

Spreading HOPE

HEALTHY OUTCOMES
FROM POSITIVE EXPERIENCES





Inside:

- 04** WELCOME
- 08** WHY HOPE EXISTS
 - Issue
 - Opportunity
- 14** OUR MISSION
- 16** THE FOUR BUILDING BLOCKS OF HOPE
- 18** WHAT HOPE DOES
 - Pathways to Transformation
 - Putting HOPE into Action
 - Collaboration
 - Theory of Change
 - Guiding Principles
- 34** OUR VISION
- 36** ACKNOWLEDGMENTS

Welcome to HOPE

Dear Friends,

When I'm asked if a brighter future for our children is possible, my answer is an emphatic yes. We have the knowledge and tools to help children lead healthier lives, we just need to put them into practice. That is why we created HOPE—Healthy Outcomes from Positive Experiences.

HOPE builds upon current strengths-based work, most notably the Science of the Positive, and uses this growing body of knowledge to better understand and support child health and development. We now know that positive childhood experiences drive healthy development and mitigate the effects of adverse ones. Children flourish with sturdy foundational relationships, safe and equitable environments, community engagement, and opportunities for emotional growth.

Through my years of pediatric practice, I've witnessed families' deep wells of strength that allow them to survive and even thrive in the face of adversity. Their wells have been filled with the love they felt as children; now, drawing from these wells, they create positive experiences for their children.

When we, as providers, understand people based on their strengths as well as their difficulties, we can drink from that deep well and work together to address the real challenges for individual families and also the society we share.

Please have a look at our story, and join us as we move together into a new age of hope and reimagine how we support children and families.

Thank you,



Robert D. Sege, MD, PhD
Director, HOPE National Resource Center
Professor of Medicine and Pediatrics, Tufts University School of Medicine





We want to be part of a networked movement that celebrates optimism and respect for families, that commits to trusted and authentic relationships with families and each other. To quote Hunkpapa Lakota religious leader and tribal chief, Sitting Bull: 'Let us put our minds together and see what kind of future we can create for our children.'

We have committed to **working towards this transformation.** Will you?

David Willis, Bob Sege, and Kay Johnson





HOPE

HEALTHY OUTCOMES
FROM POSITIVE EXPERIENCES

Why HOPE Exists

Positive experiences can alleviate toxic stress and help children grow into more resilient, healthier adults. HOPE aims to evolve our understanding and support of these key experiences.

RESEARCH SHOWS that positive experiences promote children’s long-term health and well-being. They allow children to form strong relationships and meaningful connections, cultivate positive self-image and self-worth, provide a sense of belonging, and build skills to cope with stress in healthy ways.

To be effective, we need to move beyond the crucial task of addressing adverse childhood experiences. We must also look for the positive. Doing so allows us to see things in others that we admire, allowing us to provide unbiased, empathetic care. And keeping positive experiences in the center of our work helps keep our interactions free from unfair blame or judgement.

THE ISSUE: PRIORITIZING ACEs CAN OVERLOOK THE VALUE OF POSITIVE EXPERIENCES IN PREVENTING, MITIGATING, AND HEALING CHILDHOOD TRAUMA.

HOPE aims to shift emphasis to consider positive experiences as impacting health outcomes, too, and to recognize that people are defined not only by their challenges but by their strengths as well.



When parents and families are viewed as complex individuals with strengths—rather than broken and needing to be fixed—providers can recognize families’ expertise in supporting their growing children.

Robert Sege, MD, PhD

WE HAVE THE OPPORTUNITY TO CHANGE how we support children and families and create a system of care based on understanding, equity, and trust. One that recognizes strengths as well as challenges to ensure well-being for all.

INHERENTLY ANTI-RACIST, the HOPE-informed approach treats all people with dignity. Marginalized families and communities are not judged as broken, but are valued, respected, and heard.

It's a shift in mindset where we identify and celebrate everyone's strengths and provide a positive context for examining the effects of past trauma and current challenges.

