

Ontario Early Adversity and Resilience Framework Topic Summaries

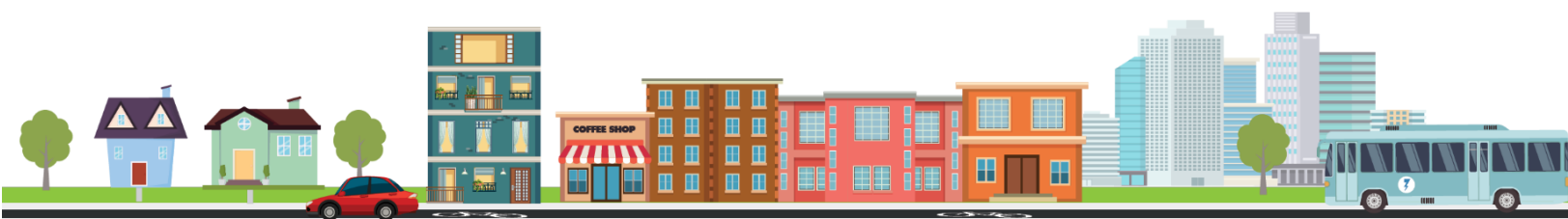
Connections Between Early Adversity, Resilience and INJURY PREVENTION

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 the work of injury prevention.

Reducing early adversity and strengthening resilience is a powerful **prevention** strategy. By implementing evidence-informed 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. Injury is the leading cause of death for Canadians ages one to forty-four,¹ and unintentional injuries remain the primary threat to children's well-being nationwide.² Injuries occur when the body is exposed to excessive energy (e.g., a crash, fall, burn, or poison) or lacks something essential (e.g., lack of oxygen in drowning).³ While injuries can be intentional or unintentional, they are predictable and preventable.³ Injury prevention and resilience reinforce one another, strengthening protective factors and reducing risks that can limit health, relationships, and opportunities across the life course.³

What is the connection between early adversity and injury prevention?

- 1. Supportive early environments help build the skills that contribute to injury prevention throughout life.** Early life adversity, including poverty, household dysfunction, abuse, and neglect, can affect healthy child development.^{4,5,6} Instability within households and caregiving environments may also interfere with the consistent, responsive relationships children need during critical developmental periods.⁴ Severe or prolonged adversity, particularly when children do not have a supportive and responsive adult to help buffer their stress responses, may affect brain development, emotional and behavioural regulation, learning, and the ability to adapt to stressful situations.^{5,6} These developmental capacities may influence health-risk behaviours and responses to safety-related situations later in life, which can contribute to injury risk and patterns of repeated injury. In contrast, supportive relationships and environments characterized by responsive caregiving, predictable routines, and emotional safety promote healthy development and strengthen skills that are associated with better mental and relational health in adulthood.^{4,7}
- 2. Early adversity is associated with an increased likelihood of injury and injury-related experiences across the life course.** Studies have found associations between adverse childhood experiences and later mental health challenges, problematic substance use, health-risk behaviours, and social difficulties (i.e., bullying involvement⁸), which may in turn contribute to increased injury risk across the life course.^{9,10} For example, exposure to intimate partner violence during childhood, has been associated with poorer educational and justice outcomes and greater involvement with Child and Family Services, illustrating pathways linked to greater injury risk.¹¹ Early adversity has also been associated with several injury and injury-related outcomes that overlap with leading causes of injury in Canada,¹ including falls,^{12,13} transport-related injuries,¹⁴ unintentional poisonings,¹⁵ and self-harm and suicide,^{16,17} as well as violence, including intimate partner¹⁸ and interpersonal violence,^{19,20,21} concussions,^{22,23,24,25} and substance-related harms.^{21,26,27} While the evidence is primarily observational, these findings suggest that preventing early adversity and strengthening protective supports may be important components of a comprehensive approach to injury prevention across the life course.
- 3. Safe, supportive, and equitable environments help prevent injury and promote lifelong health and wellbeing.** Social, economic, and environmental conditions influence exposure to adversity and injury risk among equity-deserving groups.^{28,29,30,31} These conditions shape neighbourhood and built environments, including housing quality, transportation infrastructure, neighbourhood design, and access to community supports.^{29,31,32,33} Safe and supportive community environments can help reduce injury risk, while communities with fewer protective resources may experience higher rates of injury.²⁹ Community-level factors also shape injury patterns across urban, suburban, rural, and remote areas.^{29,30,31,32,33} Structural factors, including colonialism and racism, influence how risks and protective resources are distributed across communities, contributing to differences in injury exposure, access to supports, and the impacts experienced following injury.^{29,34,35}



