

Adverse Childhood Experiences Summit: BC & Beyond

Taking action to address ACEs with improved policies and practices.

Day 1 - Tuesday, November 14th

7:30 - 9:00	Registration & Breakfast		Ballroom Foyer
9:00 - 9:30	Welcome First Nations opening & welcome from the President of Doctors of BC.	Dr Trina Larsen Soles	Ballroom
9:30 - 10:30	ACEs 101 Overview of the brain story science and Adverse Childhood Experiences from the Chair of Palix Foundation in Alberta.	Nancy Mannix	Ballroom
10:30 - 11:00	Break		
11:00 - 12:15	How Can We Mitigate the Impact of ACEs? Highlighting work in BC and elsewhere, and discussing how we can take action in our own communities.		Ballroom
12:15 - 1:00	Lunch		
1:00 - 2:30	ACEs & the Opioid Crisis What is the connection between trauma and adversity, and the growing opioid crisis in Canada? How can we respond differently given what we now know about the impact of ACEs?		Ballroom
2:30 - 3:00	Break		
3:00 - 4:30	Poster Session: Tackling ACEs and Trauma in BC & Beyond Profiling innovation from across BC and elsewhere, and an opportunity for networking.		Junior Ballroom
4:30 - 5:30	Resilience Screening (TBC)		Ballroom
6:30 - 8:30	Dinner* With special guest Dr Vincent Felitti, principal investigator of the original ACEs study.	Dr Vincent Felitti	Ballroom

*The Joint Collaborative Committees are subsidizing the cost of dinner; if you would like to attend a \$25 nonrefundable fee will be collected during the registration process.





Day 2 - Wednesday, November 15th

7:30 - 8:30	Breakfast	Ballroom Foyer	
8:30 - 8:50	Welcome	Ballroom	
8:50 - 10:05	Exploring ACEs and Trauma Informed Approaches in Indigenous Contexts An in-depth look at multigenerational trauma and building resilience in Indigenous communities.	Ballroom	
10:05 - 10:30	Break		
10:30 - 12:00	Acknowledging ACEs & Moving Forward		
Session 1.1	Cultivating Resilience: Opportunities to Impact ACEs in Maternity Care	Breakout Room	
Session 1.2	Addressing ACEs in Your Primary Care Practice	Breakout Room	
Session 1.3	Cultivating Resilience: Opportunities to Impact ACEs in Policing and the Justice System	Breakout Room	
Session 1.4	Universal Resilience Building: How Peer Support, Engagement, and ACEs May Be Our Key to Success	Breakout Room	
Session 1.5	Our Journey Building Trauma Informed Schools	Breakout Room	
Session 1.6	Communities Changing Attitudes through Awareness and Collaboration	Breakout Room	
Session 1.7	ACEs Application for Policy Makers	Breakout Room	
12:00 - 1:00	Lunch		
1:00 - 1:40	Breakout Discussions Round Up Debriefing key messages and next steps from the breakout discussions.	Ballroom	
1:40 - 3:00	Bringing It All Together – Locally, Regionally and ProvinciallyNancy PooleThe past day and a half has been filled with opportunities toIearn more about ACEs and the applications in differentsettings. So what? Now what?	Ballroom	
3:00 - 3:30	Closing	Ballroom	

Day 1 Dinner

Dr Vincent Felitti

Principal Investigator, the Adverse Childhood Experiences (Ace) Study

A renowned physician and researcher, Dr. Vincent J. Felitti is one of the world's foremost experts on childhood trauma. Leading the charge in research into how adverse childhood experiences affect adults, he is co-principal investigator of the internationally recognized Adverse Childhood Experiences (ACE) Study, a long-term, in-depth, analysis of over 17,000 adults. Defying conventional belief, this study famously revealed a powerful relationship between our emotional experiences as children and our physical and mental health as adults. In fact, the ACE study shows that humans convert childhood traumatic emotional experiences into organic disease later in life. Revolutionary at its inception, Felitti's groundbreaking research remains extremely relevant to today's healthcare models.

Founder of the Department of Preventive Medicine for Kaiser Permanente, Felitti served as the chief of preventive medicine for over 25 years. Under Dr. Felitti's leadership, his department provided comprehensive medical evaluations to 1.1 million individuals, becoming the largest single-site medical evaluation facility in the western world. During this time, Felitti's revolutionary health risk abatement programs incorporated weight loss, smoking cessation, stress management, and a wide range of cutting-edge efforts to reduce patient risk factors. Dr. Felitti also has served on advisory committees at the Institute of Medicine and the American Psychiatric Association. A noted expert on the genetic disease hemochromatosis, as well as obesity, he educates audiences around the country on these two very common, deadly maladies..

