



EXECUTIVE COMMITTEE MEETING
October 6, 2021 • 9:00 - 10:30 a.m.
Via Zoom



Meeting Minutes

Executives Present: Bridget Baublits, Lisa Brabo, Maria Chesley, Steven DeLira, Lori Goodman, Joan Hartmann, Alma Hernandez, Valerie Kissell, Amy Krueger, Ann McCarty, Karyn Milligan, Lorraine Neenan, Wendy Sims-Moten, Alana Walczak

Staff: Barbara Finch and Gloria Munoz

1. Welcome & Establish Quorum

Barbara Finch called the meeting to order and introductions were made.

2. Approve Minutes: May 5, 2021

Lorraine Neenan motioned to approve the May 5, 2021 minutes and Lori Goodman seconded the motion. Karyn Milligan and Wendy Sims-Moten abstained from voting; all others voted in favor and the minutes were approved.

3. Public Comment – Items not on the Agenda

Supervisor Hartmann asked if she could share a brief report on early childcare later in the meeting. The item was brought up at the Board of Supervisor's meeting the day before. There was a request for 2 million dollars to be able to shore up private childcare, which is still laboring under distancing requirements and a lot of extra requirements. This has put a tremendous financial burden on them. How do they support those that already exist?

4. Report on Circumstances of the COVID-19 State of Emergency

1. Receive and file:

- a) An update that the State and County Remain under a proclaimed state of emergency related to COVID-19; and**
- b) Public Health Recommendation issued September 28, 2021 regarding social distancing**

2. Provide direction to staff about the location of the next meeting

The Executive members motioned to approve for the October KIDS Network Executive meeting to remain remote and the decision was approved unanimously.

A meeting will be held 30 days before each KIDS Network meeting to vote on whether the meeting will remain remote or go back to in person. Lorraine asked folks to consider, when deciding on meeting face to face, that most of them work with children 0-5 and they are not vaccinated. Everyone needs to be careful about following regulations, including social distancing. Lori will be writing to the Governor about how she feels regarding the Brown Act regulations.

Barbara asked folks to share their thoughts on how they are feeling about this transition:

- **Wendy:** Important to abide by the Health Order and to make sure that the spaces are safe, both for staff and for the public.

- **Lisa:** Pre-pandemic, FSA's Board members attended meetings at any of their offices, (SM, LO, and SB) or they could connect remotely on their own. This worked well for them and increased participation.
- **Wendy:** County Counsel let them know that they can participate remotely but they have to make sure their address is public and for the public to have access to participate at that location.
- **Steve:** One of the biggest challenges is how to manage schedules. Currently, meetings are back to back without travel time in between. They may need to start turning down meetings or saying they can't meet and suggest another time. He suggested to continue meeting at the same time, day and month consistently so that it is locked in their schedule.
- **Lorraine:** One of the great things about KIDS Network is working on relationship building. She recognized that there are strong relationships within the network. Lorraine stressed the importance of having your camera on and needing to see people's body language.

The Executive Team will meet on Wednesday, January 5, 2021 at 9am to vote for the February meeting. The General Membership will meet at the beginning of the Executive meeting in February to vote for the meeting in March.

5. KIDS Network General Membership November 3, 2021

1. Renewing Member Agreements

2. Meeting location 2022

3. Collaboration with Network of Care Leadership Committee

Barbara shared that we do not have signed Membership Agreements for all the organizations that attend the KIDS Network meetings. She suggested sending out the agreements so that we know what we need to establish quorum. Steve shared that FSA has embedded electronic signatures to their documents and it has made it easier for folks to respond and send things back. Amy feels that this would be a good opportunity to update. Folks can be given a due date and if we do not get agreements back from organizations then they will not be considered members.

Karyn shared that Probation looked into the SYV Marriott and the use of their meeting rooms. Their prices have gone up substantially and they do not offer remote options. Currently, they have not found a solution. Amy mentioned looking into the use of county offices. Barbara asked folks to let her or Gloria know if they come across spaces that can be used for KIDS Network meetings. Lisa shared that their FSA offices have remote capabilities but they might not be large enough. The use of spaces at the Santa Barbara Foundation was also suggested.

The Network of Care Leadership Committee and the KIDS Network will come together at the November KIDS Network meeting. There is overlap between the two groups, but there are new partners who do not know about the KIDS Network. The goal of this meeting is to support connections and inform conversations about how to sustain the Santa Barbara County Network of Care after the ACEs Aware grant ends. As a lead entity, the KIDS Network / Resilient Santa Barbara County will bring ACEs and resilience training to community partners. The Pediatric Resiliency Collaborative trains clinic partners as they come on board. Both groups are learning about trauma informed approaches, ACEs science, and toxic stress. ACEs Aware introduced the Santa Barbara team to grantees from the Hanna Institute in Sonoma. They have a four-part training on implicit bias and race-based trauma. They will be attending our meeting on November 3rd to discuss the priority concerns about these issues for our community. Where do we see oppression and marginalization? It will be an opportunity for really important shared learning

about implicit bias and race-based trauma. Barbara asked folks for their suggestions and feedback about the training plans. Folks shared the following:

