Academy on Violence and Abuse – 11 Years of Work to Improve Health and Wellness by Educating the Healthcare Professions and Communities

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Secretary, American Professional Society on the Abuse of Children
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Tulsa, Oklahoma
May 20, 2015
AVA’s First 10 years

- Policy
- Partners
- People
- Publications
- Products

- Mission & Vision
- Initiatives
- Research
Policy Impetus for AVA Founding

Institute Of Medicine Report
Released Sept 10, 2001

Called for:

• Multidisciplinary Centers for Education and Research
• Organizational guidance
• Innovative training models
• Federal funding
Partnership between AMA Violence & Abuse Council and Family Violence Prevention Fund
Other Key Partnerships

- AMA National Advisory Council on Violence and Abuse/National Health Collaborative on Violence and Abuse
- American Medical Association
- Family Violence Prevention Fund/Futures Without Violence
- T. Boone Pickens Foundation
- AHRQ
- Trauma Violence and Abuse
- National Child Traumatic Stress Network (NCTSN)
- Chadwick Center for Children and Families/San Diego International Conference on Child and Family Maltreatment
- IVAT (Institute for Violence, Abuse and Trauma)
People

Never doubt that a small group of thoughtful, committed citizens can change the world. Indeed, it’s the only thing that ever has.

Margaret Meade
AVA’s Inaugural Event - Sept. 2005
AVA Board – April 10, 2015

AVA’s current small group of “thoughtful, committed citizens”
Academy on Violence and Abuse (AVA)

A Global Interprofessional Society focused on the Health Impacts of Violence and Abuse across the Lifespan
AVA Mission

To advance health education and research on the recognition, treatment, of the health effects of violence and abuse across the lifespan.
AVA Vision

The recognition, treatment, and prevention of the health effects of violence and abuse are fully integrated into healthcare and society so that people of all ages are safer and healthier.
Publications

• Building Academic Capacity and Expertise in the Health Effects of Violence and Abuse
Publications

• Competencies Needed by Health Professionals for Addressing Exposure to Violence and Abuse in Patient Care
AVA’s 1st Product - 2012
ACE Study DVD/Online Videos

- Felitti & Anda ACE Study Plenaries
- Putnam – “ACEs Changed the Landscape”
- Individual Interviews with Vincent Felitti, Rob Anda, and David Williamson
- 4.5 hours of video
- PPTs, ACE Questionnaires
AVA ACEs Study DVD/Videos
8 Minute Policy Maker Summary
2009 – 2014 AVA Initiatives

2009 – Began posting AVA videos on website
2012 – Scholars Program initiated (AVA now has six AVA scholars)
2013 – United States Medical Licensure Examination (USMLE) Site Visit

1st Regional Academies & Symposia
2014 – April - Ashland and Akron, Ohio
          October - Salt Lake City, Utah
Ashland OH

- Population 54,000
- Conservative Christian Community
  - Brethren and Amish
- Agriculture and Manufacturing
- Samaritan Regional Health System
- Ashland University
- Ashland Theological Seminary
Mental Health and Recovery Board

- Branch of local (county) Government
- 18 Member Citizen Governing Board
- Plan, fund, monitor and evaluate
- Contract provider network
  - Clinical and Support Services
- Community Education
- Professional and Workforce Development
- Advocacy
Three Legs of the Stool

- Recovery
- Trauma-Informed Care
- Medication Optimization
How the AVA Supports Local Efforts

- ACEs DVD
- Experts and Collaboration
  - Regional Academy: April 2014 (Fellitti, Corwin, Ismailji, Alexander)
  - Barbara Boat (April 2015)
  - Victor Vieth (March 2016)
- Affinity Groups
- Website Resources
Laying the Groundwork

- Staff and Board Members
- Network Providers
- Public and Private Social Service Agencies
- Community at Large
Pre-Conference Preparation

- Lunch and Learn Series (AVA ACEs DVD)
  - Mental Health and Addiction Providers
  - Social Service Agencies
  - Faith Community
  - Hospital
  - Educators
Recruit Partners

- Margaret Clark Morgan Foundation
- Samaritan Regional Health System
- Northeast Ohio Medical University (CMEs)
- Visiting Nurse Association of Ohio
- Mental Health Agencies
- Ashland University’s Center for Nonviolence
- Akron Partners Summa, Akron Children’s Hospital, others)
Regional Academy: April 2014

- Providing exposure to a wide body of knowledge, research and practice by subject experts
- 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
Using the Media

- Local Newspaper
- Local TV
Conference breaks down lasting effects of traumatic childhood experiences

By DAN KURACKI
TG Staff Writer

Wednesday was a day of eye-opening revelations about the impact of violence, abuse and neglect against children, and their long-term effects on those children's adult lives.

