

Resilience-Infused Community Substance Misuse Prevention Efforts Worksheet

Using a trauma-informed approach doesn't mean changing everything you are doing. Rather, we can use it as a way to assess how we are doing in meeting the needs of those who may be experiencing the aftereffects of trauma, or who have a high ACE score. This worksheet will begin by focusing on asking WHAT you are doing, and then ask you to reflect on HOW you are doing it to see whether you can enhance your current efforts to be more trauma-informed. This change is going to be process-driven, which may mean you aren't going to have all of the answers today.

Part 1: What can you do to assess your current efforts?

1. **Identify Existing Stakeholders and Partners:** Who are the stakeholders and partners who your prevention efforts already collaborating with broadly? Which populations do they connect you with?
2. **Identify Potential Partners:** Who are those partners or stakeholders with whom you haven't yet collaborated? Examples might be Headstart programs, early-home visiting programs, treatment programs who focus on trauma-informed practices, child health services, etc.
3. **Determine existing data and potential gaps:** What data do you have that tells you that you should be using a trauma-informed approach? What does this data not tell you? Does it tell you anything about the presence of protective factors? If so, which ones?
4. **List the strategies you are implementing with your RPP efforts:** Identify which stakeholders and partners have the biggest roles in implementing each strategy.
5. **Assess how your current efforts align with the different socio-ecological levels (individual, relationship, community, policy):** What observations can you make about which socio-ecological levels your work is the strongest in? The weakest? What implications does this have for how you might want to move forward?
6. **Assess your current organization's capacity and knowledge about being trauma-informed:** What observations can you make about how your organization works in this space? Does it think about being trauma-informed? Is it reflective of your wider community?

Part 2: What could you do to enhance your efforts?

In substance misuse prevention, we link risk and protective factors to our strategies to try to decrease risk factors and increase the presence of protective factors. When considering a trauma-informed prevention approach (or using ACEs), risk factors are invariably present. However, it is increasing protective factors within the community that will provide us with the best opportunity for success. Protective factors are often addressed in our evidence-based prevention strategies, and include factors such as social connectedness, prosocial engagement with adults, prosocial engagement, etc. At a community level, these help to build the *community's* resilience. So by focusing on enhancing this, let's spend some time thinking about the protective factors we are or can address.

- 7. Which protective factors can you build or enhance based on your existing partnerships?**
- 8. Which protective factors can you build or enhance if you brought on new partnerships?**
- 9. Would focusing your efforts on enhancing these protective factors align with where you see the gaps in terms of the socio-ecological levels?**
- 10. Are there existing social services that you or your community are not utilizing?** This includes underutilized services like providing trainings with the Building Flourishing Communities initiative, food pantries, and other community-based services.
- 11. Self-Reflection:** Based on the above two sections, what observations can you make about the opportunities and gaps that exist in terms of addressing trauma within your community. And what about within your own organization, and for yourself?

Part 3: Now what?

We have now established our current landscape, and can begin to look at how we can adapt our existing work to be more trauma-informed. In basic form, trauma-informed approaches aim to reduce the fight/flight/freeze response, and the first step in implementing these approaches is thinking about how we can help alleviate those responses and support those who have them. The following are a set of guiding ideas that can be incorporated into our work at each level. To begin with, focus on one socio-ecological level.

12. **Identify which socio-ecological level you want to focus on:** Select a strategy you are already implementing that is focused on one of the socio-ecological levels: Individual, relationship, organizational, policy

Here are examples of the types of adaptations we can make to processes at each level to be more trauma-informed (some of these could be in multiple places – so some of this is subjective):

- A. **Individual-level:** Provide ways for individuals to self-soothe; create space for transitions between activities
- B. **Relationship-level:** Explore ACE scores of existing staff members and how that might influence how each staff member approaches their work; Identify a way to do outreach to families who have not been engaged in the existing systems.
- C. **Organizational-level:** Revise job descriptions so that the experiences of people who have been exposed to trauma (IE, ??); Adapt “zero-tolerance” policies to be “zero indifference” policies; Opportunities for inter-generational interactions to promote understanding among colleagues
- D. **Policy/System-level:** Support partners in designing soothing spaces e.g. reduce bright lights, loud noises, include greenery, etc); Develop messaging and communications that do not use blaming language, formalize the expectation that supervisors/managers show compassion to supervisees, encourage team bonding activities and do not use a punitive lens during times of conflict, etc;

13. **Identify at least three adaptations you think are realistic in your chosen socio-ecological level:**

These can be process-oriented that may take time, and can include assessing the space in which you hold gatherings to adapt them to make them support a safe environment, assessing agendas to ensuring transitions are gentle, etc. These can also be action-oriented, such as reaching out to your Building Flourishing Community

- a. **Adaptation 1:**

- b. **Adaptation 2:**

- c. **Adaptation 3:**

14. Being trauma-informed translates to building attachment, bonding, and resilience. Resilience is not only an individual trait, but it is also a community trait. We've thought about what a trauma-informed approach looks at the individual, relationship, organization and policy/systems levels, but how can you, either individually or as a member of your organization participate in building a more resilience-focused community?

15. Language is a key contributor to both healing trauma and fostering resilience. At your chosen socio-ecological level, what is one way that you can shift your language to build more trust, create more safety and provide more support?