

***Building Self-Healing Communities***

**The ACE Interface *Train the Master Trainer Program*** October 20, 2017

**Summary**

Throughout the nation, people are talking about the ACE Study because study findings reveal this is the largest public health discovery of our time. In any great public health discovery, the most important actions in the first decades are:

1. To tell everyone – share the findings effectively and with fidelity, and
2. To change ourselves and promote changes within our spheres of influence.

The ACE Interface *Train the Master Trainer* *Program* is designed to support rapid dissemination of ACE and resilience science, and promote understanding and application of the science to improve health and wellbeing across the lifespan. In less than a year, *the Master Trainer Program* enables delivery ACE information to diverse communities--*with fidelity to science and concepts*--to tens of thousands of people.

The program is structured with licensed materials, a two-day training provided by Dr. Robert Anda and Laura Porter, and a process for effectively implementing a massive ACE education campaign that is based on person-to-person interaction and community engagement. Trained presenters use a flexible script, PowerPoint presentation, and background information that has been reviewed by national content experts, improved over time using field experience, and proven to be effective with diverse audiences.

People love this program! The presentation script and photographs evoke new ways of thinking, compassion, hope, and motivation to act. ACE educators benefit in three ways: 1) each presenter is part of a cohort of ACE educators who co-present and provide feedback; 2) a hosting organization supports presenters as a learning community; 3) fidelity and quality of information is assured via updates and reviews by leading experts affiliated with ACE Interface. ACE Interface Master Trainer/Coaches have a vital role in sparking a new social movement – one with the power to transform the future of the public’s health.

Minnesota, Wisconsin, Alaska, Montana, Colorado, South Carolina, Louisiana, Iowa, Washington, Oregon, Indiana, Michigan, North Dakota, Vermont, Virginia, and Maryland are the first states to adopt the *ACE Interface Master Trainer Program.* There is an emerging trend of county-based Master Trainer cohorts, and cohorts within a region of a state, who are able to disseminate ACE information to the entire population, setting the stage for a fast-paced paradigm shift in neighborhoods and service delivery systems. Sonoma County and Shasta County are examples of this model in action. In Michigan, five cohorts of Master trainers (125 trainers) are working in each region plus the City of Detroit to support a rapid roll-out of the science. Also emerging is a higher education commitment to ensure that every graduate has had this basic education about neuroscience, epigenetics, ACEs, and resilience/transformation, regardless of their major. Southern Oregon University and Rogue Community College have made this commitment with faculty and student support personnel who are Certified Master Trainers who provide education and support to the entire faculty and student support team as presenters.

Getting started is simple. A sponsoring organization -- frequently in collaboration with other partners -- will hold a three-year license for use of ACE Interface materials, select the cohort of up to 25 people to become Master Trainer/Coaches, and host the two-day Master Trainer course. The host organization will also oversee development of the Trainer/Coaches, and act as a liaison to and from ACE Interface. The cost of the ACE Interface Train the Master Trainer program is $60,000, which includes a three-year license for use of all materials, plus on-site education for up to 25 individuals provided by Dr. Robert Anda, Laura Porter, and additional experts selected by ACE Interface, plus limited post-event consultation, to support implementation.

**Costs:**

1. **Registration Fee.** *The Host Organization* will pay to ACE Interface a registration fee to assure the right of participation in a two-day onsite training referenced in Section 1 of this Agreement of $30,000 (“the Registration Fee”) for up to 25 people to participate in a 2 day training event. The Registration Fee will be payable within 20 days of executing the registration purchase agreement.
2. **Licensing Fee.** *The Host Organization*will pay to ACE Interface a licensing fee (“the Licensing Fee”) which shall be calculated as follows: $32,000 for the license described in Section 2 of this Agreement.

**The total costs for the training registration and license fee is $62,000**

Additional costs to the host organization include hosting trainees for the two-day event: rooms for training (including two break-out rooms and a large room), food, hotel rooms for participants (if providing these to participants), and follow-up support to the Master Trainers, which typically includes some staffing and convening the trainers a couple of times during the first year after training to generate a cohort or learning community among the trainers.