The Mental Health and Recovery Board of Ashland County played host to the inaugural Regional Academy on Violence and Abuse at Ashland University. The conference lasted throughout the day, drawing hundreds of medical professionals and community outreach leaders to listen to presentations and panels on the effects of traumatic life experiences on children and adolescents.

At the core of the conference was discussion of the Adverse Childhood Experiences study. The study's co-principal investigator, Dr. Vincent Felitti, began the proceedings Wednesday morning by presenting the study's findings. Felitti, who has spent much of his medical career at Kaiser Permanente of San Diego, collaborated on the ACE study with the U.S. Center for Disease Control to survey more than 17,000 middle-class adults in the mid-1990s, and the participants still are being studied today.

Turn to TRAUMATIC, Page A6

Dr. Vincent Felitti talks about the Adverse Childhood Experiences study Wednesday at the Regional Academy on Violence and Abuse conference at Ashland University’s John C. Myers Convocation Center.

Times-Gazette photo/ Tom E. Puskar

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Next Steps

- Faith Leaders Conference (March 2016)
- Community Health Assessment TAGs
  - Health and Wellness
  - Opiate Addiction
  - Poverty
  - Violence Across the Lifespan
- Considering a Second Regional Academy
Resources

- AVA Resources
- ACEs DVD:
  - https://avahealthorg.presencehost.net/ace_study/order_ace_dvd/
- Regional Academy Planning Guide and Related Resources:
- Health Federation of Philadelphia
- Community Resiliency Cookbook:
  - http://communityresiliencecookbook.org/
- ACEs Connection Network Resources:
  - Infographic:
  - Roadmap to Resilience Toolkit:
    - http://www.acesconnection.com/blog/roadmap-to-resilience-toolkit-v-1-0-1
ACEs: Best Practices

Adverse Childhood Experiences: Informing Best Practices

Online Collaborative Living Document - Version 1.0 (3/14/2015)

This document is the product of an ongoing collaboration between the Academy on Violence and Abuse (AVA) and the National Health Collaborative on Violence and Abuse (NHCVA). It is intended to assist healthcare professionals and others who wish to integrate knowledge of adverse childhood experiences into patient care and other activities (e.g., education, human services, and justice). A downloadable PDF including links of ACEs: Informing Best Practices, is available in the appendix.

Steering Committee

David L. Corwin, MD, Editor-in-Chief
Randell Alexander, MD, PhD
Megan Bair-Merritt, MD, MSCE
Robert Block, MD
Verna Davis, MSCE
2015 AVA Initiatives

Regional Academies and Symposia – USA
  May – Ft. Peck Health & Resilience Symposium co-sponsor and one AVA speaker
  October – Rochester, NY
  November – Tampa, FL

Global Partnerships
  July – Trauma Awareness & School Mental Health Symposium – Seoul, Korea
  October – Hong Kong/AVA Regional Academy

AVA Global Summit – November 5-7 Jacksonville, FL
AVA’s Educational Tools Go Global

ACE Study

The Adverse Childhood Experiences Study: Background, Findings, and Paradigm Shift

Robert F. Anda, MD, MS, Co-Principal Investigator
Vincent J. Felitti, MD, Co-Principal Investigator
Frank W. Putnam MD, Discussant

The ACE Study has made that which was known to the few, credible to the many

NEW - INSTITUTIONAL LICENSE

ACEs: Informing Best Practices

Online Collaborative Living Learning Document

For more information about the AVA, becoming a member and to order a copy of the ACE Study DVD, Institutional License or to view the ACEs: Informing Best Practices, visit avahealth.org or call 952.973.3270.

