

Framing Messages about Early Adversity and Resilience for COMMUNITY LEADERS

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. 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.

Framing Messages about Early Adversity and Resilience for Community Leaders provides guidance on how to talk with community leaders about early adversity and resilience. It is a tool to prepare for those conversations and to set priorities and key messages based on the context and the intended audience.

Intention Setting

- Be clear about **why you are sharing key messages** with community leaders and what you want to achieve.
- While planning, think about your **positionality, biases, and assumptions** and how these may shape the message.
- Share **messages and [resources about safety and care](#)** first, because talking about trauma and adversity can be hard conversations.

Know your audience

- What **background information** do community leaders need in order to understand the impacts of early adversity and resilience?
- What **priorities** do the community leaders currently champion?
 - Build connections with, and advocate alongside, community leaders for community and policy-level changes that strengthen protective factors and resilience. This includes work related to: poverty reduction, built environment planning, structural change and reducing systemic inequities across multiple sectors, mental health, prenatal and postpartum primary care, childcare and education, parenting supports, substance use prevention, and child welfare.
 - If relevant, review the community leader's website or strategic plan to understand their priorities and link them to the framework goals.
- How does the framework align with the **roles and responsibilities**, or influence of your audience?
 - Connect your audience to community organizations with shared goals.
- What **funding sources or budget limits** should be considered?

Frame the message

- Share a **clear message**, such as: Community members share responsibility to help children reach their potential and to make our communities more supportive.
- Include **key points on how early adversity affects life long physical and mental health and the role community leaders can play in building community resilience**, using the [Ontario Early Adversity and Resilience Framework](#).
 - Adjust your message based on the community leader's prior knowledge.
 - Present early adversity and protective factors together.
 - Check the Resources section for tips on framing a balanced message.



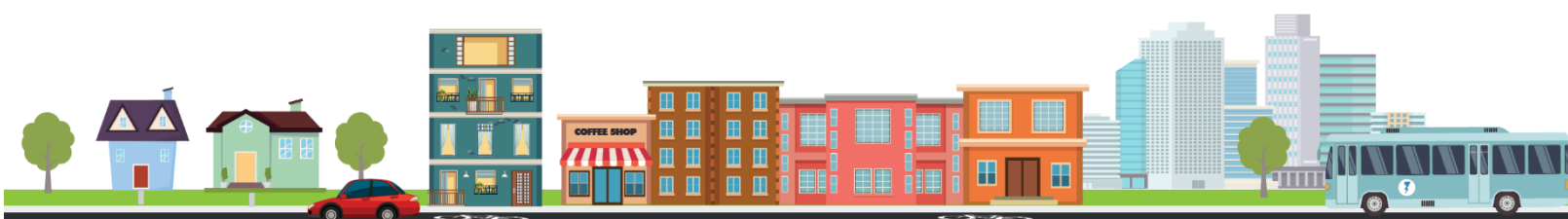
- Connect **your message to upstream prevention efforts that your audience champions** or can influence.
 - Use [topic summaries](#) that match their priorities to shape the message.
- Ask them to **plan next steps** and include their role.
 - Acknowledge the work already underway and align proposed actions with their partnerships, priorities, and funding.
 - Offer practical actions from the strategic action tables that fit their role.

Encourage commitment and action

- Remind them why this work matters and **end with a positive message about the difference they can make**, and how it supports their priorities.
- Change **takes time**: Some community leaders will be ready to act now, while others may need more time.
- Ask them to **commit to short- and long-term goal(s)** such as reading the full framework, taking training or learning more, collaborating with other partners, developing common language and actions, reviewing their own policies and practices, applying for grants for supportive actions, advocating for municipal or provincial funding, or implementing strategic actions from the focus areas in their community.
 - If appropriate to your role, offer to connect back and help the leader set goals and put the plan into action.

Ontario Early Adversity and Resilience Framework Recommended Actions for Community Leaders

Everyone plays a role in taking action to prevent adversity and promote resilience. Community leaders can change policy, influence funding decisions, and foster cross-sector collaboration.¹ [The actions highlighted in the table on the next page](#) provide examples for community leaders and decision makers; it does not include actions at the child/youth and family socioecological levels. This is not an exhaustive list of strategic actions, see the OEAR Framework for more.



