



**THE FACILITATOR'S  
GUIDE TO RESILIENCE**

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# RESILIENCE

THE BIOLOGY OF STRESS & THE SCIENCE OF HOPE

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## The Facilitator's Guide to *Resilience*

A discussion guide to accompany screenings of the documentary film





The child may not remember.

But the body remembers.

Researchers have recently discovered a dangerous biological syndrome caused by abuse and neglect during childhood. As the new documentary *Resilience* reveals, TOXIC STRESS can trigger hormones that wreak havoc on the brains and bodies of children, putting them at a greater risk for disease, homelessness, prison time and early death. While the broader impacts of poverty worsen the risk, no segment of society is immune. *Resilience*, however, also chronicles the dawn of a movement that is determined to fight back. Trailblazers in pediatrics, education and social welfare are using cutting-edge science and field-tested therapies to protect children from the insidious effects of toxic stress—and the dark legacy of a childhood that no child would choose.

*-Synopsis from KPJR Films*

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## **Resilience Facilitator's Guide | Project Team**

**Laura Avellaneda-Cruz** - Director, AK Resilience Initiative, Prevent Child Abuse Alaska

**Mike Foley** - Executive Director, Prevent Child Abuse Michigan

**Claire Lounge** - Director of Training and Outreach Director, Prevent Child Abuse Arizona

**Jim McKay** - Executive Director, Prevent Child Abuse West Virginia

**Rayne Nimz** - Program Associate, Americorps Vista / Prevent Child Abuse Alaska

**Kristen Rector** - President and CEO, Prevent Child Abuse Tennessee

**Vicky Roper** - Executive Director, Prevent Child Abuse Kansas

**Trevor Storrs** - Executive Director, Prevent Child Abuse Alaska

**Sarah Welch** - Communications Director, Prevent Child Abuse Iowa

## **Resilience Facilitator's Guide | Project Managers**

**Janet Rosenzweig, PhD, MPA** - Vice-President, Prevent Child Abuse America

**Zach Hiner** - Director of Communications, Prevent Child Abuse America

**Leslie Mitchel-Bond** - Director of Peer Abuse Prevention, Prevent Child Abuse America

**Amanda Monto** - Peer Abuse Prevention Services Manager, Prevent Child Abuse America

**Madison Delk** - Research and Programs Intern, Prevent Child Abuse America



**Prevent Child Abuse America - Dan Duffy, President & CEO**

# Introduction: What is Resilience?

Resilience is the ability to thrive, adapt and cope despite tough and stressful times. Resilience is a natural counter-weight to Adverse Childhood Experiences (ACEs). The more resilient a child is, the more likely they are to deal with negative situations in a healthy way that won't have prolonged and unfavorable outcomes. Resilience is not an innate characteristic, but rather is a skill that can be taught, learned and practiced. Everybody has the ability to become resilient when surrounded by the right environments and people.

Toxic stress is a chronic activation of a physiologic response to stressors when there is no buffering protection, or support. The ACE studies and subsequent related research quantified the physiological effects of stress and suffering, but spiritual cultures have understood the relation between body and mind for eons and clinicians have observed and documented it for decades. The film *Resilience* contains a wealth of technical information about child development and how developing bodies and brains respond to stress, and offers steps everyone can take to promote resilience in children.

We all have a role to play in promoting the great childhoods that children deserve. As facilitators of discussions around this film, our job is to help ensure that viewers leave knowing how they can promote resilience in their families and communities.

## Using this Guide

Many professional ideologies intersect around the concept of promoting well being for children. Prevent Child Abuse America chapters and our local partners are in an ideal position to promote the core message of *Resilience*. We want professionals to feel comfortable discussing the critical messages of *Resilience* with colleagues or peers, in their own language. Our intent is to engage the participants and motivate them to take action on behalf of children, their families and the communities in which they live. In order to accomplish this goal, we will need to appeal to the “heart” and “head” of the audience by leading a discussion that:

- (1) *Speaks to their heart by introducing them to the concepts behind the ACE studies and the life-long impact of exposure to multiple ACEs, and the normalization of ACEs in all of our lives; but then,*
- (2) *Engages their head through a guided discussion about the role they can play in the lives of the children and families they serve professionally and in their communities, encourage others to do so, support community members already playing a role and obtain the tools they need to do so.*

We want to help audience members see how all of the different professions participating in the community initiatives highlighted in the film made a difference. We can note that even when a trauma-informed approach was implemented by one profession, it was successful thanks to strong collaboration with staff from others.

Our goal is to elevate the dialogue to that of how an interconnected population or system, not just any particular teacher, child or family can make a change. If everyone takes a step, like the professionals behind the collaborative in New Haven, then we all move together to create a thriving community. In this guide, you will find specific moments in the film that support important strategies to build resilience and suggested discussion points. Later in this guide, you will find suggested questions to move the discussion toward a call-to-action for your organization or community.