- **Lorraine:** Becoming trauma informed is in their program and agency's strategic plan. She is looking forward to the trainings to help fulfill their strategic plan
- **Steve:** How do they reach leadership? Ex: folks at the school district, council members, etc.
- **Wendy:** In terms of reaching out to leaders, it has to be embedded in conversations and connected to everything that you talk about.
- **Bridget:** Bridget clarified that there is ASES with an "s", which is very well known in schools as the after school education and safety program versus ACEs with a "c" so this is where some confusion may lie. Overall, school districts have been doing quite a bit of work around trauma-informed care and ACEs trainings. Bridget added that COVID also brought forward mental health concerns. They are working with Behavioral Wellness and the Mental Health Services grant to embed trauma-informed care practices. It has been evolving and more and more educators and leaders are aware of it. They have come a long way but there is still a lot of work to do.
- **Amy:** Shared that she heard a very lengthy commercial about Number Story with young people talking about their numbers and the science of ACEs on the radio.
- **Barbara:** The Healthy Lompoc Coalition asked for the application for the buffering services grants and they are trying to think about how to come on board, to bring more of the work to Lompoc.

6. Community Assessment & Data Gathering

1. Executives updates on current / anticipated assessments

- **Community engagement plans**

2. Children's Scorecard 2022

- **Priorities**
- **Process**
- **Alignment of Child Abuse Prevention Contracts**

The next KIDS Network Scorecard is due to be published in 2022. The intention is to align it with the County Self-Assessment and the System Improvement Plan led by Child Welfare and Probation. Barbara stated that the data that was gathered through the scorecard process really helped to inform that assessment. She is aware that many organizations have their own requirements for assessments and assessment processes so she thought that this would be a good group to talk about what may be the best way to approach this process. Members shared the following in regards assessments, surveys, etc., that they are aware of:

- **Steve:** The Santa Barbara Foundation did a survey of the community. Behavioral Wellness also did a survey and the schools are doing surveys of the families and students. NAACP is also doing a survey and working with UCSB.
- **Karyn:** Probation just did quite a few surveys of families and youth and did a community forum on the 24th. They are planning to do more forums and inviting justice- involved communities and the community at large to share their experience and thoughts. Karyn would like to see this information in the Scorecard with information about how they are trying to limit incarceration and include youth, family and community voice.
- **Lisa:** Everyone has their agency data as far as the issues that we have seen and the outcomes that have been achieved.

- **Barbara:** The data dashboard that was built for the COVID emergency gathered meaningful and easily accessible data on public health. There is a proposal to build out a data dashboard for Health and Human Services in the County.
- **Supervisor Hartmann:** The Board will have a presentation at the next board meeting. The project builds on what was done with COVID, and is linked to ARPA funding. It looks at a range of things related to Department of Social Services, Be Well, Public Health and possibly Probation, especially looking at disadvantaged underserved communities. Eventually, it will expand to include community service, libraries, and parks.
- **Maria:** Maria is working on a report for the cities of Santa Barbara and Goleta around childcare. They have done a survey of providers and will launch a survey of parents who live in zip codes 93101 through 93118. It is not the whole county but there will be pieces that are relevant to the whole county.
- **Barbara:** The County Self-Assessment and the Scorecard help guide decisions for Child Abuse Prevention funding. Since they have not had a chance to begin these projects, they are thinking of extending the current prevention contracts. Amy added that the State has paused all of the counties processes because of COVID and are backlogged. Typically, they would have started by now but at this point they are looking to begin in January or February. They want to be intentional with the RFP's to make sure that they are clear about community needs and priorities.

Childcare Report: Wendy shared that the Board Supervisors was asked to consider childcare needs and the impact of Covid. They worked on a presentation with the CEO's office to bring local data to support the ask. They took a three-prong approach: recovery, relief and response. A First 5 presentation yesterday proposed working with the Office of Emergency Management on a child care plan for disaster or crisis. They are going to be working with the Office of Emergency Management on county strategies. The ECCI has been meeting separately and determining the amount of money needed to provide grants for private childcare providers who did not have access to relief payments that the state funded childcare providers were able to receive. Dr. Holly Goldberg spoke about the need to provide grant relief to these agencies who were able to maintain childcare slots. Michelle explained that it was hard to do with COVID and licensing requirements. The private providers, who may have been fully enrolled, may not be able to go back to full capacity. The recovery part was about grants, technical assistance, and training on recovering in a crisis and how to apply for funding. Wendy added that the Board of Supervisors did not really understand the need and the why, the process and the criteria for giving money. Santa Barbara Foundation would be the fiscal agent. The Board is meeting on October 18th to determine their funding decisions. The ask was about 1.5 million. Wendy added that they also spoke about how it impacted women in the workforce. Since women were the primary caregiver they were not able to return back to the workforce.

Chat comments:

- **Lori:** It feels like we need to measure work force. Not enough child care workers, not enough mental health workers, not enough health care workers - all of this impacts children, and dollars for slots or services doesn't impact the ability to deliver services if there are no workers to provide the services.

7. Next Steps for KIDS Executive Committee

The Executive Committee will meet in January to vote on the meeting location for February.

8. Adjourn

The meeting was adjourned at 10:30 a.m.



