

Organizing a  
Regional Academy on Violence and Abuse  
  
A Planning Guide



ADVANCING HEALTH EDUCATION & RESEARCH

# Regional Academies on Violence and Abuse

## A Planning Guide

### Introduction and Purpose

The Academy on Violence and Abuse (AVA) is working with local organizations and communities to increase awareness of the prevalence and health effects of violence, abuse and neglect throughout the lifecourse. AVA 's mission is to advance health education and research on the recognition, treatment and prevention of the health effects of violence and abuse. The concept of a Regional Academy creates opportunities for local communities to collaborate with national experts to effect change on the local and regional level. This guide is not intended to provide comprehensive guidance regarding planning and executing of conferences or major events. It is offered as a supplemental resource for individuals and organizations who wish to collaborate with the AVA in organizing a local Regional Academy.

This guide incorporates learnings from the inaugural Regional Academies held in Ohio in April 2014. It is important that future Regional Academies include similar content and a comparable agenda. The agenda is designed to provide participants with a wide array of information; many of the presentations can be offered as more robust educational opportunities in the future. The Regional Academy is oriented toward a broad scope as opposed to great depth or detail in any one area. Resources are offered to participants who wish to pursue a subject area further in their own development.

The advantages to hosting a Regional Academy are many and include:

- Providing exposure to a wide body of knowledge, research and practice
- Creating networking opportunity and helps to build a local learning community
- Promoting local leaders (individuals and organizations) who are seeking to address the impact of violence and abuse as well as to prevent its occurrence

Attachments to this guide include the promotional flyer and program guide/agenda that were developed for the inaugural Regional Academy. Together, they provide useful information to those considering such an event and are available to any individuals or organizations to use as a template for future Academies.

### Planning

An individual or small group of individuals (Planner) are needed to lead the local planning process and the execution of the Regional Academy. The planning process for a Regional Academy will be a collaborative process between the AVA and local planner.

Most often, the local Planner(s) will be associated with a sponsoring organization and it is critical that the organization is committed and supportive of the idea. The AVA and the Planner will communicate on a regular basis throughout the process. Together, the AVA and Planner will agree on a date, location and agenda as well as negotiate costs associate with the AVA's role. The roles and responsibilities of the AVA and Planner are distinct.

The AVA will:

- Provide guidance and consultation on the development of the agenda
- Provide up to four faculty/presenters for the morning sessions
- Allow for the use of the AVA logo for promotional and related purposes

The Planner will:

- Secure the venue for the Regional Academy
- Organize afternoon agenda and secure necessary speakers
- Conduct the promotional, registration and CEU/CME activities for the event
- Secure sponsors, if desired, to provide financial, logistical or other support
- Act as the fiscal agent for the event

The venue must be suitable for a professional development activity such as this, which means it must be accessible, provide ample parking, have conformable seating and ensure the availability of basic IT services (projector for presentations, web access, etc.). Additional roles and responsibilities are described in Attachment B: Memorandum of Understanding.

Sponsors may be secured for a number of financial and other supports. These may include:

- Sponsoring the AVA or a morning speaker
- Provide food for lunch or breaks
- Provide a speaker for an afternoon presentation or panel
- Provide CMEs/CEUs
- Provide a venue for the event

## Recommended Agenda

The attached agenda/program for the inaugural Academy should be consulted for guidance by the Planner. The morning section is designed primarily by the AVA with input from the Planner. The afternoon section is designed primarily by the Planner with input from the AVA. The afternoon section should feature individuals and programs from the local community and region who can effectively present information in concert with the morning sessions. Afternoon sessions may include individual or panel presentations. Roundtable and breakout sessions should also be considered. In addition to local professional experts, it is strongly suggested that consumer/survivors of violence and trauma participate in afternoon presentations and/or panel discussions.

## Funding

The cost of a Regional Academy can vary significantly depending primarily on the number of attendees, food costs and honorariums. The primary costs for a Regional Academy are: AVA (speakers, etc.), food, venue, CME/CEU applications and local speaker honorariums.

The AVA fee is negotiated for each Regional Academy and will be an all-inclusive fee for the morning speakers (including travel, lodging, etc.). Local leaders and speakers in the afternoon section may be

sponsored by their own organization, or receive an honorarium from an event sponsor. Food costs can be reduced if arrangements are made for registrants to have lunch on their own at a nearby restaurant or cafeteria.

Revenue to cover the cost for the Regional Academy can be provided from:

- Foundations (community, hospital and healthcare)
- Organizational or individual sponsorships
- Registration fees
- Exhibitors

The AVA consultant can assist local Planners in exploring ways to cover the cost for the Regional Academy. The inaugural Regional Academy was funded by several organizations, including a grant that covered about 60% of the cost. There was no registration fee for participants. The second Regional Academy did not have the benefit of a foundation grant, but organizational sponsorships allowed the cost to registrants to be subsidized and required only \$20 as a registration fee. Both of these events offered food at breaks, lunch and continuing education credits for physicians, nurses, counselors and social workers. In addition, a children's hospital provided memory sticks to all participants that contained all conference materials and other supplemental resources.

## Promotion

A template for a promotional poster/flyer is attached and available to Planners to adapt for their local event. It is highly recommended that the event is promoted to attract a broad and diverse group of professionals including healthcare, mental health, addictions, educators, law enforcement, and criminal. While most of the promotional activity can be done electronically and online, it may be beneficial to print a small number of posters/flyers to distribute and post in hard copy. A great deal of promotion can be done for very little cost.

## Attachments

- A: About the AVA
- B: Memorandum of Understanding
- C: Sample Regional Academy Mini-poster/Flyer
- D: Sample Regional Academy Program

## About the Academy on Violence and Abuse

The Academy on Violence and Abuse (AVA) was created to address the concerns highlighted in a 2002 report released by the Institute of Medicine (IOM). The report, which challenged the health care community to better educate and train health professionals about the often unrecognizable health effects of violence and abuse, inspired a group of health care professionals to converge in effort to gain recognition and understanding for violence and abuse as health care issues.