Academy on Violence and Abuse
1160 Vierling Dr. Suite 130
Shakopee, MN 55379 USA
Paradigm Shifts

Mind-Body Dualism

Biomedical Model

Biopsychosocial Model

Ecobiodevelopmental Model

Decartes (1596 – 1650)

Robert Anda, MD, MS

Vincent Felitti, MD

George Engel, MD (1913 – 1999)

Slide by Tasneem Ismailji, MD, MPH used with permission
ECOBIODEVELOPMENTAL FRAMEWORK

Schonkoff JP, Garner AS 2012 Pediatrics 129;e232
Slide by Tasneem Ismailji, MD, MPH
graphic copyrighted by AAP
Adverse Childhood Experiences (ACEs) & Relationship to Adult Health Status and Well-Being

A collaborative effort of Kaiser Permanente and The Centers for Disease Control and Prevention

www.acestudy.org

Vincent J. Felitti, M.D.
Robert F. Anda, M.D.

slide from Randell Alexander, MD, PhD and Vincent Felitti, MD used with permission
The Adverse Childhood Experiences Study

- The largest study of its kind ever done to examine the health, social, and economic effects of adverse childhood experiences over the lifespan (17,337 participants)
- Average age = 57 years old

slides from Randell Alexander, MD, PhD and Vincent Felitti, MD used with permission
ACE Study Design

Survey Wave 1
71% response (9,508/13,454)
n=13,000
All medical evaluations abstracted

Survey Wave II
n=13,000
All medical evaluations abstracted

Mortality
- National Death Index

Morbidity
- Hospitalization
- Doctor Office Visits
- Emergency Room Visits
- Pharmacy Utilization

Present Health Status

17,337 adults
What are Adverse Childhood Experiences?

Experiences that represent medical and social problems of national importance:
- childhood abuse and neglect
- growing up with domestic violence
- substance abuse or mental illness in home
- parental loss or incarceration
Historical Trauma and ACEs

From Rob Anda’s, MD, MS presentation at Ft. Peck Indian Reservation May 27, 2015 - used with permission
Prevalence of Adverse Childhood Experiences

Abuse, by Category
- Psychological (by parents) 11%
- Physical (by parents) 28%
- Sexual (anyone) 22%

Neglect, by Category
- Emotional 15%
- Physical 10%

Household Dysfunction, by Category
- Alcoholism or drug use in home 27%
- Loss of biological parent < age 18 23%
- Depression or mental illness in home 17%
- Mother treated violently 13%
- Imprisoned household member 5%

slides from Vincent Felitti, MD, used with permission
Adverse Childhood Experiences Score

Number of categories of adverse childhood experiences are summed …

<table>
<thead>
<tr>
<th>ACE score</th>
<th>Prevalence</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>48%</td>
</tr>
<tr>
<td>1</td>
<td>25%</td>
</tr>
<tr>
<td>2</td>
<td>13%</td>
</tr>
<tr>
<td>3</td>
<td>7%</td>
</tr>
<tr>
<td>4 or more</td>
<td>7%</td>
</tr>
</tbody>
</table>

- More than half have at least one ACE
- If one category of ACE is present, there is an 84% likelihood of additional categories being present.
Number of Adverse Childhood Experiences and Teen Sexual Behaviors

Number of adverse factors:
- 0
- 1
- 2
- 3
- 4 or more

- Intercourse by age 15
- Teen pregnancy
- Teen paternity

slide from Randell Alexander, MD, PhD used with permission
ACE Score and HIV Risks

Number of adverse factors:

- 0
- 1
- 2
- 3
- 4 or more

Percent With Health Problem (%)

- Ever injected drugs
- Had 50 or more intercourse partners
- Ever had an STD

Slide from Randell Alexander, MD, PhD used with permission
Relationship Between Number of Adverse Childhood Experiences and Smoking Behaviors and Smoking-Related Lung Disease

Number of adverse experiences:

- 0
- 1
- 2
- 3
- 4 or more

Percent With Health Problem (%)

- Early smoking initiation
- Current
- COPD

Slide from Randell Alexander, MD, PhD - used with permission
Childhood Experiences vs. Adult Alcoholism

ACE Score vs. % Alcoholic

0 1 2 3 4+

Slide by Vincent Felitti, MD – used with permission
Lifetime ACEs & Suicide Attempts

Adapted from Koplan & Chard – Psych Annals, 2014
Data from Dube et al. – JAMA, 2001

Series 1 - Lifetime ACE Score

Series 2 - Lifetime History of Attempted Suicides

Number of ACEs

Percent of Population

0 1 2 3 4 5 6 7 or more

0 5 10 15 20 25 30 35 40

36.4% 26.2% 15.8% 9.5% 5.6% 6.0% 8.4% 3.5% 1.6% 0.9% 35.2%
Health risks

ACE Score vs Injection Drug Use

% Have Injected Drugs

ACE Score

p<0.001

Slide from Vincent Felitti, MD used with permission
ACE Score and the Risk of Being a Victim of Domestic Violence

