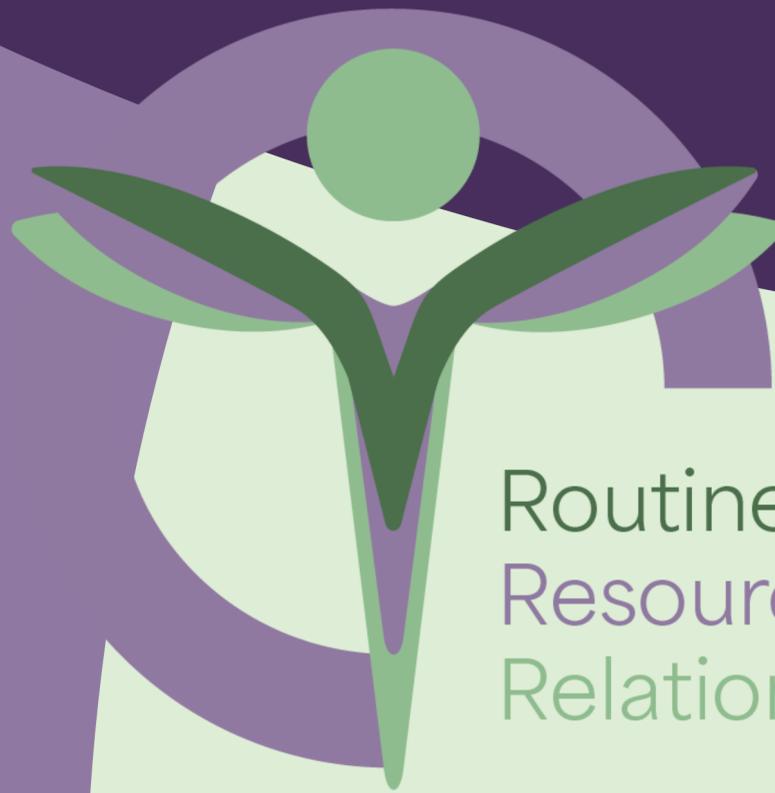


Cultivating Resilience and Flourishing

A Workbook



Routines
Resources
Relationships

Suzanne Tough, PhD



Cultivating Resilience and Flourishing: A Workbook V2.0 (c) 2025 by Suzanne Tough, PhD is licensed under CC BY-ND 4.0.
To view a copy of this license, visit <https://creativecommons.org/licenses/by-nd/4.0/>

Acknowledgments

Author

Suzanne Tough, PhD
Cumming School of Medicine, University of Calgary
Max Bell Burns Policy Fellow

Contributing Authors

Jessica-Lynn Walsh, MBCh MSc
Cumming School of Medicine, University of Calgary

Zahra Clayborne, PhD
Cumming School of Medicine, University of Calgary

Anjola Adeboye, BHSc
Cumming School of Medicine, University of Calgary

Sheila McDonald, PhD
Alberta Health Services
Cumming School of Medicine, University of Calgary

Branding, Layout & Creative Design

Adam Ford
Casual Design Studio
www.casualdesign.studio
casualdesignstudio@gmail.com

Illustrations

Eve Higgins
evemhiggins@outlook.com
www.emhiggins.ca

Access the workbook here:



Michael Ungar, PhD

Canada Research Chair in Child, Family and Community Resilience

Author of: *Change Your World: The Science of Resilience and the True Path to Success*

At a moment in our history when individuals and families are struggling to deal with the challenges of a changing economy, a housing crisis, loneliness, social injustice and a myriad of mental health problems, this guide to resilience and flourishing is very much needed. With its focus on both individual qualities and the many things we need from the world around us (like relationships), its message clearly reflects the advancing science of well-being which is helping us understand what we need to do well under stress.

What that science tells us is that we need to be both rugged individuals and well-resourced if we are going to not just survive adversity, but also thrive. This means we need grit and self-regulation in equal measure to community and opportunities to experience fair treatment. We need the chance to be our best selves and help others become theirs. While no single workbook could ever offer all the solutions for resilience, this one certainly takes a step towards providing some important information about how we can cope better with everyday stress, especially after exposure to traumatic events.

Resilience is always possible, but it needs both individual strengths and plenty of support from our families, communities and colleagues when facing life's big challenges. I hope the material in this workbook will serve as an important part of your journey to resilience and flourishing.

“This guide to resilience and flourishing is very much needed.”

Praise for The 3Rs

Kendall Quantz

Executive Director, Burns Memorial Fund

It is heartening to see how the work undertaken in the Connections First Policy Fellowship has inspired, contributed to, and continued on in so many important ways. One outcome is the ever-growing community of individuals and organizations promoting natural supports initiatives - work that aims to support individuals to rely on and contribute to a life-long network of supportive family, community and peer relationships. The importance of these connections is made clear throughout this excellent workbook that provides evidence-based, practical tools to help people along in their journey to well-being.

Congratulations to Dr. Suzanne Tough and her team on the publication of this wonderful resource and thank you for continuing to champion approaches that help people have belonging and connection to community.

Dr. Susan Graham, PhD, RPsych

Director, Owerko Centre for Neurodevelopment and Child Mental Health,
Alberta Children's Hospital Research Institute

Scientific Director, Azrieli Accelerator

Professor, Department of Psychology, Faculty of Arts, University of Calgary

The Owerko Centre at the University of Calgary is proud to support the All Our Families cohort study. As a research hub dedicated to neurodevelopment and child mental health, we believe that connecting with our community is essential for advancing impactful research. This workbook from Dr. Suzanne Tough marks a significant milestone in the ongoing commitment to the community and translating research into practical resources to empower parents, caregivers and the community. The data from All Our Families has fueled numerous studies, enriching our collective understanding and enhancing our ability to serve the community effectively. This resource helps make research accessible and actionable, offering practical insights and guidance that can make a meaningful difference in the lives of parents and caregivers.

At the Owerko Centre, we remain committed to fostering an environment where knowledge is created, resources are readily available, and we empower families to navigate life's challenges with confidence. We believe this workbook will be an invaluable tool for families, service providers and community organization in efforts to improve well-being.

Nancy Reynolds, BScOT

Max Bell/Burns Memorial Fund Policy Fellow and former CEO, The Alberta Centre for Child Family Community Research

&

Liz O'Neill

Recently retired Executive Director, Boys and Girls Clubs Big Brothers Big Sisters Edmonton and Area

There's something for everyone to learn and think about related to their own lives in this workbook. To help ourselves and to support children, families and communities to be resilient and flourish, the 3Rs Routines, Resources, Relationships, are as essential to understand as the traditional 3Rs of reading, writing, 'rithmetic.

Solidly underpinned by scientific evidence, this workbook is a tool that brings together these new 3R concepts. It offers practical ideas and strategies that can be applied in everyday life to build and strengthen resiliency and social connection. We encourage professionals and service providers to use this workbook to enhance practice and inform planning. Those utilizing the information contained in the workbook will develop greater confidence and competence as they strive to support resiliency and improved well-being in those they serve.

Applying The 3Rs Routines, Resources, Relationships can help us all thrive while also supporting the building of stronger, more connected communities.

“There’s something for everyone to learn and think about related to their own lives in this workbook.”

Ann Crabtree, MD

Clinical Associate Professor, Cumming School of Medicine, University of Calgary

These strategies “Routines, Resources and Relationships” sometimes called other things in other places, are what is needed to deal with any social, mental or physical health challenge. Where strategy is not immediately apparent, this creates a simple clear starting point. In my 30 years of helping people, and teaching physicians, to reduce dependence on opioids and benzodiazepine drugs, I wish I had had this workbook sooner.

About this workbook



Meet Dr. Tough

Suzanne Tough (PhD) is a Professor with the Departments of Pediatrics and Community Health Sciences in the Cumming School of Medicine at the University of Calgary, and Faculty for the Max Bell Public Policy Institute.

As a policy fellow for the Max Bell Foundation/Burns Memorial Fund, Dr. Tough researched and developed strategies to improve outcomes for children and families through investing in community. She is well known for her work on 'Social Snacking' and social support.

Dr. Tough is undertaking research to better understand the intersection between adversity, resilience and flourishing.

More About Dr. Tough

Information about Dr. Tough and her work can be found at the following websites:

connectionsfirst.ca

profiles.ucalgary.ca/suzanne-tough

ucalgary.ca/allourfamilies

About this workbook

Who this workbook is intended for: If you have picked up this book, then this book is for you. If this book has landed in your lap, then there must be something for you. **This book is for anyone interested in practicing strategies that promote resilience, foster flourishing and support well-being.**

What this book is: This workbook is a tool to explore, reflect and consider aspects of your daily life that can support your resilience, flourishing and well-being.

What this book is not: This book is not a replacement for counseling or clinical support.

What this book is based on: This book is based on the authors' cumulative research experience of over three decades focused on understanding risk and protective factors for human development from inception to midlife. These findings have resulted in over 300+ peer-reviewed publications, the results of which have been combined with literature reviews, expert feedback, and other evidence to create this workbook.

The expertise of the authors: The authors have academic training in psychology, physiology, epidemiology, biostatistics, psychiatric epidemiology, population and public health, clinical medicine, knowledge translation and mobilization, evidence to practice and policy, and life course research in maternal health, child development, mental health, adverse childhood experiences, resilience, and social determinants of health.

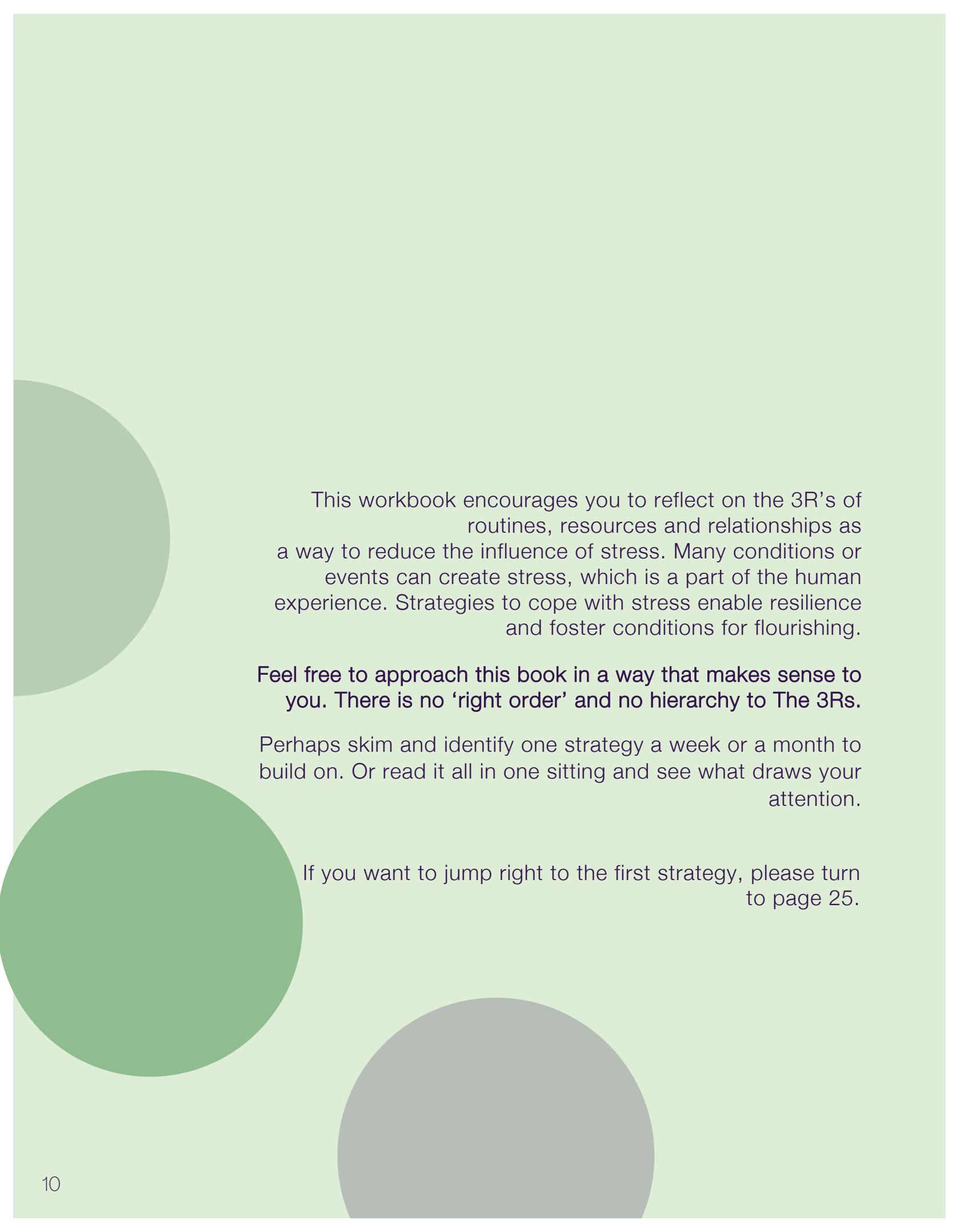
Authors' representation and reflexivity: The authors represent a diverse group of female researchers and trainees at different career stages and from different generations, and whose identities include bi-racial, new-Canadian, Canadian-born, single, married, divorced, mother, grandmother, aunt, sister, well-travelled, homebodies, introverted, and extroverted. The authors also comprise those who have experienced discrimination (including racism, ageism, and sexism), poverty, and mental and physical health issues.

For more information, please visit: <https://ucalgary.ca/allourfamilies> or <https://www.connectionsfirst.ca>.

Table of contents

Acknowledgments	2
Praise for The 3Rs	3
About this workbook	6
Overview of this workbook	11
Introduction	12
Stress and your health	14
The Concepts – Resilience and flourishing	21
The 3Rs – Considerations for well-being	25
Routines	27
Activity	30
Resources	34
Activity	36
Relationships	38
Close relationships	39
Activity #1	41
Activity #2	42
Additional thought exercise	44
Informal relationships	46
Activity	48

The 3Rs – Strategies in action	50
Fatima	51
Albert and Jeff	52
Diane	54
Amina	58
Emotional currency	60
In summary	62
A message from Suzanne Tough	63
Dedication	64
About the authors	66
Selected resources	68
Appendices	70
Appendix 1 – Word search	71
Appendix 2 – Ideas for The 3Rs stories	72
Appendix 3 – The synergy of The 3Rs	74
Appendix 4 – Social snacking	76
Appendix 5 – Potential outcomes	78
Appendix 6 – Word search answer key	79
References	80

The page features a light green background with three large, overlapping circles on the left side. The top circle is a medium green, the middle one is a darker green, and the bottom one is a greyish-green. The text is centered on the right side of the page.

This workbook encourages you to reflect on the 3R's of routines, resources and relationships as a way to reduce the influence of stress. Many conditions or events can create stress, which is a part of the human experience. Strategies to cope with stress enable resilience and foster conditions for flourishing.

