Welcome to Session IV
Community of Practice on Using a Public Health Approach In Communities to Build Pop. Level Mental Wellness and Resilience for the C-E-B Catastrophe

March 5, 2024

Many Thanks to Our Co-Sponsors!
Key Message

“Community is Medicine”

Throughout human history our ability to band together has always been key to responding creatively, adapting to, and solving complex problems!

By working at the community level we can do this again now!
So Always Remember
If trauma can be passed
down through generations,
then so can healing
and transformational resilience!

This is Our Mission!

Adapted from Judith Landau 2021
• The C-E-B catastrophe is already and will increasingly generate many **known** and also many **never-before-seen** chronic stresses and acute impacts that produce widespread **individual**, **community**, and **societal** traumas.

• We must think and respond at the **scale** of the challenges ahead--which requires engaging neighborhoods and communities in using a **public health** approach to build and sustain **population-level** mental wellness & transformational resilience.

• This requires forming broad and diverse **Resilience Coordinating Networks everywhere** that develop **multisystemic strategies** to **shift** communities from trauma-organized to **resilience-enhancing** and prevent & heal widespread traumas.
Summary of Last Week

• A powerful way to begin building community capacity for mental wellness and resilience to engage residents in activities that begin to heal their traumas.

• Numerous methods are available to do – each community should choose one that matches the type and scale of need, culture, and available resources.

• Whatever approach is chosen, use it as a catalyst to actively engage residents in long-term wider-efforts to organize and operate an RCN and build population-level capacity for mental wellness and transformational resilience.

• Engaging residents in identifying and utilizing existing strengths and resources, and adding additional assets, is far more powerful and effective than identifying and trying to eliminate risks or fix deficits.
Analogy of Methods and Benefits of a Public Health Approach

• In the 19th century strategies to prevent disease by cleaning up sewer systems and water supplies were far more effective than all of the doctors, medicines, and hospitals in the world were in treating the resulting diseases.

• Identifying the changes needed in the sewage and water systems guided the prevention efforts by clarifying what needed to be addressed.

• We know that social isolation and loneliness caused by job issues, social media, and other factors causes many types of mental health and psychosocial problems.

• So we will begin to examine the “sewer system” causing social, psychological, emotional, and behavioral problems today with the “social” sewer system.

• Next week we will examine another part of the “sewer system”: the MH problems caused by unsafe, unhealthy, and unjust physical/built, economic and ecological conditions.
Today’s Agenda

The First Foundational Focus:

*Build Social Connections Across Geographic, Economic, and Cultural Boundaries in the Community*

We are honored to have presenters from two outstanding initiatives:

- Howard Lawrence, Coordinator, Abundant Community Edmonton, City of Edmonton, Canada
- Robin Saenger, Founding Director, Peace4Tarpon, Tarpon Springs, FL, US
Resilience Pause

If it resonates with you, take a moment to use the “skylight method” to notice what are you experiencing right now in your body, your mind, and your emotions.

The “Control Test”: A Helpful Method of Self Care
(Buddhism and Stoicism)

Before worrying about or taking action, always run things through a basic test to determine what you **can and cannot control** and then **focus on what you can control**.

The **only** things you can actually control are your:

- Character
- Your actions and reactions
- How you treat others

- **Things we can control** include: our opinions, pursuits, desires, aversions, words, reactions, behaviors—in short, our **character**, **actions**, and **how we treat others**.

- **Things not in our control** include: what others say about you, what others do, property values, valuables etc.—in short, things **not related to our own actions**.
The Control Test

• Identify something you are worrying or are anxious about.

• Ask if it is something within your control related to:
  o Your character?
  o Your actions and reactions?
  o How you treat others?

• Or is it something not within your control?

If the answer is YES—it is within your control -- you can Take Action!
If it is NO, it is not within your control, do not harm yourself with a “second arrow.”
How Does This Relate to the C-E-B Catastrophe?

The control test can empower you to be a person of action: Get educated, train hard, build alliances, continually press for social, economic, and political change.

But don’t base those actions on the belief that you can control the outcome, or you will suffer from “second arrow.”

Instead, by focusing on your character—how you see the world and lead your life—you can place your energy on where you can create meaningful change while maintaining personal health and resilience.

• In short, the control test makes decision making and emotional investment easier to manage.

• It allows us to not stress out about things we cannot control.

• This can be very liberating!
10 Minute Breakout Rooms

Please share:

• In 1 word how you feel now in the present moment?

• What stood out to you about last week’s presentation by Matt Erb and Graham Parker about different ways to help residents begin to heal traumas—and the session as a whole?