COMMUNITY

SOCIETY

Shift social norms

Promote and support [School Mental Health Ontario](#)'s initiative to develop and deliver a systematic and comprehensive approach to school mental health

Modify structures and policies to embed anti-racist practice within health organizations (e.g., ensure staff and board members are representative of racialized communities)

Integrate upstream strategies

Facilitate local alliances to identify, develop and implement community-specific strategies to address family and community adversity and build resilience (e.g., through development of community coalitions, community awareness and outreach campaigns, joint advocacy, etc.)

Expand access and reduce barriers to multi-component family-focused interventions for perinatal mood and anxiety disorders (including CBT, psychotherapy, and psychoeducation) to enhance parenting skills, mental health, parent/caregiver-child relationships, and infant development

Promote the importance of infant and early mental health and invest in strategies to support families to develop safe, stable and nurturing relationships

Collaborate with community partners to design and promote equitable, inclusive, and accessible prenatal education programs, removing physical and financial barriers to enhance support and improve participation

Influence healthy public policy

Provide an evidence base for municipal policies that reduce sources of stress for children and families such as providing a range of accessible housing, food, transportation, childcare, recreation, and employment services along with liveable wage

Advocate for policy changes that shift child welfare agencies toward a more supportive, community-based, and prevention-focused model, emphasizing early intervention, family preservation, and collaboration with community organizations

Work alongside racialized, Black and Indigenous communities to co-develop policies and practices that prioritize a child- and family-centered approach, addressing the unique needs and circumstances of these populations

Provide adequate compensation, benefits, professional development, and support for service workers (such as early childhood educators, early years and mental health providers) to reduce turnover and maintain stable relationships among staff, children, and families

Intervene to lessen harm

Support National and Provincial funding for promoting universal, free mental health care (no referrals, no fees, any ages) that supports development of social and emotional skills

Establish policies for TVIC practices across all sectors, including education, healthcare, legal, social, etc.

Collect and use data

Promote data sharing between primary care and other health professionals within the circle of care to foster a holistic approach to treatment and enhance referrals to appropriate supports

Collaborate with partners to apply research and data to influence policies, practices and processes for children, youth and families

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

RESOURCES

- [Guiding Principles for Communicating about Adverse Childhood Experiences and Resilience](#)²
- [Reframing Childhood Adversity: Promoting Upstream Approaches](#)³

REFERENCES

1. Hall J, Porter L, Longhi D, Becker-Green J, Dreyfus S. Reducing Adverse Childhood Experiences (ACE) by Building Community Capacity: A Summary of Washington Family Policy Council Research Findings. *Journal of Prevention & Intervention in the Community* [Internet]. 2012 40:325-334. Available from: <https://www.tandfonline.com/doi/epdf/10.1080/10852352.2012.707463?needAccess=true>
2. Community Resilience Coalition of Guelph & Wellington and ACEs & Resilience Coalition of Kingston, Frontenac, Lennox & Addington. *Guiding Principles for Communicating about Adverse Childhood Experiences and Resilience* [Internet]. 2024. Available from: <https://www.towardcommonground.ca/wp-content/uploads/2025/08/GuidingPrinciplesforCommunicatingACEsandResilience.pdf>
3. Sweetland, J. *Reframing childhood adversity*. Washington, DC: FrameWorks Institute. [Internet]. 2021. Available from: <https://www.frameworksinstitute.org/app/uploads/2021/03/ReframingChildhoodAdversity2021.pdf>

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.

Contributors: Samantha Doris, MA (Toward Common Ground); Japnit Mander, HBScN, RN (Lakelands Public Health); Erin Tardiff Heldmann, MSW (Region of Waterloo Public Health and Paramedic Services); Brittney Urban, MS, RD (Region of Waterloo Public Health and Paramedic Services); Caroline Folkman, MSc, GDip (Toward Common Ground); Leslie McLaughlin, RN, BScN (Lakelands Public Health); and members of the PHO ACEs and Resilience Community of Practice.