FINAL REPORT August 2, 2021

Please provide a summary of key program accomplishments with the grant implementation.

Implementation of the KIDS Network Provider Engagement grant was a successful year-long effort to strengthen collaboration across three California counties and to take the concept of an ACEs Aware trauma-informed network of care from theory to practice. Building on existing networks, the project began with a small planning team that grew to include 20 dedicated and committed individuals from Santa Barbara, San Luis Obispo, and Ventura Counties. The first months were spent building trust within the team and discussing what was needed in each county to create a cohesive and integrated network of care – looking at established relationships, identifying ACEs champions, and beginning to think about new partners and different sectors that needed to be engaged. The Network of Care Leadership Convening in October successfully engaged 65 tri-county leaders who were introduced to the ACEs Aware initiative and the Bridges to Resilience conference goals. County teams began envisioning what a strong care network might look like, and they were invited to think about opportunities to align, coordinate and connect. Five physicians attended the convening, and many other community sectors were represented as well.

Input from the fall convening informed planning for the June 9th Bridges to Resilience conference. Key accomplishments of the conference were as follows:

- Successfully reinvented the in-person conference in a virtual format
- Set a goal of 500 attendees, and a record 943 persons registered and 756 attended the virtual conference day - an extraordinary 80% attendance rate
- Audience included 28 physicians, 109 nurses, 95 behavioral health practitioners, 82 other licensed professionals, plus parents and resource parents, and representatives from nonprofit service organizations, government, education, early care, youth programs, social services, law enforcement, philanthropy, faith, business and other community members – over 190 organizations were represented, including 41 healthcare organizations
- Tri-county collaboration was evident throughout the program: planning team, panelists, facilitators, affinity group representatives, resource partners, sponsors, and attendees
- All presentations dynamically addressed diverse points of view along the continuum of ACEs support, interventions and buffering factors
- Affinity Group discussions provided rich resource exchange, deepened discussion around educational topics earlier in the day, and connected participants with live representatives from a broad variety of community-based organizations in each county's network of care

- Live 1:1 networking paired attendees for brief video chats (264 participants); virtual chat and Q&A engagement were lively throughout all sessions; a networking lounge hosted 193 participants during breaks for informal group discussions
- The virtual Resource Hall included 31 community providers and 24 noncommercial community sponsors that engaged (6451) views/clicks/downloads for program content, educational materials, and resource partner websites.
- Presenter slides, handouts and Resource Hall were made available post-conference on the Bridges to Resilience website
- 25 Continuing Education certificates were issued to behavioral health practitioners, 9 to nurses, and 24 physicians received AMA PRA Category 1 credits; 11 physicians attended the entire day
- Evaluations affirmed the success of the conference in achieving its primary goals:
 - Build care networks that are trauma-informed and resiliency-focused
 - Inspire, engage, invigorate and integrate the work force in every sector
 - Leverage the ACEs Aware Initiative to link providers from every sector to other opportunities for training, education and connections
 - Facilitate strong connections and communication between healthcare professionals and community partners
 - Integrate resources and tools for ACEs prevention and early intervention.

In the interim report you shared obstacles you faced, if there are additional obstacles you face, please share.

For the first time in 2021, we applied for and were granted CME and CE approval with a generous partner, Cottage Health. While this process added significant planning and production considerations, we eagerly anticipated continuing education to be an incentive to registration and attendance.

We strategically targeted physicians and healthcare professionals with a dedicated early registration period for two weeks before registration opened to the broader public. Leading up to registration, our Communication Team developed targeted messaging, articles and social media to healthcare. Despite our proactive promotional strategies, we had lower than expected physician attendance overall, and lower than expected healthcare professional attendance from our regional hospitals/health plan providers. We discovered several delays and barriers to reaching the physician / healthcare audience including:

- Unexpected, extended timelines needed to submit messaging/invitations/logos for approval to get information out to providers
- Policies in managed care organizations and other healthcare systems that prevent mass emails to providers
- Messaging specifications/approvals required around continuing education promotion
- Healthcare systems firewalls preventing receipt of invitations, communications and registration confirmations
- Lack of access/restrictions for healthcare-systems participants in Google services (drives, documents, Chrome browser) recommended by our Accelevents platform and common to contemporary virtual events for best attendee experience

- Challenges with virtual sign-in and out procedures for continuing education credits (we tried to use Google docs and ran into the problem above)

Unfortunately, on conference day, the system encountered an unexpected technical issue during the first Affinity Group session that disrupted audio/mute and internet connectivity for many participants. Our agile technical team responded immediately and sessions were resumed on Zoom after a 20 minute reset with over 600 participants successfully transitioned. The shift was well communicated on the platform but attendees with compromised access experienced gaps, confusion and frustrations. The program day was extended slightly to ensure education sessions were delivered according to the continuing education plan. We did our best with a difficult technology glitch and have an even more comprehensive back-up plan for future virtual events.

Due to virtual venue capabilities and budget constraints, language access/ interpretation was not provided this year.

Share an example or story that illustrates what you consider to be the most significant impact your grant had on the community or the most significant change in people's lives as a result of the project.

