

A philanthropic case for national impact

Transforming health, equity and opportunity
through positive childhood experiences





Across the United States, children are growing up under pressure that their parents' generation never faced. Economic instability. Social isolation. A mental health crisis that the pandemic accelerated but did not create. The effects show up everywhere: in pediatric waiting rooms, in overcrowded classrooms, in juvenile courtrooms, in families doing their best with too little support.

For decades, our systems have responded by focusing on what goes wrong. That work is necessary. But necessity alone has not been enough.



For years, we asked the wrong question

We asked what happened to children—cataloguing harm, measuring adversity, responding to crisis. What we didn't ask was what children actually need to thrive.

The answer, backed by decades of science, is both simple and transformative: positive experiences. Relationships that hold. Environments that support and nurture. A sense of belonging. Room to grow. When children have these things, the outcomes are measurable and profound—better health, stronger futures.

Tufts Medical Center built HOPE on that truth. Now we're asking you to help us take it to scale.



What does this child need to thrive?

Healthy Outcomes from Positive Experiences (HOPE) is the first national framework built entirely around that answer.

For too long, child-serving systems have organized themselves around adversity. Identifying it. Documenting it. Responding to it. That work matters. But it has never been enough.

HOPE shifts the lens. Built on decades of developmental, public health and behavioral science, HOPE gives healthcare professionals, educators, housing authorities and justice systems a shared framework and the practical tools to use it.

This is not theory.

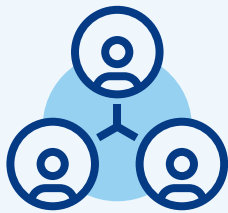


It is infrastructure for change.

HOPE doesn't ask systems to abandon what they know. It gives them what they've been missing—a common language, a positive direction and proof that it works.

The foundation every child deserves

Decades of science point to four experiences that are essential for children to grow up healthy and whole.



Relationships: Safe + supportive relationships within the family + with other children + adults.



Environment: Safe, equitable + stable environments where children can live, learn + play.



Engagement: Opportunities for social + civic engagement to develop a sense of belonging + connectedness.



Emotional growth: Opportunities for emotional growth where children feel supported through difficult events + emotions.

How PCEs change lives

Recent groundbreaking research published in *JAMA Network Open* analyzed data from more than 20,000 respondents across Kansas, Montana, South Carolina and Wisconsin. The findings demonstrate that positive childhood experiences (PCEs) have profound and measurable impacts on adult health outcomes.

Physical health outcomes

Adults with high numbers of PCEs (6 – 7 experiences) showed significantly lower rates of chronic health conditions:

- **27%** lower likelihood of diabetes
- **47%** lower likelihood of heart disease
- Reduced rates of arthritis, asthma, cancer + COPD
- Lower rates of being overweight or obesity
- Better overall physical health

Mental health outcomes

The impact on mental health was particularly striking:

- **68%** reduction in depression among adults with 6 – 7 PCEs
- Significantly better general mental health outcomes
- Lower rates of poor mental health days

Educational + economic impact

PCEs create substantial opportunity benefits:

- **64%** more likely to attend or graduate from college
- **117%** more likely to have an income of \$50,000 or more
- Better employment outcomes + career prospects

Economic value

The economic analysis reveals unprecedented value:

- **\$216 billion** total annual economic value (across four states)—represents the full impact of better health and longer lives, including both reduced costs + increased societal contributions.
- **\$3.1 billion** in reduced medical spending—by increasing PCEs, we can reduce chronic illness, mental health crises + hospital visits—leading to meaningful savings in healthcare costs.
- **\$212.8 billion** in additional healthy life years—reflects the value of people living longer, healthier + more productive lives.
- **\$28,000 annual savings** per adult with 3+ PCEs—individuals with supportive early environments require fewer resources + contribute more each year.
- **\$782,000 lifetime value** per individual—a person with strong early positive experiences lives healthier, contributes more to society + requires fewer healthcare + social services over their lifetime.

A photograph of children sitting around a green table, engaged in drawing. One child in the foreground is wearing a pink shirt and a dark headband. Another child in the background is wearing a yellow shirt and white shorts. A basket of colorful markers is visible on the right side of the table. The scene is brightly lit, suggesting an indoor setting like a classroom or community center.

WHY TUFTS MEDICAL CENTER National leadership with credibility

The HOPE framework was developed and is led by the **HOPE National Resource Center (NRC) at Tufts Medical Center**. This is not an affiliate effort, pilot or external partnership—HOPE is Tufts Medicine thought leadership brought to life. This credibility gives HOPE something rare in philanthropy: proof, not promise

Tufts Medical Center is uniquely positioned to lead this work because it sits at a rare intersection:

- An academic medical center with deep scientific credibility
- A public health-oriented institution focused on prevention + equity
- A community-embedded health system serving diverse populations
- A national convener with the ability to translate science into systems change

The research behind HOPE is strong:

- Large-scale CDC population studies demonstrating the protective power of PCEs
- Peer-reviewed implementation science proving HOPE works in healthcare, education, housing + juvenile justice
- Economic analyses quantifying hundreds of billions of dollars in lifelong value associated with PCEs



Integrating the HOPE framework into primary care practice

Challenge

A network of 29 pediatric clinicians wanted to address adverse childhood experiences (ACEs) and promote PCEs but lacked practical tools and frameworks for doing so in busy clinical settings.