AVA is a non-profit, academic, membership-based organization. Our membership includes a variety of health care professionals, representing various facets of the health care field. Our goal is to continue expanding health education and research to integrate knowledge about violence and abuse into the training of all health professionals to promote safe families, safe workplaces and safe communities.

**Mission:** The mission of the AVA is to advance health education and research on the recognition, treatment and prevention of the health effects of violence and abuse.

This will be accomplished by:

- Fostering and advancing best science regarding the relationship of violence and abuse to health and its prevention, identification, and care
- Accelerating translation of best science to practice
- Developing and widely promulgating competencies and standards that define quality care
- Improving the abilities/skills of all health care professionals to deliver compassionate, quality care.

**Vision:** The vision of AVA is the prevention of violence and abuse, as well as its identification and care, is fully integrated into the delivery of quality healthcare. People of all ages are safer and healthier.

### Reframing Society's View

Violence and abuse have been viewed predominately as criminal justice or social welfare issues with a focus on stopping crime, prosecuting criminals and treating the victims' immediate physical wounds. Criminal justice systems, however, are not designed to address the full spectrum of health care needs of victims of violence and abuse. Subtle forms of violence and abuse such as verbal abuse and neglect are rarely recognized or deemed serious enough to be classified as criminal behavior. Still, these less obvious cases of abuse require prevention and contribute to serious health problems, which warrant professional treatment.

Without formal training, health care professionals often lack knowledge and understanding about the issues surrounding violence and abuse, and are inexperienced in recognizing related physical and emotional health symptoms. Instead, health problems resulting from abuse are often attributed to unrelated factors — or worse yet, to nothing at all

For these reasons, AVA is creating dialogue, raising awareness and promoting changes in the way the issues of violence and abuse are addressed in health professional education and its academic communities.

AVA intends to enhance the infrastructure of health care education and highlight the pivotal role health care professionals play in addressing these critical issues, ultimately reframing the limited view of violence and abuse into one that establishes them as critical health care issues.

# Memorandum of Understanding

This Memorandum of Understanding is by and between [Local Planner] \_\_\_\_\_ (hereinafter “\_\_\_\_\_”), located at \_\_\_\_\_, and the **Academy on Violence and Abuse** (hereinafter “AVA”), located at 4505 Beach Blvd, Jacksonville, FL 32207.

**WHEREAS**, [Local Planner] desires to make available to local health care professionals a training intended to assist with the integration of knowledge about violence and abuse into the care provided by those professionals;

**WHEREAS**, AVA has agreed to assist [Local Planner] with the development of such training through the provision of materials, collaboration and expertise; and

**WHEREAS**, the Parties wish to set forth in this Memorandum of Understanding (“MOU”) their respective responsibilities in regards to such training.

**NOW, THEREFORE**, in consideration of the mutual covenants and agreements contained herein, [Local Planner] and AVA hereby agree as follows:

## **I. AVA Responsibilities**

The AVA agrees to:

1. Assist [Local Planner], through regular communication and collaboration, in the development of a training curriculum, based on the needs, desires and objectives of the local community.
2. Identify potential faculty presenters who are content experts in their field.
3. Provide [Local Planner] with adequate and relevant resources and materials (e.g. articles, PowerPoint presentations, websites etc.) to be made available to training participants.
4. Permit [Local Planner] to use the AVA name and logo in its training announcements and materials.
5. Assist in the development of the training’s evaluation instrument.

## **II. [Local Planner] Responsibilities**

The [Local Planner] agrees to:

1. Provide the financial resources necessary to develop, promote and conduct the training.
2. Attend to the logistical aspects of the training including but not limited to, promotion of the training, registration of participants, duplication of AVA-provided materials, and development and/or duplication of other training-related materials.
3. Secure an appropriate venue for the training and ensure facilities are adequate and appropriate.

4. Contact and work directly with individual faculty presenters regarding travel arrangements, compensation, materials and all other details related to the faculty members' involvement with the training.
5. Serve as the fiscal agent for the training and all matters related thereto.
6. Ensure all necessary equipment is available at the training, including audio visual.
7. Apply for and facilitate the provision of continuing education credits for physicians, nurses, social workers and other disciplines as relevant to the training.
8. Handle evaluation activities related to the training and share evaluation results with AVA.

### **III. Mutual Responsibilities**

Both Parties agree to:

1. Collaborate and communicate as necessary to accomplish the goals of this MOU.
2. Jointly develop the training curriculum based on the needs, desires and objectives of the local community.
3. Jointly determine the appropriate date(s) for the training.
4. Ensure respective and mutual responsibilities are carried out in a timely manner in order to permit their completion within a reasonable timeframe with respect to the chosen date(s).
5. Ensure that AVA does not assume any financial responsibility in regards to the training other than that incident to the performance of the responsibilities set forth herein.
6. Utilize the AVA's Regional Academy Sub-Committee as necessary to fulfill the AVA's responsibilities under this MOU.
7. Employ best efforts to resolve any disputes or disagreements regarding the subject matter of this MOU. The Parties shall consult and negotiate with each other in good faith and recognizing their mutual interests, attempt to reach a just and equitable solution satisfactory to both Parties. Engaging in such negotiations to resolve such disputes or disagreements does not preclude either Party from taking any action available under applicable law to protect its rights.

### **IV. Miscellaneous Provisions**

1. This MOU shall be effective as of its signing and shall terminate upon completion of the evaluation activities related to the training. Additionally, either party may terminate this MOU for any reason upon written notice by the terminating Party to the other Party except that any such notice must be provided at least sixty (60) days prior to the agreed upon training date, or the earliest thereof if more than one date is agreed upon, in order to ensure that [Local Planner] does not incur financial loss in relation to faculty presenter, space/equipment.

