

# RESILIENT NC

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Supporting Statewide Efforts to Build  
Community Resilience

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## North Carolina Partners

ACES-Informed Courts Task Force  
 Building Resilient and Courage to Excel (BRACE)  
 Center for Trauma Resilient Communities  
 Charlotte Resilience Project  
 Duke University - Center for Child and Family Health (CCFH)  
 Kellin Foundation  
 North Carolina Child  
 North Carolina ECHO  
 North Carolina Division of Mental Health, Developmental Disabilities, and Substance Abuse Services

North Carolina Partnership for Children  
 PACES Connection  
 Prevent Child Abuse North Carolina  
 ReCAST Mecklenburg  
 Resilient North Carolina Collaborative Coalition  
 Rural Opportunity Institute  
 Resiliency Collaborative  
 Watauga Compassionate Community Initiative

## State Partners

California	Pennsylvania
Connecticut	Tennessee
Delaware	Utah
Florida	Virginia
New Jersey	

## National Partners

Campaign for Trauma-Informed Policy and Practice (CTIPP)  
 ACE Resource Network

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# Executive Summary

## An Overview

A growing body of research within the U.S. points to the benefits of taking a trauma-informed approach when building systems and delivering services at a state and community level. Building a trauma-informed service system requires focus on multiple components, including trauma screening and assessment, workforce development, and partnering with youth and families (SAMHSA, 2014). An additional key component to creating a trauma-informed, statewide approach is the strengthening of resilience and protective factors.

Resilience is traditionally defined as a process of adapting well in the face of adversity, trauma, tragedy, threat to well-being, or significant stress (American Psychological Association, 2014). While resilience is often referenced as an individual trait, there are many different layers of resilience, including individual-level, family-level, organizational-level, and community-level resilience.

*While there are many ways to define community resilience, this report refers to the dynamic process at the community and systems level in which communities respond and adapt to stresses and challenges. Key attributes include a community response that: a) promotes safe, secure, and nurturing environments for all; and b) draws on interconnected social networks and coordinated, easy-to-access, and comprehensive resources that help communities thrive.*

As described by Ammons (2020), an important clarification is that resilience does not mean that oppressed peoples are the ones who should solely adapt to survive, but that the systems should adapt and transform to support people. **For clarity, this report, and the Resilient NC efforts, focuses on this type of community-level resilience.**

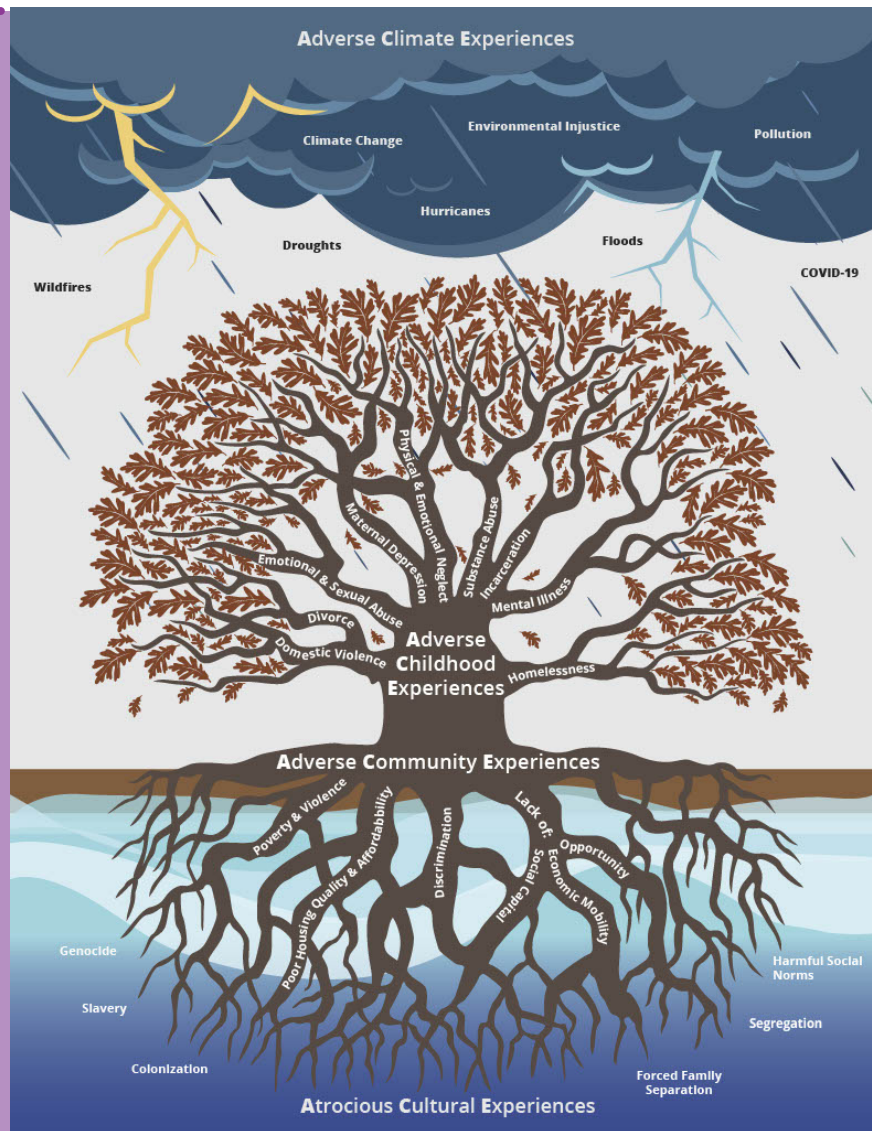
Just as resilience can be conceptualized as occurring at various levels, it is important to note that adversity can also occur at various levels. Adverse childhood experiences, or ACEs, are individual-level experiences of childhood trauma (occurring before age 18) that include abuse, neglect, and household dysfunction (Felitti et al., 1998). The landmark ACEs study conducted by Kaiser-Permanente revolutionized