WE CAN TRANSFORM our practices, systems, and cultural narrative by recognizing, valuing, and actively bolstering positive experiences that drive health and well-being for children, families, and communities.



Systemic change requires a change in mindset. We join together in strengths-based, family-centered, and anti-racist efforts [that] aspire to transform pediatric care, early childhood systems, and social norms.

David Willis, Robert Sege, Kay Johnson



Our Mission

HOPE, GROUNDED IN SCIENCE that demonstrates the formative role of positive experiences in human development, seeks to inspire a HOPE-informed movement that fundamentally transforms how we advance health and well-being for our children, families, and communities.

The Four Building Blocks of HOPE

are composed of key positive childhood experiences (PCEs)—and the sources of those experiences and opportunities—that help children grow into healthy, resilient adults.



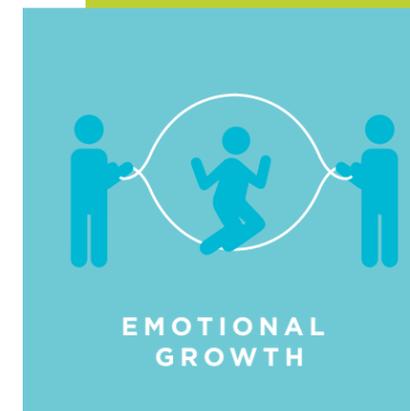
Relationships within the family and with other children and adults through interpersonal activities.



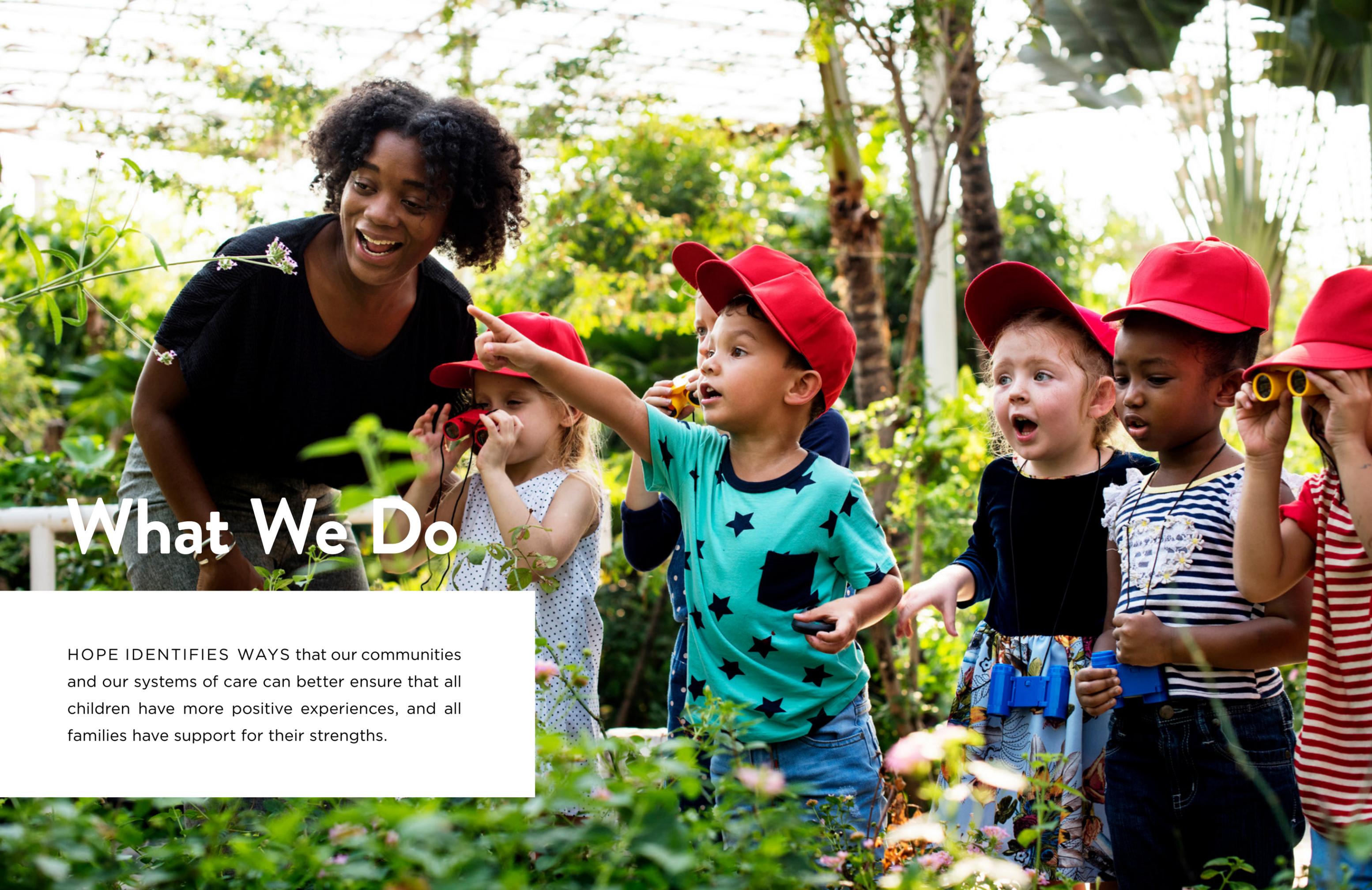
Safe, equitable, stable environments for living, playing, learning at home and in school.



