Introduction to HOPE
Positive experiences help children grow into more resilient, healthier adults. HOPE aims to better understand and support these key experiences.

Why HOPE Exists

Positive experiences:
- Promote children’s health and well-being
- Allow children to form strong relationships and connections
- Cultivate positive self-image and self-worth
- Provide a sense of belonging
- Build skills that promote resilience

Core assumption from the Science of the Positive:

The positive exists, it is real and worth growing.

Positive experiences:
- Promote children’s health and well-being
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- Provide a sense of belonging
- Build skills that promote resilience

Many systems focus on the negative:

Screening tools, many of which codify implicit bias, create a presumption of deficit.

HOPE shifts the narrative: people are defined by their strengths as well as their challenges.

HOPE creates a presumption of strength.
Poll
How much do you know about Positive Childhood Experiences (PCEs)?

A. Nothing – what are PCEs?
B. A little – I have heard the term before.
C. More than a little but probably still have a lot to learn.
D. I am well versed in PCEs and their effects on health.
E. I am a PCEs expert!

Think about a positive experience that stands out to you from your childhood. Hold that in your mind as we talk.
Developing the Positive Childhood Experiences (PCEs) score

- 2015 population study in Wisconsin
- Part of the BRFSS
- Asked about ACEs
- Asked about Positive Childhood experiences
- Correlated with mental health

Positive Childhood Experiences scale questions

As a child, how often did you . . .
1. Feel able to talk to your family about feelings
2. Feel your family stood by you during difficult times
3. Enjoy participating in community traditions
4. Feel a sense of belonging in high school
5. Feel supported by friends
6. Have at least two non-parent adults who took genuine interest in you
7. Feel safe and protected by an adult in your home

Positive Childhood Experiences (PCEs) Protect Adult Mental Health

- 48.2% reported poor mental health
- 25% reported poor mental health
- 12.6% reported poor mental health

Bethell C, Jones J, Gombojav N, Linkenbach J, Sege R. Positive Childhood Experiences and Adult Mental and Relational Health in a Statewide Sample: Associations Across Adverse Childhood Experiences Levels. JAMA Pediatr. 2019 Sep 9; e193007
Positive childhood experiences (PCEs) can positively affect adult health. Resilience and healthy outcomes are outcomes of PCEs. Relationships with other children and adults through interpersonal activities are a key aspect of the Four Building Blocks of HOPE framework. Relationships with other children and adults through interpersonal activities are essential for emotional growth, self-acceptance, and self-esteem. Sege and Browne. Responding to ACEs with HOPE: Health Outcomes from Positive Experiences. Academic Pediatrics 2017; 17:S79-S85.
Use the Chat Box:

Ideas about promoting relationships through your work

Environment

The Four Building Blocks of HOPE

Safe, equitable, stable environments for living, playing, learning at home and in school.

Use the chat box:

Ideas about promoting the environment building block through your work
Engagement

The Four Building Blocks of HOPE

Social and civic engagement to develop a sense of belonging and connectedness.

Use the Chat Box:

I ideas about promoting the building block of engagement through your work

Emotional Growth

The Four Building Blocks of HOPE

Emotional growth through playing and interacting with peers for self-awareness and self-regulation.
Use the chat box:

Ideas about promoting the building block of emotional growth through your work

Poll

How much do you know about Adverse Childhood Experiences (ACEs)?

A. Nothing – what are ACEs?
B. A little – I have heard the term before.
C. More than a little but probably still have a lot to learn.
D. I am well versed in ACEs and their effects on health.
E. I am an ACEs expert!
ACEs and PCEs

ACEs
- 1998 study of employed people in Southern California
- Patients answered questions about their childhood
- Correlated with mental and physical health

PCEs
- 2015 population study in Wisconsin
- Part of the Behavioral Risk Factor Surveillance Survey
- Asked about ACEs
- Asked about Positive Childhood experiences
- Correlated with mental health

Adverse Childhood Experiences (ACES)

Adverse Community Environments are the root causes of ACEs
Positive Childhood Experiences promote child development

ACEs interfere with PCEs: Child Abuse blocks Relationships
ACEs interfere with PCEs:
Family Dysfunction blocks Environment

Adverse COMMUNITY environments block engagement

Summary – ACEs can block PCEs

- Child Abuse & Neglect... 
  - Disrupts foundational relationships
  - Disrupts safe home environments
- Family Disruption... 
  - Disrupts safe environments (home and SDH)
- Adverse Community Environments... 
  - Reduce engagement
  - Reduce opportunities for emotional growth (peer play)
Positive Childhood Experiences Mitigate the Effects of ACEs

- Prevent ACEs
- Block toxic stress
- Promote healing

Let that sink in.

PCEs protect adult mental health...even in the face of ACEs.

What does that mean to you?
Questions?