the science behind the understanding of how childhood adversity can have lasting mental and physical health effects over the lifespan. This study highlighted that ACEs are incredibly common, and that a dose-response relationship exists between a person's ACE score and their risk for developing diseases like cancer, heart disease, and diabetes. In other words, the higher one's ACEs score, the higher the likelihood the individual will engage in unhealthy behaviors such as smoking and substance use, and/or experience mental health issues including depression and suicidal ideation (Felitti et al., 1998). The negative effects of childhood trauma and ACEs are well documented and have garnered increasing attention from leaders across sectors and across the country. **In addition, our understanding of the negative effects of childhood toxic stress on the brain and body**

### Key Attributes of Community Resilience

- SAFE, SECURE, AND NURTURING ENVIRONMENTS FOR ALL
- INTERCONNECTED SOCIAL NETWORKS
- COORDINATED, EASY TO ACCESS, AND COMPREHENSIVE RESOURCES





NCPC's NC Healthy & Resilient Communities Initiative

has called for a paradigm shift to focus on and invest in prevention and intervention efforts to foster well-being (Garner & Yogman, 2021).

Adverse experiences can also occur as a community-level (e.g., structural racism, police violence, poverty, etc.), at a climate level (e.g., pandemics, natural disasters), and at a cultural level (e.g., slavery, segregation, forced family separation) as demonstrated in Figure 1 included in this report with permission from the [Resilient Communities Landscape Analysis](#).

Communities increasingly recognize the intergenerational impacts of adversity and trauma, particularly within communities of color. It is important to acknowledge two points: (1) racial and ethnic minorities and individuals with low incomes are disproportionately affected by ACEs, as the result of differential exposure to stress and racial discrimination (Strompolis et al., 2019); and (2) the original ACEs study does not account for the many kinds of trauma a person can experience. Understanding and mitigating the impacts of systemic and historical racism, discrimination, and race-based trauma must be at the forefront of all resilience efforts. Embedded within systemic structures, marginalized communities continue to experience acute and chronic violence and discrimination in our society. Advancing community resilience-building efforts requires recognizing and working with established, trusted partners within communities to heal historical traumas perpetrated against Black, Indigenous, and People of Color (BIPOC) communities.

***“People can be as resilient  
as the resources  
available to them.”***

**-Victor Armstrong,  
Director of DMH/DD/SAS**

The science is clear that resilience is built, and that protective experiences and adaptive skills can counteract trauma and adversity when they strike. These resilience strategies occur across systems and across the lifespan. There are vast differences in approaches to building resilience both in a community and across a state, including local coalition building, workforce development, and policy advocacy. Another strategy is through facilitating stronger emotional connections between people, also known as relational health. Research on relational health as a protective buffer for toxic stress in childhood has changed our understanding of the importance of safe, stable, nurturing relationships (SSNRs) and healthy communities. Relational health is “the ability to form and maintain SSNRs as these are potent antidotes to childhood adversity and toxic stress responses” (Garner & Yogman, 2021, p.6). This approach prioritizes creating healthy, safe, stable, positive relationships, and communities to achieve the best possible outcomes across the lifespan, including the ability to successfully overcome future challenges successfully.