What they did

Clinicians took part in focused training sessions to learn how to use the HOPE framework in their daily work. They integrated new tools and resource guides directly into their electronic health record systems to make these tools and guides easier to use. Instead of only looking for risks, teams learned how to identify children's strengths and connect families with local community resources that help build PCEs.



Outcomes

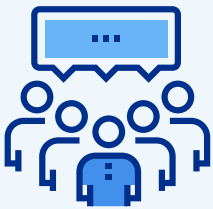
The program greatly increased clinician confidence, with 76% feeling very prepared to talk with families about childhood experiences. These changes led to the HOPE framework becoming a regular part of well-child checkups. As a result, families left their appointments with practical resources and a better understanding of how simple, positive daily activities and community support can help their children grow up healthy and strong.

The window is open. It won't stay that way.



First: The science has reached a critical mass

We now understand not only the harm caused by adversity, but the protective and healing power of positive experiences. This knowledge is actionable—and delay means lost opportunity.



Second: Systems are asking for what's next

Healthcare, education and justice leaders understand trauma but often lack practical tools to move forward. HOPE answers the question professionals are asking: *“What do we do now?”*



Third: A window for national leadership

HOPE is currently the only national effort focused exclusively on translating PCE science into scalable systems change. With strategic philanthropic investment now, Tufts Medical Center can ensure HOPE becomes a national standard, implemented with fidelity, equity and impact.



THE ROLE OF PHILANTHROPY

HOPE depends on philanthropic investment to sustain and expand the critical work already in motion. Private philanthropy is not optional—it is essential. Without it, progress will slow, momentum will be lost and the impact on the communities we serve will be at risk. Now is the moment to act to ensure this work continues and grows.

Philanthropy provides:

- ✔ Flexibility to innovate
- ✔ Speed to respond to demand
- ✔ Capacity to build durable infrastructure
- ✔ Vision to shape long-term systems change



A philanthropic investment in HOPE is a force multiplier, influencing the systems that touch millions of children for generations.

\$10M+

FOUNDING NATIONAL LEADERSHIP INVESTMENT

Positioning Tufts Medical Center as the permanent national home of HOPE

This catalytic investment establishes HOPE as a national standard for child- and family-serving systems.

Supports

- A permanent national training, certification + implementation infrastructure
- Endowed leadership, research + operational capacity
- Advanced national data, evaluation + policy influence
- National convenings + thought leadership hosted by Tufts Medicine

Impact: Millions of children reached through large-scale systems change; enduring national recognition for Tufts Medical Center.

\$5M –
\$7.5M

SCALING + SYSTEMS TRANSFORMATION

From adoption to normalization

This accelerates HOPE's integration into sectors already demanding implementation support.

Supports

- Expansion of train-the-facilitator + certification pipelines
- Sector-specific implementation (healthcare, education, juvenile justice, child welfare)
- National technical assistance + coaching infrastructure

Impact: HOPE becomes embedded within institutional practice, policy and funding priorities.

\$2.5M
– \$4M

EVIDENCE, EQUITY + INNOVATION

Strengthening the backbone of impact

This ensures HOPE's growth is evidence-driven and equity-centered.

Supports

- Ongoing peer-reviewed research + evaluation
- Digital tools + implementation guidance
- Targeted deployment in marginalized communities

Impact: Sustains credibility, strengthens funder confidence and advances health equity.

\$1M –
\$2M

WORKFORCE + NATIONAL CAPACITY

Building the people who deliver HOPE

This focuses on frontline professionals who translate HOPE into daily practice.

Supports

- Training + certification of hundreds of additional facilitators
- HOPE champion programs within organizations
- Support for community-based partners nationwide

Impact: Immediate, visible improvements in workforce stability and community reach.

\$500K –
\$999K

TARGETED PROGRAMMATIC IMPACT

Focused investment, clear outcomes

This focuses on targeted programs where investment translates directly into measurable change for children, families and communities.

Supports

- HOPE in pediatric care
- HOPE in juvenile justice
- HOPE in early childhood + education
- HOPE data, storytelling + dissemination initiatives

Impact: Clearly defined scope with measurable outcomes in 12 – 24 months.

\$50K –
\$499K

Building momentum, expanding the movement

The need is real and the moment is now. This level offers a critical entry point for partners ready to act.