Feel free to approach this book in a way that makes sense to you. There is no 'right order' and no hierarchy to The 3Rs.

Perhaps skim and identify one strategy a week or a month to build on. Or read it all in one sitting and see what draws your attention.

If you want to jump right to the first strategy, please turn to page 25.

Cultivating Resilience and Flourishing through the 3Rs; Routines, Resources and Relationships

The experience of resilience and flourishing is more likely when we have strategies to manage the unexpected events and stresses of daily living. This workbook begins with a summary of the stress response, what stress is, how it influences our bodies and health, and what happens if it becomes too much. We will show you how the 3Rs work. We will discuss how and why these strategies work. We discuss what resilience and flourishing are, and why they are important for our health and well-being. Next, we introduce three strategies to start you on your journey to well-being: Routines, Resources and Relationships (close and informal). We then share stories to demonstrate what these strategies in action can look like.

This workbook is based on decades of evidence gathered from the authors' research experiences. The 3Rs strategies come from findings on stress and adversity,¹⁻¹² child

development,¹³⁻²² and maternal and caregiver health.²³⁻³² Through this work, we have been able to highlight critical components of family distress and coping mechanisms.^{1,2,4,8,10,16,17,21,23,26,27,29,31,33-35} We have investigated contemporary challenges such as time crunch and partnership tension, and the buffering effect of community resources. Evidence for this workbook was gathered from the Max Bell Foundation Burns Memorial Fund Connections First policy fellowship that identified ways to promote well-being and social connections in communities.³⁶⁻⁴⁰ Dr. Tough and her team have studied flourishing and ways to support positive health in youth and their caregivers despite adversity,^{4,7-9,41-44} including the 2013 Calgary Flood² and the COVID-19 pandemic.⁴⁵

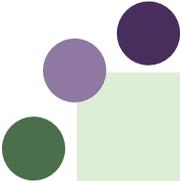
For more information on the All Our Families Study and the Connections First Policy Fellowship, please see page 68.

www.connectionsfirst.ca/a-guide-to-building-naturally-supportive-communities

www.ucalgary.ca/allourfamilies/about-aof

Hint: To get started, consider picking something where you are likely to experience success.

Everyone experiences stress and challenges in their daily lives. The science underlying the 3R strategies enable you to manage the influence of stress on your mind and body to enable you to make good decisions in difficult times. In turn, these strategies nurture the ongoing development of your own personal well-being.



What the words mean:

Well-being is a feeling of health and contentment.

Resilience is the ability to overcome stress and adversity.

Flourishing is a state of complete well-being, which is often associated with a sense of purpose and belonging.

There is overlap in these concepts.

Life includes joy, learning, new experiences, challenges, and unexpected events. These experiences shape us and are inherent to human development. Who we become reflects, in part, how we respond to, learn from, and make meaning of these experiences.

The approaches in this workbook help support people's well-being while experiencing new and challenging circumstances.

There are numerous evidence-based lifestyle approaches to improve health, including diet, exercise, and sleep - this workbook is not that. This workbook will help you create your unique way to well-being and flourishing.



Understanding the role of stress in your well-being

Approaches that improve well-being help us manage our stress responses; this includes reducing inflammation in our bodies, enhancing our ability to make good decisions, improving memory and thinking, and positively supporting our behavior and ability to adapt.

Let's begin with what stress is and how it can influence our health.

What is stress?

Stress is our body's primitive, automatic response that prepares the body for "fight or flight" from perceived attack, harm, or threat. This response has been essential for human survival. To prepare for "fight or flight", our body releases the hormone adrenaline (epinephrine), which increases our inflammatory response resulting in activation of

our immune response and nerve firing.⁴⁶ These processes cause other chemicals and hormones to be released into our bodies, including cortisol. Adrenaline and cortisol are stress hormones.⁴⁷ Cortisol, in particular, slows functions in our body that are not essential to our stress response, and increases other functions necessary to maintain our response.⁴⁸ For example, cortisol prevents the body from storing sugar and instead increases the amount of sugar in our blood to enable our brains and muscles to be on 'high alert' in case we need to make rapid decisions or movements.⁴⁸

Stress

a physical, chemical, or emotional factor that causes bodily or mental tension and may be a factor in disease causation

- Merriam Webster Dictionary

What are the different types of stress?

Some stress is healthy and an important part of development, learning and experiencing life.

Daily hassles are everyday stressors that cause brief increases in heart rate with mild, short-term release of stress hormones; examples include traffic, getting our children to school on time, or being repeatedly interrupted on a phone call.

Common stressors cause larger and longer releases of stress hormones that can occur from excitement, change or challenges,⁴⁹ such as starting a new job, moving to a new home, writing an exam, or having a child. Achieving milestones, such as graduating from school and getting married, are also common stressors.

Major stressors trigger the body's "fight or flight" responses from longer-lasting and more severe experiences,⁴⁹ such as the death of a family member, serious illness or injury, or a natural disaster.

Prolonged and/or frequent exposure to stressors can lead to poor mental and physical health.⁴⁹ Too much activation of the "fight or flight" response can make it difficult to calm our minds and make good decisions.

Stress and your health

When does stress become too much?

Prolonged and frequent states of extreme stress are sometimes called cumulative or toxic stress, which can negatively influence our brain and health and increases the risk for a range of illnesses, such as poor mental health, inflammatory disease(s), heart attack, blood clots, and stroke.⁵⁰ When the stress response stays on high alert too long, and we create a state of prolonged inflammation, we increase the chance of chronic illness.⁵¹

Over-activation and build-up of stress hormones and inflammation are linked to a number of disorders and 'wear-and-tear' of the body and mind.^{46,52} The brain changes in response to patterned, repetitive activity. The more a pathway in our brain is used, the more it becomes established, which can result in changes in our brains and bodies; these changes can be positive or negative for our health.⁵³ **Sometimes, managing the stress response requires us to develop practices that change these established pathways.**

A quick tip:

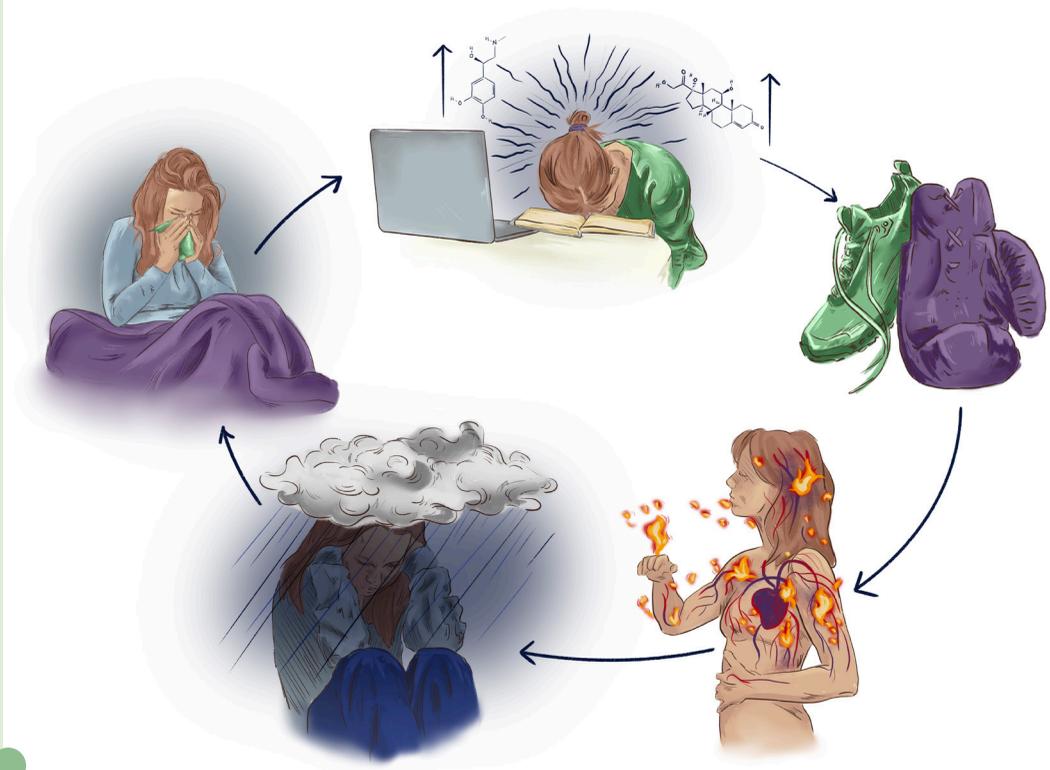
Taking just 2-minutes to create a positive emotion helps decrease the feeling of stress and worry.¹²⁴ We each know what we need to do to generate this feeling.

For example:

- pet the dog
- take a deep breath
- take a coffee/tea break
- look out at the garden
- stand in 'superman / person' pose

What is something you can do for 2-minutes to create a positive feeling?

When stress gets under the skin



How can we manage stress?

Stress is a part of the human condition. Strategies that help us cope with stress, such as the 3Rs included in this workbook, allow us to make good decisions in difficult times, learn from events and experiences, and reduce the chances of poor mental and physical health. The opportunity exists to have a number of techniques that help us function well when things are difficult.

Activities of daily living, and all it includes throughout our lives, provide an opportunity to manage stress and find ways to experience well-being.

When we participate in activities that encourage our well-being (e.g., meeting a friend, listening to music, reading, walking, meditating or prayer before bed), we feel good. These positive feelings come from the release of hormones that help us to feel happy and connected, improve our mood, decrease pain, and give us a sense of reward.

See Appendix 1 on page 71 for a fun exercise to learn more about small things you can do to help break the cycle of stress.

When managed stress promotes well-being



Did you know?

Oxytocin: Helps with bonding and connection, and has anti-stress effects.

Serotonin: Helps with feeling happy, enjoying relationships, and improving our mood.

Dopamine: Helps with making relationships feel rewarding and drives us to overcome challenges.

Endorphins: Help reduce pain and drives a need for connection during challenging times.

The image features an abstract graphic design in the upper half, consisting of several overlapping, curved shapes in shades of green and purple. The shapes are layered, creating a sense of depth and movement. The colors are muted and earthy. Below the graphic, there is a quote in a green, italicized font, followed by the author's name in a smaller, black font.