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



Emotional growth through playing and interacting with peers for self-awareness and self-regulation.



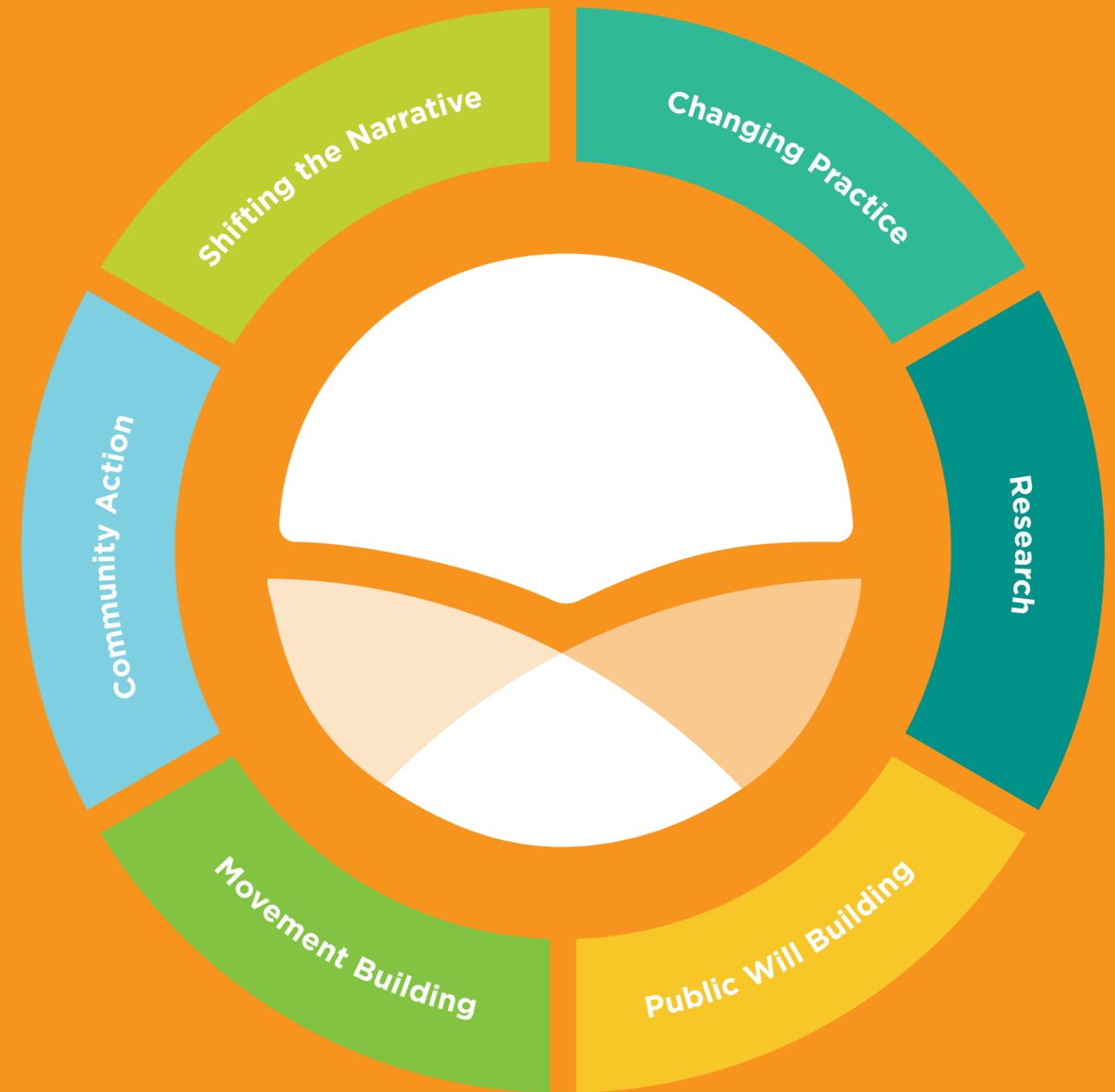
What We Do

HOPE IDENTIFIES WAYS that our communities and our systems of care can better ensure that all children have more positive experiences, and all families have support for their strengths.



Our Pathways to Transformation

POSITIVE CHILDHOOD EXPERIENCES can be nurtured, developed, and expanded. HOPE has identified six transformative pathways that drive our work:



The Pathways

Changing Practice

Promote a paradigm shift in child, family, and community-serving practices by respecting, honoring, and actively promoting positive experiences in individuals.

Research