**“Resilience does not mean that children ‘get over it.’ It does mean that the caring adults in their lives have a lot of power to buffer, rather than cement, the effects of toxic stress.”**

*-Amanda J Moreno, Ph.D.  
Erikson Institute*

# Before Staffing a Screening

Follow these steps to maximize the viewers' response to *Resilience*:

- (1) View *Resilience* at least one time and learn the name and perspective of each featured professional and community member, as well as the major facilities where the film takes place:



*Rob Anda, MD  
CDC*



*Vince Felitti, MD  
Kaiser Permanente*



*Nadine Burke Harris  
Center for Youth Wellness*



*Jack Shonkoff, MD  
Harvard University*



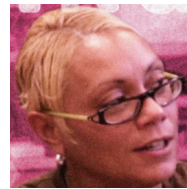
*Victor Carrion, MD  
Stanford University*



*Alice Forrester, PhD  
Clifford Beers Clinic*



*Laura Lawrence,  
Home Visitor*



*Cynthia, Mother  
working with Laura*



*Laura Porter  
CEO, Ace Interface*



*David Johnson, PhD  
Post-Traumatic Stress  
Center*



*Susan DeNicola  
Strong School*



*"Miss Kendra"  
Curriculum*

- (2) Read this discussion guide in its entirety. This guide contains more material than one person could possibly use in a single post-film discussion, but can be valuable for different audiences at different times. While *Resilience* focuses primarily on health care, education and social services, they refer to connections with others such as the private sector, law enforcement, psychology, elected officials and the community at large. Review the materials, then make notes with two or three talking points to introduce the film. The section "Strategies to Build Resilience" has suggested questions; choose those that most resonate with you after viewing the film!
- (3) Learn as much as you can about the audience and choose the most applicable discussion points from this guide, but be prepared to be flexible if the conversation moves to other areas. If you are speaking to an audience outside of your own profession, consider getting a perspective on the ACE studies from a member of that profession before the event. **A panel discussion with members of multiple professions can be most effective!** Sample questions offered in this guide can be posed to panel members as well as an audience. Here are some general discussion questions to help you get started (Refer to *Appendix E* for more question ideas):
  - Now, what does resilience mean to you?
  - From your perspective or profession, what stood out?
  - What do you consider the key strategies in the film?
  - What is one thing you heard or saw that touched you?
  - What one thing surprised you the most?
- (4) Learn about ACEs-related programs in your community and contact them for resource materials. See Appendix A for state specific resources.
- (5) Print copies of the informational postcard containing information for viewers on how to download handouts. Contact Zach Hiner ([zhiner@preventchildabuse.org](mailto:zhiner@preventchildabuse.org)) for more information.
- (6) Decide if you want to ask viewers to complete a post-film survey. Contact Janet Rosenzweig ([jrosenzweig@preventchildabuse.org](mailto:jrosenzweig@preventchildabuse.org)) for more information.

# Prepare to Inspire: Create a Call-to-Action

As Laura Porter of ACE Interface says late in the film, “If we can weave the science through these different professions and get it into the hands of the general population, they will invent very wise actions.” Your job as a facilitator is to inspire your audience to follow through and invent these actions. Washington State showed that through a comprehensive approach to educating communities and empowering local leaders to take action, the state experienced reduced rates of childhood trauma and health problems in the next generation.

## Here are some questions and activities to help inspire a call-to-action:

- What are you going to do now that you know this information?
- How can you influence the professionals in your field?
- List five people who need to see this film and learn this information. What would it take to arrange that?
- List three things that you will do now that you’ve seen this film...
  - One short term (NOW)
  - One medium term (this month)
  - One longer term (within the year)
- How might we inspire community members to stand up and be an ally for children with high ACE scores?

There are more steps you can take in your community after facilitating discussions of *Resilience!* Join a local or state ACEs task force or form one if none exists. You can also work with local prevention partners to develop in-service training for different professionals. Contact Prevent Child Abuse America for help taking these next steps.

For more discussion question ideas, refer to Appendix E - “Asking Powerful Questions.”



# Strategies to Build Resilience

Change begins by building resiliency. When we respond with compassion to those who have experienced trauma and give families the tools they need to raise healthy children from the start, we develop systems that enable people to thrive, adapt and cope despite trauma.

**“It’s not something you’re born with. It’s something that gets built over time.”**

*-Dr. Jack Shonkoff (22:30)*

In the following sections, you will find more information on the strategies to build resilience or mitigate the effects of ACEs that are mentioned in the film.

Each section includes a brief overview of the strategy, relevant quotes and their timestamps from the film and sample discussion questions that can be used with your audience to dive deeper into these ideas.

## STRATEGY: Defining resilience

The introduction to this guide defines resiliences as the ability to thrive, adapt and cope despite tough and stressful times. How does a child build resilience? The presence of a caring, stable adult and being raised in a safe, stable and nurturing environment are two critical factors to build resilience.

But learning how to be resilient isn’t just for children – adults can learn these skills as well. Two main approaches that stand out in the film as being most effective *are working with parents directly* (like at the Clifford Beers Clinic) and *intervening early with children who have experienced toxic stress* (as seen at Dr. Burke Harris’ center).

### Related Quotes

“We need to do more than give parents information and advice: we need to build their capabilities”  
*- Dr. Jack Shonkoff, Harvard University - 24:00*

“By using techniques to allow them [children] to express what their worries are and their stress, to lower their experienced stress, we are going to be able to help them maintain their resilience. And that’s our goal.”