*“Tell me, what is it you plan to do with
your one wild and precious life?”*

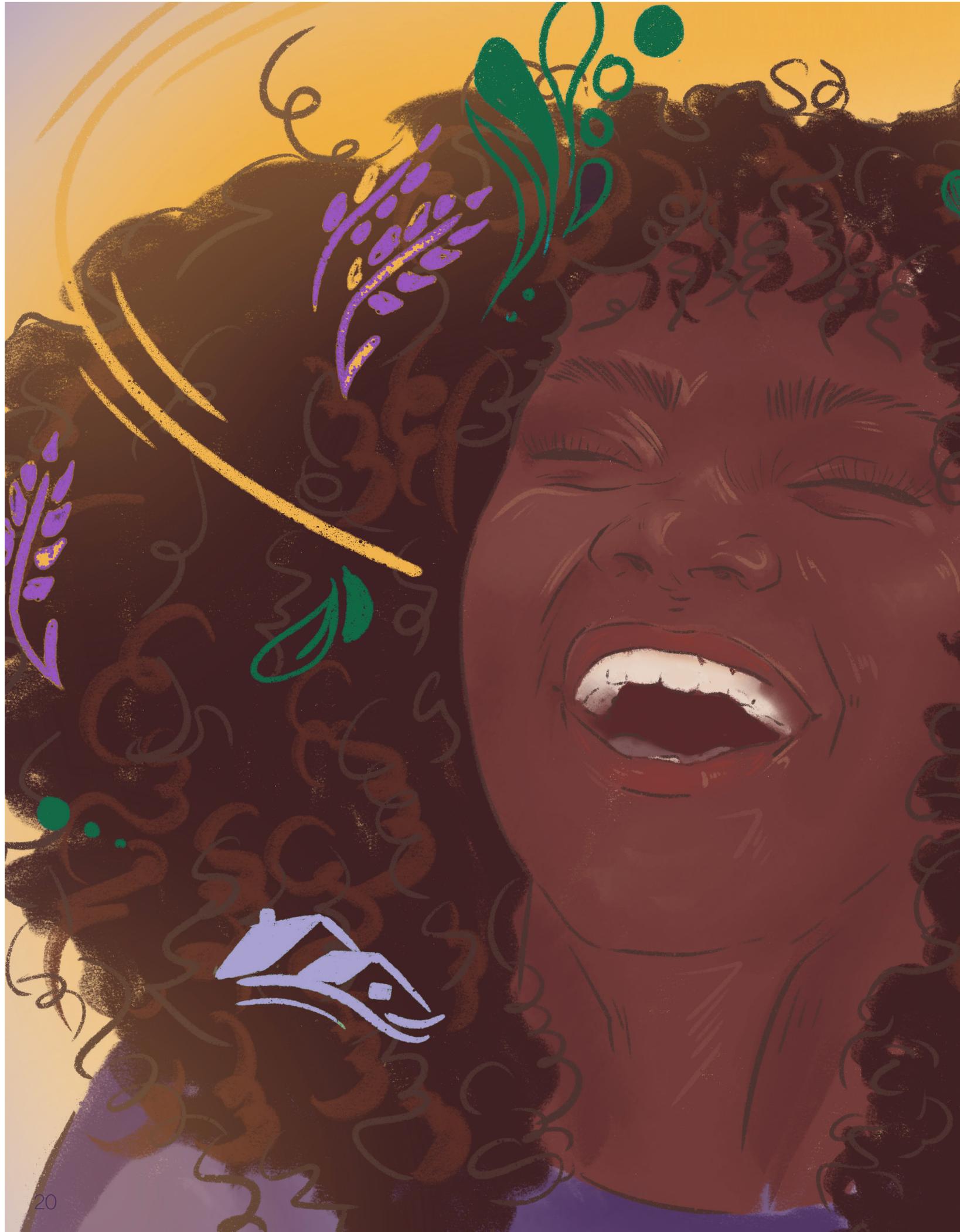
- Mary Oliver

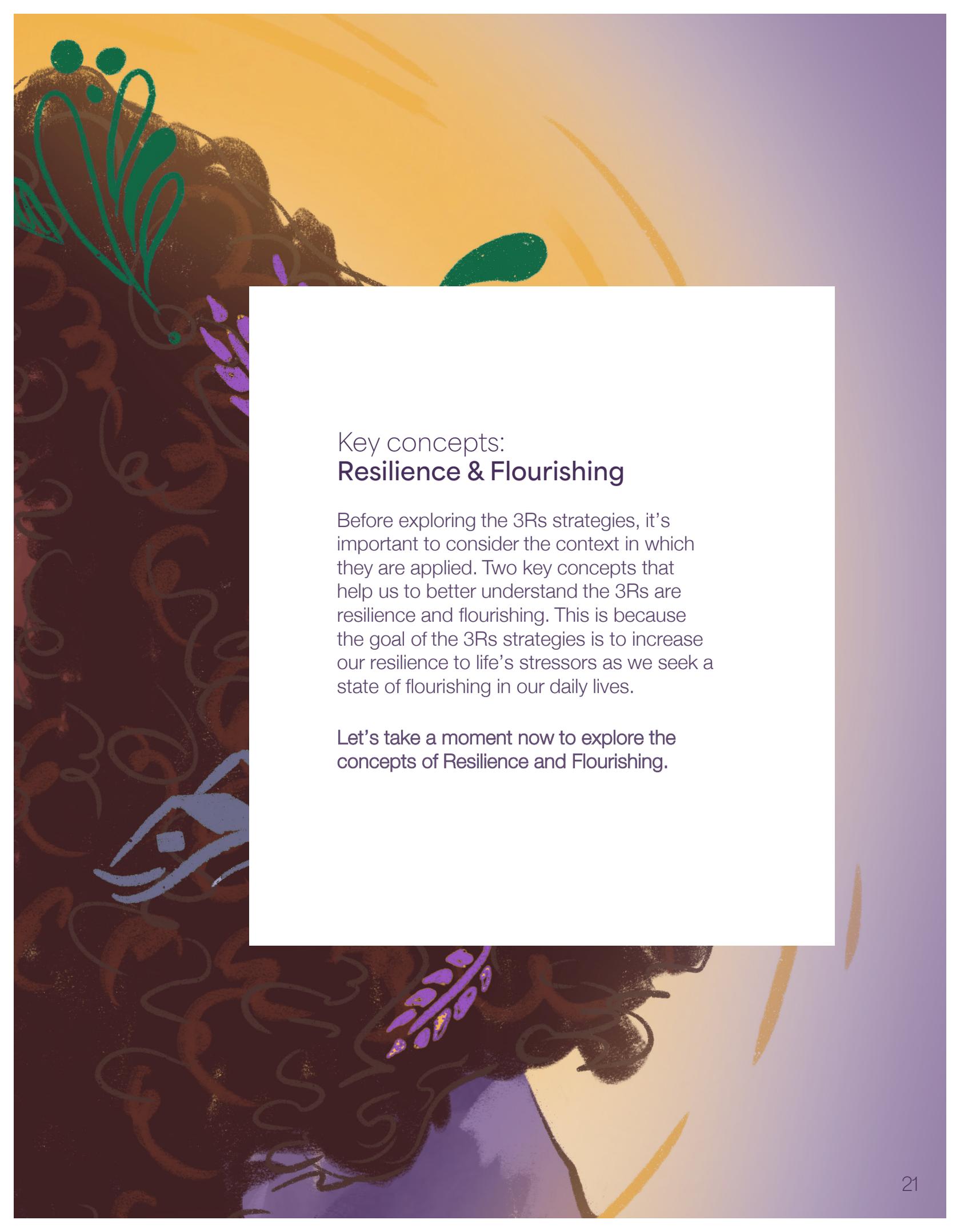
The 3Rs strategies presented in this workbook builds on our strengths and our existing routines, resources, and relationships.

Life happens, and there are factors beyond our control that contribute to our stress. This material is offered to empower you to inspired action to change what you can to protect your well-being in daily life and in difficult times. This workbook offers evidence-based strategies in the areas of routines, resources and relationships that promote resilience.

The 3Rs can be embedded into our daily lives and may even help with the challenge of time shortage in a busy world.







Key concepts:
Resilience & Flourishing

Before exploring the 3Rs strategies, it's important to consider the context in which they are applied. Two key concepts that help us to better understand the 3Rs are resilience and flourishing. This is because the goal of the 3Rs strategies is to increase our resilience to life's stressors as we seek a state of flourishing in our daily lives.

Let's take a moment now to explore the concepts of Resilience and Flourishing.

What is resilience?

Resilience refers to our ability to overcome stress and adversity (i.e., distress tolerance).⁵⁴

Actions that build resilience can help us to meet our basic needs (including food, water, shelter, and safety),⁵⁵ cope with unexpected events, and build life skills and connection.

When we have strategies to address daily life experiences, we can better shift our brains and bodies out of a survival “fight or flight” response.^{56,57} This shift leads to the release of hormones and neurochemicals that block the negative effects of stress hormones and make healthy behaviours more likely.⁵⁸ When our bodies and minds have an appropriate stress response, we are less likely to use ‘fight or flight’ and we are better able to use the executive function part.

When we develop habits that promote resilience, we are better able to deal with unexpected events that occur in our daily lives, and ultimately, flourish.

What is flourishing?

Flourishing is defined as a state of physical, mental, and social well-being.⁵⁹

We are more likely to experience this type of well-being when we are safe, physically and emotionally supported, experience connection, and have opportunities to develop our potential.³⁸

Flourishing is highly contextual and personal, meaning we all have different ideas of what it means to flourish. For example, you may have enough material goods and resources and not flourish, or you may have daily chronic pain and flourish. We can take action and create environments to improve our potential to flourish.⁶⁰ Indeed, flourishing requires our active, personal commitment. Through actions and environments that contribute to flourishing, we experience happiness, esteem, agency, sense of belonging, sense of purpose, and feelings of accomplishment.^{61,62} Physiologically, these feelings and perceptions increase the release of hormones and neurochemicals that make us feel good while quieting our body's stress response.^{58,63} Therefore, those who experience and practice physical, mental, and social well-being have stress response systems that are less easily activated.

“What you do makes a difference, and you have to decide what kind of difference you want to make.”

- Jane Goodall



The 3Rs are

Routines

Resources

Relationships

“Your little choices become habits that affect the bigger decisions you make in life.”

- Elizabeth George

What are The 3Rs?

Three strategies that protect mental health, build resilience and promote flourishing are **Routines, Resources, and Relationships** – both close and informal. We call these the 3Rs and they are explained over the next few pages.

These strategies provide an excellent starting place to identify ways to improve well-being in today's world. Those who have supportive routines, resources and relationships can decrease the impact of stress, and even adversity.

Use the worksheets below to identify your strengths and uncover new approaches to build your well-being.

Routines: What are they?

Routines are actions or thought processes that we regularly follow and repeat. They are frequently used, sometimes daily, with common tasks or duties in any place.⁶⁴ These activities or thoughts differ depending on our work, home life, culture, interests, hobbies and lifestyles.

Routines, also known as habits, maintain structure and organization. Routines are important because they help us use time efficiently and reduce the need to make a ‘new decision’ around activities of daily living that can be simplified.

Rituals are routines that have a symbolic meaning and a sense of purpose. Rituals recognize important milestones and accomplishments. **Both routines and rituals help in skill development, establish traditions, and create emotional bonds.**

Examples of routines

- Having the same foods for breakfast
- Dog walking at the same time each day
- Using the same wind-down activities before bed each night (*e.g., reading, meditation, reducing the use of screens, praying*)
- Deciding which events you will celebrate together with family and friends, such as birthdays or achievements

Did you know?

Routines have a pattern – a cue, an action, and a reward.

The reward is, generally, that we feel better and a task is accomplished. For example, many of us try to decrease screen time before bed to help improve the quality of our sleep.

The cue could be the time – we shut off all screens by 9 p.m.

The action would be ensuring we have set our alarms, checked our emails, saved our work and shut all computers, phones, tablets, etc. off by 9 p.m. We then walk, take a shower, write in our journal, or read a book before sleep.

The reward would be that we fall asleep easily and wake up feeling refreshed the next day.

Why does this work?

- Routines free up energy and ‘brain power’ for more important decisions.⁶⁵
- Routines help organize our lives and reduce decision fatigue,⁶⁶ especially when we are experiencing time-crunch stress.
- Decision fatigue can result in lessened thinking, memory, and behaviour.
- Decision fatigue also increases the chances of reactive decision-making (i.e., thinking too fast and not slowing down enough to consider our frame of mind) and making decisions we later regret.⁶⁶
- Good routines are protective for positive mental health, especially in challenging times.^{67,68}
- Rituals and celebrations can bring us together for a shared experience of joy or sorrow and can provide support and build connections.

Lived
experience

Healthy girl walks - A Recently Graduated Masters Student

A routine that does wonders for my mental health is what I (and some sectors of the internet) have dubbed, “healthy girl walks”. These are long walks (at least 45 minutes) that I go on every day. I do not do it at a consistent time, but it is a habit for me to do it when I am particularly stuck on a challenge, am transitioning between locations (walking between meetings), need some time to think, or am about to go to bed and need to wind down. I have been doing this consistently for about a year and a half - barring any bad weather. It has been amazing for my mental health.

The importance of commitment

Change requires commitment – even taking enough time to consider a new routine is a commitment to oneself and a better future. When we change a routine or habit, we may experience resistance from those around us. This is common and often relates to how others have become familiar with what they already know. The mind prefers familiarity – so change creates new feelings.

What to do? Awareness and communication are a good place to start. As others see us feel better with the adoption of new routines, life can settle. If the routine involves you and others, there can be a ‘ramp up’ stage until a new normal and new skills are established. Stay the course as you adapt, be easy on yourself and others, and see it as good progress!

Activity – Routines

Brainstorming: Use the space below each question to brainstorm your ideas.

Are there activities that I do every day or frequently? What are some of the more common ones?

Can I think of a routine I want to create? What is the cue? The action? What would be the reward? *E.g., I always put my cell phone in the same place when I come home so I don't spend time looking for it.*

What are some routines that would enhance or simplify my life?

What celebration or tradition would I like to protect? Is there a tradition I could modify, give up or share with someone else so I feel less pressured?

Am I time crunched? Do I have some routines or rituals that no longer serve me? Can I let go of some routines? Can I modify some of the rituals to meet my current needs?

Activity – Routines

How will I do this? Use these questions to think about what you do currently, and how you can build on these activities.

How can I develop activities that I do every day or frequently into a routine to make one less decision today?

Routines can be built on existing habits. Do I have existing habits I can add to, or routine stack⁶⁹? *E.g., If I am forgetful about taking my vitamins, can I add that as something I do before brushing my teeth?*

What traditions or rituals hold meaning that I will protect or allocate time for? How will I protect this time? *E.g., I can share the responsibility of the ritual or tradition with someone.*

What strategies will I use to incorporate these routines? *E.g., set a timer on my phone as a cue.*

Activity – Routines

My routines: Using your thoughts above, what would you like your average day to look like?

Morning:

E.g., I will only look at my work emails after I exercise and eat my breakfast.

Lunch time:

E.g., After I eat my lunch, I will go for a ten-minute walk.

Afternoon:

E.g., I will pick up my child from school and drop them off at their sports club Tuesday and Thursday afternoons.

Dinner time:

E.g., Our family leaves our phones in our bedrooms during dinner time and we each take turns sharing something good that happened in our day.

Evening:

E.g., After tucking my kids into bed, I lay out the clothes I will wear tomorrow.

Bedtime:

E.g., I shut all screens off by 9:30 p.m. and start my wind-down of brushing my teeth, setting my alarm and reading a book.



“We can make ourselves more resilient by making the world around us supportive.”

- Dr. Michael Ungar

Resources: What are they?

Resources in this workbook refer to our communities and other places where we spend our time.

Communities can refer to the places where we live, but also include groups of people who share similar interests, culture, faith, employment or values.⁷⁰ Examples of communities include walking or hiking groups, online gaming groups, book clubs, music groups, school councils, yoga groups, craft/art group activities, and neighbourhoods.

In addition to these active or structural resources, communities also consist of "third places", or surroundings that differ from our home environments and workplaces. Third places are locations where we can meet our needs for companionship and emotional support, and include cafés, libraries, parks, gyms, green spaces, community centres and faith-based settings.⁷¹ Resources also include opportunities, events and places to go to that allow us to build knowledge and skills, exercise, participate in improvement and civic engagement projects, volunteer, connect, and help others.

When we engage with places that include nature, we prevent or reduce stress from the attention-related weariness that develops through everyday life.⁷²

Why this works?

- With sufficient resources, we are less likely to be over-secreting stress hormones and are able to use our brain and energy for more complex tasks.^{56,57}
- Adequate resources and support help us meet our needs and feel safe in our communities and environments.^{56,57}
- Participating in activities can enable skill development and become a way for us to meet new people, learn and connect.
- Engaging with local resources, such as greeting our neighbor or participating in a local event, builds knowledge about our environment and increases our sense of community and sense of belonging. This sense of belonging creates a feeling of connection and purpose and increases the release of ‘feel good’ hormones.
- When we are focused on something else, even briefly, we cannot focus on our own concerns. This reduces feelings of stress, even for a short time.
- Activities that bring us together on a common issue increases the sense of empowerment and connection and the release of oxytocin, a ‘feel good’ hormone.

Lived
experience

Examples of resources:

- Community centres
- Libraries
- Museums
- Childcare
- Parks
- Music
- Nature
- Free internet access
- Special interest groups
- Gathering spaces such as cafes, and public spaces

Our shared spaces provide a sense of community - Early-career communications support staff

I am fortunate to live next to some amazing paths in Calgary along the reservoir. As I follow a routine with running and walking, I see some of the same people walking the path every day and it gives me a sense of community.

Activity – Resources

Brainstorm: Use the space below each question to brainstorm some of your ideas.

What does community mean to me?

What communities am I currently a part of?

How does participating in my community/communities make me feel?

What are some examples of third spaces that are close to where I live or where I spend my time?

Are there communities that I have heard of that I want to be a part of?

Activity – Resources

How will I do this? Use these questions to think about what you do currently, and how you can build on these activities.

Am I aware of third spaces in my communities? If not, what can I do to become aware of them?

Have I read my community newsletter or heard of community events, get-togethers, fundraisers, volunteering, etc.? Is it a good time for me to participate or volunteer?

Do I and my family have places to go in our community/communities that provide free and comfortable spaces? If not, is there community leadership or representatives that we can connect with to learn more about these spaces? *E.g., community centres, schools, local shops or cafés.*

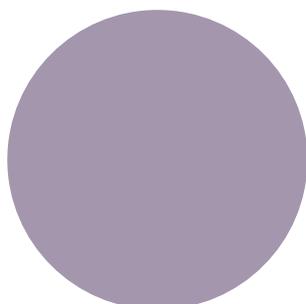
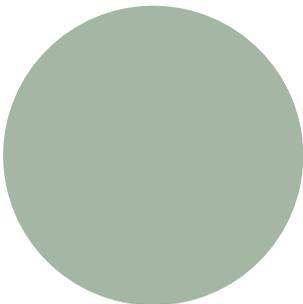
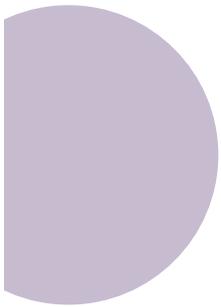
Do I feel welcome enough to participate in my community or go to third places? Is there another community that I can join where I would feel welcome and safe, and would enjoy participating?

