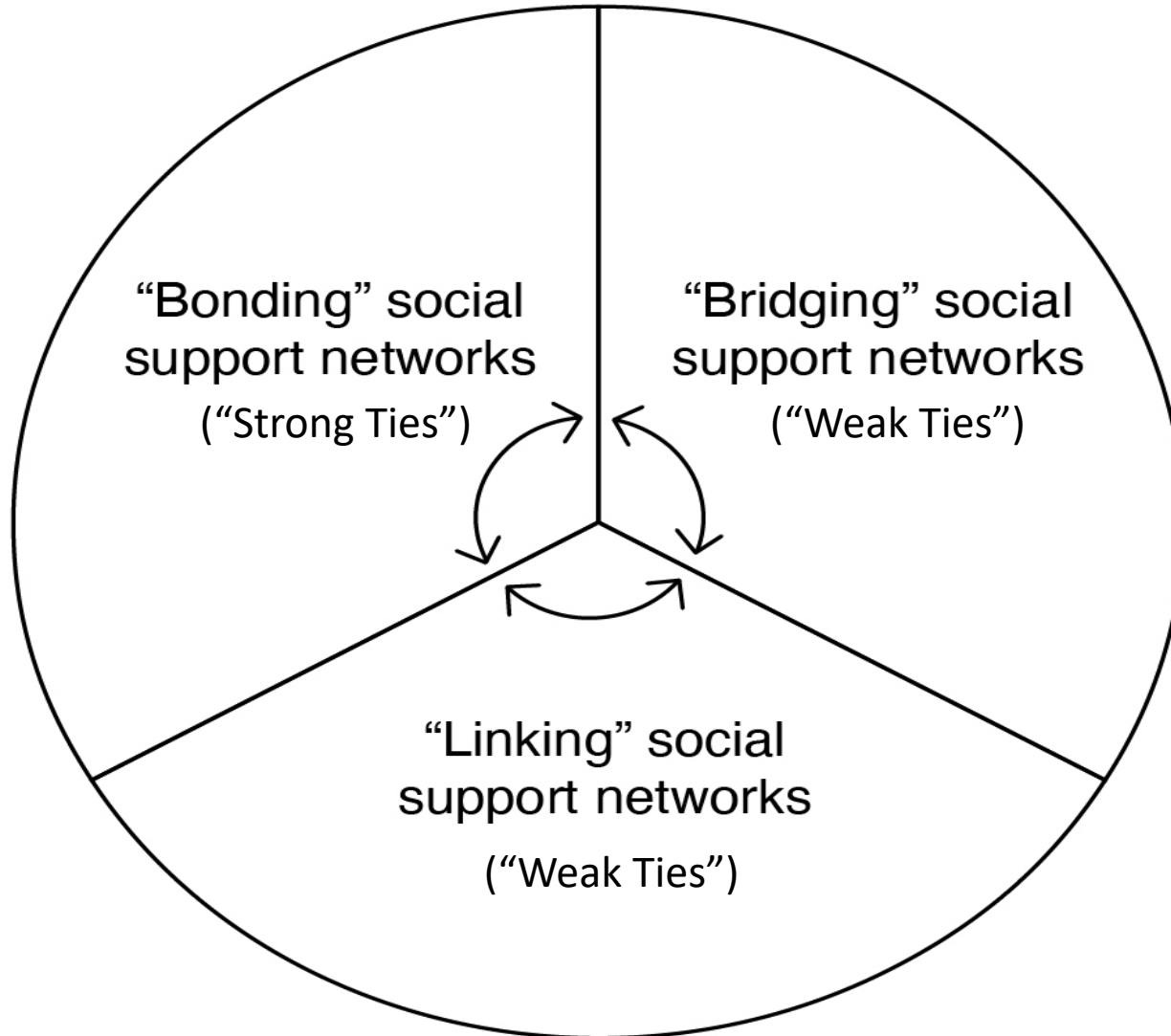


ALL TRCN Activities Should Build Social Connections

- Building social connections across boundaries in a community should be a **stand alone focus** of an TRCNs work.
- It should also be a **central focus** of strategies to address **each of the other 4 foundational protective factors**.



Three Interconnected Types of Social Connections TRCNs Should Focus On



A Few Examples of How Social Connections Can Be Built

- City of Edmonton, Canada, Neighbourhood Services:
(https://www.edmonton.ca/residential_neighbourhoods/neighbourhoods/neighbourhood-services)
- San Francisco Neighborhood Empowerment Network (the NEN):
(<https://onesanfrancisco.org/resiliency/goal-4-empower-neighborhoods-through-improved-connections>)
- Many other ways: hold different types of events, reach out to everyone, provide transportation and food to make it easy to attend, and build trust and comraderie.
- The Foundation for Social Connection has many other examples:
(<https://www.social-connection.org/>)

Forming Mutual Aid Networks is a Powerful Way to Build Social Connections

- Mutual aid networks are groups of residents that voluntarily work together to provide practise assistance, key resources, and emotional support to one another in times of crisis or when formal services do not exist or are incapable of assisting.