An engaging speaker, Felitti has traveled the world speaking with audiences and various policy leaders about his research. A well versed medical expert, Felitti also uses his knowledge to speak out against domestic violence and other forms of childhood trauma. Drawing on his years of experience, he has become an important voice advocating for the wellbeing of children everywhere. While time may not heal all wounds, Felitti helps show audiences how we can understand these physical and mental traumas, and ultimately, prevent them.

Biography Provided By:



Day 2 Breakout Discussions Acknowledging ACEs & Moving Forward

1.1 Cultivating Resilience: Opportunities to Impact ACEs in Maternity Care

Expanding on our knowledge of the power of early intervention and the impacts of Adverse Childhood Experiences on health outcomes, we will explore the 'how', the 'who', the 'what' and the 'then what' of embedding the ACEs questionnaire and a resilience focus into maternity care practices.

Learning Objectives:

- (1) Participants will gain a deeper appreciation of how attention to Adverse Childhood Experiences in maternity care can strengthen health outcomes for multiple generations.
- (2) Participants will learn of several interdisciplinary applications of ACEs history taking from BC and Alberta champions.

1.2 Addressing ACEs in your Primary Care Practice

Physicians, allied health practitioners, leaders in primary care policy and system re-design, and people with lived experience will discuss the value of incorporating Adverse Childhood Experiences into history taking and the use of the questionnaire. This is an interactive session using stories, examples and Q&A, and an opportunity to review supports and resources.

Learning Objectives:

- (1) Participants will increase confidence to incorporate ACEs into personal and professional practice and policy.
- (2) Participants will make connections with fellow professionals and other stakeholders focused on ACEs in primary care, for future collaboration.

1.3 Cultivating Resilience: Opportunities to Impact ACEs in Policing and the Justice System

It is of no surprise to those that work within, or provide support to the Policing and Justice systems, that many of those who intersect with these systems have experienced trauma in their lifetime. What may be new information is how an understanding of trauma and the ACE assessment tool can assist in supporting meaningful decisions resulting in improved outcomes for individuals intersecting with the Policing and Justice systems.

Learning Objectives:

- (1) Participants will learn how increased understanding of trauma can support meaningful decisionmaking.
- (2) Participants will learn how working in partnership and collaboration improves the system's ability to respond effectively.



1.4 Universal Resilience Building: How Peer Support, Engagement, and ACEs May Be Our Key to Success

The session is led by youth of the Child and Youth Mental Health and Substance Use Collaborative Steering Committee. Using learnings from the Surrey-North Delta Local Action Team's successful youth

engagement series "Engage," personal experiences of mental health challenges, a presentation by Dr Jana Davidson and small group discussions with participants, this interactive session will educate and empower participants to engage youth more successfully, using ACEs as a foundation for resilience building initiatives.

Learning Objectives:

- (1) Participants will understand the vision for resilience building in BC from the perspective of youth with lived experience of mental health/substance use.
- (2) Learn innovative ways to engage high risk youth in your work.

1.5 Our Journey Building Trauma Informed Schools

Through the sharing of the experiences of two communities – Penticton and Cariboo – this session will outline the practical steps School Districts can take to embed ACEs-informed, trauma-sensitive practices into their schools, supported by the other sectors in a community.

Learning Objectives:

- (1) Participants will learn how school and community partners have embraced the ACEs lens as a way to shift culture and improve student outcomes.
- (2) Participants will, through discussion, identify next steps for the application of the ideas to their communities.

1.6 ACEs: Communities Changing Attitudes through Awareness and Collaboration

The communities of Smithers and Mission share how they are moving towards shifting the public narrative and building compassionate communities where children, youth and families are supported from a trauma informed approach. Community resilience is established by accountability for all our community members and increased understanding of ACEs and trauma sensitive strategies.

Learning Objectives:

(1) Participants will engage in rich conversations that will inspire and assist them in planning next steps for their communities.

1.7 ACEs Application for Policy Makers

Leaders and policy makers will engage in a dialogue to explore the benefits of embedding ACEs into policy and practice across the health and social sectors.

Learning Objectives:

- (1) Participants will build a shared understanding of where the intersections are for ACEs, Trauma Informed Care and the science of brain development to identify how these combine to form robust health and social policy.
- (2) Participants will identify how ACEs can assist policy makers to advance government priorities.
- (3) Participants will identify the opportunities to work collectively on ACEs to improve health and economic outcomes.