What is one small thing that I can do once a week or once a month to learn more about what my community/communities offer?

Close and informal relationships

Relationships consist of both close and informal connections, and are a basic human need.⁷³ Connections can be intimate or casual, and daily or less frequent.

All forms of relationships can contribute to resilience and help us flourish.⁷⁴ **We will explore both close and informal relationships, first beginning with close relationships.**



Close relationships: What are they?

Close relationships include our family, friends and romantic partners. These are the individuals and groups we problem-solve with and celebrate accomplishments with.

Close relationships can provide us with emotional support where we share concerns, seek advice, find comfort; tangible support where we have help with tasks; and interaction support where we have someone to have fun or share experiences with.^{26,75} The quality of these relationships matter and higher-quality close relationships (e.g., responsive, give-and-take, trustworthy, hopeful, compassionate, respectful) provide us with health, mental, and emotional benefits.⁷⁶

Close relationships are fundamental to human society and involve the exchange of knowledge and feelings, and the sharing of our mind and hearts. These relationships are often reciprocal, develop over time, and bring a sense of meaning to our life as we share good times and bad times. All relationships benefit from acceptance and tolerance, as well as seeing the intrinsic worth of each person.

Hint

Build a positive relationship through “TAC”:

Time

+

Attention

↓

Connection

How to get more support out of our relationships

People are often eager to help, but they may not know what we need. Reach out and ask for help; be specific for the type of support we need; branch out and add more of the type of support we need to our close relationship circle.⁸²

Why this works?

- When we engage in close relationships, we boost the delivery of feel-good hormones in our brain and body, such as oxytocin, dopamine, endorphins, and serotonin.^{58,63,77-79}
- These hormones and neurochemicals reduce inflammation, decrease pain, reduce stress hormone levels and inhibit our body's "fight or flight" response.^{58,63}
- These hormones also promote a sense of trustworthiness, belonging, and positive social behaviours, which are essential for building relationships.^{77,78,80}
 - More frequent release of these hormones from relationships provides greater health benefits and builds well-being.⁸¹
 - We need different types of support from our close relationships in different situations to help us develop skills, cope, and strengthen self-esteem.⁸²

Quick tip

There are many resources to help us learn how to have a difficult conversation. Sometimes work places have resources to help in this area, and the skills work elsewhere too! We can also role-play the difficult conversation with someone we trust to practice.

Examples of close relationships

- Immediate or extended family
- Friends and/or those with shared interests
- Partners
- Found family (those without any relation to us that support and care for us the same way a family member would)

Activity #1 – Close relationships

Brainstorming: Use the space below each question to brainstorm some of your ideas.

Who do I turn to when celebrating an accomplishment?

Who do I turn to when experiencing a challenge?

What do I notice about 'who I turn to'?

What can I do to prioritize my most important relationships?

(clue; connection= time + attention)

Is there something different I would like to see in my close relationships? If so, what will I try to achieve this? *E.g., how will I approach it, what will I change?*

Do I need or want more emotional, tangible or interactive support? If so, what steps can I take to acquire this support?

Activity #2 – Close relationships

How will I do this? Use these questions to think about what you do currently, and how you can build on these activities.

What can I do to prioritize my most important relationships?

What would I like to see in my close relationships? *E.g., time, activity, behaviour, or conversation?*

What will I try to enhance the type of support I need in my close relationships? *E.g., how will I talk about it?*

What approaches will help to avoid defensiveness in conversations in my close relationship?

Lived
experience

Visits with the neighbours - Mid career professional with two youth at home

We really enjoy connecting with our neighbours. We have a few elderly neighbours that we love to visit. We pop by occasionally with a home-cooked meal or a cupcake and it brings so much joy to them and to us!

Lived
experience

Software strategy - Graduate student with caregiver responsibilities at home

As someone who likes staying busy, I find that sometimes I am absentminded with my relationships. One strategy I have started using is my alarms or habit-tracking software to remind myself to reach out to my peers.

I have a long-distance friend with whom I call once a week. We call when doing household chores (folding laundry, meal-prepping, etc.) and it helps us keep up with the demands of daily life while staying in touch with each other.

Partnership tension

Partnership tension can arise when pressures on family and relationships increase, when differences in opinion are hard to resolve or when unforeseen stresses emerge, such as unemployment or illness. Partnership tension is a barrier to well-being because it separates us from those we care about and reduces the likelihood of thoughtful conversation and good decision-making. When lives are too busy, communication between people can decrease or become focused on daily tasks and issues, and tensions can arise.

Take a moment to reflect on tension you may have in an important relationship. Consider asking your partner if they have any tensions they would like to explore. If you are interested in talking about what really matters, consider creating a new routine of booking regular time together when you are refreshed. Even 15 minutes of routine conversation can enhance a relationship.

Remember TAC from page 39.

Lived
experience

Prioritized family time - Early career professional with some responsibilities for a sibling with developmental challenges

I recently moved out on my own, and although it isn't my first time doing so, it is still a big adjustment. To make things easier, I make sure to schedule in some family interaction every day. Whether it's calling my Mom on the phone or dropping by for a quick chat, it still makes a huge difference for my well-being.

When you live by yourself, it's easy to neglect relationships and feel lonely. Making sure I prioritize some family time every day helps so much with loneliness and isolation.

Additional thought exercise

Many experts have provided recommendations on things we can do help with these tensions:

- Can I reflect on what I may have done to contribute to these tensions? Is there something that I can do to help?^{84,85}
- Am I able to express my needs to my partner in an open and kind way?^{84,85}
- Can we find a way to expose the tension, e.g., write it down, talk about it, walk together?
- Am I able to set and pursue goals together with my partner?⁸⁶
- Am I still prioritizing my relationship? If not, why not? What steps are needed to ensure the best possible outcomes for me and my partner?⁸⁵

For those seeking more specific resources to enhance an intimate relationship, please see the Gottman Institute at: <https://www.gottman.com/>

Ways to bring relief in a difficult time:

- Find a moment to relive some fond times and memories my partner and I had.⁸⁵
- Find a moment to do something fun with my partner.⁸⁵
- Focus on the friendship and remind myself of something good my partner did recently.⁸⁴
- Think about what I am grateful for in my relationship.
- What is one thing I can try the next time my partner and I experience any tension?

Lived
experience

Getting things done

- Late career health care provider

I used to feel anxious and guilty about leaving the family to manage and organize meals, etc. when I was working long shifts. I had to remind myself that my partner is a capable adult and can (and should!) be responsible for the day-to-day duties of a family when I'm not around.

Things don't always get done the way I want them to, but they're done.

The 3Rs – Informal relationships

What are informal relationships?

Informal relationships include connections with neighbours, community groups, interest groups, local businesses and mentorship. Participating in brief, positive interactions, such as those with a coffee barista at the local café or a fellow commuter on public transit, are an important part of our social diet as they help us feel happier.^{87,88} These types of relationships are fundamental to human society and, just like close relationships, involve the exchange of knowledge and feelings. Informal relationships often involve shared experiences and build a sense of connection, such as watching a sporting event, receiving help from a salesclerk, or lining up at a food truck. Informal relationships at any level benefit from acceptance and tolerance, as well as seeing the intrinsic worth of each person. We demonstrate respect when we have regard for the feelings, wishes, rights, or traditions of ourselves and others.⁸⁹

Lived
experience

Adult routines & love maps - Early career clinical specialist with children under age 10

When my partner was travelling every week for work, I found it really hard for us to maintain connection. One thing that we always tried to do was have a wind-down routine at the end of the week where we got to reconnect. The expectations were low. We would let the kids have a movie night and then we would decide on something for the adults to eat that would feel special after they went to bed.

Over the years, we have also made a point of repeating activities, revisiting places, or doing things that we have done in our relationship in the past. Re-experiencing things on our love map has helped us to keep connected, even when things were hard.

Why this works?

- Brief, positive social interactions benefit the sender and receiver's brain chemistry - both get an oxytocin boost. We call this 'social snacking'.⁹⁰ Oxytocin promotes a sense of connection and decreases feelings of stress.⁸⁰
- These brief connections also release other hormones and neurochemicals that build trust, familiarity, and belonging.^{77,78,80}
- Participating in groups with shared interests, such as gardening groups, choirs, and/or book clubs, increase a sense of connection and provide opportunity for learning and skill development.
- Brief repetitive interactions with neighbours and others we frequently come across can increase a sense of belonging and trust, and feelings of safety in our communities.⁹¹ Repeated interactions over time may cause informal connections to become stronger, which can lead to increased appreciation of those around us.
- Relationships allow us to share in the human condition. Through relationships, such as mentoring, we learn from one another, normalize new or unfamiliar experiences, and problem solve.

Lived
experience

Online gaming community - Early career knowledge translation specialist with two cats

I am a part of an online gaming community. It's nice to know that I can log-on at any time of day and there is always someone I can talk to or complete activities with. Even if we don't talk, I appreciate the camaraderie of working together towards a shared achievement or goal. It gives me a sense of community that is flexible to my needs and daily demands.

Examples of informal relationships

- Neighbours
- People in local businesses or organizations
- Work or volunteer colleagues
- Community leadership
- Local café owners or employees
- Other parents at the local park or at your child's school
- Fellow passengers of local transit
- People you often see in your building
- Teachers
- Mentors

To learn more about social snacking,
please see Appendix 4 on Page 76.

Activity – Informal relationships

Brainstorming: Use the space below each question to brainstorm some of your ideas.

Are there people I come across on a daily or frequent basis? Can I wave, smile or say hello to them?

What are some examples of simple actions that I can do to social snack?

Who in my home community can I reach out to in an emergency?

Do I know the names of my neighbours? Community leadership?

Activity – Informal relationships

How will I do this? Use these questions to think about what you do currently, and how you can build on these activities.

Where can I go to meet people around my interests?

What is one simple thing I can do each day to participate in social snacking?

Where can I practice social snacking? e.g., the grocery store or coffee shop or smiling at those passing by?

What can I do to get to know my neighbours or members of my community/communities better?

What these strategies can look like

Our well-being takes into consideration many things, such as a sense of safety, physical and emotional health, a sense of purpose and belonging, and gaining skills.^{92,93}

In the following pages, you will meet Fatima, Albert, Jeff, Diane, and Amina. Their stories show what the 3Rs strategies in action can look like as a caregiver, community member, family member and/or mentor.³⁹

Meet Fatima

Fatima moved to Alberta with her partner during her first pregnancy. She is one of the 8.3 million (23.0%) Canadians who are immigrants.⁹⁴ Fatima has been busy trying to balance her work and family life with three children, ages 14, 11 and 8. When she is not running her kids to school and extra-curricular activities, she is putting in extra hours at work in hopes of getting a promotion that has been promised to her for the past 3 years. She is one of the 38% of Canadian women in dual-income families who experience severe time-crunch stress.⁹⁵ Fatima got to know one community member from her birth country over the years. They used to get together to cook, talk about news back home, and meet for coffee or tea every Friday afternoon. Her friend moved back home 4 years ago, and Fatima has not been able to connect with anyone else since. She feels like a stranger in her community despite having lived there for almost 15 years, and feels unappreciated at work. Her partner's job requires him to travel a lot... And she spends more and more time each day feeling lonely and burnt out.

Using the 3Rs strategies

One of Fatima's children brings home news that their school is hosting a "culture night" where students and their families are asked to prepare and bring a dish that represents their culture. Fatima jumps at the opportunity to prepare something she used to cook together with her friend that reminds her of home. Fatima's dish and her passion for her culture are a hit. She realizes how much fun she has cooking for others in her community and goes home that night and looks online for a cooking club close to home. While attending the first cooking club get-together, Fatima is pleasantly surprised to see other women of similar age, including some who had also immigrated to Canada. She enjoys sharing her family's recipes and experiences since moving to Canada... And Fatima knows that she is not alone as she navigates her way through perimenopause, challenges at work and her children's adolescence.



How were the 3Rs used in this story?
For some ideas, see Appendix 2.

Meet Albert and Jeff

Albert is 16 years old and moved into his house and community 6 months ago with his parents, both of whom work hard in their chosen careers. Being introverted, shy and anxious, Albert struggles with meeting new people and asking for help. As a result, Albert doesn't know anyone in his community or school very well.

Because of his parents long work hours, Albert often must walk to and from school alone and spends a couple of hours after school by himself at home every day. Albert is one of the 40% of youth who feel unsupported;⁹⁶ and one of the 24% who are alone after school.⁹⁷ He is also one of the 12.9% of Canadian youth (12-24 years) diagnosed with an anxiety disorder.⁹⁸

Albert does pretty well in school, especially in science, his favorite subject. He has no hobbies in his new community. He tried out for the gymnastics team but didn't make it. He thought about joining the local Scout group, but he can't find transportation. He feels hopeless and lonely. He is finding it hard to get excited about the future... And he spends more and more time alone and anxious every day.

Using the 3Rs strategies

Albert's neighbour, Jeff, notices that Albert is interested in his dog – he stops by his yard every day before and after school to pet and say hi to Jeff's golden lab. Jeff knows Albert and his family are new to the community, so one evening, he goes over to introduce himself. Jeff suggests to Albert's parents that Albert may like to join him and his dog on a walk to the dog park. Albert is hesitant at first, but with some encouragement, agrees. Albert enjoys watching the dogs play at the park, and, over time, begins to chat with Jeff about what he is learning in school.

One day, Jeff asks Albert if he will help his niece with a science project. Albert feels a little anxious but is proud that Jeff believes in his science skills. Over time, in helping Jeff's niece, Albert makes a new friend. He also learns that he enjoys science tutoring and joins his school's peer support club to help tutor other students... And he spends more and more time talking to Jeff about his long-term goals and jobs that blend his interest in dogs and science.

Strategies in action – Albert and Jeff



How were the 3Rs
used in this story?

For some ideas, see
Appendix 2.

Meet Diane

Diane is a professional engineer in her late 40's leading a project team with a medium size company. She is very excited about her work in water management, and she has an interest in wetland reclamation. She loves birdwatching and taking her bike to the Ralph Klein Park in Calgary to the viewing stations and centre. Married to a high school principal for over 15 years, Diane and her husband, David, are parenting 2 children. Leo, her oldest son, is 15 and loves biking and video games. He does well enough at school despite needing extra help with reading and writing topics because of dyslexia. Leo is one of the 10-20% of youth with dyslexia.⁹⁹ One of the challenges Diane and David watch out for is Leo's self-esteem and motivation to complete his routine homework because of the added effort and support it takes. Leo has been bullied in the past, which resulted in depression and the need for counselling. This took away the short-term distress, but managing the concern is ongoing. Leo is one of the 7 in 10 youth who experience bullying.¹⁰⁰ Leo has been struggling more and more with trying to complete his homework, and he has been feeling down. Diane and David know they need to do something to help Leo but aren't sure what to do.