*- Dr. David Johnson, Clinical Psychologist, Post Traumatic Stress Center - 36:45*

### Suggested Discussion Questions

- Can you think of a time when a parent or caretaker exhibited resilience in the face of some really tough times?
- What gives you hope and strength during hard times?
- What strategies or methods are helpful to build resilience in your everyday life when facing adversity?

# STRATEGY: Change the discussion from “what’s wrong with you?” to “what happened to you?”

Neuroscience teaches us that the brain is constructed through an ongoing process that begins prenatally and continues into our twenties. While ACEs undermine this development and negatively affect the foundation of the brain, resilience can help repair these structural problems and allow a person to “bounce back” from the trauma or adversity they had experienced.

Knowing what we do about ACEs and brain architecture, we must work to change the conversation when a child is acting out from “what’s wrong with you” to “what happened to you and how can we help fix it.” For children, the presence of compassionate teachers, caring coaches, or other adult mentors can help build resilience. Adults dealing with other adults affected by ACEs need to show empathy in their interactions. These approaches can teach both children and adults how to behave empathetically as an instinct and create the compassion necessary to change this conversation.

## Related Quotes

“I could not make a diagnosis of ADHD because a lot of the kids I was seeing had so many traumatic experiences in their life.”

- Dr. Nadine Burke Harris, Center for Youth Wellness - 15:00

“Exposure to early adversity and trauma literally affects the structure and function of children’s developing brains.”

-Dr. Nadine Burke Harris, Center for Youth Wellness - 18:09

**“An ACE score of 4 or more makes children 32 times as likely to have problems in school.”**

*-Dr. Nadine Burke Harris (16:50)*

## Suggested Discussion Questions

- Based on what you learned in this film, what are your thoughts about zero-tolerance policies for “bad behavior” in schools or youth-serving organizations?
- How can we help children who have been exposed to trauma?
- What are some examples of situations where you could have asked “what happened” instead?
- What would you do differently after seeing *Resilience*?

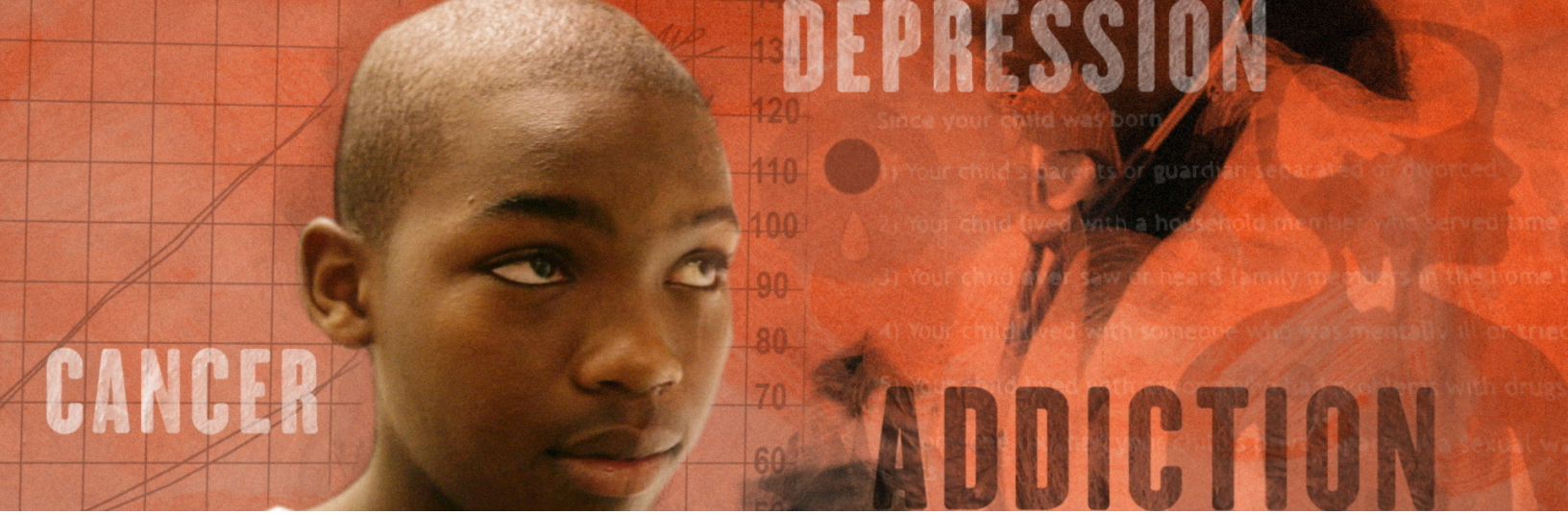
## TEACHABLE MOMENT: The ‘Miss Kendra’ curriculum



**Miss Kendra teaches children that trauma is not the norm and that grown-ups do care about what is going on in their lives.**

**Non-educators can use this tool too! Show the children in your life that you care and there to listen and help. If a child discloses abuse, contact local authorities immediately.**





## STRATEGY: Recognize toxic stress as the largest public health issue of our generation.

We know that ACEs can have long-term effects on the utilization of our healthcare system. By making an effort today to equip our children and families with the tools they need to overcome ACEs, we can cut down on the costs that future generations will have to bear. Eliminating toxic stress among children would have a profound impact on the health and well being of individuals and entire populations.