As such, the American Academy of Pediatrics recently recommended implementing a relational public health approach vertically, through primary (i.e., activities that take place before an event occurs to reduce or eliminate occurrence), secondary (i.e., immediate responses after an event has occurred to minimize its impact), and tertiary (i.e., longer-term responses after an event to reduce long-term impacts) prevention strategies, and horizontally, by involving multiple sectors and systems (Garner & Yogman, 2021). Examples include programs that focus on building strong connections and healthy relationships such as positive parenting programming, screenings for social determinants of health, parent-child reading literacy programs, and tertiary treatments for toxic stress such as parent child interaction therapy and/or trauma-focused cognitive behavioral therapy. The common factor among these is implementation of programs that focus on preventing ACEs, building strong relationships, and repairing strained or compromised relationships. In this way, a public health approach to addressing ACEs and building resilience is a “public health approach to promote relational health” (Garner & Yogman, 2021, p. 8)

## The Movement in North Carolina

In North Carolina and across the country momentum for building trauma-informed systems that strengthen resilience across the lifespan continues to grow. While some states have taken a grassroots approach to change (i.e., New Jersey), North Carolina’s evolution has largely been at the grassroots level. A variety of community resilience building efforts have taken root in North Carolina, from the early coalitions in the mountains of Watauga County to the systems-building efforts in the eastern part of the state, including Edgecombe County. Dozens of local coalitions have emerged, as has a statewide system of care infrastructure that centers racial equity and family voice. Most recently, the NC Healthy & Resilient Communities Initiative has launched a resilient communities initiative to support local coalitions, while other forward-thinking leaders have built structures to create a more trauma-informed court system. Summaries of these and other local and statewide initiatives are outlined in this report, which serves as a “snapshot in time” and not a holistic guide to all efforts. New trauma-informed initiatives and local collaboratives continue to

emerge, signaling the importance of and need for a comprehensive and cross-system approach to trauma-informed care. In addition to the significant cross-sector work happening across the state, North Carolina leaders have recognized that creating trauma-informed communities and building community resilience is not an “either/or” proposition, but a “both/and” approach. North Carolina continues to follow the science by moving from a traditional deficit-based frame of identifying adversity to a more strengths-based, asset-based approach that recognizes the benefits of going upstream to get at the root cause of the issue to proactively prevent adversity and build resilience. One outside sign of this shift toward prevention is a recent name change of partner agency ACEs Connection -- a national nonprofit focused on preventing ACEs, healing trauma, and building resilience -- to PACEs Connection to reflect the importance of positive childhood experiences.

## Purpose of This Report

Given the momentum of cross-sector initiatives in North Carolina, an important next step is to consider how strategic alignment of current efforts could maximize collective impact to optimize resources while saving lives. **That is, as efforts across North Carolina continue to grow from grassroots to grasstops, how can we continue to build an intentional and coordinated way of working together across sectors and across the lifespan to build community resilience?** To answer that question, it is important to understand the landscape of community resilience efforts across our state, to listen and learn about how various people and organizations conceptualize the concept of resilience, and to gather information about what has worked and what has not worked (i.e., lessons learned) in other statewide efforts to build community resilience.

The Kellin Foundation was charged with two primary tasks: (1) conduct a scan of ten cross-sector resilience-related initiatives in North Carolina; and (2) conduct a scan of state leaders across the United States to learn more about what worked and did not work in statewide resilience efforts. Using the data provided and the information learned in the research process, the research team was asked to develop a set of initial recommendations for how North Carolina can continue to build a science-based, trauma-informed approach to building community resilience.

This report is intended to support North Carolina leaders in deepening and expanding coordinated statewide resiliency efforts, and help connect individuals, organizations, and systems to learn from one another and continue to advance resilience-related work. In addition, the report serves as a centralized source of information that national, state, and local leaders can use to learn about strategies that have been successful in other place-based work, opportunities for next steps, and generate new ideas for resilience building.

## Report Tasks

Conduct a scan of ten cross-sector resilience-related initiatives in North Carolina

Conduct a scan of state leaders across the United States to learn more about what worked and did not work in statewide resilience efforts

## Methodological Approach

Resilience initiatives across North Carolina and the United States are working to spread awareness about trauma and ACEs, reduce the prevalence of adversity, mitigate poor health outcomes, and build resilience. Researchers identified, summarized, and mapped several resilience-related efforts in North Carolina, plus statewide resilience efforts across the United States, in order to distill common themes, learn about effective strategies, and determine opportunities for advancing this work. As anticipated, the initiatives highlighted in this



report reflect different priorities and approaches to the work, as well as common strategies (i.e., engaging state leaders, community stakeholders, and diverse sector leaders.)