Build a research agenda that advances the knowledge base on health outcomes from positive experiences and implementation science.

Shifting the Narrative

The association between positive experience and health and well-being powers a shift in conversation and mindset from the negative to the positive.

Community Action

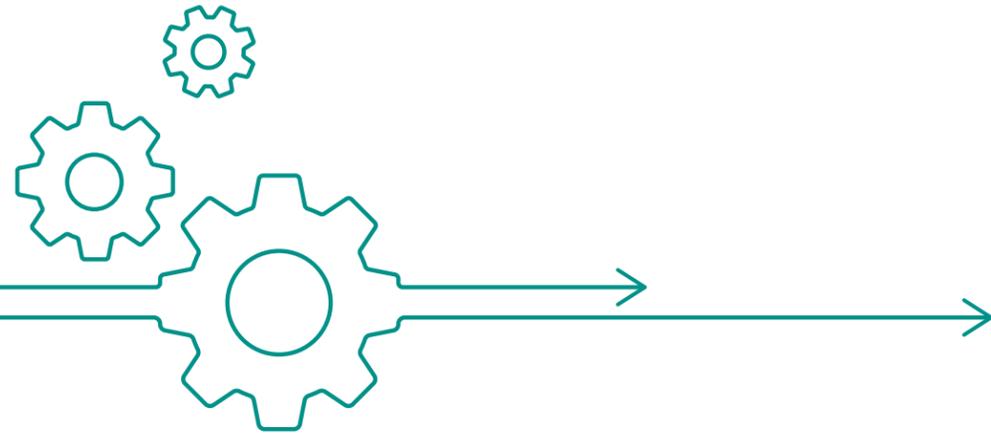
Collaborate with communities to educate and promote conditions necessary to champion positive experiences for children, families, and communities.

Movement Building

Align and collaborate across sectors to promote the principles of positive experiences to promote families' health and well-being.

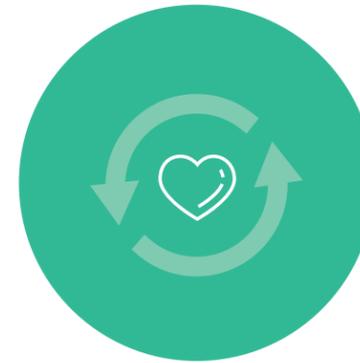
Public Will Building

Transform institutional practices that advance the recognition, honoring, and promotion of positive experiences as a way to advance health and well-being.