### Related Quotes

“When you look at ACEs they’re actually a stronger predictor of heart disease than any of the traditional risk factors...and yet I was never trained on this in one day in Medical School.”

- Dr. Nadine Burke Harris, Center on Youth Wellness - 11:00

“We coined the term toxic stress to try to explain to people how there is stress and there’s **stress**. Unfortunately, over the years a lot of people have misused the term... toxic stress is this chronic activation of stressors with no buffering protection, no support.”

- Dr. Jack Shonkoff, Harvard University - 20:45

“If all day long you feel like a truck is coming at you, day after day after day, that’s going to take a toll on the body.”

- Dr. Victor Carrion, Stanford University - 17:30

### Suggested Discussion Questions

- What is a health or social issue you noticed in the film that you were surprised tied back to ACEs and other toxic stressors?
  - What are some of the responses in this film that might help you address those issues?
- How can you spread the word about toxic stress in your personal and professional life?

# STRATEGY: Build critical collaborations

We know that the consequences of ACEs cut across professional disciplines, personal relationships and all socioeconomic demographics. In each of the trauma-informed agencies and disciplines shown in the film (for example, the Centers for Youth Wellness, Clifford Beers Clinic and Strong Elementary School), multiple disciplines were collaborating.

Our work to build resiliency can't be concentrated on an "at-risk" population, but we instead need to consider the entire population at-risk. To implement such a universal approach, we need to form connections between entities like the Department of Public Health, local universities and local schools, health care, law enforcement and the faith-based communities to affect the kinds of change necessary to build the skills of resilience on a scale larger than the individual. Proof of this can be found in Washington state, where through a coordinated, community approach, many indicators of child and family well being improved!

Screenings of films like *Resilience* and *Paper Tigers* offer an excellent tool for helping people from multiple professionals connect around building resilient children, families and communities.

**“Faith and hope are fundamental aspects of resilience, for as you think you are, so you are!”**

*-Rev. Dr. Darrell Armstrong  
Pastor, Shiloh Baptist Church*

## Related Quotes

“We tend to divide the world of mental health separate from the world of physical health, but the body doesn't do that.”

*- Dr. Nadine Burke Harris, Center for Youth Wellness - 16:11*

“If [people] already know that these [ACEs] are common, they are more likely to be relieved, I think, than frightened...they don't feel alone anymore. That ‘I'm not the only one that experienced these kinds of things.’”

*- Dr. Robert Anda, Centers for Disease Control and Prevention - 49:14*

## Suggested Discussion Questions

- What are some examples of how our community is coming together? Are there other professional groups with whom you could connect?
- The potential cost savings may appeal to the business sector; what other lessons from the film would resonate with various audiences, e.g. the faith community, law enforcement and others?

## TEACHABLE MOMENT: Cooperating with connections to build resilience



**In *Resilience*, every agency we meet has people from multiple disciplines who work together, such as at Strong Elementary.**

**Bringing together diverse stakeholders from the community - including businesses, social service agencies and government - will have a stronger impact than if one group tries to go it alone.**

# BETTER SCREENING



# HEALTHY RELATIONSHIPS



## STRATEGY: Promote safe, stable, nurturing relationships & environments

The presence of caring adults and stable environments are a necessary component for a child’s healthy development and for building resilience. Safe, stable, nurturing relationships between children and their parents or caregivers act as a buffer against the effects of toxic stress and other ACEs. In fact, **research is now showing that the presence of supportive relationships is more critical than the absence of ACEs in promoting well-being.**

If parents are struggling, other adults – like teachers or coaches – can be present to provide the safe, stable, nurturing relationships that a child needs. We can also invest in supports and promote policies that strengthen families and set them up for future success.

### Related Quotes

“Scientific research points to the presence of a stable, caring adult in a child’s life as the key to building the skills of resilience.”

- Dr. Jack Shonkoff, Harvard University - 23:26

“I think that one thing adults fail to do for children is recognize that kids have stress because our stress seems so much more important.”

- Charles Warner, Support Staff, Strong Elementary - 34:10

### Suggested Discussion Questions

- What can we do if a child we know needs our support; such as one of our child’s friends?
- What other supports or resources can we provide to build resilience in children and strengthen families?

# STRATEGY: Prevent intergenerational transmission of toxic stress

To create good outcomes for children we need to support adults. *Resilience* makes very clear the intergenerational effects associated with ACEs and trauma. What a parent teaches their children will get passed on to their children’s children. A good example of dealing with intergenerational effects is the Clifford Beers Clinic, which works with both parents and children in order build the adult’s capabilities so they can better support their children.

Cynthia, the woman who is having difficulty ending an abusive relationship, is working with a home visitor – another domestic violence survivor – to try and break the cycle for her daughter. But developing resilience also has intergenerational benefits, and as Cynthia demonstrates the resilience she learns through her home visits, her daughter will respond to these lessons as well.

## Related Quotes

“The sad thing is a lot of our students think that what they are going through is normal, this is their normal. If no one has given them anything to think otherwise, I think that is where the cycle just keeps going and going.”