2. This MOU, together with all parts incorporated herein by reference or Attachment hereto as an Exhibit, represents the entire agreement between the Parties and supersedes any and all prior agreements of the Parties with respect to the subject matter of this MOU.
3. No change, amendment or modification of any provision of this MOU shall be valid unless set forth in a written instrument and signed by the Parties.
4. Each Party agrees to accept and be responsible for its own acts or omissions, as well as the acts or omissions of its employees and agents, in complying with the terms of this MOU and nothing in this MOU shall be interpreted to place any such responsibility for professional acts or omissions onto the other Party. All losses, costs, or damages which may occur or be claimed with respect to any person or persons, corporation, property or chattels resulting from activities of a Party pursuant to this MOU shall be the responsibility of that Party as such liabilities may be determined by a court of law or pursuant to any other appropriate procedures.
5. This MOU shall be governed by and construed in accordance with the laws of the State of [INSERT].
6. Nothing express or implied in this MOU is intended or shall be deemed to confer upon any person other than the Parties and their respective successors or assigns, any rights, remedies, obligations or liabilities. Neither party may assign or delegate its rights or obligations pursuant to this MOU without the prior written consent of the other.

*IN WITNESS WHEREOF, the Parties hereto, each acting under due and proper authority, have duly executed this Memorandum of Understanding on the date set forth below.*

\_\_\_\_\_  
 [INSERT Planner Name/Title]  
 [INERT Organization]

\_\_\_\_\_  
 Nicole Taylor, Administrative Director  
 Academy on Violence and Abuse

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Date



# The Long-Term Health Effects of Violence, Abuse and Trauma: *Implications of the ACE Study for Healthcare Practice and Public Policy*

Trauma-informed care across the lifespan  
and across community systems

The Adverse Childhood Experience (ACE) Study and the ongoing analysis of its wealth of data is the focus of this Regional Academy event in Ashland, Ohio.

Learn how the ACE Study will

- Inform and improve health policy and practice in your healthcare organization and community
- Inspire collaboration among systems of care and integration of services for adults, children, and families (e.g., health, mental health, substance abuse, child welfare, education, criminal justice, among others)

## THE ACE STUDY

The ACE Study is an ongoing collaboration between Kaiser Permanente of San Diego and the U.S. Center for Disease Control. The study began in 1995-1997 as a retrospective analysis of the health status of 17,337 middle-class adult men and women. These individuals are now being followed prospectively in their eighteenth year. The ACE Study is currently being replicated by health departments in 21 states and by the World Health Organization in 14 countries.

### Structure

The original ACE Study included a standardized but unusually comprehensive medical questionnaire, detailed physical examination, and extensive laboratory testing with biomedical measurements. Ten categories of adverse childhood experience (ACE) were included in a separate four-page questionnaire. These categories included physical, emotional, and contact sexual abuse; emotional and physical neglect; growing up in a household without both biological parents; growing up in a household where mother was treated violently, where one member of the household was alcoholic or a drug user, where one member was chronically depressed or mentally ill, where one member was imprisoned.

### Results

The ACE Study is the largest epidemiological analysis of its kind ever conducted, having examined and correlated multiple risk factors and various outcomes. The first results of the ACE Study were published in 1998. Ongoing analysis has produced over 80 publications thus far. A few examples of the original findings include the following:

- Over 60 percent of patients had experienced one or more of the 10 adverse childhood experiences (ACEs)
- Of those who experienced at least one ACE, 87 percent reported at least one other ACE and 70 percent reported two or more ACEs
- A strong and direct correlation among one's ACE Score (number of ACE categories reported) and biomedical health, mental health, and substance abuse problems in adulthood, including chronic health conditions, such as obesity, diabetes, heart disease, hepatitis, and cancer, among others.

### Implications of ACE Study

- Adverse experiences are *risk factors* for chronic health, mental health, and other conditions
- Health data for trauma-informed care
- Health data for integrated primary healthcare and behavioral healthcare
- Health data to inform public policy and prevention practices

Assault  
Abuse  
Neglect  
Abandonment

*The body records  
and remembers. The  
mind tries to cope.  
It creates rituals,  
routines, and habits  
that may feel like  
protective solutions  
but often result in  
poor health outcomes  
and chronic health  
conditions.*

Reduce  
intergenerational  
transmission of adverse  
experiences

## Sponsors

- Mental Health and Recovery Board of Ashland County
- Samaritan Regional Health System
- Margaret Clark Morgan Foundation

## Partners

- Wayne-Holmes Mental Health & Recovery Board
- Appleseed Community Mental Health Center
- Visiting Nurse Association of Ohio

# The Long-Term Health Effects of Violence, Abuse and Trauma:

Implications of the ACE Study for Healthcare Practice and Public Policy



*“The ACE Study reveals a powerful relationship between our emotional experiences as children and our physical and mental health as adults, as well as the major causes of adult mortality in the United States. It documents the conversion of traumatic emotional experiences in childhood into organic disease later in life.”*

—Vincent J. Felitti, MD,  
co-principal investigator of the  
Adverse Childhood Experiences  
(ACE) Study

*Trauma-Informed  
Healthcare*

*Trauma-Informed  
Behavioral  
Healthcare*

*Integrated Primary  
& Behavioral  
Healthcare*

ver. 2014.1.24

## DATE & TIME

- April 16, 2014, 7 am to 4:30 pm

## LEARNING OBJECTIVES

Participants in this event will

- Identify information and resources about the prevalence and long-term health effects of childhood trauma, abuse, violence, and neglect
- Recognize how the ACE Study can inform public policy and healthcare practice and promote integrated and trauma-informed healthcare and behavioral healthcare

## WHO SHOULD ATTEND

The primary audience of this Regional Academy includes professionals and policymakers from primary healthcare in Ashland, Richland, Wayne, and Holmes Counties, Ohio. The event will also be open to professionals from multiple disciplines in these counties who are interested in exploring the integration of systems, such as primary healthcare, behavioral healthcare, education, and criminal justice, among others. Examples of those invited to attend include the following:

- Physicians
- Nurses
- Social Workers
- Administrators
- Policymakers
- Chemical Dependency Counselors
- Elected Officials
- Educators
- Early Childhood Educators/Workers
- Police Officers
- Judges & Magistrates
- Parole Officers
- Probation Officers

## CEUs

Applications for continuing education credits are being made for the following:

- Physicians
- Social workers
- Counselors
- Chemical Dependency Counselors
- Psychologists

## 7.75 Contact Hours for Nurses

- A criterion for successful completion includes an attendance for at least 80% of the entire event and completion of an evaluation form.
- The presenters, planner, and content reviewer have no real or perceived conflicts of interest relating to this event.

