

# Ontario Early Adversity and Resilience Framework Topic Summaries

## Connections Between Early Adversity, Resilience and CHRONIC DISEASE

The [Ontario Early Adversity and Resilience Framework](#) is a call for collective action across sectors. It aims to inspire and mobilize communities to work together to develop innovative and meaningful solutions that prevent adversity, strengthen protective factors, build resilience, and support healing in families and communities. This document will provide a summary of how early adversity and resilience connects to chronic disease.

Reducing early adversity and increasing resilience is a powerful **prevention strategy**. By implementing evidence-based interventions that build protective factors and address risk factors linked to the social determinants of health and inequity, we can act upstream to lessen both the likelihood and impact of harm and improve health and well-being. This directly supports chronic disease prevention by addressing the upstream factors, such as the social determinants of health, that shape health behaviours and long-term health outcomes.

### What is the connection between early adversity and chronic disease?

- 1. Early life experiences influence health across the life course.** Adversities such as poverty, household dysfunction, abuse, or neglect can disrupt development during critical periods and increase the likelihood of health-harming behaviours later in life.<sup>1,2</sup> These behaviours, including tobacco use, problematic substance use, physical inactivity, and poor diet, are associated with higher rates of chronic diseases such as cardiovascular disease, cancer, diabetes, and chronic respiratory disease.<sup>3,4,5,6</sup> Supportive relationships and stable, resilience-building environments, particularly in early life but beneficial at any age, can buffer the effects of adversity by supporting healthy development, stress regulation, and adaptive coping, which in turn influence health behaviours and physical and mental health, reducing the risk and severity of chronic disease over time.<sup>2,7,8</sup>
- 2. Toxic stress\* is the pathway by which severe or chronic adversity harms health, with cumulative and potentially intergenerational effects.** If unmitigated, toxic stress disrupts biological, cognitive and socio-emotional development including long-term brain, immune, metabolic, cardiac, and lung function, triggers and perpetuates epigenetic changes, and increases the likelihood of health-harming behaviours. Understanding this mechanism highlights opportunities to mitigate or prevent toxic stress by strengthening the social and physical environments in which people live, particularly in early life, to prevent or reduce long-term health consequences.<sup>1,4</sup>
- 3. Equity-deserving groups are more likely to experience early adversity and face greater long-term health impacts.** A social determinants of health approach highlights how social and economic disadvantage or privilege shapes opportunities, barriers, and functional ability across the life course. These inequities can span generations, influencing health patterns from birth onward. In Ontario, Indigenous Peoples and those with fewer social and economic resources experience higher rates of chronic disease, reflecting systemic inequities and underscoring the importance of strengthening equitable policies, supports and environments that promote health and resilience.<sup>3,7</sup>
- 4. Early adversity carries high health, economic, and societal costs, which can be reduced through prevention and resilience-building.** The health-harming behaviours and chronic diseases associated with early adversity drive substantial healthcare costs, shorten life expectancy, and reduce functional years, limiting the societal contributions people might otherwise make as they age. Investing in safe and nurturing childhoods is economically beneficial and helps relieve pressures on healthcare systems. It also supports longer, healthier lives and enables people to contribute their knowledge, skills, and experience across generations.<sup>3,7,8,9,10,11,12</sup>

*\*Toxic stress can occur when a child experiences strong, frequent, and/or prolonged adversity—such as physical or emotional abuse, chronic neglect, caregiver substance use or mental illness, exposure to violence, and/or the accumulated burdens of family economic hardship—without adequate adult support<sup>24</sup>*



## What actions does the Ontario Early Adversity and Resilience Framework recommend?

Cross-sector collaboration is essential to strengthening the social and physical environments where people live. This helps families cope by preventing or mitigating toxic stress. These improvements benefit everyone, with the greatest impact for equity-deserving groups. Interventions that support healthy development, reduce adversity, and build resilience can influence health behaviours and the physiological pathways that contribute to chronic disease, ultimately reducing its burden and supporting longer, healthier lives. Early support for children and families also protects future generations and promotes equity across society. Although all the activities in the framework contribute to an environment that will address adversity and increase resilience, **the actions highlighted on the next page** are some examples of those with strong alignment to preventing early adversity and the modifiable risk factors that shape chronic disease.