- Cynthia Manfold, Kindergarten Teacher - 39:05

“One day, some of them will be coming here as clients. Why are we waiting for them to fall apart? We need to be where the kids are.”

- Dr. David Johnson, Clinical Psychologist, Post-Traumatic Stress Center - 35:35

“If we want to produce dramatic impacts on the outcomes for kids experiencing toxic stress, we have to transform the lives of the adults who are taking care of them.”

- Dr. Jack Shonkoff, Harvard University - 23:26

## Suggested Discussion Questions

- How do we let people know that all parents need help sometimes and it’s okay to ask for help?
- How do we ensure that community members offer help or support even when parents don’t ask, but obviously need it?

**“We need a two generation approach recognizing that the child is experiencing ACEs now and the parent likely experienced ACEs during their own early years.”**

-Angelo P. Giardino, M.D., Ph.D.  
Texas Children’s Hospital

## TEACHABLE MOMENT: Parents need support, too!



When Cynthia is having a bad day, she asks her home visitor to “stay with me.”

Our efforts cannot focus on children alone. Efforts like home visiting will be much more successful when they work with both parents and children; building the skills of resilience in both and helping to break cycle of ACEs.

# STRATEGY: Promote hope

One great takeaway from *Resilience* is that there is always hope!

Science shows the effects of ACEs are not permanent. Lessons like those in the Miss Kendra curriculum teach children that misfortune isn't normal and that others care about what happens to them and want to help. Teachers report being profoundly moved when they see the impact this curriculum has on children. Trained home visitors can help parents create the kind of stable, nurturing environment critical for healthy development while overcoming their own trauma.

**“It’s therapeutic to be reminded that a high ACE score is nothing to be ashamed of!”**

*- Laura Delman  
Creative Director/Founder*

These kind of responses are examples of how different disciplines, agencies and people can come together and make a difference like that made in Washington state.

## Related Quotes

“We need to put to bed forever the sense that children who are born under disadvantaged circumstances are doomed to poor life outcomes. Science is saying that is not true.”

*- Dr. Jack Shonkoff, Harvard University - 19:33*

## Suggested Discussion Questions

- How can your community emulate the different approaches shown in *Resilience*?
- What are the programs and policies your community is already supporting to build resilience?
- What are barriers to implementing these strategies in your community? How can you help get around them?





## Appendices

**Appendix A - National ACEs Resources**

**Appendix B - State by State Resources**

**Appendix C - Core Story of Early Child Development**

**Appendix D - Dealing with Difficult Audiences**

**Appendix E - Asking Powerful Questions**

# Appendix A - National ACEs Resources

## ACEs Connection

ACEs Connection is a social network that accelerates the global movement toward recognizing the impact of adverse childhood experiences in shaping adult behavior and health. A major goal is the reforming of all communities and institutions - including schools, prisons, hospitals and churches - to help heal and build resilience rather than to continue to traumatize already traumatized people.

- The ACEs Connection Home  
[acesconnection.org](http://acesconnection.org)

## The Centers for Disease Control and Prevention (CDC)

The CDC is one of the leading agencies in the country working to address child abuse and neglect, determining the underlying causes and identifying pathways toward a violence-free future.

- The Essentials for Childhood  
[cdc.gov/violenceprevention/childmaltreatment/essentials](http://cdc.gov/violenceprevention/childmaltreatment/essentials)
- Veto Violence  
[vetoviolenecdc.gov](http://vetoviolenecdc.gov)
- The ACE Study  
[cdc.gov/violenceprevention/acestudy](http://cdc.gov/violenceprevention/acestudy)

## The Center for the Study of Social Policy (CSSP)

The CSSP has developed Strengthening Families™ as a research-informed approach to increase family strengths, enhance child development and reduce the likelihood of child abuse and neglect. It is based on engaging families, programs and communities in building five protective factors.

- Strengthening Families  
[cssp.org/reform/strengtheningfamilies](http://cssp.org/reform/strengtheningfamilies)
- The Protective Factors Framework  
[cssp.org/reform/strengtheningfamilies/about/protective-factors-framework](http://cssp.org/reform/strengtheningfamilies/about/protective-factors-framework)

## Connections Matter

Connections Matter promotes caring connections as the foundation for developing healthy brains, supportive relationships and strong communities.

- Website and Awareness toolkit with curriculum by Dr. Linda Chamberlain  
[connectionsmatter.org](http://connectionsmatter.org)

# Appendix B - State by State Resources

## Alabama

- [ctf.alabama.gov](http://ctf.alabama.gov)

## Alaska

- [www.alaskachildrenstrust.org](http://www.alaskachildrenstrust.org)
- [dhss.alaska.gov/dph/Chronic/Pages/InjuryPrevention/akfvpp/clearinghouse.aspx](http://dhss.alaska.gov/dph/Chronic/Pages/InjuryPrevention/akfvpp/clearinghouse.aspx)

## Arizona

- [www.pcaaz.org](http://www.pcaaz.org)
- [www.azpbs.org/strongkids/](http://www.azpbs.org/strongkids/)

## Arkansas

- [www.arkansasctf.org](http://www.arkansasctf.org)

## California

- [www.thecapcenter.org](http://www.thecapcenter.org)