The Kellin Foundation team **conducted a national scan** to learn what other states across the country were doing to promote resiliency, prevent and mitigate ACEs, and implement trauma-informed practices. Available information was gathered and qualitative interviews with key statewide leaders were conducted to better understand which strategies states are using, what has been successful, and lessons learned to date. Researchers consulted with national groups such as the [Campaign for a Trauma-Informed Policy and Practice \(CTIPP\)](#), which focuses on promoting healthy, resilient communities, [the ACE Resource Network](#), [PACES Connection](#), and others to connect us with state contacts. The intention was that information gathered from across the United States could be used to inform the continued development of statewide strategies in North Carolina, as well as provide a synthesized briefing to share this information with leaders across the country who are interested in implementing or continuing resiliency efforts.



The research team gathered information through publicly accessible reports, websites, presentations, and documents, and conducted 45-minute semi-structured interviews with system leaders from almost a dozen states. Most states that were included had established a formal statewide resilience, trauma, or ACEs related effort. States without formal initiatives were included to provide additional context and to recognize their growing bodies of work. Interviewees were asked about the origin story of the work, its evolution over time, the structure of the initiative, funding, lessons learned, and challenges/barriers encountered. This process was particularly helpful in clarifying previously gathered information and expanding understanding of the behind-the-scenes work. A two-to-four page summary was developed for each initiative, and interviewees reviewed and approved their initiative's summary prior to dissemination.

Similarly, **North Carolina resilience-initiative data collection** occurred during 45-minute semi-structured interviews with leaders from diverse sectors in North Carolina, including nonprofit organizations, government agencies, university affiliates, and private organizations. The primary investigator initially identified six leaders, with other leaders identified through snowball sampling process (interviewees were asked to share names of people involved in resilience work who might provide valuable perspectives.) By project's end, a total of 20 interviews were conducted. The research team created a list of questions to serve as the main interview protocol and additional follow-up questions were used as the conversation naturally unfolded using a semi-structured approach.

The research team reviewed interview transcripts and notes, identified key themes, and compiled a report for each initiative. Interviewees were given the opportunity to provide feedback and make clarifying edits, which were incorporated into the final summaries.

## Organization of the Report

The report provides a detailed summary of each North Carolina initiative, program, or organization, followed by summaries about each state-level resilience initiative. Recommendations for next steps are presented based on what was learned during the research process. The appendix also includes “at a glance” charts and tables to help the reader easily compare and contrast initiatives.

## Summary of Recommendations

The Kellin Foundation was tasked with developing a set of recommendations for how North Carolina can continue to implement a science-based, trauma-informed approach to building community resilience. The movement in North Carolina has continued to grow and evolve, making it essential to celebrate successes and leverage lessons learned to introduce new strategies, ultimately bringing the state’s resilience work to new heights.

The following pages include initial recommendations based on knowledge gained through the research about North Carolina and other states’ resilience-building work. These recommendations are expounded upon and supported within the full report. When combined, the research and interviews provide a robust, overarching look at the resiliency and trauma-informed care efforts underway across the country.

**Appendix 2: State Level Overview of Resilience Strategies Table** lists the strategies that each state is using for quick comparison with more detailed information about each strategy shared within each individual state report. Of note, the Kellin Foundation team found particular alignment among efforts in North Carolina, Utah, and Delaware when examining the evolution of the state work and the types of initiatives implemented to date.

Recommendations are framed around an 8-Point Strategy Approach and built upon suggested foundational values to consider. A description of each strategy is outlined in the following pages followed by potential action steps to advance strategy implementation. Strategies are organized in phases to offer guidance on timing and sequence of activities, and to outline a potential evaluation of implementation.

It is important to note that recommendations are offered as a starting point. A series of webinars, report presentations, and listening sessions will occur to gather additional input from stakeholders across the state, with the hope that a statewide strategic planning team is convened to evaluate additional stakeholder feedback and finalize a co-created strategic action plan for building a Resilient NC.