**Understanding the ACE Interface *Train-the Master Trainer-Program***

**All over the nation, people are talking about the ACE Study because it reveals the largest public health discovery of our time.** We are the generation that will be able to apply ACE Study findings to generate exponential improvements in health. And we are the ones with the privilege and responsibility to establish this extraordinary intergenerational legacy!

**In any great public health discovery, the most important actions in the first decades are:**

1. **To tell everyone – share the findings effectively and with fidelity, and**
2. **To change ourselves and promote changes within our spheres of influence.**

**The ACE Interface *Train the Master Trainer* *Program* is designed to support rapid dissemination of accurate information that promotes understanding of how developmental adversity affects health and wellbeing throughout the life course.** The materials include education about the ACE Study findings, the biology of adversity including neuroscience and epigenetics that tell us why ACEs are so powerful. The Program then addresses what we can do to promote resilience, recovery, and *Self-Healing Communities.* The ACE Interface *Train the Master Trainer Program* puts accurate science together with an elegant script and fabulous visuals and delivers these to your carefully selected cohort of people who become ACE experts.

**Within a year, the program helps you deliver ACE information with fidelity to tens of thousands of people.** Twenty-five (25) people are initially trained and certified as Master Trainer/Coaches (MTC) using materials approved by leading experts. Once certified, each of those 25 individuals can provide training and support to others who become qualified to educate diverse audiences. Imagine that each of your initial 25 MTC support another 15 people to teach about ACEs and resilience with fidelity – that places 375 educators into your communities, businesses, and service systems actively working to improve collective impact. The ACE Interface *Train the Master Trainer Program* is a powerful tool designed to produce rapid expansion of your ability to disseminate the science of ACEs, resilience, and community engagement.

**Using the ACE Interface *Train-the Master Trainer-Program* saves you time and effort** because the structure and content of the materials are tried and true. The content of the presentation (including framing of the issues, language, tone, and the order of the information presented) has been continuously improved for over a decade in Washington State. Improvements are informed by adult education and social movement theory, scientific discovery, and audience feedback. The program materials are based on the success in Washington plus Dr. Robert Anda’s experience presenting and learning about applications of the science of ACEs for over two decades throughout the world.

**Audiences love this talk!** It evokes new ways of thinking, compassion, hope, and motivation to act. It prevents spread of misinformation, shame, blame, and apathy. Both the tone and the content of the materials bring people together and provide a common language and framework for effective and collaborative work.

Here is what one ACE Interface Coach in Minnesota wrote after using the materials for several months: *“After the training I had a woman come up to me in tears and tell me that she had heard this material before, but not in this presentation style.  She said she had been to many therapists and life coaches.  But it wasn't until this presentation that she understood that there was nothing wrong with her, that she wasn't, in her word, BROKEN! Thanks to you for giving us the words to truly make a difference.”*

**ACE educators benefit in three ways: 1) every presenter is part of a cohort of ACE educators who co-present and provide feedback; 2) a hosting organization supports speakers in a learning community; 3) fidelity and quality of information is assured via updates and reviews by leading experts affiliated with ACE Interface.** Working together, ACE educators, host organizations and ACE Interface troubleshoot problems, support continuous improvement, and jump-start ACE initiatives. Dr. Robert Anda and Laura Porter developed the ACE Interface Master Trainer/Coach Program, in part, because we have seen well-meaning people provide wrong information, well-informed people provide information that evokes blame and shame, and well-organized coalitions become stalled-out because they didn’t have the right tool for rapid expansion. This product was designed to solve those problems and more.