- Samaritan Regional Health System (OH-146, 3/1/15), is an approved provider of continuing nursing education by the Ohio Nurses Association (OBN-001-91), an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.

## AGENDA

- 7:00 to 7:45 am  
Registration
- 7:45 am to 12 pm  
Keynote Plenary Sessions: A Focus on Research
- 1:00 to 4:15 pm  
Afternoon Plenary Sessions & Discussions: A Focus on Translating Research into Practice
- 4:15 to 4:30 pm  
Wrap up and Evaluation

Get complete agenda details online:  
[www.ashlandmhrb.org](http://www.ashlandmhrb.org)

## COST

- No cost to participants
- Registration is limited
- Complimentary registrations are available from the Mental Health and Recovery Board of Ashland County & event sponsors and partners

## LOCATION

Ashland University's John C. Meyer's Convocation Center  
Ashland University  
401 College Avenue  
Ashland, Ohio 44805

## MORE INFORMATION & REGISTRATION

- Deadline to register is March 14, 2014.
- Registration is being managed by the Mental Health and Recovery Board (MHRB) of Ashland County, Ohio
- Contact: Kelly Daniels  
419-281-3139  
[kdaniels@ashlandmhrb.org](mailto:kdaniels@ashlandmhrb.org)
- [www.ashlandmhrb.org](http://www.ashlandmhrb.org)

## KEYNOTE SPEAKERS & PRESENTERS

- **Vincent J. Felitti, MD**, co-principal investigator of the internationally recognized Adverse Childhood Experiences (ACE) Study and founder of the Department of Preventive Medicine at Kaiser Permanente in San Diego, California.
- **David L. Corwin, MD**, president of the Academy on Violence and Abuse (AVA) and professor of pediatrics at the University of Utah School of Medicine in Salt Lake City, Utah.
- **Robert W. Block, MD, FAAP**, immediate past president of the American Academy of Pediatrics (AAP) and past president of the Academy on Violence and Abuse (AVA).
- **David Schneider, MD, MSPH**, chair and professor in the Department of Family and Community Medicine at Saint Louis University and former (first) president of the Academy of Violence and Abuse (AVA).
- **Mark Hurst, MD**, medical director of the Ohio Department of Mental Health and Addiction Services (OhioMHAS).
- **Steven Stone**, director of the Mental Health and Recovery Board of Ashland County, Ohio and facilitator of the Ashland Regional Academy.
- **Policy Makers and Practitioners from**
  - Summa Health System - St. Thomas Hospital (Akron)
  - Akron Children's Hospital
  - Visiting Nurse Association of Ohio
  - Appleseed Community Mental Health Center
  - Ashland Center for Nonviolence
  - Early Childhood Experts
- **Panel of Consumers**

Get more detailed information about speakers and presenters online.



ADVANCING HEALTH EDUCATION & RESEARCH



# Regional Academy on Violence and Abuse

The Long-Term Health Effects of Violence, Abuse and Trauma:  
*Implications of the ACE Study for Healthcare Practice and Public Policy*

Ashland University – Ashland, Ohio

April 16, 2014

*Several agencies and organizations worked in collaboration to provide this educational opportunity, they include:*



*With additional support from:*





# The Long–Term Health Effects of Violence, Abuse & Trauma: Implications for Healthcare Policy and Practice

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## Agenda

**7:00 - 7:45 Registration / Introduction**

**7:45 - 12:00 Keynote Plenary Sessions: A Focus on Research**

**(Break 10:00 - 10:20)**

- Welcome and Opening Comments: Steven Stone, Director, Mental Health and Recovery Board of Ashland County (MHRB) & Danny Boggs, CEO, Samaritan Regional Health System
- The Adverse Childhood Experience Study
- Abuse Changes the Brain (Toxic Stress)
- The health impact of violence and abuse across the lifespan
- Promoting professional development and community education related to violence, abuse, neglect and their impact on health

**12:00 - 1:00 Lunch**

**1:00 - 4:20 Plenary Sessions & Discussions: A Focus on**

**(Break 3:05-3:20) Translating Research into Practice**

- How healthcare organizations may address psychological trauma in pediatrics
- How healthcare organizations may address psychological trauma in adult medicine
- Trauma and healthcare delivery from a consumer's perspective
- How trauma can be addressed from diverse perspective in the community

**4:20 - 4:30 Evaluation/ Questions & Answers**

# Academy Curriculum Summary

## I. The Adverse Childhood Experiences Study

8:00 a.m. – 9:00 a.m.

### Abstract:

The purpose of this session is to provide participants with a basic overview of the Adverse Childhood Experiences Study and its implications for healthcare policy and practice. After this session, participants will have a fresh understanding of the design and purpose of the study as well as the prevalence of adverse childhood experiences across socioeconomic and geographical boundaries.

### Objectives:

- Presenter will explain the Design & Purpose of the Adverse Childhood Experiences (ACE) Study.
- Presenter will discuss the Prevalence of adverse childhood experiences.
- Participants will gain an understanding of the long-term health effects of ACEs.

### Presenter:

#### Vincent J. Felitti, MD

Vincent J. Felitti, MD, is a noted physician and researcher on how adverse childhood experiences affect adults. He is co-principal investigator of the Adverse Childhood Experiences (ACE) Study, a long-term, in-depth, retrospective, and prospective analysis of over 17,000 adults that revealed a powerful relationship between our emotional experiences as children and our physical and mental health as adults, as well as a strong link to the major causes of adult mortality in the United States.