## 8-Point Strategy Approach to Building a Resilient NC



### Strategic Recommendation: Develop Foundational Values That Guide the Work

As Resilient NC continues to build momentum, it is essential to develop and agree to shared values to guide the collective efforts. Foundational values that are clearly understood by all will help drive decision-making and create accountability for results, as well as inform how the work is done (e.g., not further widening racial disparity gaps in ACEs). Efforts across the country have adopted shared values, as have other cross-sector efforts in North Carolina. Based on the data collected here and from across North Carolina, the following values are recommended for examination, testing, and consideration as core underpinnings to each of the 8-point strategies described herein.

## Potential Foundation Values to Examine and Consider

- Racial-equity focused, ensuring that reparative structures are in place
- Family-voice centered
- Data-driven using a trauma-informed lens
- Pandemic-sensitive
- Trust and Transparency
- Shared leadership/accountability
- Bias towards action

## Strategic Recommendation: Expand Public Awareness and Build Strategic Communications

To continue to build a Resilient NC, a strong communication strategy must be in place that targets key stakeholders with information most pertinent to them. These strategic communications strategies can help to build alignment that assist with supporting movement and growth in the same direction. When individuals and efforts are moving in the same direction, the easier it is to build momentum, align resources, and, ultimately, save lives. A strategic communications plan that raises awareness and connects initiatives across the state can help to facilitate the movement. The following actions are offered toward this goal:



### Possible Actions (Phase One):

- **Launch a Resilient NC centralized website hub.** North Carolina interviewees reported that a statewide communications and resources hub to facilitate partnership building across sectors was needed. One possible way that this can be accomplished is to launch a Resilient NC centralized website that can serve as a repository of information on North Carolina resilience-related initiatives across sectors and across the lifespan. This hub could include information segmented based on issue or interest area (e.g., schools, local coalitions, justice system, age range). It could also include a training and technical assistance portal that will expand access to public awareness videos, trainings, and continuing education opportunities. A directory of initiatives and contacts can also be maintained, allowing for stronger connection among agencies, government sectors, nonprofits, local community coalitions, and others.
- **Develop and adopt common language across Resilient NC**, supported by an easy-to-access glossary of terms. Cross-sector work requires agreement about common terms since different disciplines may use the same term that have different meanings. Intentionality about how terms are defined and used can “make or break” cross-sector efforts as even phrases like “lived experience” can have varied meanings, creating either alignment or producing confusion. A co-created glossary can be housed on the centralized website for easy access and statewide use.
- **Develop methods for sharing regular updates with stakeholders**, including regular check-ins to support mutual understanding among all stakeholders.

### Possible Actions (Phase Two):

- **Create a Resilient NC** social media presence that can be used to broaden the reach of strategic communication and build public awareness.
- **Increase public understanding of ACEs and resilience through media campaigns, discussion groups, community events.** These efforts should be framed using science-based and evidence-informed messages and language, leveraging investments made by states and organizations to develop effective communications for various platforms (e.g., reports, billboards, public awareness campaigns). These messages should build awareness not only about treatment, but about prevention and early intervention. Reports such as [Reframing Childhood Adversity: Promoting Upstream Approaches](#) (Frameworks, 2021) can be useful framing and message guides.



### Possible Actions (Phase Three):

- **Establish a public awareness film series** with documentaries aired statewide annually or semi-annually followed by a facilitated panel discussion of parents, community advocates, policymakers, and other content experts. Links to the Resilient NC hub can be shared during the events to promote greater linkages to the efforts happening in North Carolina and for participants to get engaged in their local work, and in the statewide movement.
- **Make common resources available to all local initiatives to help streamline messaging, drive alignment, and reduce the burden on staff.** This could include media resources, sample press releases, meeting agendas, work summaries, a talking point toolkit, and other materials housed on the Resilient NC hub that allow for greater coordination, alignment, and resource sharing.

## Strategic Recommendation:

### Identify an Effective Backbone Approach for North Carolina

Based on national scans and conversations with state leaders across the country, states that have demonstrated the most success in building community resilience have identified a backbone agency to drive the work. As representatives from Virginia shared, efforts are more sustainable and beneficial if at least one person (or, better yet, a team) is focused entirely on the effort. Backbone agencies are structured very differently across the country, with some based in a state government office while others are housed within a community-based non-profit organization. As the interviews revealed, there are pros and cons to each approach. Backbone organizations based in government entities may have strong launches (e.g., Tennessee, California), but are reported to be particularly vulnerable to changes and shifts in the political climate. Backbone organizations housed in nonprofit organizations report slower starts, but strong independence,



flexibility, creativity and adaptability (e.g., Utah, Virginia, Delaware). Regardless of where it is housed, it is clear that a backbone organization is critical to statewide coordinated efforts. In addition, there was a strong theme in the North Carolina interviews that it was essential for the backbone organization to be positioned as a mechanism to facilitate partnership building across sectors and across the lifespan.