**The program is structured with licensed presentation materials, a two-day training provided by Dr. Robert Anda and Laura Porter, references, answers to frequently asked questions and a process for effectively implementing a massive ACE education campaign that is based on person-to-person interaction.** Presentation materials are structured with a core set of slides plus modules that speakers can mix and match to suit audience interests and time available. The process rebuilds social networks, provides a common language and platform to improve health, and promotes *Self-Healing Communities* where people most affected by ACEs co-lead recovery and resilience promoting activities in synergy with ACE-informed systems and services. ACE Interface Master Trainers have a vital role in sparking a new social movement – one with the power to transform the future of the public’s health.

**The purpose of the two-day education event with Dr. Rob Anda and Laura Porter is to:**

1. **Increase knowledge and improve the skills** of participants related to the biological, health, and social impacts of Adverse Childhood Experience as well as the promise of prevention and collective action to enhance accommodation and resilience.
2. **Prepare participants to deliver presentations** that inspire, engage, and motivate powerful action by diverse audiences, and train other people to do the same.
3. **Lay the groundwork for a Community of Practice** among ACE Interface Master Trainer/Coaches that helps all Trainer/Coaches to continuously improve education and to realize important core values in the work, including the values of 1) transformational improvement and 2) respect for the wisdom of every human being.

**Getting started requires a sponsoring organization** that will hold the three-year license for use of ACE Interface materials, select the cohort of up to 25 people to become Master Trainer/Coaches, host the two-day training, oversee development of the Trainer/Coaches, and act as a liaison to and from ACE Interface. The cost of the ACE Interface Train the Master Trainer program is $60,000, which includes a three-year license for use of all materials ($32,000), plus on-site education for up to 25 individuals provided by Dr. Robert Anda, Laura Porter, and additional experts selected by ACE Interface ($28,000). Ongoing post-event consultation, troubleshooting, and updates are provided by ACE Interface as needed for effective implementation.

***Case Study: Minnesota***

Certified ACE Interface educators in Minnesota are called Community Resilience Coaches (CRCs). The first cohort of CRCs received their two-day training with Dr. Robert Anda and Laura Porter in February of 2013. Over 12,000 people learned about ACEs and Resilience from the CRCs in the first year of the initiative. Minnesota CRCs are training other speakers in the summer and fall of 2014, and their host organization (Minnesota Communities Caring for Children) is preparing for a second cohort of Community Resilience Coachesto receive the two-day ACE Interface training early in 2015.

A dozen steps – organized for success:

1. An informal group of individuals met for breakfast weekly to talk about application of ACE & Resilience science in Minnesota. That group considered the benefits of the ACE Interface Master Trainer Program, and decided to co-sponsor a group of 25 people for the program. The “Breakfast Group” included people from the public, non-profit, academic, primary care, and community sectors. Together they could reach people from many disciplines and communities.
2. The “Breakfast Group” agreed on a host for the work: Minnesota Communities Caring for Children (MCCC). MCCC agreed to collaborative leadership and fiscal sponsorship of the endeavor.
3. The Breakfast Group mapped the existing infrastructures for dissemination of ACE & Resilience science in Minnesota, using what they knew about coalitions, major public systems and initiatives, private interest in the science, and leaders in communities disproportionately affected by ACEs.
4. Mapping informed their fundraising efforts; and Breakfast Group members agreed to help raise funds for the program from a variety of sources. Ultimately, funding for the effort came from: United Way, private philanthropy, public agencies, higher education, and MCCC.
5. Network theory informed recruitment efforts – the greatest spread of knowledge would be gained by having the initial 25 people come from very different professional, social, and cultural circles. They developed an application form and widely circulated the application along with a description of the opportunity – taking care to personally reach all the systems and known leaders that surfaced in their mapping exercise. They sought people who were already credible to the audiences they would most likely work with – people who brought trusted relationships as a key asset into the work.
6. Breakfast Group members worked with MCCC to develop criteria and process for selecting the first cohort for the training. Criteria were based on characteristics of the individuals, the networks they were a part of or could reach to, and the sectors they came from or were credible with.
   1. Characteristics included: support trauma informed approach, demonstrated ability to teach adults and youth, experience working across multiple disciplines, commitment to communities of color, geography – grassroots connection, outcomes from the pre-assessment process.
   2. Networks included parenting education and care givers, Tribal communities, youth networks, family service collaborative groups, schools, early childhood, community coalitions, professional associations, and *Art of Hosting* (<http://www.artofhosting.org/>) experts.
   3. Sectors included: education, faith, state departments, child welfare, primary health care, public health, behavioral health, violence prevention, public safety, juvenile justice, homeless services, parents and caregivers, and other sectors as they emerged in the application and pre-assessment process.
7. Fifty-three (53) people applied to become Community Resilience Coaches! Every applicant had impressive experience, ability to reach to amazing audiences, and commitment to the task. Selection could not be made based on qualifications – since every applicant was qualified.