Putting HOPE into Action

Here are the approaches that provide the means for us to shift the paradigm in systems of care, education, and research, and to change the public narrative.



Education & Practice Transformation

Increase knowledge to support a paradigm shift at all levels in systems of care informed by the critical importance of positive experiences that foster the health and well-being of children, families, and communities.



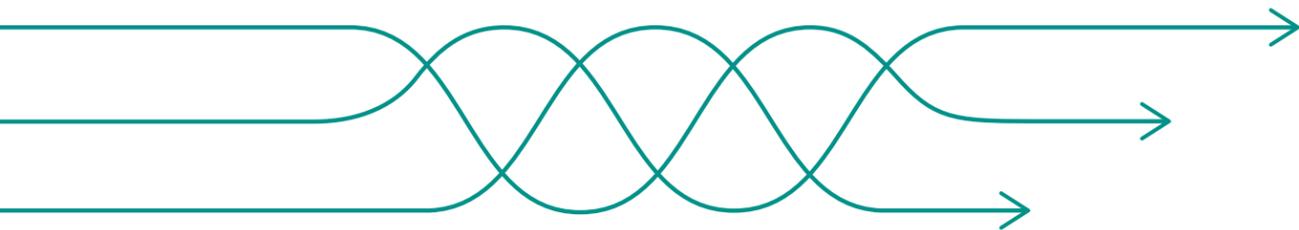
Advancing Research

Further our understanding of how experiences affect development and bring attention to the structural factors of racism to improve the effectiveness of care and create research-informed tools that help change our practices.



Community Action

In collaboration with community partners, we will grow a HOPE-informed approach that identifies existing strengths and augments conditions that support the positive experiences children and families need to thrive.



Our Strategic Actions



Education & Practice Transformation

- Training and certification
- Public education campaign
- National Resource Center
- Publications and conferences
- Policy briefs



Advancing Research

- Conduct family surveys
- Forge research partnerships
- Develop and test tools
- Create a data platform
- Capture practice-based data



Community Action

- Community toolkit
- Family outreach
- HOPE Innovation Network
- Audit of current policies
- Identify opportunities

HOPE COLLABORATES WITH a broad range of people, from the families we help to community organizations, from researchers to policy makers. The strategic actions we take are directed to meet our core objectives: education and practice transformation, advancing research, and community action.

Children & Families

Allied Organizations

Child & Family-serving Providers

Researchers

Child & Family Advocates

Policymakers



HOPE Theory of Change

AS HOPE IMPLEMENTS our strategic actions, we build a collective understanding of the importance of positive experiences. All of our work is done in collaboration with partners who seek to develop HOPE-informed approaches to supporting children and families.

We're creating a paradigm shift in systems of care, communities, and policies to value and actively bolster positive experiences. And we're improving empathy, showing respect for human dignity, and fostering trust among families. This shift builds on our understanding of the power of relationships within families and communities, and between those who provide and receive supportive services.

For families

this leads to a feeling of being acknowledged for their expertise, strengths, and assets and feeling less judged, giving them a sense of agency and optimism, and thus making them more willing to engage in joint decision making related to their health and well-being.

For community leaders

this leads to celebrating and lifting up existing community strengths and assets, forging partnerships, and prioritizing resources to improve conditions for positive experiences.

For child and family-serving practitioners

this leads to having the information, tools, and support needed to provide HOPE-informed care, allowing them to act with empathy, optimism and reduced bias, thus enhancing the quality of care and putting the joy back into their work.

For the HOPE-informed movement

this leads to joining with others in continuously learning and actively advancing the evidence of the power of positive experiences through translation of science and development of tools and best practices.



Guiding Principles for Positive Transformation

WE HONOR the hope, goodness, and strength that exists inside every single one of us.