Leo has a younger brother, Elijah, who is 12 years old. Elijah is full of energy and most happy when he is moving. To enable Elijah to focus on routine tasks, he participates in a swim club. Elijah's swimming is 4 days a week with 2 additional days of dry land training. The practices occur at 4:00 p.m. most days of the week and require someone to get him to the pool after school. Diane and David typically text one another at 3:15 p.m. to see who can get away from work for 3 of the days and call on friends for the other days. This mostly works but can be frustrating for Elijah as he is never sure who is picking him up that day.

Diane and David live in the same city as David's parents, who are aging. David's mother, Nancy, is 76 years old, and, although mostly healthy, she experiences short-term memory challenges, which have made routine tasks like grocery shopping and doctor appointments difficult. Although David's father, Stan, at 80 years of age, helps out as much as possible, he is becoming frustrated by the disruption and tired of trying to problem solve on his own. Stan is also becoming concerned about leaving Nancy by herself for too long and feels trapped. To reduce his stress, Stan calls Diane 3 or 4 times a day for advice and problem solving. Stan knows he could call his son, but he thinks Diane's instincts are better in this area.

Strategies in action – Diane

Diane has taken on a new project and is managing a new team. She enjoys the leadership opportunity but is noticing she has some signs of menopause, which are influencing her ability to focus. David, her husband, is supportive, but doesn't really know what to do to help as he manages his own job. Diane is stretched too thin, her temper is more easily sparked, and time-crunch stress is a big issue. How

can she manage her professional life, help Leo with his homework and support his mental health, get Elijah to the pool on time, support Stan, spend time with her husband David and find a moment for birdwatching? She is finding it hard to balance everything... And she spends more and more time feeling frustrated and exhausted each day.



Using the 3Rs strategies

Diane reaches out to David one night and tells him how she is feeling, and that she needs a few things to change. David and Diane sit down and realize that if they plan ahead, they can each manage a swim drop off for Elijah 2 times a week. They also realize they can use the 'pool time' to take care of a personal need such as exercise or reading. They agree to the days of pick-up to start the habit and connect with their friends to see if they can still help with Elijah the remaining 2 days a week. This makes it easier for their work colleagues and friends as they have a better idea of David and Diane's schedules.

David and Diane agree that Stan's phone calls are becoming a bit too much and often discuss the same topics. They know he needs someone to talk to. They do a little research and discover there is a senior's coffee group that meets weekly which Stan can attend alone or with Nancy. They agree to go with Stan for the first one to ensure it works and then arrange for a regular Uber as transportation for the couple. In anticipation of Nancy's future needs, and to reduce the stress on Stan, they arrange for in-home support for 6 hours per week. This gives Stan a break, and ensures that as Nancy's needs increase, she will be familiar with someone she trusts to support her. They also try to arrange a weekly chat with Stan so he knows they are there to help. They let Stan know they will also take care of delivered groceries so the pressure for one chore is reduced. Stan forms connections with a couple of coffee group members, and they often call each other and meet up in the park close to Stan's house.

Diane and David reach out to Leo's guidance counsellor, Mrs. Mitchell, and schedule a meeting to discuss their concerns about Leo. Mrs. Mitchell listens and feels for the couple and their son. Together, they make a plan to help support Leo and his learning needs. Mrs. Mitchell suggests that Leo could record his lectures, if each of his teachers agree, to decrease the amount of reading he does. She also suggests looking for audio versions of his English and Social Studies books. Studying in groups or with a tutor or older student would also break up the amount of time studying on his own. Diane and David appreciate the suggestions and discuss them with Leo. Leo appears to be a little more hopeful with these ideas.

Diane and David have been going through a lot, and problem solving together has brought them closer. They know they will need to continue to overcome challenges for themselves and their family. Right now, with the changes made, Diane and David find they are able to carve out a few more minutes each day for their own needs. This allows Diane to schedule an appointment with her doctor to discuss how to decrease her menopause symptoms... And she finally begins to feel more like herself again.

How were the 3Rs used in this story?

For some ideas, see Appendix 2.

Meet Amina

Amina is a first-generation, multi-racial Canadian living with her mother and her six-year-old brother. Amina is part of the 16.4% of Canadian households led by a single parent.¹⁰¹

She is busy juggling the demands of high school with cultural and societal expectations of being an eldest sibling and daughter and understanding her identity as one of the 0.9% of Canadians who report belonging to more than one racialized group.¹⁰²

She loves to swim, read books, and watch old movies. She maintains good grades, but household responsibilities such as babysitting her brother, being in a lower-income household, and feeling uncertain about where she fits in have made it difficult for her to participate in extracurricular activities and maintain long-term friendships. She is finding it hard to get excited about the future... And she spends more and more time feeling lonely and sad every day.

Using the 3Rs strategies

Amina finds a flyer on her school's bulletin board advertising a program that subsidizes participation in competitive sports. She takes a picture of the flyer and shows it to her mom, and they register online.

Meanwhile, the school's English teacher starts a lunch-time book club and encourages Amina to come. She drops by the first session and is surprised by how excited she is to talk about the book. She signs up to lead the next meeting and invites another book club member to come with her to the public library to help her pick their next book to read.

Amina and her mom open the mail to find that she has been approved for a sports subsidy and they are able to register Amina with a local competitive soccer club.

Her days are busier than ever, but Amina is excited to be more involved in the things she enjoys, and to be meeting other youth who share her same interests. She starts to feel hopeful for the first time in a long while.



How were the 3Rs used in this story?

For some ideas, see Appendix 2.

Emotional currency influences our well-being

We have limited emotional, mental and physical capacity. We can consider this capacity as currency in a bank where certain actions and events can affect our account balance. Actions that we and others do (or don't do) can add to or subtract from our account balance levels, which influences our well-being and ability to manage daily hassles and stressors. The higher our account balance levels, the more likely we can experience well-being.



Let's use a story to illustrate this concept:

The story: It's a workday morning, and you are running late. Your adolescent child forgot to set their alarm, and you rush to get them out the door. You realize after dropping your kids off at school (and receiving a glare from the principal for being late) that it's your day to pick up coffee for the team. You get the coffees and enter your building. The person in front of you doesn't hold the door for you long enough, and the door slams closed, causing you to spill 2 coffees. These negative interactions and daily hassles subtract from your available emotional currency that day. It's been quite a morning, and your emotional resources are almost depleted. They are so depleted that when your coworkers invite you for lunch, you do not have enough currency to attend, and

your account balance remains low. You finish your workday, pick your kids up from school and go home feeling exhausted.

Now, let's shift the narrative using some of the strategies discussed in this workbook:

As part of your family's night-time routine, everyone sets their alarms before shutting off all electronics, brushing their teeth and reading before bed. Everyone is ready for school the next morning, and you get the kids to school on time. You are thankful that even if you couldn't get the kids to school on time, the school's principal understands and knows that many parents are extremely busy and stressed and doing their best. A team member texted you the night before reminding you that it is your turn to pick up coffees (part of a routine team arrangement to help everyone remember) so you could order the coffees ahead. One of

the building administrators recognizes you (from your brief chats about a shared interest in hiking) and holds the door for you. These positive interactions, actions and resources add to your emotional currency, strengthening your ability to respond, cope and adapt. When you are invited to lunch with your coworkers, you jump at the opportunity to propose your favourite café. During lunch, you realize that you have similar challenges with managing your kids' screen time and homework, and feel better sharing experiences and strategies. You finish your workday, pick up your kids from school, and go home feeling accomplished and optimistic.

In summary:

Why these strategies work

With the 3Rs strategies we have presented in this workbook, we hope to provide you tools that help promote your well-being. The strategies in this workbook can enable us to be more fulfilled in our lives while balancing the challenges of adult development. We have limited emotional, mental and physical capacity. Actions that we and others do (or don't do) can add to or subtract from our capacity, which influences our well-being and ability to manage daily hassles and stressors. The higher our capacity, the more likely we can experience well-being.

(Learn about the synergy between the 3Rs in Appendix 3)

The evidence-based strategies in this workbook provide opportunities to help us strengthen our resilience and promote flourishing in our busy lives. As described in the examples above, actions such as briefly connecting with people we see frequently, using our community resources, and adding routines that help our families run smoother to decrease our overall mental load can improve our well-being.

“Happy families are all alike; every unhappy family is unhappy in its own way.”

- Leo Tolstoy from Anna Karenina

I love this quote by Tolstoy, which to me reflects some of the mysteries of the human experience, and some of the challenges with demonstrating the effectiveness of strategies that reduce the negative influence of difficult experiences.

The 3Rs included in this workbook help people and families accommodate and grow through the myriad of life events that we experience. In essence, when we have ‘good enough’ routines, ‘good enough’ resources and ‘good enough’ relationships, we are strong enough. Crises are addressed, life lessons bring growth, developmental delays are mitigated, and many mental health concerns are addressed before they become debilitating.

When we practice the 3Rs, we can live in a way that honors oneself, and those we care about. When these strategies are working, and we prevent the worst possible outcomes, life becomes more satisfying. Perhaps this sense of satisfaction, or ease, is a component of ‘happy families are all alike’.

Be well,

Dr. Suzanne Tough, PhD



*“be softer with you.
you are a breathing thing.
a memory to someone.
a home to a life.”*

- Nayyirah Waheed

The work is dedicated to all those who have participated in the evidence journey. Through years of questionnaires, reports, and information sharing, you have inspired us to look deeply into the features of life that enable optimism, positive development, and family well-being. Your ongoing participation has allowed us to learn how early events shape later outcomes. We have learned how families and communities come together and manage during difficult times, and what resources and strategies support people, families and neighbourhoods.

On behalf of the All Our Families team and the many researchers who have collaborated with us, we are truly grateful. I offer my personal thanks to the friends, colleagues and teachers who provided feedback, debate and insights into earlier components of this work. You are too numerous to mention, and I sense you know who you are. This project was enhanced through your time and expertise.

This 3R workbook is offered as a resource for you, for service providers and communities to explore resilience and flourishing to enhance well-being in daily life.

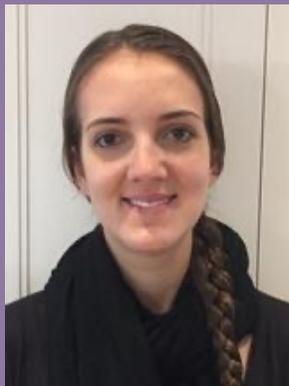
- Suzanne Tough

About the authors



Dr. Suzanne Tough

Dr. Tough (PhD) is a Professor in the Cumming School of Medicine, University of Calgary, and Faculty for the MaxBell Public Policy Institute. She has published over 300 academic articles and leads the All Our Families Longitudinal Cohort. Dr. Tough's commitment to science and community have resulted in numerous awards and she was 1 of 100 women worldwide recognized through the United Nations SHEInnovates Initiative. Dr. Tough is a fellow of the Canadian Academy of Health Sciences and has been a member of national and international advisory boards and undertaken the role of Scientific Director in provincial organizations and initiatives.



Dr. Jessica-Lynn Walsh

Dr. Walsh (MBBCh MSc) joined All Our Families in 2017 and has participated in numerous capacities with the team, including as a trainee and Interim Program Lead. She has a MSc in Medical Sciences and received a medical degree from Trinity College Dublin in Ireland.



Dr. Zahra Clayborne

Dr. Clayborne (PhD) joined All Our Families in 2022 as a postdoctoral fellow. Her fellowship work studied flourishing and well-being in All Our Families mothers and youth. Dr. Clayborne received a BSc (Hons) in Psychology from the University of Calgary, and a PhD in Epidemiology from the University of Ottawa.



Anjola Adeboye

Anjola (MSc trainee) joined All Our Families in 2021. She is currently an MSc trainee with the team in Population and Public Health in the Department of Community Health Sciences at the University of Calgary. She has a BSc in Bioinformatics with a minor in Health and Society.



Dr. Sheila McDonald

Dr. McDonald (PhD) is the Co-Principal Investigator of the All Our Families Study. She is also the Manager of the Early Years Health Promotion Team in Healthy Children and Families, Promoting Health, Provincial, Population and Public Health at Alberta Health Services.

All Our Families Study:

An ongoing Canadian longitudinal cohort on pregnancy, caregiving, and child and youth development.

www.ucalgary.ca/allourfamilies

Connections First

A hub for natural support work in Alberta and resources and guides for communities and organizations to promote social connections and natural supports approaches.

www.connectionsfirst.ca

Resilience Research Centre

A collaboration of leading researchers, led by Dr. Michael Ungar, that explore cultural, community, program, family, child, youth, workplace, and individual resilience.

resilienceresearch.org/

Alberta Family Wellness Initiative

An organization that makes and mobilizes scientific knowledge about brain development so that it is easy to understand and use for policy, practice, and the public to help improve Albertan's health and well-being.

www.albertafamilywellness.org/

Where can you find this workbook?



Workbook layout, creative design, and direction by:

Adam Ford of Casual Design Studio

www.casualdesign.studio

casualdesignstudio@gmail.com

Illustrations by:

Eve Higgins

www.emhiggins.ca

evemhiggins@outlook.com

Land Acknowledgement

The University of Calgary, located in the heart of Southern Alberta, both acknowledges and pays tribute to the traditional territories of the peoples of Treaty 7, which include the Blackfoot Confederacy (comprised of the Siksika, the Piikani, and the Kainai First Nations), the Tsuut'ina First Nation, and the Stoney Nakoda (including Chiniki, Bearspaw, and Goodstoney First Nations). The City of Calgary is also home to the Métis Nation of Alberta (Districts 5 and 6).

Appendices

Breaking the cycle of stress word search

Word search for activities to help break the cycle of stress.

Words can go in any direction.

Words can share letters as they cross over each other.

F S X L Z F Q P W A S V C G F
E L A U G H P G I A V H M R O
R S W I D U R E Q G J K U A R
D E S O C I A L I Z E J S T G
T E B I N P Y U U N Z O I I I
I C L T D A E J W Y P U C T V
S U O E S C T X Z C E R P U E
B D L N G U H U E H T N L D M
R W S C N A N O R R S A A E E
E A T O W E T S C E C L Y B D
A T R E A D C E H O Y I E W I
T E E R L G E T T I L R S D T
H R T E K Z W X B M N A W E A
E Z C S H O B B I E S E T G T
F G H T R E F R A M E O I E E

gratitude
delegate
meditate
sunshine
music
water

chocolate
exercise
reframe
connect
journal
stretch

socialize
breathe
hobbies
nature
laugh
forgive

read
pets
play
rest
pray
walk

For the word search answer key see Appendix 6.

Fatima



Routines:

Fatima has added a once-a-month cooking club to her routines, which is manageable for her schedule and brings her lots of joy.

Resources:

The cooking club provides Fatima with many resources, including knowing other moms in her daughter's school and her home community, knowing women of a similar age group for perimenopause and relationship advice, and a couple of moms are also immigrants to Canada.