## Colorado

- [www.preventchildabusecolorado.org](http://www.preventchildabusecolorado.org)

## Connecticut

- [www.kidsafect.org](http://www.kidsafect.org)
- [www.ct.gov/dcf/cwp/view.asp?a=4758&q=314496](http://www.ct.gov/dcf/cwp/view.asp?a=4758&q=314496)

## Delaware

- [www.pcadelaware.org](http://www.pcadelaware.org)

## Florida

- [www.ounce.org/PreventionServices.asp](http://www.ounce.org/PreventionServices.asp)

## Georgia

- [abuse.publichealth.gsu.edu/essentials-for-childhood/](http://abuse.publichealth.gsu.edu/essentials-for-childhood/)
- [dph.georgia.gov/georgia-behavioral-risk-factor-surveillance-system-brfss](http://dph.georgia.gov/georgia-behavioral-risk-factor-surveillance-system-brfss)

## Hawaii

- [www.preventchildabusehawaii.org](http://www.preventchildabusehawaii.org)

## Iowa

- [www.pcaiowa.org](http://www.pcaiowa.org)
- [www.iowaaces360.org](http://www.iowaaces360.org)

## Idaho

- [www.idahochildrenstrustfund.org](http://www.idahochildrenstrustfund.org)

## Illinois

- [hmprg.org/Programs/IL+ACE+Response+Collaborative](http://hmprg.org/Programs/IL+ACE+Response+Collaborative)

## Indiana

- [www.pcaain.org](http://www.pcaain.org)

## Kansas

- [www.kansaspowerofthepositive.org](http://www.kansaspowerofthepositive.org)

## Kentucky

- [kidsnow.ky.gov/Improving-Early-Care/Pages/Kentucky-Strengthening-Families.aspx](http://kidsnow.ky.gov/Improving-Early-Care/Pages/Kentucky-Strengthening-Families.aspx)

## Louisiana

- [pcal.org](http://pcal.org)
- [1800251baby.org/provider/bureau-of-family-health#louisiana-ace-educator-program](http://1800251baby.org/provider/bureau-of-family-health#louisiana-ace-educator-program)

## Massachusetts

- [www.masskids.org](http://www.masskids.org)

## Maine

- [www.maineaces.org](http://www.maineaces.org)
- [www.mechildrenstrust.org](http://www.mechildrenstrust.org)

## Maryland

- [www.familytreemd.org](http://www.familytreemd.org)

## Michigan

- [www.michigan.gov/ctf](http://www.michigan.gov/ctf)

## Minnesota

- [www.pcamn.org/resources-for-resilience-and-healing](http://www.pcamn.org/resources-for-resilience-and-healing)

## Missouri

- [www.missourikidsfirst.org](http://www.missourikidsfirst.org)

## Mississippi

- [www.preventchildabusems.org](http://www.preventchildabusems.org)

## Montana

- [www.elevatemontana.org](http://www.elevatemontana.org)
- [www.childwise.org/resilience2016](http://www.childwise.org/resilience2016)

## North Carolina

- [www.preventchildabusenc.org/about-child-abuse/ace-study](http://www.preventchildabusenc.org/about-child-abuse/ace-study)
- [www.buncombeaces.org/ace-learning-collaborative/](http://www.buncombeaces.org/ace-learning-collaborative/)

## North Dakota

- [www.pcand.org](http://www.pcand.org)

## Nebraska

- [www.nebraskachildren.org](http://www.nebraskachildren.org)

## New Hampshire

- [www.nhchildrenstrust.org](http://www.nhchildrenstrust.org)

## New Jersey

- [www.preventchildabusenj.org](http://www.preventchildabusenj.org)

## Nevada

- [www.preventchildabusenevada.org](http://www.preventchildabusenevada.org)

## New York

- [www.preventchildabuseny.org](http://www.preventchildabuseny.org)
- [www.aceresponse.org/give\\_your\\_support/HEARTS\\_Initiative\\_45\\_pg.htm](http://www.aceresponse.org/give_your_support/HEARTS_Initiative_45_pg.htm)

## Ohio

- [jfs.ohio.gov/OCTF/](http://jfs.ohio.gov/OCTF/)

## Oklahoma

- [www.parentpromise.org](http://www.parentpromise.org)

## Oregon

- [www.ctfo.org](http://www.ctfo.org)

## Pennsylvania

- [www.preventchildabusepa.org](http://www.preventchildabusepa.org)

## South Carolina

- [www.scchildren.org/aces](http://www.scchildren.org/aces)
- [www.scchildren.org/prevention\\_learning\\_center/](http://www.scchildren.org/prevention_learning_center/)

## Tennessee

- [tn.gov/tccy/article/ace-building-strong-brains](http://tn.gov/tccy/article/ace-building-strong-brains)
- [pcat.org](http://pcat.org)

## Texas

- [www.preventchildabusetexas.org](http://www.preventchildabusetexas.org)

## South Dakota

- [dss.sd.gov/childprotection/nationalchildabuse.aspx](http://dss.sd.gov/childprotection/nationalchildabuse.aspx)

## Utah

- [www.preventchildabuseutah.org](http://www.preventchildabuseutah.org)

## Vermont

- [www.pcavt.org](http://www.pcavt.org)
- [mentalhealth.vermont.gov/cafu](http://mentalhealth.vermont.gov/cafu)

## Virginia

- [www.pcav.org](http://www.pcav.org)

## West Virginia

- [www.preventchildabusewv.org](http://www.preventchildabusewv.org)

## Wyoming

- [www.pcawy.org/trainings](http://www.pcawy.org/trainings)



# Appendix C - The Core Story of Early Child Development

Prevent Child Abuse America sought to reframe its messaging to be more engaging based on research we commissioned by the FrameWorks Institute. With this research we established a “Core Story of Early Child Development” as the foundation of all organizational communication. The FrameWorks research showed that this core story has the power to engage the public and help “move the dial” on policies that support all children and families.