• Outcomes of your discussions with others about hosting/organizing a way for residents to begin to heal their trauma and start building community capacity for mental wellness & resilience.
A Process For Forming and Operating an RCN for the C-E-B Catastrophe

First Week

Step One
Get Organized by Forming an RCC and Clarifying Mission, Values, and Operating Principles

Step Two
Begin Building Community Capacity

Option A
Begin Trauma Healing and Resilience Education

Option B
Develop Asset Maps and Community Resilience Portrait

Next 5 Sessions

Step Three
Establish Vision of Success, Goals, Strategy, and Action Plan

Build Social Connections Across Boundaries

Create Supportive Built/Physical Economic & Ecological Conditions

Develop Universal Mental Wellness and Resilience Literacy

Foster Engagement in Activities that Promote Wellness & Resilience Literacy

Establish Ongoing Opportunities to Heal Trauma

Last Week

Step Four
Implement Strategy with Focus on Five Core Focal Areas

Step Five
Continually Track Progress, Learn, and Improve

Step Six
Build on Successes to Plan for Long Term

Last 2 Sessions
The Five Foundational Areas RCNs Should Focus on to Build Universal Capacity for Mental Wellness and Trans. Resilience for the C-E-B Catastrophe

- Build Social Connections Across Boundaries in Communities
- Ensure a Just Transition by Creating Supportive Physical/Built, Economic, and Ecological Conditions
- Universal Capacity for Mental Wellness and Transformational Resilience
  - Establish Ongoing Opportunities to Heal Suffering and Trauma
  - Develop Mental Wellness and Resilience Literacy
  - Foster Engagement in Practices that Promote Mental Wellness & Resilience
When do you feel **happiest, most fulfilled, and peaceful**?

Put comments in chat.

How much does your happiness, fulfillment, and peacefulness depend on **connections to others**?

Put comments in chat.
Loneliness and Social Isolation Are Today Profound Drivers of Mental Health and Psychosocial Problems

- A meta-analysis found that **loneliness** and **social isolation** can produce anxiety, depression, post-traumatic stress disorder (PTSD), increased suicidality and more.

- Lack of social connections and loneliness can lead to **loss of self worth**, and **loss of meaning** and **purpose** in life—which are **essential** human needs.

- Loneliness also inhibits the **immune system**, **promotes inflammation**, and aggravates the **stress response**, making it **twice as harmful** to both **mental** and **physical** health as **obesity** and greatly increases risk of **premature mortality**.
Conversely, Social Connections *Prevent* Mental Health Problems, Strengthen Physical Health, and Increase Chances of Longevity by 50%

- People who feel **connected to others** have **lower rates of anxiety** & **depression**.

- They also have **higher self-esteem** and **more empathy** for others.

- People with good social connections tend to be more **trusting** and **cooperative** which makes **others** more **open to trusting and cooperating with them**.

**In Other Words:**

Social connectedness generates a **positive feedback** that enhances social, psychological, emotional **and** physical wellness.
Social Connections are also *Vital* During Toxic Stresses and Disasters

- In the **first five days** (or more) of disasters, **survival** often depends largely on **family**, **friends**, and **neighbors**, not emergency responders.

- Social connections are **key** to helping people **move to safe places** and **obtain** food, water, shelter, and other **basic needs**.

- And they are **key** to providing a vital **sense of safety** and **emotional support** during and after a disaster.

- Research on 2021 Pacific Northwest record **heatwave** found that socially **isolated** people were **much more apt to died**. The **same** dynamic applies to many **other** disasters.

- Research by CREW (Communities Responding to Extreme Disasters) found that **neighbors-knowing-neighbors** is **vital** for **resilience** during climate disasters.
This is why building **social connections** is *By Far* the **Most Important** foundational area RCNs should focus on to build population-level mental wellness and resilience.
Building social connections across boundaries in a community should be a **stand alone focus** of an RCNs work.

- It should also be a **central focus** of each of the other 4 foundational areas.
The Three Interconnected Types of Social Connections RCNs Should Focus On

- "Bonding" social support networks
  ("Strong Ties")

- "Bridging" social support networks
  ("Weak Ties")

- "Linking" social support networks
  ("Weak Ties")
Introducing Howard Lawrence

Coordinator of Abundant Community Edmonton, City of Edmonton Canada
Another Approach

Introducing Robin Saenger

Founding Director, Peace4Tarpon
Resilience Pause: Practice the Control Test

• Identify something you are **worrying** or are **anxious** about.

• Ask if it is something **within your control** related to:
  
  o Your character?
  o Your actions and reactions?
  o How you treat others?

• Or is it something **not** within your control?

If the answer is **YES**—it is **within your control** -- you can **Take Action**!