Vincent Felitti is clinical professor of medicine at the University of California and a Fellow of The American College of Physicians. He is senior editor of *The Permanente Journal* and on the international editorial board of the Swiss medical journal *Trauma und Gewalt*. He founded the Department of Preventive Medicine for Kaiser Permanente in San Diego, California, in 1975 and served as chief of preventive medicine until March 2001. Under Dr. Felitti's leadership, the Health Appraisal Division of the Department of Preventive Medicine provided comprehensive medical evaluation to 1.1 million individuals, becoming the largest single-site medical evaluation facility in the western world. During his career, associated health risk abatement programs included weight loss, smoking cessation, stress management, and a wide range of cutting-edge risk abatement programs offered to over 1,000 patients per month.

Dr. Felitti has served on advisory committees of the Institute of Medicine, the American Psychiatric Association, and on the Committee of the Secretary of Health and Human Services for *Healthy People 2020*. Presently, he is a member of the Advisory Committee on Women's Services at SAMHSA. He is a graduate of the Johns Hopkins Medical School (1962) and a physician in the Southern California Permanente Medical Group

## II. Abuse Changes the Brain (Toxic Stress)

9:00 a.m. – 10:00 a.m.

### Abstract:

The purpose of this session is to promote an understanding of the health impacts of toxic stress. The term “toxic stress” will be defined and its impact on brain development and the health of other organs and systems will be explained.

### Objectives:

- Participant will understand the definition of “toxic stress.”
- Participants will gain an understanding of the impact of stress on brain development.
- Presenter will discuss the impact of stress on other organs/systems.

### Presenter:

**Randell Alexander, M.D., Ph. D.**

Randell Alexander earned his M.A. and Ph. D. in experimental psychology from the University of Michigan and his M.D. from Wayne State University. He is the Chief of the Division of Child Protection and Forensic Pediatrics and a professor of pediatrics at the University of Florida. From 1994 to 2002 he served on the U.S. Advisory Board on Child Abuse and Neglect, including one term as Vice Chair, and is an active member of many agencies working toward the protection and improvement of lives of children including the Academy on Violence and Abuse.

## III. Violence across the Lifespan

10:20 a.m. – 11:10 a.m.

### Abstract:

The purpose of this session is to promote a greater understanding of the health impacts of violence and abuse across the lifespan. In general participants can expect to gain a greater understanding of domestic violence and the health care professional’s role in caring for victims of domestic violence.

### Objectives:

- The content of this session will include and overview of domestic violence and its health impacts.
- Participants will gain and understanding of the role of the health care professional in caring for survivors of domestic violence.
- Participants will learn about community and national resources.

### Presenter:

#### Tasneem Ismailji, M.D., MPH

Tasneem Ismailji M.D, MPH is an educator/ researcher in the field of the health effects of violence and abuse. As a pediatrician (nonclinical) she has conducted numerous trainings, seminars and workshops for healthcare professionals at national conferences, medical centers, hospitals and clinics for over fifteen years. She initiated and published research on survivors of intimate partner violence as a Visiting Scholar at Stanford University. Her other major interest is relationship abuse prevention for young adults and adolescents and has led numerous workshops in schools, colleges and universities. Dr Ismailji is a cofounder of the Academy on Violence and Abuse, its immediate past President and current Board Chair. She is a member of the Advisory Board of the National Child Traumatic Stress Network (NCTSN). She serves on the medical sub-committee of the Domestic Violence Council of Santa Clara County in California.

## IV. Educating your Community about the Health Impacts of Violence and Abuse

AVA Website, ACE Study Videos and Next Steps White Paper

**11:10 a.m. – 12:00 p.m.**

### Abstract:

The purpose of this session is to identify ways of promoting professional development and community education related to violence, abuse, neglect and their impact on health.

### Objectives:

- Participants will get a “tour” of the AVA Website.
- Presenter will review AVA’s “Next Steps” White Paper.
- Presenter will review AVA’s Training Videos.

**Presenter:**  
**David Corwin, M.D.**

Dr. Corwin is currently the President of the Academy on Violence and Abuse which is dedicated to increasing the education of health professionals about and research on the health impacts of violence and abuse. He is a Professor of Pediatrics at the University of Utah School of Medicine in Salt Lake City, Utah. He is Board Certified in Psychiatry, Child Psychiatry and Forensic Psychiatry. Dr. Corwin has worked as a lecturer, consultant, evaluator and/or expert addressing child abuse cases throughout the United States and other countries including Canada, Great Britain, Europe, Israel, South Korea and Thailand. Dr. Corwin is a founder of the California and American Professional Society on the Abuse of Children (CAPSAC & APSAC), the Ray E. Helfer Society and the Academy on Violence and Abuse (AVA). From 2009 to 2010, he chaired the transition of the AMA's National Advisory Council on Violence and Abuse into the National Health Collaborative on Violence and Abuse. Dr. Corwin has ongoing interest in the evaluation, mitigation and prevention of the adverse health impacts associated with exposure to violence and abuse across the lifespan. Dr. Corwin is the Executive Producer for AVA's Adverse Childhood Experiences Study DVD released in January of 2012. In 2012, he was re-elected to the Board of Directors of the American Professional Society on the Abuse of Children.

## V. Focus on Children

**Initiatives Akron Children's Hospital is implementing to address Adverse Childhood Events**

**1:00 – 1:40 p.m.**

**Abstract:**

In order to prevent the toxic effects of adverse childhood events and trauma, early identification and intervention is imperative. Recovery and resiliency of the child and family is facilitated when service systems work in collaboration with everyone involved with the child while using the best available science. A leader in this effort is The National Child Traumatic Stress Network (NCTSN) whose mission is to raise the standard of care and improve access to services for traumatized children, their families and communities. The network develops and disseminates information on evidence-based interventions, trauma-informed services, and education.

Akron Children's Hospital was awarded a \$1.6 million dollar grant from the NCTSN to increase the identification of children who have experienced adverse or traumatic events; to enhance the care of traumatized children by increasing access to evidence based-trauma treatment within their community; and to serve as a community resource. We would like to share some of the opportunities and training that will be afford to the community as a result of this grant award to Akron Children's Hospital.