Using this story, we can create common messages that focus on the need to understand brain structure and the idea that supporting healthy child development cannot be on one person’s shoulders – it takes a community of engaged members to support the healthy development of children. Below are the key concepts to this core story as well as examples from *Resilience* to help flesh them out further.

## The seven concepts to the core story

### (1) Frameworks Concept: Prosperity

Healthy child development is important for both community and economic development. According to this view, society’s ability to build capacities that are developed during childhood becomes the basis of a prosperous and sustainable society.

**Example from *Resilience*:** Since training all teachers and students about ACEs and toxic stress, youth arrests for violent crime are down 66% in Washington, saving the state more than \$1.4 billion over a ten year period.

### (2) Frameworks Concept: Brain Architecture

Much like the construction of a home, the architecture of the developing brain begins with laying the foundation, framing the rooms and wiring the electrical system. It continues with the incorporation of distinctive features that reflect increasing individuality over time. As it emerges, the quality of that “brain architecture” establishes either a sturdy or fragile foundation for all of the development and behavior that follows.

**Example from *Resilience*:** Places like the Center for Youth Wellness focus on building resiliency skills at a young age so children have the sturdy brain architecture that leads to healthy development and a prosperous future.

### (3) Frameworks Concept: Skill Begets Skill

Children’s brains are built “from the bottom up,” with simple circuits and skills providing the scaffolding for more advanced circuits and skills over time. According to this view, the circuits that underly the ability to put words together to speak phrases forms a foundation for the subsequent mastery of reading a written sentence in a book.

**Example from *Resilience*:** Children are not born fully formed, so we have the opportunity to build their brains through love and stable, nurturing relationships and environments. The presence of a stable, caring adult is one of the keys to building resiliency, according to Dr. Jack Shonkoff.

#### (4) Frameworks Concept: Serve and Return

Interactive influences of genes and experiences shape the developing brain. The active ingredient is the “serve and return” relationships with their parents and other caregivers in the community. Like the process of serve and return in games like tennis, young children naturally reach out for interaction through babbling and facial expressions. If adults do not respond by getting in sync and doing the same kind of vocalizing and gesturing back at them, the child’s learning process is incomplete. This has negative implications for later learning.

**Example from Resilience:** Kids learn from people they trust, but more than that, kids learn - and grow - when connections are made between them and adults they can trust. With these connections, ideas and support can be shared back and forth between them, such as seen at Strong Elementary.

#### (5) Frameworks Concept: Can’t Do One Without the Other

Paying attention to young children’s emotional and social needs, as well as to their mastery of literacy and cognitive skills, has the maximum impact on child development. According to this view, because the brain is a highly integrated organ and its multiple functions operate in a richly coordinated fashion, you cannot focus on developing just one part of the child without paying equal attention to the other capacities.

**Example from Resilience:** At Strong Elementary School, the teachers and support staff not only teach children skills like arithmetic and language, but also focus on their mental health and development. This two-fold approach allows them to ensure their lessons about math and English are having the biggest impact without being impaired by issues like toxic stress.

#### (6) Frameworks Concept: Toxic Stress

Toxic Stress is the repeated over-exposure of a developing brain to stress hormones in early childhood and is associated with such things as extreme poverty or maltreatment. While positive stress is short-lived and tolerable stress is alleviated by the presence of stable relationships, toxic stress lasts longer. Without consistent, supportive relationships it can lead to lifelong problems with learning, behavior and physical and mental health.

**Example from Resilience:** Many of the children who Dr. Nadine Burke Harris saw before starting her Center for Youth Wellness were experiencing the affects of toxic stress due to various conditions in their lives. Dr. Burke Harris is trying to prevent that with her practice, but this task isn’t up to doctors alone.

#### (7) Frameworks Concept: Pay Now or Pay Later

Trying to change behavior or build new skills on the foundation of brain circuits that were not formed properly when they were first formed requires more work and is less effective. It is better to focus on forming safe, stable nurturing relationships and environments early and preventing the effects of toxic stress because it is less costly and more effective than late-stage interventions.

**Example from Resilience:** Dr. David Johnson talks about the need to “be where the children are,” instead of waiting until later in life to confront physical and mental health problems. With this view, we can either prevent toxic stress and intervene early, or wait until it is much more costly and less effective to intervene when the children have become adults.

# Appendix D - Dealing with Difficult Audiences

Audience members may come to an event with a personal or political agenda that may not match your goals. These tips can help you keep the discussion focused!