"Thank you for offering the conference even during our challenging Covid times." This quote, along with others from the Bridges to Resilience survey responses, captures the significant impact that this grant had on the tri-county community. The Covid-19 pandemic disrupted healthcare, businesses, and the social sector in ways that we have yet to realize. Every sector has been challenged in some way to support community members, and organizations have been challenged to support their employees and clients/patients while also tending to their own families. So many people now have a personal understanding of trauma and toxic stress. If ever we needed hope and inspiration, the time is now. We need each other and we need to work together to reduce ACEs and prevent the impacts of toxic stress from damaging the health of an entire generation. One of the conference goals was to "inspire, engage, invigorate, and integrate the work force in every sector." While integration is a goal that is yet to be achieved in our three counties, we know that we have inspired and invigorated individuals whose work encompasses a wide array of disciplines and sectors. They see the possibilities in this work, and their comments tell the story...

"Glad to hear there are so many individuals and organizations that care about creating systemic change and care about providing the best support and care for our children and youth."

"What fantastic community resources. I'm excited to take these resources I've gleaned from the conference and start making connections to bolster support for the patients that I serve."

"I appreciate the opportunity to participate in this conference. It's amazing to see how so many groups, organizations, and people participate in this worthwhile event to help the whole community!"

Thanks for all your hard work with the planning process and during the event. I enjoyed this virtual event and didn't think I was going to be so engaged but I was! Thanks for providing a space where community can share and learn."

“Very thankful for the opportunity to share in communication and knowledge of how to support children and their families facing ACES. Partnering with agencies and health care is so important. Thank you for this wonderful collaboration.”

“Appreciated the effort and speakers. Feel grateful to associate with so many caring, intelligent people who are trying to create a safe and healing world.”

“I loved the opportunity to network and share information about my program as well as learn more about what others had to offer.”

“I thought this was a great eye opener within the community to know what needs to be refined within our systems. Also, I learned that not every individual has a one size fits all narrative, but each person has a story to tell and we must cater to each of their needs to the best of our abilities.”

“I really enjoyed it. Listening to all the good things and learning from them. I guess I came out loving more what I do.”

“Today was a good example of what happens when you have a great team supporting you. Imagine the great success our families can achieve when great teams like ours join and support them.”

What avenues are you pursuing to help sustain your efforts after the grant period ends?

The vision for the Bridges to Resilience conference is that it will continue to be a tri-county event that strengthens Networks of Care in the years to come. Registration and participation numbers from this year’s conference show that this year’s virtual event allowed us to reach twice as many people as we have in years past. Each county will continue to engage participants in local efforts in between conferences, and ACEs Aware resources and training opportunities will be shared widely. Relationships between key stakeholders will be strengthened, both locally and regionally, through integration and alignment of ACEs efforts with child abuse prevention planning and Help Me Grow initiatives in each county.

Santa Barbara County is participating in the PACEs Connection Cooperative of Communities, and through this affiliation, has been able to offer PACEs Connection resources and training opportunities to its Network of Care participants. Connections with other Cooperative affiliates continue to inspire and inform progress (Fresno and Mind OC are PACEs affiliates and NOC grantees).

Cottage Health and Landon Pediatric Foundation will help sustain efforts by sharing their certified Core and Supplemental Trainings with networks in all three counties. In San Luis Obispo, members of the Bridges Planning Team (Center for Family Strengthening) will advance the ACEs work by pursuing connections with First 5 and the Help Me Grow Steering Committee.

How has the grant been leveraged to attain additional support in reaching the goals you set for advancing ACE screening and trauma-informed care?

ACEs Aware support for the KIDS Network project allowed us to successfully expand the Bridges to Resilience conference to inspire, engage and invigorate healthcare and human service professionals in three counties. By offering sponsorships opportunities, we were able to engage additional funders and build support for ACEs screening and trauma-informed care networks. Sponsors from all three counties contributed a total of \$36,100, which allowed us to establish a residual fund to cover startup costs for the next conference.

Santa Barbara and Ventura Counties also leveraged partnerships that were strengthened during this grant to apply for and receive Network of Care grants through ACEs Aware. Santa Barbara received an implementation grant and Ventura received a planning grant. Santa Barbara County's grant activities center on integrating the Pediatric Resiliency Collaborative and Resilient Santa Barbara County community partners, and expanding both networks to continue strengthening the Network of Care throughout the county. A portion of the funds will be used to host learning sessions that will facilitate strong connections and communication between healthcare professionals who are screening for ACEs and community partners who can provide buffering services. Ventura's planning grant activities have focused on establishing work flows, choosing an IT platform, and developing the care coordinator role. San Luis Obispo was not able to identify a lead entity and did not apply, however, they remain connected to the learnings of each county through the ACEs Aware initiative, monthly meetings of the Coastal Tri-Counties Child Abuse Prevention Coalition, and the cross-sector Child Abuse Prevention Planning Teams that are active in all three counties.

How have you measured your accomplishments and if so what are the results?

