Program Title: Adverse Childhood Experiences: Why does it matter?

Program Abstract & Summary:

1. Abstract:
   a. What are Adverse Childhood Experiences (ACEs) and what does it have to do with hope, health, and healing? ACEs have become a critical (variable) when looking at health outcomes because ACE scores can impact everything from physical health to mental health to substance misuse/use disorders. Community members and leaders equipped with a better understanding of ACEs, the conditions that reduce ACEs, and strategies to build resilience can have a greater impact through policy, advocacy, and improvements in services, resources, and programs.

2. Outline:

   The Adverse Childhood Experiences (ACEs) study is not new, however professionals in a multitude of disciplines are becoming more aware of how ACEs impact society at large. While individuals may have an awareness of adverse childhood experiences itself, many may not understand what the implications are for the results of the study. ACEs impact two-thirds of the population regardless of race, socioeconomic status, gender, ability, sexual orientation, etc. Furthermore, research indicates that individuals from marginalized populations may experience more Adverse Childhood Experiences than others. The purpose of Adverse Childhood Experiences: Why does it matter? is to examine the findings of the initial and subsequent ACEs studies, the impact specifically on the Black community, and the implications for policy and practice moving into the future.

   Research consistently shows a strong correlation between ACEs and mental and physical health outcomes, substance use and reduced educational attainment. The findings of ACE studies can greatly impact how we provide services to individuals and communities in the area of health and mental health services as well as policies that could possibly address the disproportionate exposure to ACEs within Black communities. Additionally, research shows that building resiliency can act as a protective factor that can mitigate the long-term impacts associated with ACEs.

   Using the Social Ecological Model framework of public health, this program will also present a multilevel approach to address ACEs. Evidence-based practices will be presented and discussion around how we can support the creation of resilient communities focused on thriving and not just surviving.

   The hope is that individuals who attend Adverse Childhood Experiences: Why does it matter? will leave the session with a better understanding of ACEs, how it affects their current role, and where to move toward the future.

Learning Outcomes:
1. Define Adverse Childhood Experiences (ACE).
2. Identify potential impact of ACEs specifically to the Black community.
3. Examine implications for practice in addressing ACEs and resiliency as it relates to the Black community.

Program Relation to Theme:
ACEs, resiliency, and its impact specifically to the Black community, directly relate to health and healing. This program topic incorporates public health, health education, mental, and emotional health. Highlighting ACEs and resiliency can help leaders and community members learn how to better support individuals and communities through a multilevel approach to address and explore disparities and impacts.

Presenter Bios:

Lyndon Mitchell -
Lyndon Mitchell has been a School Psychologist within the Knox County School System for the past 9 years and he currently serves Sarah Moore Greene Magnet Academy. In addition, Lyndon also serves as a district trainer on ACEs and trauma informed educational practices. Prior to working for KCS, Lyndon worked as an educational and mental health consultant in his native twin islands of Trinidad and Tobago. In that role, Mr. Mitchell consulted with a number of organizations and assisted in developing their youth educational outreach programs.

Rebecca Juarez -
Rebecca Juarez has served as a Wellness Coordinator in the Center for Health Education and Wellness since April 2015 overseeing the alcohol and other drug risk reduction area. The focus is on primary and secondary prevention providing educational programs, events, outreach, and individual brief interventions. Prior to the University of Tennessee – Knoxville, Rebecca was a clinical therapist with experience working in substance use disorder treatment, treatment of trauma, and generalized practice in community mental health settings.