4. **Injury prevention benefits everyone by reducing the human, social, and economic costs of injury.** Injuries carry substantial human and economic burdens, including healthcare expenses, lost income, ongoing care needs, emotional impacts (i.e., trauma), long-term disability, altered life roles, and loss of independence.^{1,36} Early adversity is also associated with substantial health and economic burdens across the life course, reinforcing the broader value of preventing early adversity alongside injury.^{37,38} In Canada, unintentional injuries account for the majority of injury-related costs, with falls representing the greatest economic burden overall, followed by transport incidents, suicide/self-harm, and unintentional poisonings.¹ The burden of injury varies across the life course, with falls contributing most to injury costs among children, adults, and older adults, while transport incidents are a leading contributor among youth and young adults.¹ Reducing this burden requires protective environments that shape everyday settings, such as homes, schools, sports programs, community spaces, and neighbourhoods, to minimize hazards, improve policies and systems, support safe behaviours, and provide appropriate supervision and support.^{2,3,39}

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

Cross-sector collaboration is essential to strengthen the social and physical conditions in which people live, learn, work, and play to prevent or mitigate toxic stress and reduce injury risk. Safe, stable, supportive relationships and environments, such as positive sport and school settings, Age-Friendly communities, and trauma- and violence-informed services, can buffer the impacts of adversity and build resilience across the life course. Evidence-informed policies and practices (e.g., supporting safe communities, preventing violence) further strengthen protective factors and reduce injury burden. Collecting and using local data on violence and injury supports targeted prevention and accountability, particularly in equity-deserving communities where early adversity and injury risk are disproportionately experienced. While all the activities in the framework contribute to addressing early adversity and building resilience, [the actions highlighted on the next page](#) are some examples of those with strong alignment to the work of injury prevention.

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**



	CHILD/YOUTH	FAMILY	COMMUNITY	SOCIETY
Shift social norms	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	*Integrate accessible, culturally responsive injury prevention education into prenatal and early parenting supports to build caregiver knowledge and skills for creating safe environments for children ^{40,41}	*Promote the inclusion of loose parts and natural elements in childcare settings, schools, and public parks to support diverse, engaging, and developmentally beneficial risky play opportunities for children ^{42,43}	*Replace the term “accident” in official communications and surveillance systems with more accurate, prevention-focused language (e.g., injury, collision, event) to reinforce that injuries are predictable and preventable ²⁹
Integrate upstream strategies	*Implement active travel education and walk/roll initiatives (e.g., Walk to School Day or Month) to strengthen children's pedestrian and cycling skills, increase road safety awareness, and help prevent traffic-related injuries ^{44,45,46}	Empower caregivers with opportunities for active skill building for self-regulation and embedding SED practices in the home, and work with professionals to ensure these opportunities are available in both rural and remote communities (e.g., HBHC, NFP)	*Embed Age-Friendly community planning principles into municipal policies, infrastructure, and public spaces to improve accessibility, mobility, social connection, and safety for people of all ages and abilities ^{47,48,49,50}	*Support and implement population-wide primary prevention policies and programs that promote healthy relationship attitudes (especially those that target behaviours among adolescents) to prevent intimate partner violence and sexual violence perpetration ⁵¹
Influence healthy public policy	*Partner with youth to share their lived experiences within Ontario's mandatory mental health curriculum, helping school boards tailor policies to include student-vetted suicide and self-harm prevention tools ^{52,53,54}	*Equip parents and caregivers to recognize developmental readiness and identify and advocate for sport programs with policies and practices that prevent injury. ^{55,56,57}	*Collaborate with local governments, community groups, and Indigenous communities to reduce off-road vehicle injuries among children and youth by establishing community-wide policies and supports, such as age-based restrictions, safe riding zones, and protective gear standards ^{58,59,60}	*Advocate for public policies and transportation systems that prioritize road safety through safer speeds, road design, and enforcement to prevent traffic-related deaths and serious injuries (e.g., Vision Zero) ^{61,62,63}
Intervene to lessen harm	Raise awareness about how an individual's culture affects how they perceive trauma, safety, and privacy	*Support parents and caregivers to recognize the signs of bullying (including cyberbullying and sexual exploitation) so that they can respond effectively to help their children ^{64,65,66,67,68,69}	*Implement a community-based multifaceted fall prevention program for older adults (e.g., Stay on Your Feet) that combines balance and strength exercises, home and public space safety assessments, and educational campaigns to raise awareness about fall risks ^{70,71,72,73}	*Support the implementation of concussion safety legislation (i.e., Rowan's Law) that promotes early identification, appropriate management, and safe return to activity to reduce the risk of recurrent injury and long-term health consequences ^{74,75,76}
Collect and use data	Facilitate the measuring and monitoring of social emotional development and resilience of children and youth across the province (e.g., EDI, ASQ-SE, School Climate Surveys)	*Support individuals to identify and address home safety risks by using practical checklists or guidance tools to assess hazards and implement improvements ^{77,78,79,80,81}	*Improve access to timely, local violence data (including intimate partner violence) and lived experience to inform violence prevention policies and programs, guide community planning, and monitor progress ^{82,83,84}	*Strengthen child injury surveillance systems to collect, harmonize, and share timely, disaggregated data that identify inequities and inform targeted prevention strategies ²⁹

*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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