

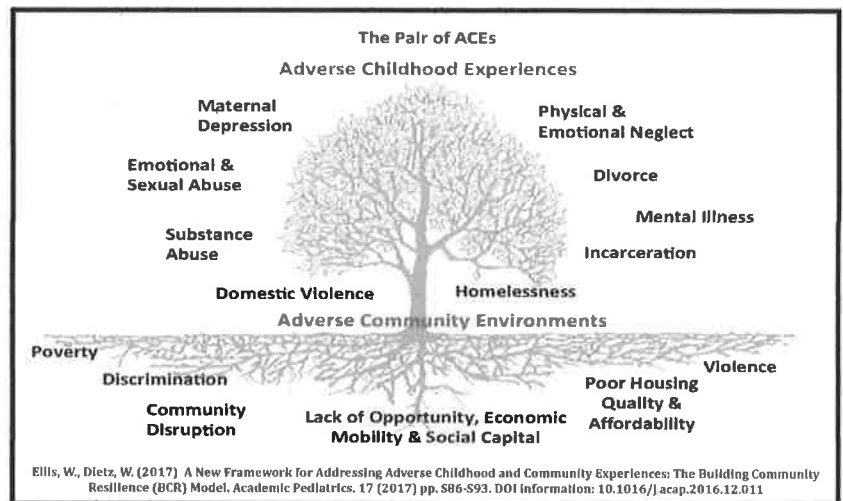


**Building Community Resilience (BCR)** is a George Washington University led national collaborative and network seeking to improve the health and wellbeing of children, families, and communities across multiple generations. Teams throughout the country are fostering measurable change using the BCR process, tools and resources to help their communities not only 'bounce back' in the face of adversity, but bounce *forward*.

Fundamental to the BCR process is building and strengthening buffers to prevent negative outcomes associated with adverse childhood experiences (ACEs), particularly in the context of adverse community environments (ACEs)—the 'Pair of ACEs'. This is achieved through alignment and adjustment of large systems—such as health care, city government and education – and, critically, through partnership *with* community, including parenting support services and grassroots advocacy.

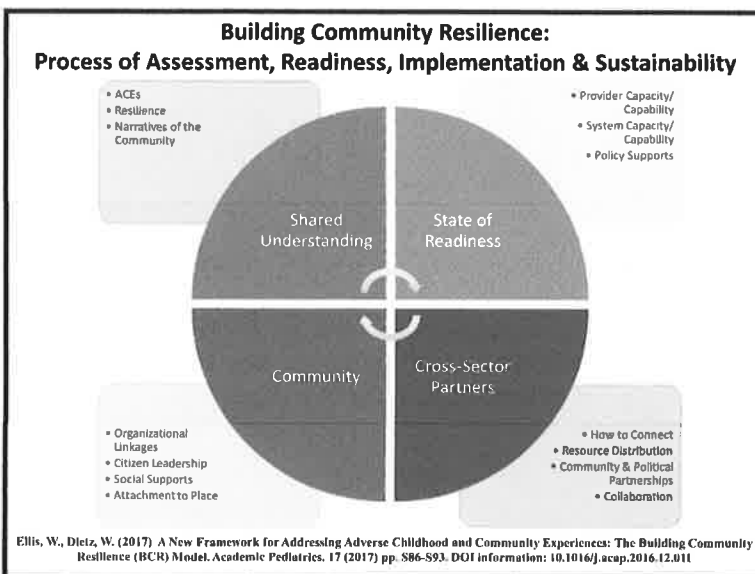
## The Problem

Across the country, parents, families and communities face the challenge of achieving or maintaining good health in the face of daunting adversity. Childhood adversity or trauma such as exposure to abuse and neglect, parental substance abuse and incarceration are often rooted in community environments lacking equity, as measured by concentrated poverty, poor housing conditions, higher risk to violence and victimization and homelessness. These are **adverse childhood experiences** occurring in the context of **adverse community environments** – what BCR has coined the 'Pair of ACEs.' These inequitable community conditions provide little access to the support and buffers that enable resilience. The effects are compounded, negatively impacting health and other outcomes across a lifespan, and over multiple generations. *BCR recognizes that adverse community environments are often the result of policies and practices across multiple systems that were designed for the place-based inequities they produce.*



## The BCR Approach

Until now, no process has existed to create a multi-sector response to address the Pair of ACEs or the policies and practices driving the inequitable outcomes they produce. Using the BCR process, tools and resources, community partners across the country are bringing together diverse coalitions to address long-standing inequities, communicating ACEs as a national public health concern, and shaping policy, practice and programs to support and build resilience. BCR employs a systematic approach based on four central components. These are applied as a continuous improvement model: creating shared understanding of childhood and community adversity, assessing system readiness, developing cross-sector partnerships, and engaging families and community residents in a collaborative response to prevent and mitigate the Pair of ACEs.