Supports*

- Sponsorship of trainings, communities or pilot sites
- Regional or sector-based implementation efforts
- Seed funding for innovation + rapid-response opportunities

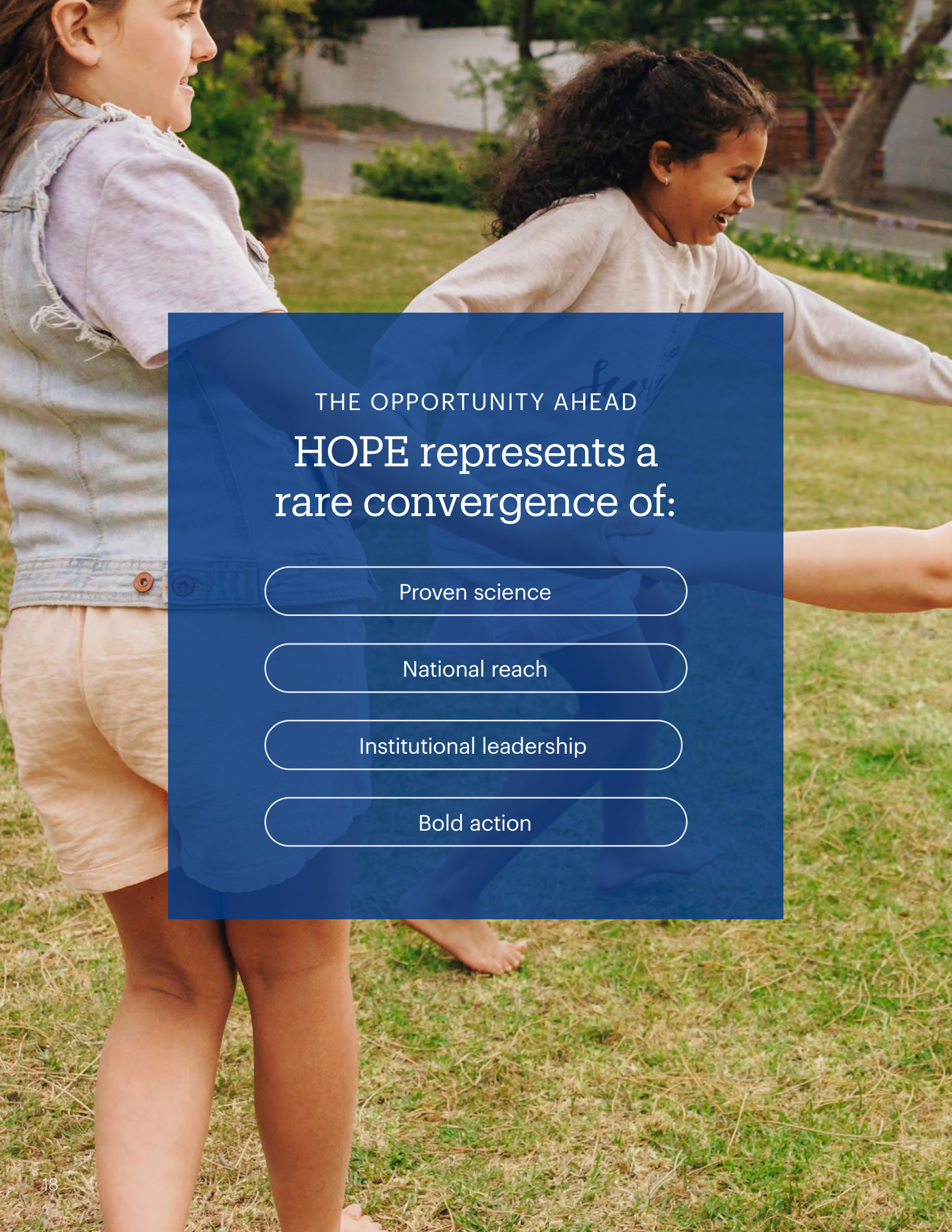
Recognition + engagement opportunities

- Named initiatives, programs or cohorts (as appropriate for philanthropy)
- Visibility in national + regional communications
- Invitations to leadership convenings + briefings

Impact: Immediate traction, expanded reach and the essential momentum needed to ensure HOPE continues and grows at a national level.

*Customized investment opportunities are available to meet specific marketing and budgetary objectives in support of this important work.





THE OPPORTUNITY AHEAD


HOPE represents a rare convergence of:

Proven science

National reach

Institutional leadership

Bold action

A photograph of three children playing in a grassy field. On the left, a girl with long brown hair in a braid is seen from the back, wearing a light pink shirt and denim shorts. In the center, a young boy with short brown hair is looking down, wearing a white shirt. On the right, a girl with brown hair in a ponytail is wearing a blue denim jacket and bright green pants, looking towards the other children. The background shows a large tree and a grey building.

Tufts Medical Center is ready to lead the next phase of this work. What's needed now are visionary philanthropic partnerships to ensure that PCEs become a cornerstone of how America supports children and families.

JOIN OUR MISSION

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Adverse childhood experiences
are not the end of the story.
PCEs have the power to change
outcomes and create lifelong
health and resilience.
HOPE ensures that knowledge
becomes action—and action
becomes lasting change.

To explore how your philanthropy can shape the future of HOPE, scan the code or contact Jonathan Agree, chief development officer, at jonathan.agree@tuftsmedicine.org, Emma Lavery, associate vice president, Development, at emma.lavery@tuftsmedicine.org or Robert Sege, MD, PhD, director, The HOPE National Resource Center at Tufts Medical Center and professor of medicine and pediatrics, Tufts University School of Medicine, at robert.sege@tuftsmedicine.org.

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HOPE
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