	CHILD/YOUTH	FAMILY	COMMUNITY	SOCIETY
<b>Shift social norms</b>	Engage in culturally appropriate public education campaigns to raise awareness of child development and how the brain works, to encourage responsive parenting and healthy brain development	*Promote trauma- and violence-informed care principles through capacity building across early years and family-serving sectors to support caregivers, normalize early relational health, foster positive development, and strengthen long-term well-being through integrated, interdisciplinary approaches <sup>13,14,15</sup>	*Promote and normalize intergenerational programming in community spaces to challenge age-based stereotypes and strengthen expectations of inclusion, connection, and mutual support across the life course <sup>16,17,18</sup>	Shift the focus from individual responsibility to community solutions by creating conditions for resilience and promoting sense of belonging (e.g., cross sector collaborations, community coalition)
<b>Integrate upstream strategies</b>	Use digital solutions to reach parents/caregivers in Ontario, with evidence-based health and development messages to improve child and parent health outcomes	Connect children and youth with caring adults and activities in the community (e.g., community mentoring programs, after-school activities, offering training opportunities in sports, media, arts, science, technology)	*Embed Age-Friendly community planning principles into local policies, programs, and built environments to address upstream determinants of health and support inclusion, mobility, and social participation <sup>19,20,21,22</sup>	Collaborate with urban planning and transportation sectors to advance healthy community design, prioritizing equity deserving communities
<b>Influence healthy public policy</b>	Advocate for enhanced early learning programs and supports for children and youth with disabilities	Promote the implementation of flexible work weeks and enhanced parental leave policies for all workers	Design and implement policies to improve local food systems (e.g., establish a local food policy council to inform supply and demand, implement healthy retail food environment policies)	Advocate and support local and provincial efforts to reduce the province's child and family poverty rate including access to social assistance programs with equitable rates. (i.e. Ontario Works (OW) or Ontario Disability Support Program (ODSP))
<b>Intervene to lessen harm</b>	Implement recommendations from <a href="#">A Call to Action on Behalf of Maltreated Infants, Toddlers, and Preschoolers in Canada</a>	Promote and educate families on the benefits of home visiting programs and ensure they are accessible to all geographical areas across the province	Promote evidence-based strategies among health care providers to help individuals regulate stress	Establish policies for Trauma- and Violence-Informed Care (TVIC) practices across all sectors, including education, healthcare, legal, social, etc.
<b>Collect and use data</b>	Utilize resources such as the Community Child and Youth Wellbeing Survey, to measure the well-being of youth in Canada from birth to 18 years of age	*Support the collection, sharing and use of data across sectors to monitor children's health and development from the prenatal period through early childhood, to enable families to access timely identification and intervention <sup>8,23</sup>	Utilize geographic data to determine which neighbourhoods could benefit from additional resources, programs and services to ensure equitable access	Support the collection and sharing of local and provincial data to monitor indicators of interest (e.g., child poverty rates stratified by race and other sociodemographic characteristics)

**Legend:**  
Each colour corresponds to a focus area

**SOCIALLY CONNECTED, EQUITABLE, AND INCLUSIVE COMMUNITIES**

**SOCIAL AND EMOTIONAL DEVELOPMENT AND RESILIENCE**

**REPRODUCTIVE HEALTH AND PARENTING/CAREGIVING READINESS**

**RESPONSIVE AND CULTURALLY SAFE PARENTING/CAREGIVING**

\*Interventions not included in the OEAR framework

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The strategic actions in this document are drawn from the *Ontario Early Adversity and Resilience Framework*, which includes actions originally adapted from *A Health Promotion Strategy to Prevent Adverse Childhood Experiences (ACEs) and Foster Resilient Children, Families and Communities* published by Fraser Health Authority, as well as additional actions included specifically for the OEAR framework and referenced therein.

## CONTRIBUTORS

This topic summary was produced by members of the Public Health Ontario ACEs and Resilience Community of Practice, with contributions from collaborators and subject matter experts, to support implementation of the Ontario Early Adversity and Resilience (OEAR) Framework.

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