Accomplishments were measured through participant surveys and event statistics. For the October convening 70 individuals registered with 23 from San Luis Obispo, 29 from Santa Barbara, and 18 from Ventura County (we asked each county to invite 30 people). We had 65 participants attend the convening and 32 completed the survey. We asked whether the convening had given a clearer understanding of individual's roles in the ACEs Aware initiative. 65% agreed or strongly agreed, 35% were neutral. We also asked if participants left with a stronger sense of the cross-sector nature of the ACEs and resilience movement. 87% agreed or strongly agreed, 13% were neutral. Participants were asked to identify sectors for future outreach, and the majority of these sectors were successfully engaged in all three counties for the Bridges conference. 65% of those who completed the survey said they had made new connections as a result of the convening. Additional comments affirmed the importance of interactive breakout sessions.

For the Bridges conference, we measured accomplishments with survey data as well as information captured by the Acelevents platform regarding registration, attendance, county participation, sector participation, participation in networking opportunities, and visits to the Resource Hall. Much of the data from the event platform was included in the key accomplishments summary above. Survey data

showed that 18% of attendees (141 individuals) were from San Luis Obispo, 50% (374 individuals) were from Santa Barbara, 27 % (201 individuals) were from Ventura, and 5% were from other counties. We also broke out attendance numbers broadly by sector and found that 58% of participants were from community sectors (non-licensed providers) and 31% were from healthcare or behavioral health (licensed providers). Another 11% had licenses other than those we tracked for continuing education credits. Survey data from 203 responses showed that 72 % were attending the Bridges conference for the first time; 62% rated their experience as very good to excellent; 75% made connections and/or gained new resources; 71% of community providers said they would incorporate different strategies in their work and/or use alternative communication methodologies with families. We also broke out the physician responses. Of the 15 physicians who completed the Bridges Conference Survey, 87% rated their experience as very good to excellent; the remaining 13% rated their experience as good; 93% rated Dr. Anda's Keynote and Community Conversation as most valuable; 87% said they made new connections or gained new resources; 7% indicated they plan to modify treatment plans; 27% said they would change their screening and prevention practices; 40% said they would incorporate different diagnostic strategies; 40% said they would use alternative communication methodologies; and 13% said the conference validated their current practices. Narrative comments in the surveys indicated a high level of inspiration and gratitude.

Please provide copies of any pertinent documents such as newsletters, press/news release, website URLs, fliers, posters, toolkits. In addition, we are interested in seeing any documentation (pictures, video, etc.) used to document your journey.

Website has all of the presentations, slides, and resources: www.BridgestoResilience.com

Flyers, press releases, newsletters were included in prior reports :)

Uploaded screen shots from conference day...



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HEALTH OFFICIALS AB 361 SOCIAL DISTANCE RECOMMENDATION

Issued: September 28, 2021

COVID-19 disease prevention measures, endorsed by the Centers for Disease Control and Prevention, include vaccinations, facial coverings, increased indoor ventilation, handwashing, and physical distancing (particularly indoors).

Since March 2020, local legislative bodies-such as commissions, committees, boards, and councils- have successfully held public meetings with teleconferencing as authorized by Executive Orders issued by the Governor. Using technology to allow for virtual participation in public meetings is a social distancing measure that may help control transmission of the SARS-CoV-2 virus. Public meetings bring together many individuals (both vaccinated and potentially unvaccinated), from multiple households, in a single indoor space for an extended time. For those at increased risk for infection, or subject to an isolation or quarantine order, teleconferencing allows for full participation in public meetings, while protecting themselves and others from the COVID-19 virus.

Utilizing teleconferencing options for public meetings is an effective and recommended social distancing measure to facilitate participation in public affairs and encourage participants to protect themselves and others from the COVID-19 disease. This recommendation is further intended to satisfy the requirement of the Brown Act (specifically Gov't Code Section 54953(e)(1)(A)), which allows local legislative bodies in the County of Santa Barbara to use certain available teleconferencing options set forth in the Brown Act.

A handwritten signature in blue ink, appearing to read "Ansorg", written over a horizontal line.

Henning Ansorg, MD
Public Health Officer
County of Santa Barbara

A handwritten signature in blue ink, appearing to read "Van Do-Reynoso", written over a horizontal line.

Van Do-Reynoso, MPH, PhD
Public Health Director
County of Santa Barbara



BRIDGES TO RESILIENCE
CONNECTING THE COASTAL TRI-COUNTIES
SAN LUIS OBISPO • SANTA BARBARA • VENTURA

FINAL REPORT August 2, 2021

Please provide copies of any pertinent documents such as newsletters, press/news release, website URLs, fliers, posters, toolkits. In addition, we are interested in seeing any documentation (pictures, video, etc.) used to document your journey.