1. MCCC, with support from Breakfast Group members, selected and notified a group of 25 people who would collectively optimize reach into diverse audiences, and whose strengths were complementary and therefore conducive to making a strong and cohesive learning community. MCCC retained the final decision-making authority over cohort selection because, as the sponsoring organization, they would become responsible for the work of the CRCs over time. People who were not selected to be a part of the first cohort were notified that they would be considered for the second cohort training.
2. Twenty-five (25) people completed the two-day training event with Dr. Robert Anda and Laura Porter and celebrated the beginning of a new learning community dedicated to community resilience throughout Minnesota. This celebration was the beginning of an experiential process that led to certification as Community Resilience Coaches, and/or certification as speakers, trainers or content experts (see below).
3. The process toward certification included the following steps:
   1. Completion of the two-day education event with Dr. Anda and Laura Porter.
   2. Debrief and recommitment – in case people changed their minds about participation.
   3. Creation of a phone-based learning community with a monthly schedule.
   4. Commitment and fulfillment of two paired speaking engagements in the first 45 days post-training. Evaluation forms for these speaking engagements were provided by MCCC and were mailed to MCCC for review and feedback that would improve learning and improvement of everyone in the cohort.
   5. Commitment to 8 paired speaking engagements (some with facilitated dialogue and coaching) with evaluation and feedback over a 6 to 12-month period, plus participation in the learning community by phone and via scheduled retreats. (Participants suggested that another state or second cohort might consider adding a required video recording (via phones) of at least two presentations with peer review and suggestions for improvement.)
   6. Participation in coaching sessions with MCCC staff and stakeholders.
   7. Required participation in two additional learning retreats that focused on relationship, lessons learned, coaching skills with communities, and strategic networking.
   8. Determination of competency and mutual interest in next steps via a multi-modal assessment process and respectful consideration of the best fit for each individual in the Community Resilience movement in Minnesota.
4. Based on multiple factors including feedback received and what organically emerged, the certification was separated into four categories, as described in the table below. Individuals could be certified in none, one or up to all four categories.

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| **Presenters** | **Master Trainers** | **Community Resilience Coaches** | **Technical Experts** |
| These individuals limit their work to: inform their own work as well as present to audiences using only a short version of the ACE Interface presentation. | These individuals have shown that they have the ability to not only present this information at any level, but have the skills and abilities to train it to others and monitor their success. | These individuals are certified Presenters and Master Trainers, and have shown that they have the skills and abilities to facilitate safe, nurturing and supportive dialogue with the community about taking action on this information. They have expertise in trauma informed approaches, and most are masterful facilitators using Art of Hosting technologies. | These individuals may or may not be certified in some or all of the previous categories; however, they serve as technical experts in specific areas:  For example:  Historical Trauma,  Cultural Respect,  Public Education,  Art of Hosting,  Substance Use  Disorders,  Children’s Mental  Health, Domestic  Violence, FASD,  Early Childhood  Development,  Community  Organizing,  Strategic Planning, etc. |

1. The first cohort of ACE Interface certified Trainers and Coaches has provided education and coaching to presenters, and supported **the second cohort** of ACE Interface Master Trainer candidates. Exponential impacts are possible because of the dedication, expertise, relationships and skills of the people involved, and is supported by the ACE Interface materials and partnership.

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