WE BELIEVE in the goodness embodied by the deep loving relationships between parents and their children.

WE SEEK TO CREATE equitable conditions for health and well-being so that all families and children have the opportunity to thrive.

WE CELEBRATE our differences as our collective strength and speak out against racism and stereotypes for the harm they inflict.

WE JOIN with others to advance the evidence of positive experiences to support health and well-being for all children and families.

WE ACT with humility, respect, and gratitude for others in everything we say and do.



When we start to look at the world through this positive, hopeful lens, it has a profound impact on the questions we ask, the data we collect, and the way we address health and safety issues.

“The Science of the Positive,” Dr. Jeffrey Linkenbach, Director, The Montana Institute

Our Vision

WE SEE A WORLD that honors and fosters positive experiences as being fundamental to everyone's health and well-being.





Acknowledgments

HOPE is only possible because of the tireless work and generous contributions of others. We are indebted to these people and organizations for their efforts, wisdom, and passion.

HOPE National Advisory Board (NAB)

Mayra Alvarez, MHA, President, The Children's Partnership

Corey Best, AAS, Community Curator, Mining for Gold; Parent Leader, Birth Parent National Network

Renée Boynton-Jarrett, MD, ScD, Founding Director, Vital Village Community Engagement Network; Associate Professor, Boston University School of Medicine/Boston Medical Center

Mary Crane, PhD, MA, Senior Director, Systems of Services for Children and Youth with Special Health Care Needs, American Academy of Pediatrics

Stephanie Ettinger de Cuba, MPH, Executive Director, Children's HealthWatch

Ronald F. Ferguson, PhD, Founder and President, The Basics; Director, The Achievement Gap Initiative, Harvard University

Baraka Floyd, MD, MSc Clinical Assistant Professor, Stanford University School of Medicine

Andrew Garner, MD, PhD, FAAP, Clinical Professor of Pediatrics, Case Western Reserve University School of Medicine; Pediatrician, Partners in Pediatrics

Nia Heard-Garris, MD, MSc, Department of Pediatrics, Feinberg School of Medicine at Northwestern University; Division of Academic General Pediatrics and Mary Ann & J. Milburn Smith Child Health Research, Ann & Robert H. Lurie Children's Hospital of Chicago; Chair and Founding Member, American Academy of Pediatrics Section on Minority Health, Equity, and Inclusion

Jennifer Jones, MSW Director, Change in Mind Institute, Alliance for Strong Families and Communities

Bart Klika, PhD, MSW, Chief Research and Strategy Officer, Prevent Child Abuse America

Danielle Laraque-Arena, MD, FAAP, Senior Scholar-in-Residence, The New York Academy of Medicine; Adjunct Professor of Epidemiology, Columbia Mailman School of Public Health; Associate Director, Injury Free Coalition for Kids; Professor and President Emerita, SUNY Upstate Medical University

Jeff Linkenbach, MA, EdD, Director, The Montana Institute

Cailin O'Connor, MS, Senior Associate, Center for the Study of Social Policy

David Willis, MD, Senior Fellow, Center for the Study of Social Policy

Kay Johnson, MPH, MEd, President, Johnson Group Consulting, Inc. (*consultant*)

Judy Langford, Senior Fellow, Center for the Study of Social Policy (*consultant*)

Jabeen Yusuf, Co-founder and Principal, Health Plus Studio (*consultant*)

Phyllis Holditch Nolon, PhD, Senior Scientist, Centers for Disease Control and Prevention (*liaison*)

Other Acknowledgments:

The Health Resources and Services Administration

Tufts Clinical and Translational Science Institute

The Centers for Disease Control and Prevention

The National Center for Advancing Translational Sciences, National Institutes of Health, Award Number UL1TR002544. (The content is solely the responsibility of the authors and does not necessarily represent the official views of the NIH.)

Thank you to our partners in the HOPE INNOVATION NETWORK for advancing health and well-being for children, families, and communities.





Spreading HOPE

EMAIL: HOPE@tuftsmedicalcenter.org

WEBSITE: positiveexperience.org