Fifth Annual

BRIDGES TO RESILIENCE

A conference connecting the Coastal Tri-Counties

JUNE 9, 2021

A live virtual event

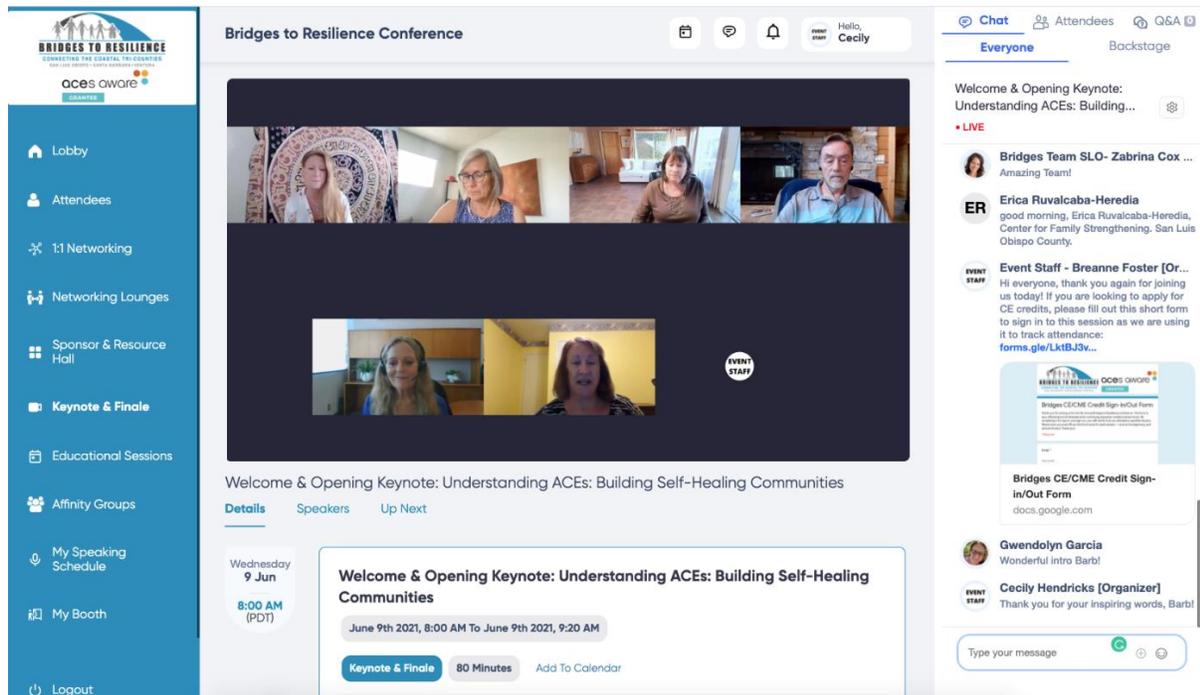
Hosted by ACES Aware and KIDS Network of Santa Barbara County

Watch for conference updates, including registration dates, at our website:

www.BridgesToResilience.com



Welcome to the Conference!



We are so excited that you've chosen to be with us today for our first ever tri-county event, and we're thrilled to have this opportunity to build bridges together. When we chose the name for this conference in 2016, our intention was to create an event that would connect our community, break down silos, and promote the kind of collaboration that eases pathways to healing and resilience for all those who are struggling.

Who knew that we would be here today, in the midst of a global pandemic, over a year of immeasurable suffering and social unrest that has brought new awareness to our understanding of trauma and resilience? Every one of us has been touched in some way by these events, and many of the healers and heroes who helped us get through it all are here with us today. Thank you for being you, and thank you for being here...

Everyone steps into this space with their values and perspectives, knowing what they know, whom they love, what matters to them, and what gives their lives meaning. Bridges to Resilience provides a unique opportunity for us to be curious and courageous, to consider other perspectives and different ways of being in the world, to share stories and find our common ground.

We invite you to be as fully present as possible today, and we hope that you will leave here with whatever you needed when you first arrived.

Understanding ACEs; Building Self-Healing Communities

Robert Anda, MD, MS.

Co-Founder, ACE Interface, LLC

Co-Principal Investigator, Landmark ACE Study

The **Keynote** presentation by Dr. Robert Anda offered foundational research on ACEs and current perspective for patient/family care.

The screenshot shows a Zoom meeting interface. The main window displays a presentation slide titled "The Progressive Nature of Adversity in the Life-Course". The slide content is as follows:

Adverse Childhood Experiences
Predictable patterns of brain development, traits & behaviors

- Slowed language & reading
- Lateralization
- Diminished IQ
- Poor decision making skills
- Memory Problems
- Attention problems
- ADD
- ADHD
- Aggressive behavior among peers
- Poor understanding of social cues = conflict

early use/abuse of alcohol, tobacco, illicit or prescription drugs

- Special education
- School failure
- Dropping out
- Suspension
- Expulsion
- Delinquency
- Prison pipeline

ADULT Adversity

- Low-wage jobs
- Unemployment
- Public Assistance
- Incarceration
- Chronic health problems
- Mental health and substance abuse
- Parenting and relationships more difficult

Intergenerational Risk

The chat window on the right shows several messages from participants, including Chris Ridge, Debbi Ashby, and Bridges Producer - Judy Hawkins, all discussing the importance of understanding ACEs and the need for empathy and healing.

Audience Feedback:

- I'm thankful for this study because it shines a light on the importance of prevention for future generations and lessens the stigma of people who grew up with life adversities.
- ACEs work brings together the head and the heart!
- "Gateway to empathy, compassion, and healing" Our children and their parents desperately in need of all 3!
- Dr. Anda is speaking the truth! We have to help awareness like he is doing. We also need to give those with high ACE Scores opportunities to learn skills to mitigate the impact of ACEs. Self-regulation will help reduce the trauma for the next generation.
- I hope for schools to eventually integrate the perspective of what is behind behaviors, instead of just seeing the behavior and not the full child.
- Dr. Anda touched many feelings in me. I believe in his theories and will endeavor to show compassion in my work and try to give back to our community.