The functions of the backbone agencies vary, but generally focus on convening partners, facilitating teams, communicating with stakeholders, coordinating broad training and technical assistance opportunities, and building alignment across sectors and across geographic areas to advance the work.

### Possible Actions (Phase One):

- **Identify the role and functions that an effective backbone agency would play in North Carolina's resiliency building work.** Consider holding statewide strategy sessions to determine how a backbone organization can support this effort, including the location that would be most beneficial within North Carolina.

One possible backbone structure to consider would be the development of a centralized backbone agency that staffs regional resource and alignment coordinators. These coordinators would be located within a specific geographic region to drive the work, and connect regularly to learn from one another and align efforts across the state. Coordinators would be employed by the backbone agency, and be responsible for sharing information, resources, and lessons learned from their specific regions into the Resilient NC hub (as previously recommended). Regional resiliency coordinators could also assist with public awareness and strategic communication dissemination in their respective regions, and facilitate training and technical assistance opportunities across the state.

## Strategic Recommendation:

### Build Public-Private Partnerships that Assist with Funding Resilient NC Implementation Strategies.

Interviews across the country revealed the critical role public-private partnerships play in statewide resilience-building initiatives. Efforts rooted in strong public-private partnerships benefited from financial support at critical times (especially at the start of the effort), access to content expertise that otherwise might not be available, and better access to needed data. In addition, many communities across the country recommend a reparative funding structure to ensure funding centers the voices of those most affected and the organizations already embedded in communities that are closest to the issues.

### Possible Actions (Phase One):

- **Identify and cultivate a small group, including elected officials and business leaders, representing different parts of the state to serve as champions for a statewide resilience building effort.** The group would advocate for and lend credibility to the work with other leaders, funders, agencies, and other key stakeholders.
- **Identify and convene philanthropic partners already engaged in resilience-related work** across the state to explore how a collaborative approach to funding could advance the work. Introduce how a reparative funding structure could work within NC.

- **Identify and convene key public sector leaders to share high-level vision, explore roles their agencies could play in a statewide resilience-building effort, and to assess what resources (people, budget) could be engaged in and support the work.**



### Possible Actions (Phase Two):

- **Create funding structures that support and sustain trauma and resilience work in North Carolina.**

Each state has approached funding structures slightly differently. However, states reported that those with significant state funding were able to launch more quickly and to sustain their impact over time. A combination of the three approaches below is most powerful and reduces susceptibility to shifts in state leadership or political climates. Ideally, this type of braided funding approach would allow for building and sustaining a Resilient NC.

- **Philanthropic networks:** North Carolina-based funders can convene and build a collective voice and a pooled resource strategy that promotes the implementation and sustainability of resilience-focused work. The North Carolina Early Childhood Funders Collaborative has seen success in this approach. Using the success of that model as a framework, a philanthropic network could be established that meets regularly to learn about issues related to trauma, explore gaps in the current systems, pool resources to address gaps, assess progress, contribute to public will building efforts, and more.
- **Business entities:** Corporate and business partners can, and should, be key partners in building a statewide approach that enhances the well-being of North Carolinians. California's statewide work benefits from significant investments from the corporate sector. One example is [The Resilience Effect](#), a \$20 million philanthropic initiative focused on protecting the health and well-being of Bay Area children. Created and funded by Genentech, a biotechnology company based in the Bay Area, the organization has invested in efforts to “advance understanding of early exposure to toxic stress, develop new models that bridge pediatrics with community resources, and shift the policy landscape.”
- **Public-private partnerships:** Encourage local and state government promotion of and funding for support that can be allocated to support and sustain the work of local coalitions and statewide strategy development such as the 8-point strategy outlined within this document. States such as Tennessee and New Jersey have seen a significant boost in their impact when these supports were in place. The creation of public-private partnerships will allow for the leveraging of expertise in private entities across the state to implement strategies that can be supported and sustained through public dollars, including potentially utilizing American Rescue Plan Act (ARPA) of 2021 funding to support these strategies.