Well-being

Risk of Victimization (%)

ACE Score

Women

Men

0 1 2 3 4 >5

0 1 2 3 4 >5

ACE Score

Slide by Vincent Felitti, MD - used with permission
Childhood Experiences Underlie Chronic Depression

Felitti, 2011

slide from Vincent Felitti, MD used with permission
ACEs Increase Likelihood of Heart Disease*

- Emotional abuse 1.7x
- Physical abuse 1.5x
- Sexual abuse 1.4x
- Domestic violence 1.4x
- Mental illness 1.4x
- Substance abuse 1.3x
- Household criminal 1.7x
- Emotional neglect 1.3x
- Physical neglect 1.4x


Slide from Vincent Felitti, MD used with permission
Population attributable risk associated with early adversity:

- 50% for drug abuse
- 54% for current depression
- 65% for alcoholism
- 67% for suicide attempts
- 78% for iv drug use


ACE STUDY FINDINGS

• As ACE score goes up, so does risk for:
  – Smoking
  – Organic disease
  – Adult alcoholism
  – Depression and suicide attempts
  – Having 50+ lifetime sexual partners
  – STD’s and Rape (from 5% to 33%)
  – Hallucinations
  – Domestic Violence
  – Addictions
  – Dying early
  – Job problems and lost time from work


# ACEs Data from Three Studies

Adapted from Koplan & Chard – Psychiatric Annals, 2014

<table>
<thead>
<tr>
<th></th>
<th>ACE Study</th>
<th>CDC Five State BRFSS Study</th>
<th>CDC Ten State BRFSS Study</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Year(s)</strong></td>
<td>1995-1997</td>
<td>2009</td>
<td>2010</td>
</tr>
<tr>
<td><strong>Sample size</strong></td>
<td>17,337</td>
<td>26,229</td>
<td>53,998</td>
</tr>
<tr>
<td><strong>Study Site</strong></td>
<td>San Diego, CA</td>
<td>AR, LA, NM, TN, WA</td>
<td>DC, HI, ME, NE, NV, OH, PA, UT, VT, WA, WI</td>
</tr>
<tr>
<td><strong>Physical Abuse</strong></td>
<td>28.3 %</td>
<td>14.8 %</td>
<td>16.0 %</td>
</tr>
<tr>
<td><strong>Sexual Abuse</strong></td>
<td>20.7 %</td>
<td>12.2 %</td>
<td>10.9 %</td>
</tr>
<tr>
<td><strong>Emotional Abuse</strong></td>
<td>10.6 %</td>
<td>25.9 %</td>
<td>35.1 %</td>
</tr>
<tr>
<td><strong>Parents Sep./Div.</strong></td>
<td>23.3 %</td>
<td>26.6 %</td>
<td>28.1 %</td>
</tr>
<tr>
<td><strong>HM with alcohol or drug problem</strong></td>
<td>26.9 %</td>
<td>29.1 %</td>
<td>21.7 % (alcohol) 9.4 % (drug)</td>
</tr>
<tr>
<td><strong>HM with Mental Illness</strong></td>
<td>19.4 %</td>
<td>19.4 %</td>
<td>16.4 %</td>
</tr>
<tr>
<td><strong>HM Incarceration</strong></td>
<td>4.7 %</td>
<td>7.2%</td>
<td>5.9%</td>
</tr>
<tr>
<td><strong>HM Domestic Violence (IPV)</strong></td>
<td>12.7 % ( Mothers only)</td>
<td>16.3 %</td>
<td>15.0%</td>
</tr>
</tbody>
</table>
Disease Burden of Childhood Adversities Greater than all Mental Disorders

<table>
<thead>
<tr>
<th></th>
<th>Years Lived with Disability</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Childhood Adversity</td>
<td>20.7</td>
</tr>
<tr>
<td>Abuse and Neglect</td>
<td>15.8</td>
</tr>
<tr>
<td>All Mental Disorders</td>
<td>12.9</td>
</tr>
</tbody>
</table>

Utah Workforce Services Department

- Commitment to train all employees to be trauma-resiliency informed
- Three Tiers
- Tier One
  - Trauma – Health & Function
  - Resiliency
  - Role Playing
  - Protocols and next steps