Strengths-based, Child-centered, Family-led innovating around promoting access to the Four Building Blocks
HOPE focuses on the child

Common Framework
HOPE links related ideas
Relational Health
Social Determinants
Child-directed play
Parental wellbeing

Helps Providers
Understanding family's strengths, hopes, and dreams
Basis for collaborative problem solving
Reduces burnout?
Promotes human dignity

Families are Resilient. HOPE celebrates their strengths.

Integrating HOPE into our work

Initial encounter
Interaction
Cultural norms and engagement
Please share what stands out to you in this picture in the chat box. What do you see?

Poll
Were risk or protective factors easier to see?
A. Protective factors were easier to see
B. Risk factors were easier to see
C. They were about the same

Type 1 vs. Type 2 thinking

Type 1 thinking
✓ Fast, intuitive, unconscious thought
✓ Everyday activities
✓ Effortless
✓ Training and experience
✓ Implicit bias

Type 2 thinking
✓ Slow, calculating, conscious Solving a problem
✓ Takes more effort!
✓ Something novel
✓ Perceiving variability
✓ Perspective taking
Implicit biases are imbedded in Type 1 thinking. Type 2 thinking can help us notice and navigate our biases. Type 1 vs. Type 2 thinking:

Unconscious, immediate reactions to difference

Slow, conscious strategies to mitigate bias

Simulated Encounter

Without a HOPE-informed approach

HOPEless Practice
Simulated Encounter
With a HOPE-informed approach

Watch out for the Building Blocks!

HOPE in Practice

HOPE-informed Resources and Referrals

• Let’s promote access to the Building Blocks!
• Go round robin sharing what you know about how communities you serve define each Building Block.
• What are you curious about?
• How can you learn more?
Discuss

Anything surprising?

Are there Building Blocks that felt easier to define? Harder?

What are next steps to learn about how your families define the Building Blocks?

Lunch Time!

Breakout Room: Creating Building Block Toolkit
HOPE-informed Resources and Referrals

- Let’s promote access to the Building Blocks!
- Go round robin sharing the resources you have for each Building Block.
- Take notes in Google Doc.

Discuss

Anything surprising?

Where are the gaps?

Think about your community. Do the resources you have align with how your community defines the Building Blocks? Are the resources accessible to everyone? If not, who does not have access? How can you change that?
Breakout Room: HOPEful Intake/First Contact

HOPE-informed Encounters

Whiteboard Activity: What makes an encounter HOPE-informed?

- Talk through standard intake.
- Where are moments for HOPE?
Breakout Room: HOPEful ACEs Screening

What does your screening process currently look like?
Preparing

- Provide information about screening
  - Explain ACEs study and kinds of questions study will ask
  - Explain why you are conducting the screening
- Schedule for a time in the future when parent can feel prepared to discuss

Conducting the Screener

- Briefly review power of the brain to change
- Review science of Positive Childhood Experiences and the power to offset health outcomes
- Create a safe space to share, acknowledging that parent should not feel obligated to go into detail
- Conduct ACEs screen

After the Screener

- Review PCEs that you have witnessed in the home
- Celebrate with the parent the work they are already doing to offset long term health outcomes associated with ACEs
- Ask parent if they are interested in brainstorming more ways to create PCEs for children
- Close with positive, HOPEful messaging
Breakout Room: Responding to Challenging Situations with HOPE

HOPE for Challenging Interactions

Typical response to challenging behavior: What did you do?
Family is perpetrator and practitioner is doling out punishment.

Trauma-informed Response: What happened to you that led to this behavior?
Family is framed as a victim or survivor of trauma and practitioner becomes therapeutic support in processing that trauma.

HOPE-informed Response: I see you doing the best you can with what you have. Let’s talk about what happened here and how it might be able to look different next time.
Family is framed as resilient and the systems within which the family is operating are recognized as contributing factors to current situation. Practitioner is seen as a partner in figuring out a way forward.

HOPEful Challenges

How does your office respond to families who are routinely late or miss appointments?
HOPEful Challenges

A family arrives for services. The parent is trying to speak with you, but the child is distracting them. They raise their voice with the child and tell them that they need to be quite “or else.” How do you respond?

HOPEful Challenges

You have co-created a treatment plan with a family, but the family regularly fails to make progress in one of their own goals, getting physical activity 3 times per week. How do you respond?

Co-created Case Study

Challenging Situation
How old?
Risk factors?
Protective factors?
Moments of HOPE can occur:

- In each encounter
- During intake and assessments
- When sharing referrals or community resources
- When creating or revising policies
- When designing programming

What will you do in the next 30 days?

https://form.jotform.com/220004754906057
Join us in the HOPE transformation

LEARN
Visit our website
Download our material
Watch our videos
Complete our online modules

SHARE
In your networks
Encourage your agency to sign up for a workshop about implementing HOPE

ACT
Sign up for a Train the Facilitator
Use the Anti-racism Toolkit to increase access to the 4 Building Blocks in your community
Revise your intake and assessment forms to be HOPE-informed

Register for Growing HOPE
SECOND ANNUAL HOPE SUMMIT
MARCH 8TH, 2022

Spreading HOPE