## Strategic Recommendation:

### Expand Training and Technical Assistance in Trauma-Informed Care and Resilience Using an Upstream Approach

#### Possible Actions (Phase One):

- Leveraging curriculum and learnings from other state efforts, **develop an NC-tailored, train-the-trainer curriculum on ACEs and Resilience**. Specifically, the training will be tailored to be consistent with core foundational values and be steeped in science-based language and messaging, such as in the Frameworks report referenced in the first strategic recommendation above.
- **Develop and execute statewide training plan**. Backbone agency staff would be responsible for identifying and recruiting potential trainers from across the state and supporting their efforts. If implemented, the Resilient NC hub could be utilized to reach trainers across the state, document progress toward training goals (leveraging the PACES Connection community presentation tracker), and deliver training information and other tools.
- **Create and execute an NC-tailored Preventing Secondary Stress and Burnout online training** that can be made widely available to local coalitions, agency leaders, parents, and others. Burnout was a consistent theme throughout the interviews, so it would be prudent to attend to the resiliency of the workforce to help them remain healthy as they are helping others. This training could be housed on a centralized Resilient NC hub and promoted as outlined in the overall communications plan.



#### Possible Actions (Phase Two):

- **Build and execute a workforce development strategy that reaches more sectors and provides in-depth training on ACEs and Resilience**. This includes expanding cross-sector training to several audiences, including schools and childcare settings on the impact of ACEs and the ways in which resilience can be built in the school setting. To address the complex needs of clients experiencing adversity, many behavioral health care staff need additional training in evidence-based models, including trauma-focused cognitive behavioral therapy (TF-CBT), child-parent psychotherapy (CPP), and exposure therapy (Note: these models are offered as examples, and do not represent an exhaustive list). Faith communities and community-based resource centers would benefit by learning more about preventing ACEs and building resilience. Finally, ACEs and resilience training and technical assistance opportunities should be opened up to a wide variety of sectors, including criminal justice, public health/health care, business, elected officials, and more.

## Strategic Recommendation: Build and Facilitate Cross-Sector Partnerships

### Possible Actions (Phase One):

- **Establish a consistent mechanism to facilitate cross-sector partnership building across the state.** For example, holding an ACEs Innovations Symposium would enable partners from across the state to share their work (including opportunities, barriers, small wins) and learn from others in areas like Program Innovations, Policy Innovations, Training Innovations, and more. This type of symposium could be executed in partnership with an organization like the Institute for Emerging Issues (IEI), promoted by partners across the state, and potentially hosted on the Resilient NC hub. Specific efforts can be made to recruit and engage cross-sector presentations to consistently lift up unique ways communities are creating partnerships and aligning their work. Agency-level and community-level presentations would ensure demonstration of both grassroots and grassroots approaches.
- **Establish and execute a process for continued system scanning to elevate what is learned across the state, where opportunities for alignment exist, where resources are needed, what barriers need to be addressed by policy/practice changes, and more.** Staff in the established backbone structure will be uniquely positioned to regularly scan the system and build connections across resilience-related initiatives. What is learned could be shared in the Resilient NC hub.
- **Build and regularly maintain a Resilient NC contacts database that includes information about cross-sector, resilience-related initiatives and key contacts for more information.** This can also include a directory of existing or known working groups for greater awareness of statewide efforts, which can help avoid duplication, increase efficiency, improve resource utilization, and facilitate better outcomes.

## Strategic Recommendation: Promote Policy and Advocacy Efforts that Support Community Resilience

### Possible Actions (Phase One):

- **Promote the adoption of trauma-informed care policies at the local, state, and federal levels.** While organizations and initiatives learn about and create asset-based, trauma-informed approaches, policies and practices can support or undermine the effectiveness of these approaches. It will be critical to evaluate current policies and practices from the family perspective to identify what needs to change in order to be trauma-responsive and healing centered. Other states such as Pennsylvania and California have undertaken similar efforts, which can be instructive for North Carolina. New policies and practices should be evaluated using a trauma-informed lens to help prevent and/or reduce instances of re-traumatization.
- **Support and build stronger connections to the work of [NC Child](#), [PCANC](#), and other organizations that take active roles in trauma-informed, resiliency focused policy work.** Policy changes that promote resilience can continue to be supported as these efforts are linked to other cross-sector efforts across the state. While some North Carolina leaders are aware of these efforts, others were not and/or did not understand how to help support these efforts. Regular policy updates could be made to a Policy Briefs section of the

Resilient NC hub to assist with dissemination of policy actions and connect individuals and organizations with these efforts. Policy toolkits can be posted that include talking points, links to policy campaign tools (auto-emails), sample letters to legislators, and other tools so individuals, organizations, and communities can readily access these materials without reinventing the wheel.