Community Conversation

The keynote was followed by a **Community Conversation** panel with Dr. Anda. Panelists included Dr. Nisha Abdul Cader - a pediatrician from San Luis Obispo, Victoria Kral - a probation officer from Santa Barbara, and Manny Arroyo - a parent leader / family advocate from Ventura.

The screenshot displays a Zoom meeting titled "A Community Conversation with Dr. Anda" on the "Main Stage". The interface includes a "Stop Broadcast" button and a "Change layout" option. The main stage is divided into six video feeds: "Event Staff - Breanne Foster" (with an "EVENT STAFF" logo), Victoria Kral, Manny Arroyo, Nisha AbdulCader, Dr. Robert Anda, and Bridges Team SBC Barbara Finch. A chat window on the right shows the following audience feedback:

- JR Julia Reynoso:** Thank you Manny for sharing your experience! (8 likes)
- DB Danette Brown:** Victoria mentioned the Positive Achievement Change Tools--what is she referring to? (2 likes)
- LF Lorena Ferrari:** Sorry Audio was out, what does Dr. Anda think about EMDR? (2 likes)
- LM Lisa Martinez:** School based services are very helpful.
- EC Erin Cross:** The Positive Achievement Change Tool is our risk assessment tool. It tells us their highest areas of need, the critical factors we need to address, and their protective factors. This helps us work with them on case plans for services and to highlight the positive supports they have.

Audience Feedback:

- We all need reminders of what led the person in front of us to be where they are at this moment. Especially the parents. Thank you.
- How do we support people to share their stories and cultivate compassion? That your ACE score is actually your super power - for me growing up in foster care and emancipating helps me listen and support those going through the system.
- Thank you for sharing your experiences working with youth and families. Your compassion and love for others, is inspiring.
- How can we get ACES information and training to educators from preschool teachers and higher education? Should this be a mandatory course work or classes prior to obtaining their degree or certification? How can this be implemented across the board?

The Importance of Youth Resilience in Overcoming Adversity

Kenneth Ginsburg, MD, MS, Ed, The Children's Hospital of Philadelphia, Center for Parent and Teen Communication



An Integrated Model that includes all we've learned from

- ✓ Positive Youth Development
- ✓ Resilience Building Strategies
- ✓ Trauma-sensitive Practices
- ✓ Restorative Practices

A model that acknowledges pain, but sees the best in people.

A model that recognizes structural racism and the undermining forces of low expectations, but that prevents a new label from being applied to already marginalized communities. In sharp contrast, it must recognize the inherent strengths of individuals, communities, and cultures.

An equity and anti-racist lens must be fully integrated lest aspirational models do harm.

Audience Feedback:

- Confirmation of long held beliefs and life experience. Appreciated the depth of intellect and thought.
- Hope, reassurance, inspired, eager to work with youth.
- Takeaway: when speaking with teens go from heart (love and strengths)-belly (what you are worried about) -head (plan) -hand (connect and do this together)
- This information helps me identify underlying causes for chronic health issues in our adult patients. Always lead with kindness!

Shifting from the Stress System to the Wisdom System

John Horton, MD (with Natalie Rhodes from the Bridges Team)



Audience Feedback:

- STOP method...taking a step back when in the reptilian brain.
- The intro talked a about the three boxes intervention and the tree of stability. I was intrigued by these.
- Thank you very much. This is helpful for both personal and professional endeavors.
- Love, hope contentment, compassion, courage, empathy