If it is **NO**, it is **not within your control**, do not harm yourself with a “**second arrow.**”
Q & A with Howard and Robin

Please post in chat
Breakout Rooms

• Share what you learned from Howard and Robin …

• Discuss how you can implement similar approaches to build social connections in your neighborhood or community

• Identify key questions
Q & A

Post in chat

Any examples of how social connections are deliberately formed and sustained in your community?
Resilience Hubs: Can Be a Helpful Resource for Certain People

- Hubs can be helpful for some residents when trusted by them.
- Hubs can provide people with support, information, and key resources before, during, and after disasters, and can include libraries, community centers, businesses, open spaces, private homes, new locations—even park benches.
- During disasters, a Hub can serve as a central gathering point for people to check in with others, assess impacts, share stories, gather information, and plan responses.
- But hubs “are not for everyone” (Kristin Baja, Urban Sustainability Directors).
- They are generally most helpful for populations without other resources/options.
- Generally, only people living nearby, who have ability to easily access it, and trust the people in charge and those likely to be at a hub will use them—and a physical facility itself might be damaged or inaccessible in a disaster.
YES WE CAN!

- It is not easy, but when people take the time to discuss **practical issues** they are concerned about and ways to **address them** that **benefit all, positive connections** can occur.

- Creating a **non-judgmental** welcoming **environment**, practicing **self-regulation** and **co-regulation**, providing a strong sense of **safety and support**, and addressing people’s **real world needs** (food, transportation, childcare etc.) are vital.

- “**Mattering**” is Key: interact with and care for **everyone** so they feel **they matter**!
In a pattern seen throughout history, when populations are defined as "vulnerable," "at risk" or in other ways “different,” other people often discount their importance or show little concern about their plight.

Focusing on any group separately from others can also easily revert back to the fragmented and siloed approaches that so often dominate today.

This can increase the segregation and social isolation many individuals and groups already experience and pit them against others for attention, funding and other resources.
To avoid these pitfalls **every** group should be **integrated into a holistic population-level strategies** to building mental wellness and resilience.

**All** groups should be **equal partners** in the RCN **steering committee/board** and **Resilience Innovation Teams**.
Universal (or primary) prevention focuses on thwarting mental health problems \textbf{before} they appear within the \textbf{entire population}: e.g. teaching all adults how threats can activate instinctive fight, flight, freeze reactions, and then teaching them Presencing and Purposing skills.

Intensive (or indicative) prevention helps people who are \textbf{already} experiencing serious mental health problems \textbf{control} and \textbf{reduce} their symptoms: e.g. helping people who misuse drugs or alcohol learn how to prevent relapse.

Targeted (or selective) prevention focuses on people with \textbf{characteristics} that place them at high risk of mental health problems: e.g. giving special attention to people who live in high-risk areas, or who are typically marginalized.

Universal (or primary) prevention focuses on thwarting mental health problems \textbf{before} they appear within the \textbf{entire population}: e.g. teaching all adults how threats can activate instinctive fight, flight, freeze reactions, and then teaching them Presencing and Purposing skills.
Integrate Proportionate Universalism with a “Life-Course” Approach

• In **addition to** simultaneously focusing on the three different types of prevention, to build population-level capacity for mental wellness and transformational resilience, RCN strategies should employ a "life-course" approach.

• This means **different methods** should be used with **different age groups**.

• This is important because people are typically **exposed to different risk factors** at **different stages of their lives**, so **different protective factors** should be emphasized for children, adolescents, working age, and older adults.
Building Social Connections Can Enhance “Collective Efficacy”

- When numerous people share the belief that through their unified efforts they can achieve important outcomes they become more effective and increase the likelihood of achieving their goals.

Example: in communities where neighbors believe that together they can prevent crime, research has found significantly less of it.

- Strong collective efficacy can also bring residents together to prevent social, economic, ecological, and other forms of inequity and injustice.

- And, enhanced collective efficacy will be vital to empower residents to engage in actions that help reduce the C-E-B catastrophe to manageable levels.
Comments and Questions

Please post in chat
Summary

• Building social connections across boundaries in communities is by far the most important focus of RCNs, because social isolation produces mental health problems, and both “strong” and “weak” connections are essential to deal with the toxic stresses and blunt traumas generated by the C-E-B catastrophe.

• A variety of methods can be used to build robust social connections: it should be a stand-alone focus, and be a central focus of all other strategies.

• When building social connections do not isolate people or used siloed approaches that segregate people from others: Instead use a combination of “proportionate universalism” and “life-course” approaches.
If you want CE credits please remember to complete APHA CoP session evaluation that will be sent to you.

**Homework**

- Practice a “Tracking” Resilience Pause **daily**—and then **teach it** to someone.

- **Share** what you learned/experienced today about building social connections with the people you have already spoken with about forming an RCN, or expanding an existing one, and discuss **how you can apply it in your community**.

- Develop an **initial strategy** and **timeline** for beginning to do this.

**Next CoP: Tuesday March 12:**

The second foundational area: Ensure a “Just Transition” by Building Healthy, Just, and Equitable Climate-Resilience Physical/Built, Economic, and Ecological Conditions
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