## (1) Stuck / Repeated Point

If someone is stuck on a point that is not helpful to the discussion, acknowledge you've heard them but need to move on. Consider inviting them to continue the discussion with you after the event.

## (2) Dominator

If someone is dominating the discussion. "Okay, we've heard from you before. I'd like to hear from more people here. Are there others who have a question or a point to make?"

## (3) Anger / Intense Emotion

If someone is really angry or expressing another strong emotion: "I can see/hear that you are really \_\_\_\_\_. These issues can tap into really strong feelings. (If the person is combative)... I respect your feelings and your point of view, but I want to make sure this is a space where everyone feels safe and respected so we need to move on.

## (4) Left Field

If someone came to make a certain point that has little or nothing to do with the film and/or discussion, remind them that people came to watch - and discuss - and you need to bring the discussion back to the point. If you want or feel a need, offer to meet with the person later.

## (5) Disclosures

If someone says "that happened to me too" acknowledge the courage it takes to speak up and how difficult it can be to talk about. There are likely others who've also experienced traumatic events who haven't mentioned it. Depending on the situation saying one or more of the following may help:

- "There are people here who you can talk to more (*note the information in preparing for the discussion on identifying helpers*)."
- "I'm here for a while after the discussion if you want to talk more."
- "Thank you for acknowledging your truth. There is no shame in experiencing childhood trauma and speaking about it can help people understand that we can move beyond the effects."

*This section on Dealing with Difficult Audiences was prepared by Cordelia Anderson, Sensibilities, Inc. for use by Prevent Child Abuse America.*

# Appendix E - Asking Powerful Questions

## Questions for Focusing Attention

- What question, if answered, could make the most difference to the future of (our/your situation)?
- What's important to you about (our/your situation) and why do you care?
- What draws you/us to this inquiry?
- What's our intention here? What's the deeper purpose that is really worthy of our best effort?
- What opportunities can you see in (our/your situation)?
- What do we know so far/still need to learn about (our/your situation)?
- What are the dilemmas/opportunities in (our/your situation)?
- What assumptions do we need to test or challenge here in thinking about (our/your situation)?
- What would someone who had a very different set of beliefs than we do say about (our/your situation)?

## Questions for Connecting Ideas and Finding Deeper Insight

- What's taking shape? What are you hearing underneath the variety of opinions being expressed?
- What's emerging here for you? What new connections are you making?
- What had real meaning for you from what you've heard? What surprised you? What challenged you?
- What's missing from this picture so far? What is it we're not seeing? What needs more clarity?
- What's been your/our major learning, insight or discovery so far?
- What's the next level of thinking we need to do?
- If there was one thing that hasn't yet been said in order to reach a deeper level of understanding/ clarity, what would it be?

## Questions that Create Forward Movement

- What would it take to create change on this issue?
- What could make you/us to feel fully engaged and energized about (our/your situation)?
- What's possible here and who cares? (Rather than "What's wrong here and who's responsible?")
- What needs our immediate attention going forward?
- If our success was completely guaranteed, what bold steps might we choose?
- What challenges might come our way and how might we meet them?
- What conversation, if begun today, could ripple out in a way that created new possibilities for the future?
- How can we support each other in taking the next steps? What unique contribution can we each make?
- What seed might we plant together today that could make the most difference to the future of (our/your situation)?

*This section on Asking Powerful Questions and Appreciative Inquiry was taken from **The Art of Powerful Questions: Catalyzing Insight, Innovation and Action** (2003) by E. Vogt, J. Brown, and D. Isaacs.*



“We confront society’s hidden challenges. And we honor those that fight them. One story at a time.” KPJR Films began as a collaboration between Karen Pritzker and James Redford on HBO’s THE BIG PICTURE: RETHINKING DYSLEXIA, a documentary film that gave hope to millions of families around the world who have struggled to educate their dyslexic children. From there, they turned their story-telling eye toward the hidden menace of adverse childhood experiences, ACEs, producing both Paper Tigers and Resilience. PAPER TIGERS premiered in 2015 at the Seattle Film Festival and RESILIENCE premiered in 2016 at the Sundance Film Festival. KPJR Films are available to all segments of the community for educational purposes as well as community screenings, nationally and internationally. Learn more at [kpjrfilms.co](http://kpjrfilms.co).



Founded in 1972, Prevent Child Abuse America is a national organization with chapters in all 50 states and nearly 600 Healthy Families America home visitation sites. Approaching our 45th anniversary, we lay the groundwork to deliver the great childhoods that all children deserve. We promote services that improve child well-being and develop programs that help to prevent all types of abuse and neglect. Ninety-two cents of every dollar donated goes directly into programs and services, which is why we are rated as “one of the two best charities for children in the nation” by Consumer Reports and ranked “Top-Rated Nonprofit” by a variety of charity watchdog organizations, including: Charity Navigator, GreatNonprofits and GuideStar. To learn more about what we’re doing to prevent child abuse and neglect and how you can help, visit us at [preventchildabuse.org](http://preventchildabuse.org).

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*Download resources related to Resilience, the ACEs studies and more:*  
[preventchildabuse.org/resource/resilience](http://preventchildabuse.org/resource/resilience)

**THE FACILITATOR'S  
GUIDE TO RESILIENCE**

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