Trauma-Responsive Family Engagement Practices for Early Childhood

Julie Kurtz, Center for Optimal Brain Integration®

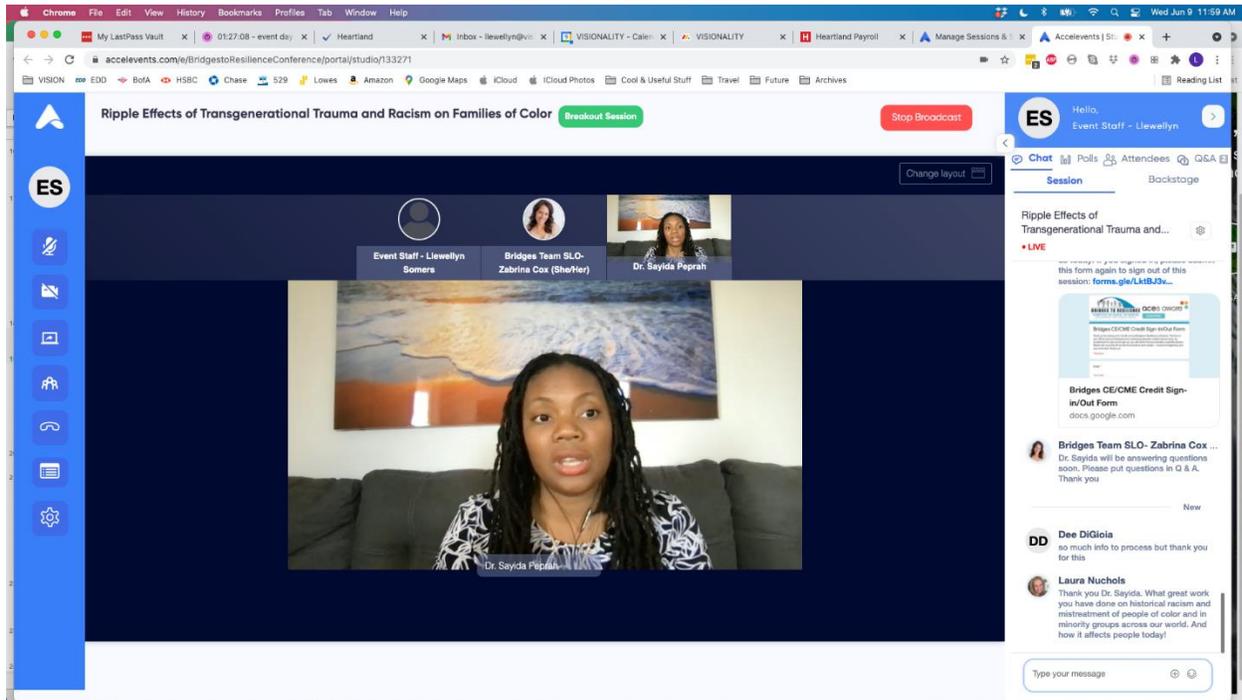


Audience Feedback:

- I always appreciate a strength based approach. I always think it's great to move past "trauma informed" to "trauma responsive."
- What I will take from this session is to carefully examine my inner self when meeting with client as to learn from their point of view, meaning what they are currently wanting to gain from our visits.
- Thank you! Brought consciousness to our daily interactions with families.

Ripple Effects of Transgenerational Trauma and Racism on Families of Color

Dr. Sayida Peprah, PsyD, Diversity Uplifts, Inc.



Audience Feedback:

- What great work you have done on historical racism and mistreatment of people of color and in minority groups across our world. And how it affects people today!
- Thank you for all this wisdom and guidance! I can't agree more that we need to turn to the community for the guidance we need to be effective in this work.
- Immigration trauma, my mother was first generation American and moved to the United States at the age of 32, while she assimilated into American culture, the daily discrimination and racism is something she still encounters

SPEAK Up 2 Disrupt! Disrupting Fragility to Create Opportunity

Sara Rex, SPEAK, Inc. strategist / motivational speaker

The image is a screenshot of a virtual event slide. At the top, there is a dark blue header with three circular icons. The first icon is labeled 'EVENT STAFF' and below it is 'Event Staff - Nico Gervasoni'. The second icon is a video feed of Sara Rex, with her name 'Sara Rex' below it. The third icon is labeled 'Bridges Team SB Terri Allison'. Below the header is a large black slide with the title 'Our Disruptors | Who Are We?' in white and blue text. The slide features three circular portraits of speakers. The first is Sara Rex, with her name and title 'CEO, COO & Executive Strategist' and 'Sixth Grade & Single' below. The second is Julius Ross, with his name, title 'Creative Director', and the quote 'I'm already a Big No.' below. The third is Pei-Wen Fu Park, with her name, title 'Executive Talent Program Director', and the quote 'I didn't even know that I was Asian.' below. At the bottom of the slide, the text 'Moments that Matter' is followed by 'Discovery. Denial. Disruption.' in white and blue. The SPEAK logo is in the bottom right corner.

Audience Feedback:

- Love this explanation of fragility and disruption - so much clearer now!
- I really wish this component was mentioned/acknowledged in the ACES model
- We all have biases because we have a brain and live in society
- Ally is a verb not a noun

Road to Resilience: Connecting Pediatrics and Community Service Providers

Andria Ruth, MD, Pediatric Resiliency Collaborative, and Ama Atiedu, Cottage Health

The screenshot shows a Zoom meeting interface. At the top, there are six participant tiles. From left to right: Breanne Foster (Event Staff), Yvonne Nelson, Ama Atiedu (Bridges Plan Team SBC), Dr. Andria Ruth, MaryEllen Rehse, and Liliana Hernandez. The main content area displays a presentation slide with a teal background image of a woman and a child. The slide title is "Responding to Adverse Childhood Experiences (ACEs)". The slide content includes:

- **Primary prevention**- prevent ACEs through educating parents and providing supports to families
- **Secondary prevention**- early recognition of ACEs and provide supports to prevent toxic stress
- **Tertiary prevention**- early, evidence-based interventions to mitigate the toxic stress response

Below the list, there is a quote: "Prevent, treat and heal". At the bottom of the slide, there is a small URL: www.acesaware.com. The Zoom interface also shows a "www.acesaware.com is sharing your screen" notification at the bottom of the slide area.

Audience Feedback:

- Love the collaboration between CALM and FSA to make sure people are able to get the supports without being lost or delayed in the process
- So wonderful to hear how the collaboration has grown and been strengthened
- I like the normalization of discussing mental health in primary care!
- This was such a fantastic summary of PeRC's work.