### Objectives:

- Participants will gain an understanding of the National Child Traumatic Stress Network.
- Participants will become aware of the resources available through the National Child Traumatic Stress Network to address trauma and adverse childhood experiences.
- Introduce participants to the initiatives of Akron Children's Hospital to respond to trauma and adverse childhood experiences as a result of the NCTSN grant.

### Presenter:

#### Melissa Peace, MSSA, LISW-S

Melissa Peace is a Licensed Independent Social Worker with supervisory designation who has been employed by Akron Children's Hospital for the last 14 years. She is currently the Project Director for the National Child Traumatic Stress Network grant that the hospital received to develop the Center for the Treatment and Study of Adverse Childhood Events. Ms. Peace is a graduate of Case Western Reserve University where she received a Master of Science in Social Administration degree. She has spent her career designing and redesigning programs for health and human service organizations which includes multiple programs to address the unique needs of traumatized children and providing training to diverse populations. For the past 12 years, Ms. Peace has been dedicated to raising awareness on the prevalence and effects of trauma, adverse childhood experiences and toxic stress on individuals, families, and systems. She has advocated for the integration of trauma informed care into service systems; including testifying about the importance of trauma-informed school systems before a joint committee of the Ohio State Senate.

## VI. Addressing the Needs of Traumatized Adults

1:40 – 2:20 p.m.

### Abstract:

The Center for the Treatment and Study of Traumatic Stress is an outpatient specialty clinic in the Department of Psychiatry at Summa Health System in Akron, OH. It has three primary integrated missions: 1) providing evidence-based, trauma-focused clinical services; 2) educating/training current and future health care professionals about trauma, its consequences, and trauma-informed care; and 3) conducting research to advance the science of traumatic stress.

The focus of this presentation will be on describing methods of identifying and addressing trauma issues in outpatient mental health, inpatient mental health, and primary care settings as part of a coordinated trauma-informed approach.

### Objectives:

- Session content will demonstrate how to screen for ACEs in the adult population
- The presenter will outline how to promote a trauma-informed organizational culture
- Discussed how to integrate primary & behavioral healthcare in adult medicine

### Presenter:

#### Patrick A. Palmieri, Ph. D.

Patrick Palmieri, Ph.D., is the Director of the Center for the Treatment and Study of Traumatic Stress (CTSTS), Summa Health System, Akron, OH. Dr. Palmieri is a licensed clinical psychologist and holds faculty appointments as Associate Professor of Psychiatry at Northeast Ohio Medical University and Adjunct Associate Professor of Psychology at Kent State University. He earned his B.A. in Psychology from the State University of New York at Binghamton and his M.A. and Ph.D. in Psychology from the University of Illinois at Urbana-Champaign. He completed a predoctoral clinical internship at the Danville VA Medical Center in Danville, IL, and a postdoctoral fellowship at the University of Illinois at Urbana-Champaign. He has been employed at Summa Health System for 10 years, the past 6 as Director of the CTSTS. He has clinical and research expertise in the assessment and cognitive-behavioral treatment of PTSD and other trauma-related psychopathology. His extensive research has been published in numerous peer-reviewed journals and presented at many professional conferences. He was recently appointed as Co-Chair of the Ohio Mental Health and Addiction Services' Trauma-Informed Care Advisory Committee. In addition to his trauma-focused administrative, research, and clinical activities, he is Project Coordinator for a grant-funded project integrating primary and behavioral health care at Summa and is Co-Chair of the Ohio Psychological Association's Healthcare Reform Task Force.

## VII. Consumer/Trauma Survivor Panel Discussion

2:20 p.m. – 3:05 p.m.

### Abstract:

The purpose of this session is to help participants understand healthcare delivery from the perspective of a consumer who has experienced trauma or adverse experiences.

### Objectives:

- During the panel discussion, participants will discuss the impact of violence, abuse and neglect on healthcare consumers.
- Panel participants will share consumer/survivor experiences in navigating healthcare services.
- Panel participants will share what they (as consumers/survivors) want healthcare professionals to know.

## **Panelists:**

### **Alexis Moseley**

Alexis Moseley was raised in Tallmadge, Ohio with her biological mother, step-father, and two siblings. Alexis was placed into foster care at the age of 12, where she resided in the custody of Summit County Children Services until the age of 18, when she emancipated. Alexis graduated from Stark State College with an Associate's Degree in Chemical Dependency and is using her degree as a Treatment Counselor at the Oriana House. She currently volunteers her time as a Board Member for Shelter Care Inc. and has done so for the last 4 years. Alexis served for two years as the President of Leaders of Tomorrow, a group of foster care alumni who advocate on behalf of children who enter the foster care system. Alexis also serves in an advisory role in the Family Reunification Through Recovery Court (FRRC) with Judge Teodosio. She enjoys speaking to, and working with, individuals and organizations who work with young people who have experienced trauma, time in the foster care system, and/or have been exposed to drug and alcohol addiction.

### **Civonna Wass**

Civonna Wass is an ambitious, goal-oriented and determined young lady. She was born and raised in Northeast Ohio. She spent six years in the foster care system and emancipated at the age of nineteen. Civonna has dedicated the last three years to help advocate for other children who are in the foster care system. She has experience providing training and consultation to CASA/GAL volunteers, foster parents, social workers and many other child serving organizations.

### **Patrick Risser, B.A.**

Patrick Risser spent over ten years (1973 –1987) as a "mental patient" with over twenty hospitalizations including state hospital and various treatment modalities. His lived experience includes (often forced) inpatient, outpatient, partial hospitalization, day treatment, individual, group and medication therapy. He participated in drug and alcohol 30-day inpatient rehabilitation twice 1985. He recovered fully and worked as a professional. Pat is a survivor of childhood and subsequent abuse, neglect and trauma and as a result, he has championed the cause of trauma for over 30 years (for which he was recognized with a SAMHSA Voice Award in 2011). He works as faculty/consultant with the National Center for Trauma Informed Care. Pat currently serves on the Board of Directors for NARPA (National Association for Rights Protection and Advocacy) and Witness Justice (Help and Healing for Victims of Violence). Pat also serves on the National Health and Human Services (HHS), Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services (CMHS) National Advisory Council and he is Co-Chair of the Subcommittee On Consumer/Survivor Issues (SOCSEI).