## Strategic Recommendation: Support Local Coalitions

### Possible Actions (Phase One):

- **Develop funding streams to support staffing and other supports for local coalitions.** A key theme heard throughout the interviews is that many coalitions are working toward community-level goals with volunteers or unpaid leaders. While the individual and collective intentions are admirable, interviews indicate that it is nearly impossible to build momentum without at least one full-time paid staff member focused on the effort of driving and being accountable for local coalition goals. This theme is consistent with the data from the [Resilient Communities Landscape Analysis](#) in which survey participants listed an increase in financial resources as key to furthering local coalition work. Providing local coalitions with adequate staffing and financial support is critical to building a Resilient NC. The NC Smart Start's Healthy and Resilient Communities Initiative (NCHRCI) is working on these efforts to help advocate for additional financial support of local coalitions.
- **Continue to build mechanisms that connect local coalitions across the state.** This can include a directory of local coalitions as well as the development of local coalition “profiles” that can be housed on a potential Resilient NC hub under a “local coalitions” section of the site. Alternatively, this directory and profile database can be maintained and communicated through the NC PACES Connections website should infrastructure be built to support maintenance of this site as recommended in the strategic communication recommendations. In addition, the NCHRCI is working on strategies that more strongly connect local coalitions as well, including the Peer Connection meetings that launched in fall 2021 to bring together local coalitions regularly.
- **Continue to create regular learning opportunities for local coalitions.** Local coalitions report that they rarely have the opportunity to learn from one another in meaningful ways that could increase the adoption of strategies and practices that build momentum, while leaving behind those that are ineffective. The NCHRCI is working on this strategy to create regular connection points and learning opportunities across local coalitions. One innovative idea raised in interviews was a “speed dating” approach in which local coalitions meet virtually and minute presentations of their initiative. Facilitators can work to connect similar local coalitions (i.e., coalitions at similar stages or working on similar issues) behind the scenes to build alignment and coordination.

### Possible Actions (Phase Two):

- **Continue to conduct regular surveys of local coalitions (in short survey format) about the training and technical assistance needs, develop priorities, and meet those needs.** These trainings can be recorded and housed to build a repository of resources local coalitions can be easily accessed when needed.
- **Develop a monthly Local Coalition Spotlight to share key learnings across coalitions.** Spotlights can be promoted on websites, social media, the NC PACES Connection page, the Resilient NC hub, etc., to raise awareness and promote coordination of efforts.



## Strategic Recommendation: Identify and Implement Evidence-Based Measurement Strategies

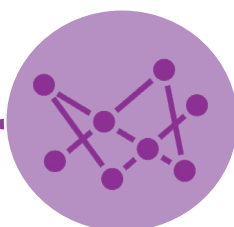
### Possible Actions (Phase One):

- **Develop a common approach to measuring community resilience in North Carolina at the local and state level.** North Carolina, and the United States in general, does not have a consistent way to measure community resilience. Currently, limited tools exist, and each initiative and local coalition measures and tracks data differently. Determining how to measure community resilience across the state - and what data will be needed - will be a critical step for Resilient NC.

Two resources that could be helpful starting points include the [Milken Institute School of Public Health at George Washington University](#) and the [North Carolina Center for Health and Wellness at University of North Carolina at Asheville](#). In addition, it may be helpful to examine whether a set of selected items can be added to the North Carolina Behavioral Risk Factor Surveillance System (BRFSS) for ongoing data collection across the state. This would leverage the already existing infrastructure and add resilience data that can inform prevention and intervention health practices across North Carolina.

- **To measure community resilience, build, launch, and train initiatives (and the state) to use a Measurement Toolkit (compendium of measurement tools).** A series of webinars would provide a user-friendly overview of the tools available, including the pros and cons of each, so initiatives and communities can decide which tools might best serve their purposes. These webinars would be available at any time through the Resilient NC hub.

- **Conduct an annual survey of resilience initiatives to gather key indicators for ongoing tracking and progress.** The annual survey should be co-created by a team of researchers from across the state, and can be potentially implemented by the backbone organization or other identified research partner. This will allow for an annual point-in-time view of the data so that movement can be tracked and emerging needs identified. Data reports can be compiled and disseminated, with these reports available each year on the centralized hub.



### Possible Actions (Phase Two):

- **Examine potential key indicators that could be measured across all resiliency-initiatives across the state, and build an infrastructure that can support the collection and reporting of these key indicators.**

This could be one to three indicators, which would allow for measurement across initiatives to examine collective impact and needs. These data, combined with the annual survey data above, could serve as continuous quality improvement indicators for the continued momentum of Resilient NC efforts (e.g., additional training and technical assistance needs, additional resources for the hub, identification of areas that would benefit from additional funding support).