**Community Resilience Plan Guidance Document & Template**

Minnesota Communities Caring for Children is partnering with Children’s Mental Health and Family Services Collaboratives to support Community Resilience Conversations that will help Collaboratives' communities move from understanding neurobiology, epigenetics, ACEs, and resilience (NEAR) Science to Community Resilience Planning for possible community responses. Community stories and local data will inform these conversations.

In working towards reducing ACEs, increasing resilience and promoting trauma-informed practices, communities can develop a Community Resilience Plan that incorporates these four objectives:

1. Leadership expansion
2. Community collaboration/Coming together
3. Shared learning
4. Results-based decision making

The goals of the plan are two-fold:

1. Enhance community collaboration and capacity
2. Implement strategies to enhance protective/resilience factors and prevent/reduce ACEs

The Collaborative Coordinator and local Community Resilience Planning Team will complete the Community Resilience Plan based on Community Resilience Conversations. This plan should reflect the actions and commitments of the Collaborative, partners, and parents to decrease ACEs and increase protective factors in their community. The plan will help the Collaborative identify community goals and priorities for concentrating efforts to create self-healing communities. The plan may connect with the Collaborative’s current strategic plan or some Collaboratives may even choose to adopt and approve the plan as the strategic plan for the Collaborative.

The Collaborative does not need to fill out every goal or objective. The Community Resilience Conversations should drive the plan and it is expected the plan will evolve with more conversations and more participants to meet changing needs in the community.

Community Resilience Plans may include:

* Development of innovative initiatives, programs and services
* Community capacity, health equity and system change strategies
* Ways to leverage local and other resources (in-kind, LCTS, etc.)
* Strategies to promote trauma- and resilience-informed policies and practices
* Priority data points for evaluating and tracking outcomes for children, youth and families

Outcomes:

* Short-term outcomes refer to outcomes the Collaborative hopes to see within the first year
* Intermediate outcomes refer to outcomes the Collaborative hopes to see after one year
* Long-term outcomes refer to outcomes the Collaborative hopes to see after five years

The Community Resilience Plans may contain a pilot project or potential program to propose later as a Community Resilience Initiative. DHS hopes to offer opportunities to support these initiatives as part of the fourth phase of this project. Collaboratives that have completed Phase 3 (Community Resilience Conversations) and entered Phase 4 (Community Resilience Plans and Initiatives) will be able to apply for a small grant for seed funding to initiate a program or project. The Community Resilience Plan will accompany the application for the Community Resilience Initiative.

# Goal 1: Enhance Community Collaboration and Capacity

Use findings from the [Understanding ACEs & Building Self-Healing Communities Assessment Tool](https://www.pcamn.org/wp-content/uploads/2019/04/Appendix-F_-Understanding-ACEs-Building-Self-Healing-Communities-Assessment-Tool-.pdf), Community Resilience Conversations, focus groups, and/or one-on-one interviews (100 Cups of Coffee) to inform action planning related to:

* Raising community awareness about NEAR Science
* Offering opportunities for shared learning and shared goals
* Assessing, mapping and increasing community assets and partners
* Ensuring a diverse array of community leaders engaged in shared decision-making
* Building relationships across sectors and populations
* Gathering data and stories
* Hosting community conversations and cafes

**Example:**

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| **Goal 1, Sample Objective 3: Shared Learning** |
| **Activities** | **Partners/ Participants** | **Timeline** | **Resources** |
| *Gather stories from parent recipients of services on their experiences* | *Graduate students will work with family-serving organizations to recruit and interview parents* | *By March 30, 2020* | *Incentives for parents;* *safe and private meeting spaces for interviews* |
| *Compile data on ACEs, risk factors, and protective factors from multiple community sectors* | *Local public health agency* | *By March 30, 2020* | *Data-sharing agreements* |
| *Develop and share a community profile integrating all data and stories collected* | *Local public health agency* | *By May 15, 2020* | *Websites; report; presentations;* *community meetings* |
| **Short-term outcomes:** *Community profile developed and shared with stakeholders* |
| **Intermediate outcomes:** *Data used to guide decision-making and planning* |
| **Long-term outcomes:** *Profile updated annually to track trends over time and respond to emerging needs* |

# Goal 2: Implement Strategies to Enhance Protective/Resilience Factors and Prevent/Reduce ACEs

Strategies to enhance protective/resilience factors and prevent/reduce ACEs may vary widely, not only from community to community, but also sector to sector. Community partners will know best what approaches can help advance community change efforts and what partners can accomplish based on time, resources, buy-in, etc. Goal 2 can comprise multiple mini-plans to be implemented by partner organizations, agencies, and community groups.