### **Ruta Mazellis, M.A.**

Ruta Mazelis is the editor of *The Cutting Edge: A Newsletter for People Living with Self-Inflicted Violence*, an internationally distributed quarterly on the topic of self-injury, founded in 1990. Ms. Mazelis has provided presentations and publications on this topic, as well as others, to a variety of audiences. She has experience in providing services in mental health and substance abuse programs as well as in service and policy development, and research. She is on the staff of the Sidran Institute and Witness Justice, serves on the board of the National Trauma Consortium, is a program manager for the National Center for Trauma-Informed Care, and serves as a consultant to various projects at local and federal levels. Ms. Mazelis can be contacted at 6196 Vo Ash Dr. SW, Carrollton, OH 44615 or by e-mail at [rutamaz@eohio.net](mailto:rutamaz@eohio.net).

## **VIII. Local Panel Discussion**

**3:20 p.m. – 4:20 p.m.**

### **Abstract:**

This panel discussion will focus on what local agencies have learned from the ACE Study and how they are applying the lessons learned to their practice in the community. Each panel member comes from a unique area of practice including social work, counseling, and nursing and will discuss from their perspective ideas for addressing trauma's affects across the lifespan and preventing future adverse experiences.

### **Objectives:**

- Participants will learn new approaches and ideas to prevent ACEs.
- Presenters will discuss what material presented throughout the day means to their agency in its area of the community.
- Participant will learn how community leaders and health/social agencies promote trauma-informed culture.

**Presenter(s):**

**Facilitated by Steven G. Stone, Executive Director, Ashland County MHRB; Chair of AVA Regional Academies Committee; Conference Facilitator**

Steve Stone is the Executive Director of the Mental Health and Recovery Board of Ashland County. He has worked in the community mental health field for over 30 years. Mr. Stone holds a Bachelor of Arts in religion/education and a Master of Arts from Ashland Theological Seminary in counseling and psychology. He received his clinical training at the Cleveland Psychiatric Institute and Case Western Reserve University. He also completed post-graduate studies in Public Policy and Social Change at Union Institute and University.

Steve has worked in the public and private sector in in-patient and out-patient mental health settings; he was licensed as a Professional Clinical Counselor with a Supervisory endorsement in 1989 and maintained a private counseling practice in Ashland for 15 years. He was an adjunct faculty member at Ashland University for six years and was also the director of a not-for-profit behavioral health agency in Huron County. He completed the Mental Health Executive Leadership Program at Case Western Reserve University and is an approved Mental Health Mediator. Steve currently serves as the chair of the Regional Academies Committee of the Academy on Violence and Abuse.

Steve has been an active member of the Ashland community since moving there in 1979. He is a past-president of the Rotary Club of Ashland and past-chair of the Leadership Ashland Advisory Council. He is currently on the board of North Central State College where he served as board chair for 2 years and has served on a number of other community and non-profit boards.

**Mark Hurst, M.D., Medical Director, Ohio Dept. Mental Health and Addiction Services**

Mark Hurst, MD, is medical director of the Ohio Department of Mental Health and Addiction Services (OhioMHAS), where he provides leadership for clinical services at all of the state's regional psychiatric hospitals and community-based organizations. Dr. Hurst is board certified in psychiatry and addiction psychiatry and has, throughout his career, has advocated for the adoption of evidence-based practices such as integrated treatment for substance abuse and mental illness, modern psychopharmacology, and trauma informed care as a way to maximize recovery on an individualized basis.

Throughout his career, Dr. Hurst has served in a number of positions in public psychiatry, including chief of psychiatry at the Columbus VA outpatient clinic; medical director of Ohio State University Psychiatric Healthcare; and director of the Harding Addiction Recovery Center in Columbus. He has been on the faculty of The Ohio State University Department of Psychiatry since 1989 and has received numerous teaching awards. He has published on multiple topics in psychiatry, addiction treatment, and psychopharmacology and has made numerous presentations on these topics locally, regionally, and nationally.

Dr. Hurst is a graduate of Muskingum College and the Medical College of Ohio and completed his psychiatry residency training at the University of Michigan and Ohio State University. He has been honored with listing in the Midwest edition of "Best Doctors in America" since 1995.

### **Roger Snyder, M.D., Samaritan Regional Health System**

Dr. Roger Snyder grew up in Wayne County, he has lived in and loved Ashland since 1986. He and his wife Perri (Houghton) Snyder married in 1979. They are the proud parents of three adult children; Mary, Stephen, and Anne who they enjoy visiting in New Orleans, Grand Rapids, and Columbus as much as possible. Dr. Snyder has served the community of Ashland a family physician at Ashland Family Practice since 1986. He is a member of the founding committee of the Ashland Christian Health Center, which serves the uninsured and underinsured in Ashland County. He has been the medical director there since 2003. Dr. Snyder is an active member and elder at Ashland Grace Brethren Church.

### **Ginny Telego, Associate Director, Ashland Center for Nonviolence**

Ginny Telego is the Assistant Director of the Ashland Center for Nonviolence (ACN) at Ashland University. ACN offers programming aligned with its mission to explore and promote alternatives to violence in ourselves, our families, our communities and our world. Past programs have featured speakers on preventing war and the cost of war; the power of forgiveness; restorative practices and alternatives to violence. Community focused programming includes a community mediation program as well as student led anti-bullying initiative that performs at area schools. Ms. Telego is also a certified experiential learning facilitator and has her own business, Wager's Way, which offers equine assisted learning programs for individuals and organizations. In her experiential learning programs, Ms. Telego works with at-risk youth as well with businesses and organizations to offer leadership and team development. She is a member of the Mental Health and Recovery Board of Ashland County and is currently finishing a bachelor's degree in Organizational Management.