Relationships:

The cooking club started as casual relationships, some of which will likely develop into closer relationships. Fatima now has people she can turn to for advice or for help.

in science.

Resources:

Jeff's knowledge and experience may help Albert with a future career that combines both science and dogs. Jeff has Albert's support and expertise to help his niece with her science homework. Albert is becoming more comfortable to move about his community and to go to the dog park.

Relationships:

Jeff has become a mentor to Albert and provides Albert with someone to turn to for advice or help. Albert has also gained a new friend in Jeff's niece. Albert has developed a sense of responsibility and belonging with his tutoring. He also will create relationships as a peer support member and tutor.

Albert and Jeff



Routines:

Jeff and Albert have developed a routine of walking to the dog park on occasion. Albert has also developed a routine to tutor Jeff's niece

Diane



Routines:

Diane and David have added helping Elijah get to and from his swimming practices twice a week each, which decreases stress for them, Elijah, and their friends and work colleagues.

Appendix 2 – Ideas for The 3Rs stories *(pages 50-59)*

Diane and David are also able to add exercising, reading or other personal activities during swimming practices twice a week. Leo also has the option of meeting up with a tutor or group of students to add to his routines once or twice a week.

Resources:

The resources in this story are the senior's coffee club offered in the community, the local grocery delivery service, having local parks, and the school having a guidance counselor. Diane and David are also able to use an in-house support service to help with Nancy's health.

Relationships:

Diane and David found time to talk about the challenges with a constructive outcome. They are thankful to have their friends to help get Elijah to and from swimming practice twice a week. Stan is able to create connections with a couple of members of their coffee club, which helps him de-stress and have a sense of belonging. Because Stan is not calling Diane all the time while she is at work, they are able to have a better relationship. David also is making more time to talk once a week with his dad. Nancy will be able to create an informal relationship with her in-house support to develop trust as her

health needs change. Diane and David are able to form a connection with Leo's guidance counsellor, Mrs. Mitchell, in order to help their son. All of the problem solving together has brought Diane and David closer in their relationship.

Amina

Routines:

Amina has added competitive soccer and a book club to her routines.

Resources:

Amina was able to gain access to a subsidy resource to enable her to participate in competitive soccer. She has also started using her local public library more with attending a book club at school.

Relationships:

Amina is able to create relationships through her book club and soccer. Both activities give Amina a sense of responsibility (e.g., to make it to practice in time, to read the book before the club, to select a book and lead a session of the book club) and create a strong sense of self and belonging.



Appendix 3 – The synergy of The 3Rs

If you have come this far in the workbook, you may have noticed that some of the separation between routines, resources and relationships can feel arbitrary. This is true.

It is also true that when routines, resources and relationships overlap there is a synergy, and the benefits expand beyond each individual component. You get more than you bargained for in a positive way.

For example

The Kim's are a very busy family with both parents working full-time and one parent is a shift worker. They have 3 children with a variety of needs and interests. The family is interested in arts and culture but finds it difficult to 'fit in' with busy schedules and shift work. They start to talk about this after a school event where they enjoyed an evening of theatre, music and storytelling. On the way home, they begin to talk about 'what can we do to have more of this in our lives' in a way that is time limited, feasible, low cost and can involve everyone. After much back and forth, they decide that they can invest more

time as a family in learning and storytelling through reading. They pick reading because it fits into daily practice, the children are encouraged to do it regularly, it can be time limited, and it enables each person in the family to be equally involved. Reading also allows each person to express and explore their own particular interest.

The routine begins with everyone thinking about their preferred stories, followed by a discussion about how they can incorporate reading into their lives. They decide that the most important element is 'how much time' and agree to 15 minutes per day before bedtime.

The first week is challenging with getting to the library to pick up some books and figuring out how to read with other commitments. The first nights are spent trying to decide 'what story', 'what book', 'can it be a graphic novel', and 'should it be read aloud, or read independently'. The family realizes that this can all be worked out, but the key thing is to come together 20 minutes before the children go to bed for story sharing. The first week has some variability, however, when they debrief as a family, they realize that they enjoyed the experience and the time they

Appendix 3 – The synergy of The 3Rs

shared together. The parent working shifts realizes that although they miss some evenings, they are still part of the experience as the family talks about what they read at other times during the week. They are committed to creating this as a 'family tradition'.

As time moves on, the family builds the routine of coming together in a comfortable setting and sharing the book they are reading. Story-time sometimes lasts longer. They deepen their understanding of all the material that comes from books as they talk about the content, and they get to know one another better. They also find they have more to talk about at other times because of the shared experience.

Why this works

The evening routine softens the 'flight or fight' response from the busyness and stress of the day, which paves the way for a better night's sleep. The low-cost resource of library books and other written materials means family members can pick a range of content and try new things with ease. Comfort emerging from

the shared experience brings closeness to the relationships which increases the "feel good" hormones at the end of the day. Conversations that arise because of the events and challenges in the stories helps the family discuss new topics, including some that may have been awkward without the book as a starting place. All of this increases the sense of belonging within the family. The routine of shared reading, the resources of written material, and the comfort of the relationships are more than they ever imagined this routine would provide.

"Imagine an elixir so strong that a daily dose would make your family smarter, happier, healthier, more successful, and more closely attached. Now imagine that you could have it without spending a dime. It all starts with a book, a voice and a place to sit..."

- Meghan Cox Gurdon

Additional Information on Social Snacking

What is a social snack? What is a weak tie? And why do I need them?

Social snacking describes brief, informal and positive interactions that we can engage in in our daily lives, such as smiling at someone, chatting with someone at the dog park, saying hi to someone in line, wishing someone good morning or holding the door for others. These brief encounters, sometimes called weak ties, are full of potential to brighten our day. These ‘snacks’ contribute to our happiness, reduce feelings of loneliness, and improve our sense of belonging and identity.^{1,2}

These social snacks have both practical and physiological outcomes. Practically, these serve as a mechanism for recognizing we are sharing an experience with someone or sharing information, which may broaden our perspectives. Social snacks have even been associated with creativity and skill building.^{3,4} Importantly, for both giver and receiver, social snacking and weak ties can improve mood, sense of connection, feelings of trust and can reduce stress. Social snacking can increase levels of feel-good hormones, such as oxytocin and dopamine, and activate the parasympathetic nervous system (i.e., “rest and repair”), which is linked to our feelings of happiness and our overall well-being.⁵ These small, simple actions can really add up to benefit both an individual and a community.

The importance of social snacking goes across age group and culture – for example, bus drivers can make eye contact with and greet those who use the bus, and neighbors can say “good morning” to children in the park or walking by their house. These interactions can put others at ease and create a greater sense of belonging and feelings of safety and security, especially in places where we spend our time.

So... we all need social snacks, which can be accomplished in any number of ways.

Let's think about the following:

1. When I have a chance for a brief encounter with someone, can I make eye contact and smile?
2. When I have a chance for a brief encounter with someone, can I look up from my phone or take off my headphones, and greet them with eye contact, a wave of my hand or kind words?
3. When I have a chance for a brief encounter with a store clerk, can I say "hello" and offer a comment?
4. When I have a chance for a brief encounter at the coffee shop, do I use this as an opportunity to connect with the barista or those around me? Perhaps through a smile or eye contact?
5. Your thoughts and ideas...

For more information on social snacking, and for material to help you and your community engage more intentionally in strategies that build connection and well-being, please check out the www.connectionsfirst.ca website.

Potential outcomes with The 3Rs strategies

Following the strategies outlined in this workbook will lead to an increase in resilience and flourishing in your daily lives. Studies suggest that this will lead to a number of potentially beneficial outcomes.

Resilience →

- ↑ overall mental and physical health^{56,57,92,103-107}
- ↓ mortality^{56,57,108}
- ↓ chronic pain and inflammation^{106,108}
- ↓ mental health conditions^{105,109}
- ↓ blood pressure^{108,110}
- ↑ ability to develop critical life skills^{105,107}
- ↑ sense of trustworthiness^{80,106}
- ↑ sense of belonging^{103,111}

Flourishing →

- ↑ overall mental and physical health^{92,107}
- ↑ skill development^{105,107,112}
- ↑ sense of belonging^{103,111,113}
- ↑ self-esteem^{107,114}
- ↑ respect for self and others^{115,116}
- ↑ sense of purpose^{117,118}
- ↑ sense of accomplishment^{119,120}
- ↑ connections with others^{121,122}
- ↑ sense of trust in others^{80,106,114,121,122}
- ↑ balancing responsibilities¹²³

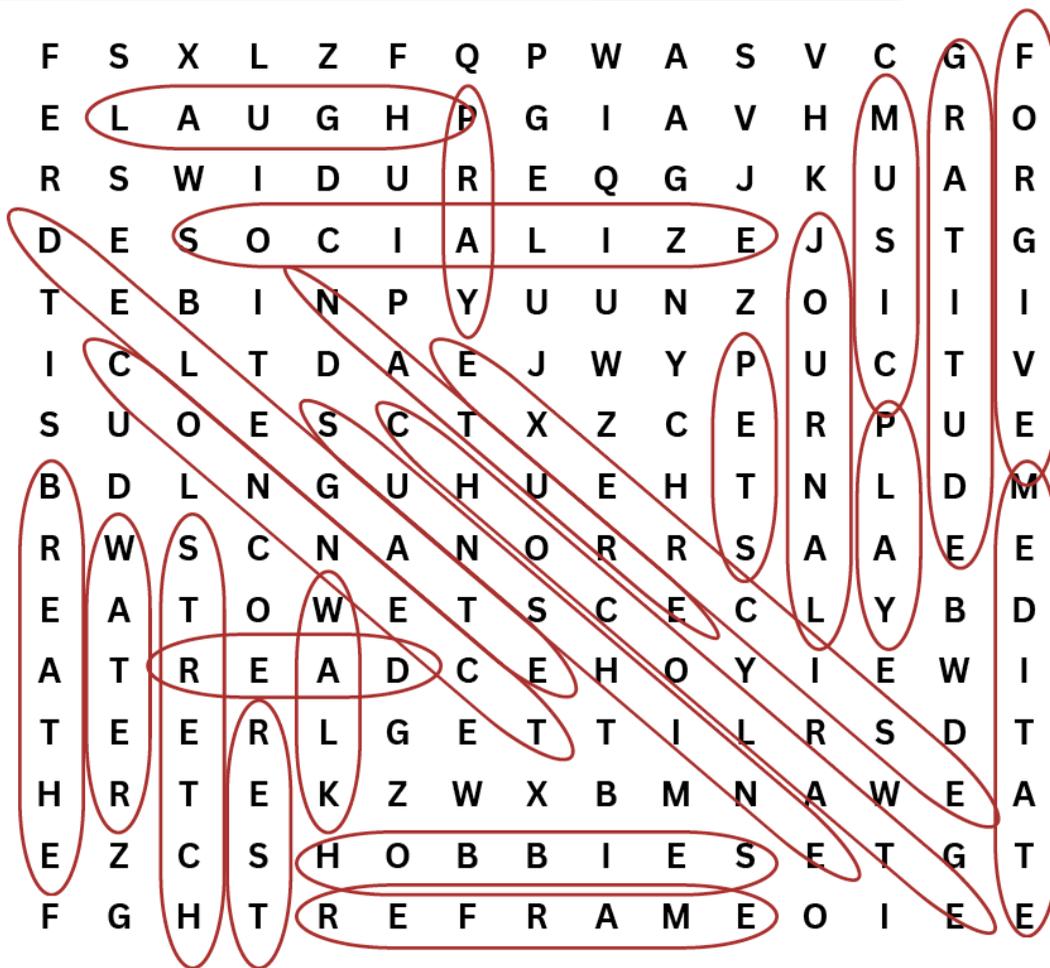
Word search answer key

The following is the answer key for the word search in Appendix 1.

Remember:

Words can go in any direction.

Words can share letters as they cross over each other.



gratitude
delegate
meditate
sunshine
music
water

chocolate
exercise
reframe
connect
journal
stretch

socialize
breathe
hobbies
nature
laugh
forgive

read
pets
play
rest
pray
walk

References

1. Currie C, Tough SC. Adverse childhood experiences are associated with illicit drug use among pregnant women with middle to high socioeconomic status: findings from the All Our Families Cohort. *BMC Pregnancy & Childbirth*. 2021;21(1):1-9. doi:10.1186/s12884-021-03591-1
2. Hetherington E, McDonald S, Wu M, Tough S. Risk and protective factors for mental health and community cohesion after the 2013 Calgary flood. *Disaster Medicine and Public Health Preparedness*. 2018;12(4):470-477. doi:10.1017/dmp.2017.91
3. Hetherington E, Racine N, Madigan S, McDonald S, Tough S. Relative contribution of maternal adverse childhood experiences to understanding children's externalizing and internalizing behaviours at age 5: findings from the All Our Families cohort. *CMAJ Open*. 2020;8(2):E352-E359. doi:10.9778/cmajo.20190149
4. McArthur BA, Racine N, McDonald S, Tough S, Madigan S. Child and family factors associated with child mental health and well-being during COVID-19. *European Child & Adolescent Psychiatry*. 2021;32:223-233. doi:10.1007/s00787-021-01849-9
5. McDonald S, Edwards S, Hetherington E, et al. Experiences of Albertan families with young children during the COVID-19 pandemic: Descriptive report. 2020.
6. McDonald SW, Madigan S, Racine N, Benzies K, Tomfohr L, Tough S. Maternal adverse childhood experiences, mental health and child behaviour at age 3: The all our families community cohort study. *Preventative Medicine*. 2019;118:286-294. doi:10.1016/j.ypmed.2018.11.013
7. Racine N, Hetherington E, McArthur BA, et al. Maternal depressive and anxiety symptoms before and during the COVID-19 pandemic in Canada: a longitudinal analysis. *The Lancet Psychiatry*. 2021;8(5):405-415. doi:10.1016/S2215-0366(21)00074-2
8. Racine N, McDonald S, Tough S, Madigan S. Mediating mechanisms for maternal mental health from pre- to during the COVID-19 pandemic. *Journal of Affective Disorders Reports*. 2021;(100287):1-7. doi:10.1016/j.jadr.2021.100287
9. Racine N, Plamondon A, McArthur BA, et al. Changes and predictors of maternal depressive and anxiety symptoms during the COVID-19 pandemic. *Archives of Women's Mental Health*. 2023;26(4):565-570. doi:10.1007/s00737-023-01339-8
10. Racine N, Zumwalt K, McDonald S, Tough S, Madigan S. Perinatal depression: The role of maternal adverse childhood experiences and social support. *Journal of Affective Disorders*. 2020;263:576-581. doi:10.1016/j.jad.2019.11.030
11. Racine NM, Madigan SL, Plamondon AR, McDonald SW, Tough SC. Differential associations of adverse childhood experience on maternal health. *American Journal of Preventive Medicine*. 2018;54(3):368-375. doi:10.1016/j.amepre.2017.10.028
12. Robinson AM, Benzies KM, Cairns SL, Fung T, Tough SC. Who is distressed? A comparison of psychosocial stress in pregnancy across seven ethnicities. *BMC Pregnancy & Childbirth*. 2016;16(1) doi:10.1186/s12884-016-1015-8
13. Hentges RF, Graham SA, Plamondon A, Tough S, Madigan S. Bidirectional associations between maternal depression, hostile parenting, and early child emotional problems: Findings from the all our families cohort. *Journal of Affective Disorders*. 2021;287:397-404. doi:10.1016/j.jad.2021.03.056
14. Hentges RF, Madigan S, Tough S, McDonald S, Graham SA. Maternal depressive symptoms and language development: The moderating role of child temperament. *Developmental Psychology*. 2021;57(6):863-875. doi:10.1037/dev0001184
15. Hentges RF, Madigan SL, Plamondon AR, et al. Heterogeneous trajectories of delayed communicative development from 12 to 36 months: Predictors and consequences. *Journal of Developmental & Behavioral Pediatrics*. 2019;40:335-343. doi:10.1097/DBP.0000000000000677
16. Li QKW, MacKinnon AL, Tough S, Graham S, Tomfohr-Madsen L. Does where you live predict what you say? Associations between neighborhood factors, child sleep, and language development. *Brain Sciences*. 2022;12(2)doi:10.3390/brainsci12020223
17. MacKinnon A, Sell H, Silang K, et al. Neighbourhood characteristics, lifestyle factors, and child development: Secondary analysis of the All our families cohort study. *Frontiers in Epidemiology*. 2023;2doi:10.3389/fevid.2022.1073666
18. MacKinnon AL, Tomfohr-Madsen L, Tough S. Neighborhood socio-economic factors and associations with infant sleep health. *Behavioral Sleep Medicine*. 2020;19(4):458-470. doi:10.1080/15402002.2020.1778478
19. McArthur BA, Browne D, McDonald S, Tough S, Madigan S. Longitudinal associations between screen use and reading in preschool-aged children. *Pediatrics*. 2021;147(6)doi:10.1542/peds.2020-011429