The evidence tells us that ACEs can be prevented by:

* Strengthening economic supports for families
* Promoting social norms that protect against violence and adversity
* Ensuring a strong start for children and paving the way for them to reach their full potential
* Teaching skills to help parents and youth handle stress, manage emotions, and tackle everyday challenges
* Connecting youth to caring adults and activities
* Intervening to lessen immediate and long-term harms

[CDC: [*Preventing Adverse Childhood Experiences (ACEs): Leveraging the Best Available Evidence*](https://www.cdc.gov/violenceprevention/pdf/preventingACES-508.pdf), 2019]

Strategies could include new policies or protocols, new or improved services, new programs, etc. to strengthen families and communities. For example, a school district might implement a new Social Emotional Learning curriculum or a local public health agency may partner with their clients to establish a parent/caregiver advisory group to help guide decision- making.

What do local data on protective factors and ACEs point to as the greatest need? What do community conversations say about community inequities and health inequities? Which partners are ready and willing to implement a new strategy? What do stories from youth and families illuminate about their experiences with local child welfare, justice, public health, and education? What adverse community environments are children, youth and families experiencing?

**Example:**

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| **Goal 2, Sample Objective: *Implement a New Social Emotional Learning Curriculum in School District X*** |
| **Activities** | **Partners/Participants** | **Timeline** | **Resources** |
| *Meet with district stakeholders and parents to assess needs and interests* | *School administration, teachers, school counselors, parents/ guardians* | *By February 29,**2020* | *Meeting space**Child care for parents* |
| *Research available curricula for evidence of effectiveness, cost, etc.* | *Teachers, school counselors* | *By April 30, 2020* | *Other local school districts MDE* |
| *Hold a curriculum selection meeting* | *Teachers, school counselors, parents/ guardians* | *By May 15, 2020* | *Meeting space**Child care for parents* |
| *Get School Board approval* | *School Board* | *By June 30, 2020* | *Time on board agenda* |
| *Train teachers on curriculum* | *Teachers* | *By August 15, 2020* | *Travel budget to attend regional training* |
| *Implement curriculum in grades 4-6* | *Teachers* | *By December 30,**2020* | *Materials for all students* |
| **Short-term outcomes:** *# of sessions completed; # of students reached; pre and-post-test changes in self-reported skills, behaviors, beliefs, etc.* |
| **Intermediate outcomes:** *Changes in classroom behavior as observed by teachers; changes in home behavior as observed by parents; reductions in school disciplinary incidents* |
| **Long-term outcomes:** *Increases in self-reported social competency and behavioral health as measured by the MSS Grade 8 Survey* |

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| **Community Resilience Plan** |
| **Collaborative** |
| **Date** |
| Goal 1: Enhance Community Collaboration and Capacity*(choose 1 – 4 objectives)* |
| **Objective 1: Leadership Expansion** |
| **Activities** | **Partners/Participants** | **Timeline** | **Resources** |
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| **Short-term outcomes:** |
| **Intermediate outcomes:** |
| **Long-term outcomes:** |
| **Objective 2: Community Collaboration/Coming Together** |
| **Activities** | **Partners/Participants** | **Timeline** | **Resources** |
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| **Short-term outcomes:** |
| **Intermediate outcomes:** |
| **Long-term outcomes:** |
| **Objective 3: Shared Learning** |
| **Activities** | **Partners/Participants** | **Timeline** | **Resources** |
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| **Short-term outcomes:** |
| **Intermediate outcomes:** |
| **Long-term outcomes:** |

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| **Objective 4: Results-Based Decision Making** |
| **Activities** | **Partners/Participants** | **Timeline** | **Resources** |
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| **Short-term outcomes:** |
| **Intermediate outcomes:** |
| **Long-term outcomes:** |

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| Goal 2: Implement Strategies to Enhance Protective/Resilience Factors and Prevent/Reduce ACEs*(list 1 or more objectives)*  |
| **Objective:** |
| **Activities** | **Partners/Participants** | **Timeline** | **Resources** |
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| **Short-term outcomes:** |
| **Intermediate outcomes:** |
| **Long-term outcomes:** |
| **Objective:** |
| **Activities** | **Partners/Participants** | **Timeline** | **Resources** |
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| **Short-term outcomes:** |
| **Intermediate outcomes:** |
| **Long-term outcomes:** |