### **Stephanie Taddeo, MSW, LISW, Visiting Nurses Association of Ohio**

Stephanie Taddeo, LISW-S is the Director of Mental Health and Development for The Visiting Nurse Association of Ohio. With the organization since 2004, she provides direction for the mental health managers and team members, provides community education, and advocates for the consumers of mental health services. She received her BA from Miami University and Masters in Social Work from The Ohio State University with an emphasis in Health Care. She has focused on home based care since 1997, serving diverse populations including those with substance abuse issues, HIV/AIDS, mental illness, bereavement, and acute, chronic, and terminal illness.

### **Diane Karther, Ed.D., Early Childhood Specialist, Mental Health and Recovery Board**

Diane holds a doctorate in Curriculum & Instruction, Early Childhood Education, an MS in Child Development and a BA in social work. She has over thirty years' experience working in the fields of social services, family education and higher education in multiple states. Her university teaching included child/family development and early childhood education. She also lectured in Texas Tech HSC Department of Pediatrics. She has extensive experience in family

home-based and group parent education as well as school readiness programs. She has co-authored an award winning university extension family video program for teen pregnancy prevention and an infant book. She has worked with preschool-school-aged children and special needs children in childcare, early intervention and afterschool programs. She's been a governor's appointee to the Ohio Fatherhood Commission, served on NC State College Dept. of Human Services Advisory Board and received an Ohio Dept. of Education award for child advocacy.

### **Jerry Strausbaugh, EdD, LPCCS, Executive Director, Appleseed Community Mental Health Center**

Jerry has 21 Years of Mental Health experience working in a variety of settings including inpatient, partial hospitalization, outpatient and EAP settings. Jerry graduated from Ashland Theological Seminary in 1992 with a MA in pastoral counseling. He became a Licensed Professional Clinical Counselor in 1996. Dr. Strausbaugh has worked at Appleseed Community Mental Health Center since 1999 and became the executive director of Appleseed in 2005. In 2006 he completed the "Mental Health Executive Leadership Program" at Case Western Reserve University. In December of 2013 Jerry Received an Ed.D. in Leadership Studies from Ashland University. His research focused on the developmental process of community mental health center executive directors who began their careers as clinicians. Jerry is a graduate of Leadership Ashland, current president of the Ashland Rotary Club, and Former Chair of the Family and Children First Executive Council. Jerry actively participates in the Ohio Council of Behavioral Health and Family Services Providers policy committee, is a member of the Ohio Counseling Association and the American Counseling Association. On a personal level Dr. Strausbaugh has been married for Jane for 24 years and is the father of three daughters.



## Ohio ACEs Network

[www.ACEsConnection.com](http://www.ACEsConnection.com) is a social networking site established by Jane Stevens as a way of bringing people together who are implementing -- or thinking of implementing -- ACE concepts in international, national, state or local agencies, organizations, or communities. Several groups have been established on this site, including the Ohio ACEs Network which was established to connect people and organizations in Ohio who are working to address issues related to trauma and ACEs. Please consider becoming a member of ACEsConnection and joining the Ohio ACEs Network. Building a learning community and sharing resources and ideas can help us all to maximize our resources and our impact in Ohio.

## About AVA Regional Academies

The Academy on Violence and Abuse (AVA) is working with local organizations and communities to increase awareness of the prevalence and long-term health and social effects of violence, abuse and neglect throughout the lifecourse. In this way, the AVA can further its mission to promote research and to influence healthcare policy and practice. The concept of a Regional Academy allows for local communities to collaborate with national experts to effect change on the local and regional level. Contact the AVA at [info@avahealth.org](mailto:info@avahealth.org) for more information about organizing a Regional Academy in your community

## About the Academy on Violence and Abuse

The Academy on Violence and Abuse (AVA) was created to address the concerns highlighted in a 2002 report released by the Institute of Medicine (IOM). The report, which challenged the health care community to better educate and train health professionals about the often unrecognizable health effects of violence and abuse, inspired a group of health care professionals to converge in effort to gain recognition and understanding for violence and abuse as health care issues.

AVA is a non-profit, academic, membership-based organization. Our membership includes a variety of health care professionals, representing various facets of the health care field. Our goal is to continue expanding health education and research to integrate knowledge about violence and abuse into the training of all health professionals to promote safe families, safe workplaces and safe communities.



Mission: The mission of the AVA is to advance health education and research on the recognition, treatment and prevention of the health effects of violence and abuse.

This will be accomplished by:

- Fostering and advancing best science regarding the relationship of violence and abuse to health and its prevention, identification, and care
- Accelerating translation of best science to practice
- Developing and widely promulgating competencies and standards that define quality care
- Improving the abilities/skills of all health care professionals to deliver compassionate, quality care.

Vision: The vision of AVA is the prevention of violence and abuse, as well as its identification and care, is fully integrated into the delivery of quality healthcare. People of all ages are safer and healthier.

### *Reframing Society's View*

Violence and abuse have been viewed predominately as criminal justice or social welfare issues with a focus on stopping crime, prosecuting criminals and treating the victims' immediate physical wounds. Criminal justice systems, however, are not designed to address the full spectrum of health care needs of victims of violence and abuse. Subtle forms of violence and abuse such as verbal abuse and neglect are rarely recognized or deemed serious enough to be classified as criminal behavior. Still, these less obvious cases of abuse require prevention and contribute to serious health problems, which warrant professional treatment.

**Without formal training, health care professionals often lack knowledge and understanding about the issues surrounding violence and abuse, and are inexperienced in recognizing related physical and emotional health symptoms. Instead, health problems resulting from abuse are often attributed to unrelated factors — or worse yet, to nothing at all**

For these reasons, AVA is creating dialogue, raising awareness and promoting changes in the way the issues of violence and abuse are addressed in health professional education and its academic communities.

AVA intends to enhance the infrastructure of health care education and highlight the pivotal role health care professionals play in addressing these critical issues, ultimately reframing the limited view of violence and abuse into one that establishes them as critical health care issues.

# NOTES