## Free Tools & Resources

Learning from BCR teams across the country, BCR has developed multiple online resources and tools, including a Policy & Advocacy Guide, a Communications & Coalition Building Guide, and made them free for use to enable spread and uptake for broad systems change across communities. See the "BCR Tools and Resources" section on our website: [go.gwu.edu/BCR](http://go.gwu.edu/BCR).



## Partnering with Local Public Health

BCR is partnered with the National Association of City and County Health Officials (NACCHO) to align efforts aimed at reducing childhood and community adversity by connecting BCR teams and local health department leaders using NACCHO's Mobilizing Action through Planning and Partnerships (MAPP) process. MAPP is a community-wide strategic planning process that provides a framework, guidance and structure for developing healthy and equitable communities. With a shared focus on data, community and public systems (such as education, child welfare, juvenile justice and housing), the BCR-NACCHO partnership is working to build and strengthen community and multi-sector partnerships.

### BCR Implementation and Evaluation: ACEs Prevention & Resilience Building Programs

BCR coalitions implement evidence-based programs and initiatives aimed at addressing the Pair of ACEs at the community level and/or individual interventions designed to prevent childhood adversity, prevent illness, and build resilience. The national BCR collaborative provides technical assistance, consultation, and peer-to-peer support to accelerate learning and empower teams for program implementation. The national BCR collaborative also develops tools and strategies that are shared among the collaborative partners. Finally, the national BCR collaborative evaluates the cohort's ability to implement programs and the BCR model's effectiveness in a diverse range of settings, and well as the effectiveness of BCR tools and resources.

### BCR Planning: Strategic Readiness and Launch of Regional Networks & Coalitions

Applying a systematic approach, site-based teams establish a cross-sector coalition of partners that address the root causes of childhood and community adversity. Through this process, teams in the BCR collaborative promote practice, program and policy change by helping city leaders, public agencies, social service and health care providers and community partners coordinate to promote healthy social emotional development for children and their families. Each local network works both internally and with external partners to establish a common language – a shared understanding – around adverse childhood experiences, adverse community environments, and the concept of community resilience. Partner organizations learn how to use communications and advocacy tools and apply them with a diverse range of audiences in order to increase awareness of the Pair of ACEs across their coalition and community. They identify community resource gaps and assets to determine capacity for action, and collect data that can be shared among partners to build resilience. Local network partners also identify policy gaps and opportunities for advocacy at the local, county and state levels with technical assistance and guidance from the national BCR team.

## BCR Networks & Collaborators

Regional Networks	Partners & Community-Based Initiatives
Dallas, Texas	<ul style="list-style-type: none"> <li>Resilient Dallas/City of Dallas</li> <li>Children's Health System of Texas</li> <li>ChildCareGroup</li> <li>Community Council</li> <li>Big Thought</li> </ul>
Washington, DC & Baltimore, MD	<ul style="list-style-type: none"> <li>Rodham Institute</li> <li>Early Childhood Innovation Network (ECIN)</li> <li>Unity Health Care Minnesota Avenue</li> <li>Martha's Table</li> <li>Trinity Washington University</li> <li>Ward 8 Health Council</li> <li>ROOT/NOBLE</li> <li>Resilient DC, Office of the City Administrator</li> <li>Center for Urban Families</li> <li>Center for Health &amp; Health Care in Schools</li> </ul>
Greater Cincinnati (OH) & Northern KY	<ul style="list-style-type: none"> <li>Joining Forces for Children</li> <li>Mayerson Center for Safe and Healthy Children</li> <li>Arts Over ACEs</li> <li>Beech Acres Parenting Center</li> <li>Children Inc.</li> <li>The Children's Home of Cincinnati</li> </ul>
Missouri & Kansas	<ul style="list-style-type: none"> <li>Alive and Well Kansas City</li> <li>Alive and Well St. Louis</li> </ul>
Oregon	<ul style="list-style-type: none"> <li>Trillium Family Services</li> <li>Concordia University, 3toPhD</li> <li>The Faubion School, Portland Public Schools</li> <li>Oregon Alliance of Children's Programs</li> <li>Trauma Informed Oregon</li> <li>Looking Glass</li> <li>Keep Oregon Well</li> <li>Oregon Public Health Institute</li> <li>Self Enhancement, Inc.</li> <li>Oregon Department of Human Services</li> <li>Curandi</li> <li>Catholic Community Services</li> </ul>

### Contact Us

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