20. McArthur BA, Browne D, Racine N, Tough S, Madigan S. Screen time as a mechanism through which cumulative risk is related to child socioemotional and developmental outcomes in early childhood. *Research on Child and Adolescent Psychopathology*. 2022;50(6):709-720. doi:10.1007/s10802-021-00895-w
21. McDonald SW, Kehler HL, Tough SC. Protective factors for child development at age 2 in the presence of poor maternal mental health: results from the All Our Babies (AOB) pregnancy cohort. *BMJ open*. 2016;6(11)doi:10.1136/bmjopen-2016-012096
22. McDonald SW, Kehler HL, Tough SC. Risk factors for delayed social-emotional development and behavior problems at age two: Results from the All Our Babies/Families (AOB/F) cohort. *Health Science Reports*. 2018;1(e82):1-12. doi:10.1002/hsr.2.82
23. Adhikari K, Patten SB, Williamson T, et al. Neighbourhood socioeconomic status modifies the association between anxiety and depression during pregnancy and preterm birth: a Community-based Canadian cohort study. *BMJ open*. 2020;10(e031035)doi:10.1136/bmjopen-2019-031035
24. Adhikari K, Racine N, Hetherington E, McDonald S, Tough S. Women's mental health up to eight years after childbirth and associated risk factors: Longitudinal findings from the All Our Families Cohort in Canada. *Canadian Journal of Psychiatry*. 2023;68(4):269-282. doi:10.1177/07067437221140387
25. Bayrampour H, Tomfohr L, Tough S. Trajectories of perinatal depressive and anxiety symptoms in a community cohort. *The Journal of Clinical Psychiatry*. 2016;77(11):e1467-e1473. doi:10.4088/JCP.15m10176
26. Hetherington E, McDonald S, Williamson T, Patten S, Tough SC. Social support and maternal mental health at 4 months and 1 year postpartum: analysis from the All Our Families cohort. *Journal of Epidemiology and Community Health*. 2018;72(10):933-939. doi:10.1136/jech-2017-210274
27. Hetherington E, McDonald S, Williamson T, Tough S. Trajectories of social support in pregnancy and early postpartum: findings from the All Our Families cohort. *Social Psychiatry and Psychiatric Epidemiology*. 2020;55:259-267. doi:10.1007/s00127-019-01740-8
28. McDonald SW, Benzies KM, Gallant JE, McNeil DA, Dolan SM, Tough SC. A comparison between late preterm and term infants on breastfeeding and maternal mental health. *Maternal and Child Health Journal*. 2013;17(8):1468-1477. doi:10.1007/s10995-012-1153-1
29. McDonald SW, Kingston D, Bayrampour H, Dolan SM, Tough SC. Cumulative psychosocial stress, coping resources, and preterm birth. *Archives of Women's Mental Health*. 2014;17(6):559-568. doi:10.1007/s00737-014-0436-5
30. Nagulesapillai T, McDonald SW, Fenton TR, Mercader HFG, Tough SC. Breastfeeding difficulties and exclusivity among late preterm and term infants: results from the all our babies study. *Canadian Journal of Public Health*. 2013;104(4):e351-356. doi:10.17269/cjph.104.3803
31. Racine N, Plamondon A, Hentges R, Tough S, Madigan S. Dynamic and bidirectional associations between maternal stress, anxiety, and social support: The critical role of partner and family support. *Journal of Affective Disorders*. 2019;252:19-24. doi:10.1016/j.jad.2019.03.083
32. Roy A, Patten S, Thurston WE, Beran T, Crowshoe LL, Tough SC. Race as a determinant of prenatal depressive symptoms: analysis of data from the 'All Our Families' study. *Ethnicity and Health*. 2024;1-28. doi:10.1080/13557858.2024.2312420
33. Hetherington E, McDonald S, Racine N, Tough S. Risk and protective factors for externalizing behavior at 3 years: Results from the All Our Families Pregnancy Cohort. *Journal of Developmental & Behavioral Pediatrics*. 2018;39(7):547-554. doi:10.1097/DBP.0000000000000586
34. McDonald S, Kehler H, Bayrampour H, Fraser-Lee N, Tough S. Risk and protective factors in early child development: Results from the All Our Babies (AOB) pregnancy cohort. *Research in Developmental Disabilities*. 2016;58:20-30. doi:10.1016/j.ridd.2016.08.010
35. McDonald S, Kehler H, Tough S. Risk and resilience factors for early child development: An analysis of the All Our Babies study. Department of Pediatrics University of Calgary; 2014.
36. Tough S, Reynolds N, Walsh J-L, Agius M. Connections First: Key natural supports indicators. 2020. www.connectionsfirst.ca
37. Tough S, Walsh J-L, Reynolds N. Building naturally supportive communities to promote well-being: A policy brief. 2022. <https://www.policyschool.ca/publications/building-naturally-supportive-communities-to-promote-well-being-a-policy-brief/>
38. Tough SC, Reynolds N, Walsh J-L, Agius M. Call to action: The opportunity of natural supports to promote well-being and resiliency in Alberta. 2019. <https://www.connectionsfirst.ca/call-to-action>
39. Tough SC, Reynolds N, Walsh J-L, Agius M. Executive summary: The opportunity of natural supports

References

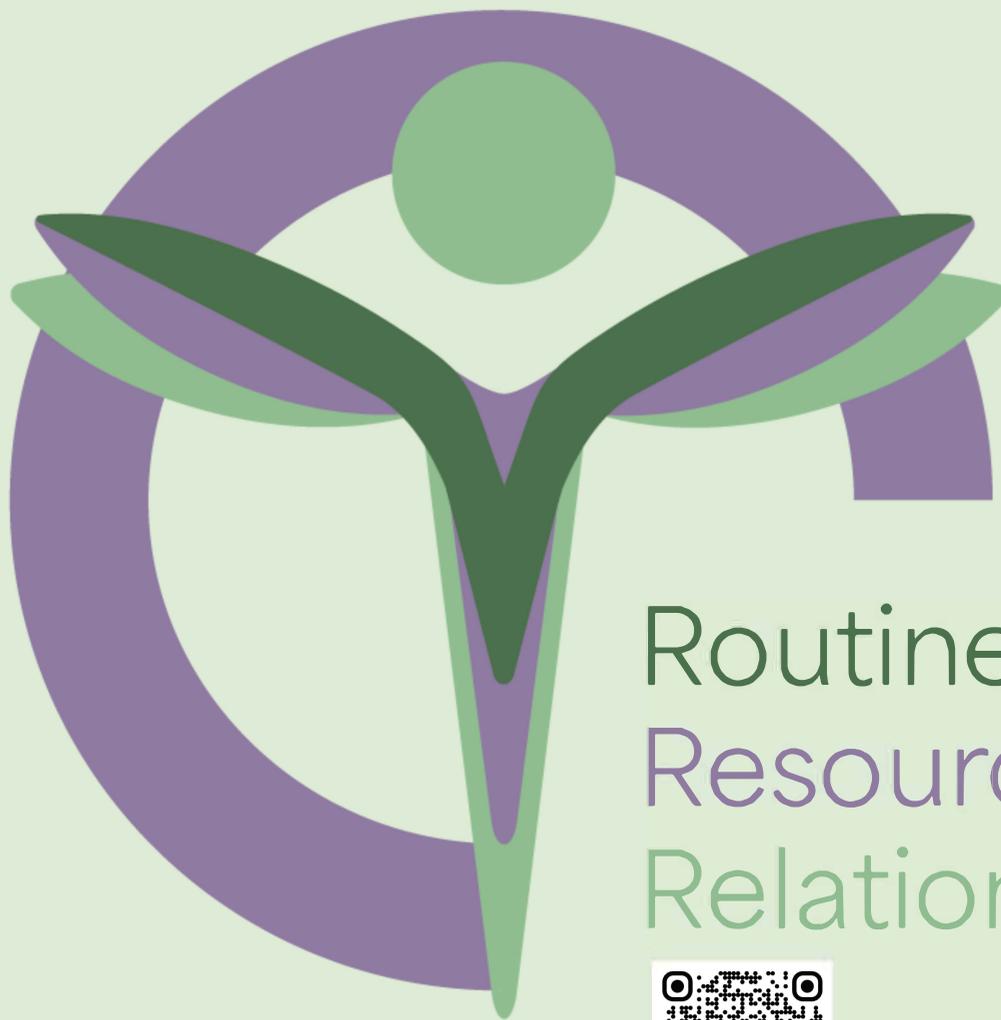
- to promote well-being and resiliency in Alberta. 2020. <https://www.connectionsfirst.ca/executive-summary>
40. Tough SC, Reynolds N, Walsh J-L, Agius M. Natural supports evidence overview. 2020. <https://www.connectionsfirst.ca/evidence-summary>
 41. Letourneau N, McDonald S, MacKay LJ, et al. Cross-sectional study protocol for the COVID-19 impact survey of mothers and their 7-11 year old children in Alberta, Canada. *Frontiers in Psychiatry*. 2021;12(597759)doi:10.3389/fpsy.2021.597759
 42. McArthur BA, Racine N, Browne D, McDonald S, Tough S, Madigan S. Recreational screen time before and during COVID-19 in school-aged children. *Acta Paediatrica*. 2021;110(10):2805-2807. doi:10.1111/apa.15966
 43. McArthur BA, Eirich R, McDonald S, Tough S, Madigan S. Predictors of preadolescent children's recreational screen time duration during the COVID-19 pandemic. *Journal of Developmental & Behavioral Pediatrics*. 2022;43(6):353-361. doi:10.1097/DBP.0000000000001057
 44. Plamondon A, McArthur BA, Eirich R, et al. Changes in children's recreational screen time during the COVID-19 pandemic. *JAMA Pediatrics*. 2023;177(6):635-637. doi:10.1001/jamapediatrics.2023.0393
 45. VanderWeele TJ. On the promotion of human flourishing. *Proceedings of the National Academy of Sciences of the United States of America*. 2017;114(31):8148-8156. doi:10.1073/pnas.1702996114
 46. Franke HA. Toxic stress: Effects, prevention and treatment. *Children*. 2014;1(3):390-402. doi:10.3390/children1030390
 47. Staufenbiel SM, Penninx BWJH, Spijker AT, Elzinga BM, van Rossum EFC. Hair cortisol, stress exposure, and mental health in humans: A systematic review. *Psychoneuroendocrinology*. 2013;38(8):1220-1235. doi:10.1016/j.psyneuen.2012.11.015
 48. Thau L, Gandhi J, Sharma S. Physiology, Cortisol. *StatPearls [Internet]*. StatPearls Publishing; 2023.
 49. National Scientific Council on the Developing Child. Excessive stress disrupts the architecture of the developing brain: Working paper no. 3. 2005/2014.
 50. Center on the Developing Child. The impact of early adversity on child development (In Brief). 2007. www.developingchild.harvard.edu
 51. Steptoe A. Invited review: The links between stress and illness. *Journal of Psychosomatic Research*. 1991;35(6):633-644. doi:10.1016/0022-3999(91)90113-3
 52. Stojanovich L, Marisavljevic D. Stress as a trigger of autoimmune disease. *Autoimmunity Reviews*. 2008;7:209-213. doi:10.1016/j.autrev.2007.11.007
 53. National Research Council (US) and Institute of Medicine (US) Committee on Integrating the Science of Early Childhood Development. The developing brain. In: Shonkoff JP, Phillips DA, eds. *From neurons to neighborhoods: The science of early childhood development*. National Academies Press (US); 2000:chap 8.
 54. Ungar M. The social ecology of resilience: Address context and cultural ambiguity of a nascent construct. *American Orthopsychiatric Association*. 2011;81(1):1-17.
 55. Center on the Developing Child. How to help families and staff build resilience during the COVID-19 outbreak. 2021. <https://developingchild.harvard.edu/resources/how-to-help-families-and-staff-build-resilience-during-the-covid-19-outbreak/>
 56. Maslow AH. A theory of human motivation. *Psychological Review*. 1943;50(4):370-396. doi:10.1037/h0054346
 57. Maslow AH. *Motivation and personality*. Harpers; 1954.
 58. Inagaki TK. Opioids and social connection. *Current Directions in Psychological Science*. 2018;27(2):85-90. doi:10.1177/0963721417735531
 59. Logan AC, Berman BM, Prescott SL. Vitality revisited: The evolving concept of flourishing and its relevance to personal and public health. *International Journal of Environmental Research and Public Health*. 2023;20(6)doi:10.3390/ijerph20065065
 60. Novak LF, Fowers BJ, Kiknadze NC, Calder AJ. A close analysis of eight flourishing measures. *The Journal of Positive Psychology*. 2024;doi:10.1080/17439760.2024.2322468
 61. Barnhart S, Bode M, Geaahart MC, Maguire-Jack K. Supportive neighborhoods, family resilience and flourishing in childhood and adolescence. *Children*. 2022;9(4)doi:10.3390/children9040495
 62. Gander F, Proyer RT, Ruch W. Positive psychology interventions addressing pleasure, engagement,