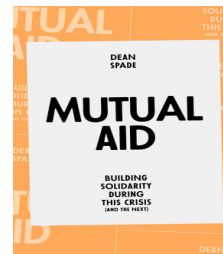


- Mutual aid networks can focus on **many needs**, including disaster assistance, shelter, food distribution, financial assistance, childcare, emergency health care, and other forms of assistance.
- Mutual aid networks are **NOT charity**, which usually involves hierarchical relationship between giver (often an NGO) and receiver.
- Mutual aid networks promote **solidarity** through a **horizontal equal exchange** of resources and support.

TRCNs should organize Mutual Aid Networks throughout their neighborhood and community

Just a Few Examples:

- Mutual Aid Networks were very active in Asheville North Carolina in U.S. after Hurricane Helene ravaged the area and provided residents with many types of vital assistance:
 - <https://www.belovedasheville.com/> ; and
 - <https://www.trianglemutualaid.org/>).
- Mutual Aid Los Angeles Network: <https://mutualaidla.org/>
- *Mutual Aid Hub* has helpful resources: <https://www.mutualaidhub.org/resources>
- As does Dean Spades book:



Physical Resilience Hubs: Can Be a Helpful Resource for Some People at Certain Times

- Physical “hubs” can help when they are **trusted** and easily accessible by **residents**.
- Hubs can provide people with **information**, **key resources**, and **support** and can be **located** in libraries, community centers, businesses, religious facilities, and even private homes and park benches.
- During disasters, a Hub can serve as a central **gathering point** for people to find safety, obtain key resources, assess impacts, and plan responses.
- But physical hubs ***“are not for everyone”*** (quote from Kristin Baja USDN hub leader)
- They are generally most helpful for people **without other options or resources**.
- Generally, only people **living nearby**, who have ability to **easily get there**, and **trust** those in charge and the people likely to be there will use a physical hub.
- And as often seen, a physical facility itself might be **damaged** or **inaccessible** in a disaster.

This Underscores Again that the Key to Wellness and Resilience is the

Horizontal Social Infrastructure in Communities

This what TRCN should focus on!





Breakout Rooms

- Share what you have gained from today's session
- Discuss how you might be able implement similar approaches in your neighborhood or community

Post key issues and questions in chat

Can We Build Social Connections In Today's Polarized Conditions?

Yes we can!

- It is not easy, but when people take the time to discuss **practical issues** they are concerned about and ways to **address them** that **benefit all, positive connections** and change can occur.
- Creating a **non-judgmental** and **non-confrontational** welcoming **environment**, practicing **self-regulation** and **co-regulation**, providing a strong sense of **safety and support**, and addressing people's **real-world needs** are vital.
- **“Mattering”** is Key: interact with and care for **everyone** so they feel **they matter!**

It is Vital to Build Social Connections Among Youth, BIPOC, and Other Vulnerable Groups

But Don't Isolate or Fragment Them

- In a pattern seen throughout history, when populations are defined as "vulnerable," "at risk" or in other ways "different," other people often discount their importance or show little concern about their plight.
- Focusing on any group separately from others can also easily revert back to the fragmented and siloed approaches that so often dominate today.
- This can increase the segregation and social isolation many individuals and groups already experience and pit them against others for attention, funding and other resources.

Building Social Connections Can Enhance “Collective Efficacy”

- When numerous people come together to work on shared interests they become more effective and increase the likelihood of achieving their goals.

Example: in communities where neighbors believe that together they can prevent crime, research has found significantly less of it.

- Strong collective efficacy can also bring residents together to prevent social, economic, ecological, and other forms of inequity and injustice.
- And, enhanced collective efficacy will be vital to empower residents to engage in actions that help reduce the C-E-B crisis to manageable levels, continually innovate and adapt to the impacts, and regenerate local conditions.

Summary

- After a TRCN steering committee is formed, it should begin to **build community capacity** to transform the community from “trauma organized” to “**wellness and resilience enhancing**” and use the information that results to refine their mission, vision and strategies.
- Building social connections is **by far** the most important protective factor TRCN strategies should focus on because they are **essential** to deal with relentless stresses, disasters and other adversities, and build the bonds needed for change.
- A variety of methods can be used to build robust social connections--it should be a **stand-alone focus** and be **a central focus** in work on **all other protective factors--** and forming **Mutual Aid Networks** is a powerful way to do this.
- When building social connections do **not** isolate people or used siloed approaches that segregate people from others: Instead, use a combination of “**proportionate universalism**” and “**life-course**” approaches.

Remember this Thursday's April 10

"Skills Training Open Session"

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

The **skills** focused on will be determine by suggestions **you** give us.

Please take a moment to complete this short questionnaire:

https://docs.google.com/forms/d/e/1FAIpQLSdnn_yCDBqV-rIJAw-AZ9509I6chtMqJfLZkrOq9oqXTrQh2g/viewform?usp=dialog

Also, remember next Tuesday's April 15 Educational Session

It will focus on how TRCNs can address two additional core protective factors

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

Always Remember the Key Message

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