- meaning, positive relationships, and accomplishment increase well-being and ameliorate depressive symptoms: A randomized, placebo-controlled online study. *Frontiers in Psychology*. 2016;7(686) doi:10.3389/fpsyg.2016.00686
63. Rigney N, de Vries GJ, Petrulis A, Young LJ. Oxytocin, vasopressin, and social behavior: From neural circuits to clinical opportunities. *Endocrinology*. 2022;163(9)doi:10.1210/endo/bqac111
 64. Dictionary.com L, . Routine. <https://www.dictionary.com/browse/routine>
 65. Graybiel AM. Habits, rituals, and the evaluative brain. *Annual Review of Neuroscience*. 2008;31:359-387. doi:10.1146/annurev.neuro.29.051605.112851
 66. Pignatiello GA, Martin RJ, Hickman Jr. RL. Decision fatigue: A conceptual analysis. *Journal of Health Psychology*. 2020;25(1):123-135. doi:10.1177/1359105318763510
 67. Koome F, Hocking C, Sutton D. Why routines matter: The nature and meaning of family routines in the context of adolescent mental illness. *Journal of Occupational Science*. 2012;19(4):312-325. doi:10.1080/14427591.2012.718245
 68. Hou WK, Lai FTT, Ben-Ezra M, Goodwin R. Regularizing daily routines for mental health during and after the COVID-19 pandemic. *Journal of Global Health*. 2020;10(2)doi:10.7189/jogh.10.020315
 69. Clear J. *Atomic habits: Tiny changes, remarkable results: An easy and proven way to build good habits and break bad ones*. Penguin Random House; 2018.
 70. Bradshaw TK. The post-place community: Contributions to the debate about the definition of community. *Community Development*. 2008;39(1):5-16. doi:10.1080/15575330809489738
 71. Rosenbaum MS. Exploring the social supportive role of third places in consumers' lives. *Journal of Service Research*. 2006;9(1):59-72. doi:10.1177/1094670506289530
 72. Kaplan S. The restorative benefits of nature: Toward an integrative framework. *Journal of Environmental Psychology*. 1995;15(3):169-182. doi:10.1016/0272-4944(95)90001-2
 73. The Change Collective. *Working with vulnerable youth to enhance their natural supports: A practice framework*. 2018;Version 2.0
 74. Perry BL, McConnell WR, Peng S, et al. Social networks and cognitive function: An evaluation of social bridging and bonding mechanisms. *Gerontologist*. 2022;62(6):865-875. doi:10.1093/geront/gnab112
 75. Sherbourne CD, Stewart AL. The MOS social support survey. *Social Science & Medicine*. 1991;32(6):705-714. doi:10.1016/0277-9536(91)90150-b
 76. Proctor AS, Barth A, Holt-Lunstad J. A healthy lifestyle is a social lifestyle: The vita link between social connection and health outcomes. *Lifestyle Medicine*. 2023;4(4):e91. doi:10.1002/lim2.91
 77. Love TM. Oxytocin, motivation and the role of dopamine. *Pharmacology, Biochemistry and Behavior*. 2014;119:49-60. doi:10.1016/j.pbb.2013.06.011
 78. Skuse DH, Gallagher L. Dopaminergic-neuropeptide interactions in the social brain. *Trends in Cognitive Sciences*. 2009;13(1):27-35. doi:10.1016/j.tics.2008.09.007
 79. Pearce E, Wlodarski R, Machin A, Dunbar RI. Variation in the β -endorphin, oxytocin, and dopamine receptor genes is associated with different dimensions of human sociality. *Proceedings of the National Academy of Sciences of the United States of America*. 2017;114(20):5300-5305. doi:10.1073/pnas.1700712114
 80. Zak PJ, Kurzban R, Matzner WT. Oxytocin is associated with human trustworthiness. *Hormones and Behavior*. 2005;48(5):522-527. doi:10.1016/j.yhbeh.2005.07.009
 81. National Scientific Council on the Developing Child. *Three principles to improve outcomes for children and families*. 2021 Update. www.developingchild.harvard.edu
 82. Canadian Mental Health Association. *Social support*. CMHA National. Accessed July 23, 2024. <https://cmha.ca/brochure/social-support/>
 83. Daly L. *Toxic relationships: Dealing with unhealthy family members*. Step Up for Mental Health. Accessed July 23, 2024. <https://www.stepupformentalhealth.org/toxic-relationships-dealing-with-unhealthy-family-members/>
 84. Hyder S. *How to be kind when you're upset with your partner: Kindness is not just important in the heat of an argument*. The Gottman Institute. Accessed July 23, 2024. <https://www.gottman.com/blog/how-to-be-kind-when-youre-upset-with-your-partner/>
 85. McNeil D. *Are rough patches in relationships normal? What you can do when your relationship is on the rocks*. The Gottman Institute. Accessed July 23, 2024. <https://www.gottman.com/blog/are-rough->

References

- patches-in-relationships-normal/
86. Beaty J. Rescuing your relationship from stress. The Gottman Institute. Accessed July 23, 2024. <https://www.gottman.com/blog/rescuing-relationship-stress/>
 87. Sandstrom GM, Dunn EW. Is efficiency overrated?: Minimal social interactions lead to belonging and positive affect. *Social Psychological and Personality Science*. 2014;5(4):437-442. doi:10.1177/1948550613502990
 88. Sandstrom GM, Dunn EW. Social interactions and well-being: The surprising power of weak ties. *Personality and Social Psychology Bulletin*. 2014;40(7):910-922. doi:10.1177/0146167214529799
 89. Merriam-Webster.com Dictionary. Merriam-Webster. February 8, 2024. <https://www.merriam-webster.com/dictionary/respect>
 90. Connections First. Social snacking toolkit. Accessed April 5, 2024. <https://www.connectionsfirst.ca/social-snacking>
 91. Walsh J-LA, Manhas KP, Stephenson N, McDonald SW, Patten SB, Tough SC. Community perceptions of natural supports approaches: A Canadian grounded theory study with Connections First. Unpublished paper. 2024;
 92. Bronfenbrenner U. Toward an experimental ecology of human development. *American Psychologist*. 1977;32(7):513-531. doi:http://dx.doi.org/10.1037/0003-066X.32.7.513
 93. Stokols D. Establishing and maintaining healthy environments. Toward a social ecology of health promotion. *American Psychologist*. 1992;47(1):6-22. doi:10.1037//0003-066x.47.1.6
 94. Statistics Canada. Immigrants make up the largest share of the population in over 150 years and continue to shape who we are as Canadians. 2022. <https://www150.statcan.gc.ca/n1/daily-quotidien/221026/dq221026a-eng.pdf>
 95. Marshall K. The family work week. Labour and Household Survey Analysis Division; 2009. <https://www150.statcan.gc.ca/n1/pub/75-001-x/2009104/article/10837-eng.htm>
 96. UNICEF Canada. Where does Canada stand? The Canadian Index of Child and Youth Well-being, 2019 Baseline Report. 2019. One Youth. https://oneyouth.unicef.ca/sites/default/files/2019-08/2019_Baseline_Report_Canadian_Index_of_Child_and_Youth_Well-being.pdf
 97. The Human Early Learning Partnership (HELP). The Middle Years Development Instrument (MDI): MDI data trends summary 2018/19. 2019.
 98. Wiens K, Bhattarai A, Pedram P, et al. A growing need for youth mental health services in Canada: Examining trends in youth mental health from 2011 to 2018. *Epidemiology and Psychiatric Sciences*. 2020;29(e115):1-9. doi:10.1017/S2045796020000281
 99. Dyslexia Canada. Dyslexia in Canada. Accessed July 24, 2024. <https://dyslexiacanada.org/en/who-we-are#:~:text=The%20education%20system%20in%20Canada,evidence%2Dbased%20approach%20to%20reading.>
 100. Statistics Canada. Pink Shirt Day (Anti-bullying Day). Government of Canada. Accessed July 24, 2024. <https://www.statcan.gc.ca/o1/en/plus/3037-pink-shirt-day-anti-bullying-day>
 101. Statistics Canada. Census Profile. 2023. 2021 Census of Population. Accessed July 22, 2024. <https://www12.statcan.gc.ca/census-recensement/2021/dp-pd/prof/index.cfm?Lang=E>
 102. Statistics Canada. The Canadian census: A rich portrait of the country's religious and ethnocultural diversity. 2022. <https://www150.statcan.gc.ca/n1/en/daily-quotidien/221026/dq221026b-eng.pdf?st=f9FssfAZ>
 103. Holt-Lunstad J. Social connection as a public health issue: The evidence and a systemic framework for prioritizing the "social" in social determinants of health. *Annual Review of Public Health*. 2022;43:193-213. doi:10.1146/annurev-publhealth-052020-110732
 104. Lammer L, Beyer F, Luppa M, et al. Impact of social isolation on grey matter structure and cognitive functions: A population-based longitudinal neuroimaging study. *eLife*. 2023;12(e83660):1-65. doi:10.7554/eLife.83660
 105. McLafferty M, O'Neill S, Armour C, Murphy S, Bunting B. The mediating role of various types of social networks on psychopathology following adverse childhood experiences. *Journal of Affective Disorders*. 2018;238:547-553. doi:10.1016/j.jad.2018.06.020
 106. Norman GJ, Hawkey LC, Cole SW, Berntson GG, Cacioppo JT. Social neuroscience: The social brain, oxytocin, and health. *Social Neuroscience*. 2012;7(1):18-29. doi:10.1080/17470919.2011.568702
 107. Stewart D, Sun J. How can we build resilience in primary school aged children? The importance of

- social support from adults and peers in family, school and community settings. *Asia-Pacific Journal of Public Health*. 2004;16:S37-S41. doi:10.1177/101053950401600S10
108. Yang YC, Boen C, Gerken K, Li T, Schorpp K, Harris KM. Social relationships and physiological determinants of longevity across the human life span. *Proceedings of the National Academy of Sciences of the United States of America*. 2016;113(3):578-583. doi:10.1073/pnas.1511085112
 109. Brinker J, Cheruvu VK. Social and emotional support as a protective factor against current depression among individuals with adverse childhood experiences. *Preventive Medicine Reports*. 2016;5:127-133. doi:10.1016/j.pmedr.2016.11.018
 110. Uvnäs-Moberg K, Petersson M. Oxytocin, a mediator of anti-stress, well-being, social interaction, growth and healing. *Zeitschrift für Psychosomatische Medizin und Psychotherapie*. 2005;51(1):57-80. doi:10.13109/zptm.2005.51.1.57
 111. Baumeister RF, Leary MR. The need to belong: Desire for interpersonal attachments as a fundamental human motivation. *Psychological Bulletin*. 1995;117(3):497-529.
 112. Chong A, Tolomeo S, Xiong Y, et al. Blending oxytocin and dopamine with everyday creativity. *Scientific Reports*. 2021;11(16185)doi:10.1038/s41598-021-95724-x
 113. Horgan D, Forde C, Parkes A, Martin S. Children and young people's experiences of participation in decision-making at home, in schools and in their communities. 2015.
 114. Colonnello V, Heinrichs M. Oxytocin and self-consciousness. *Frontiers in Human Neuroscience*. 2016;10(67)doi:10.3389/fnhum.2016.00067
 115. Kickbusch I. The political determinants of health – 10 years on. *BMJ*. 2015;350doi:10.1136/bmj.h81
 116. Willen SS, Fisher Williamson A, Walsh CC, Hyman M, Tootle W. Rethinking flourishing: Critical insights and qualitative perspectives from the U.S. Midwest. *Social Science & Medicine Mental Health*. 2022;2(100057)doi:10.1016/j.ssmmh.2021.100057
 117. Fredrickson BL. The role of positive emotions in positive psychology: The broaden-and-build theory of positive emotions. *American Psychologist*. 2001;56(3):218-226. doi:10.1037//0003-066x.56.3.218
 118. Fredrickson BL. Biological underpinnings of positive emotions and purpose. In: Forgas JP, Baumeister RF, eds. *The social psychology of living well*. 1st ed. Taylor & Francis; 2018:chap 10.
 119. Nakai T, Nakatani H, Hosoda C, Nonaka Y, Okanoya K. Sense of accomplishment is modulated by a proper level of instruction and represented in the brain reward system. *PLoS ONE*. 2017;12(1):1-20. doi:10.1371/journal.pone.0168661
 120. Rushton S, Juola-Rushton A, Larkin E. Neuroscience, play and early childhood education: Connections, implications and assessment. *Early Childhood Education Journal*. 2010;37:351-361. doi:10.1007/s10643-009-0359-3
 121. Fareri DS. Neurobehavioral mechanisms supporting trust and reciprocity. *Frontiers in Human Neuroscience*. 2019;13(271):1-7. doi:10.3389/fnhum.2019.00271
 122. Molm LD. The structure of reciprocity. *Social Psychology Quarterly*. 2010;73(2):119-131. doi:10.1177/0190272510369079
 123. Xiao X, Yuen Loke A. The effects of co-parenting/intergenerational co-parenting interventions during the postpartum period: A systematic review. *International Journal of Nursing Studies*. 2021;119(103951)doi:10.1016/j.ijnurstu.2021.103951
 124. Eagleson C, Hayes S, Mathews A, Perman G, Hirsch CR. The power of positive thinking: Pathological worry is reduced by thought replacement in Generalized Anxiety Disorder. *Behaviour Research and Therapy*. 2016;78:13-18. doi:10.1016/j.
 125. Sandstrom GM, Dunn EW. Is efficiency overrated?: Minimal social interactions lead to belonging and positive affect. *Social Psychological and Personality Science*. 2014;5(4):437-442.
 126. Sandstrom GM, Dunn EW. Social interactions and well-being: The surprising power of weak ties. *Personality and Social Psychology Bulletin*. 2014;40(7):910-922.
 127. Granovetter MS. The strength of weak ties. *American Journal of Sociology*. 1973;78(6):1360-1380.
 128. Perry-Smith JE. Social yet creative: The role of social relationships in facilitating individual creativity. *The Academy of Management Journal*. 2006;49(1):85-101.
 129. Pinker S. *The village effect: How face-to-face contact can make us healthier and happier*. Canada: Vintage Canada; 2015.



Routines Resources Relationships



ISBN 978-1-0695546-0-4



9 781069 554604



Cultivating Resilience and Flourishing: A Workbook V2.0 (c) 2025 by Suzanne Tough, PhD is licensed under CC BY-ND 4.0.

To view a copy of this license, visit <https://creativecommons.org/licenses/by-nd/4.0/>