

**Panel Presenters Biographies**  
2018 December 19 Strategic Council Meeting  
Community Action on Mental Health and Addiction

**Nancy Mannix**

Nancy Mannix is the Chair and Patron of the Palix Foundation, a private foundation whose philanthropy aims to ultimately support improved health and wellness outcomes for all children and families.

The Foundation, through the Alberta Family Wellness Initiative focuses on creating alignments between science, policy and practice in the areas of brain development and its implications for child development, mental health and addiction, ultimately generating changes at an individual, organizational and systems level.

The work Nancy has done with the Palix Foundation has garnered some prestigious awards such as the 2015 Canadian Medical Award for Excellence in Health Promotion; the 2014 Lieutenant Governor of Alberta's Circle on Mental Health and Addiction True Leadership Award; the 2013 Certificate of Recognition by the Canadian Academy of Child and Adolescent Psychiatry; 2010-2011 President's Award, Canadian Mental Health Association and the 2006 Medal for Exceptional Contribution for Early Childhood Development by the Centre of Excellence for Early Childhood Development.

Nancy has served as a member of the Alberta Innovates-Health Solutions Board and her long career and highly regarded work in the charitable sector has included a number of organizations, such as the Calgary Health Trust and the Canada West Foundation. She has also served on numerous boards including the Alberta Heritage Foundation for Medical Research and the Alberta Bone and Joint Health Institute.

Nancy has a Bachelor of Arts Degree from the University of San Diego and a Juris Doctor Degree from Seattle University.

**The Palix Foundation**

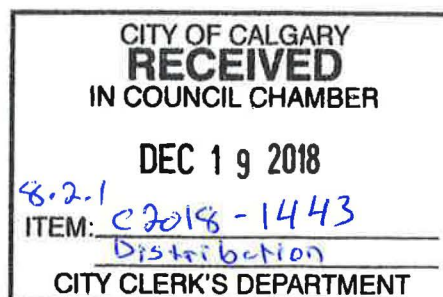
The Palix Foundation is a private foundation in Alberta working in the related areas of childhood development, addiction, and mental health. The Palix Foundation created the Alberta Family Wellness Initiative (AFWI) to improve health and well-being by mobilizing science in these areas.

Lifelong health is determined by more than just our genes: early life experiences change our brains in ways that make us more or less vulnerable to health problems in adulthood.

Knowing that, how can we improve the health of everyone in our communities? The AFWI is involved in three key strategies for improving health and wellness.

1. Educating everyone about the science of brain development and its impact on lifelong health.
2. Bringing professionals, experts and change agents across science, policy and practice to work on solutions together.
3. Supporting research and evaluation.

By educating each other on the science behind brain development, we can take action that will improve our physical and mental health, reduce vulnerability to addiction, and address related health problems across the life span.



## Can One Story Change Everything?

*City Council Mental Wellness & Addiction Strategy Session*

December 19, 2018



## Vision

The Alberta Family Wellness Initiative is a catalyst for concrete action and change to advance the understanding and approach to childhood development and its life-long impact on addiction and other negative health outcomes.



# The Core Story of Brain Development

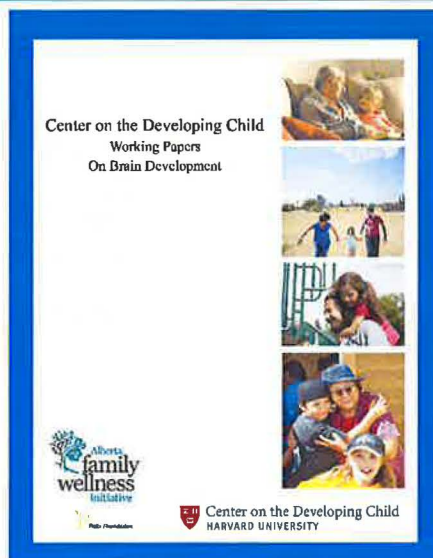
## The National Scientific Council on the Developing Child



## The FrameWorks Institute

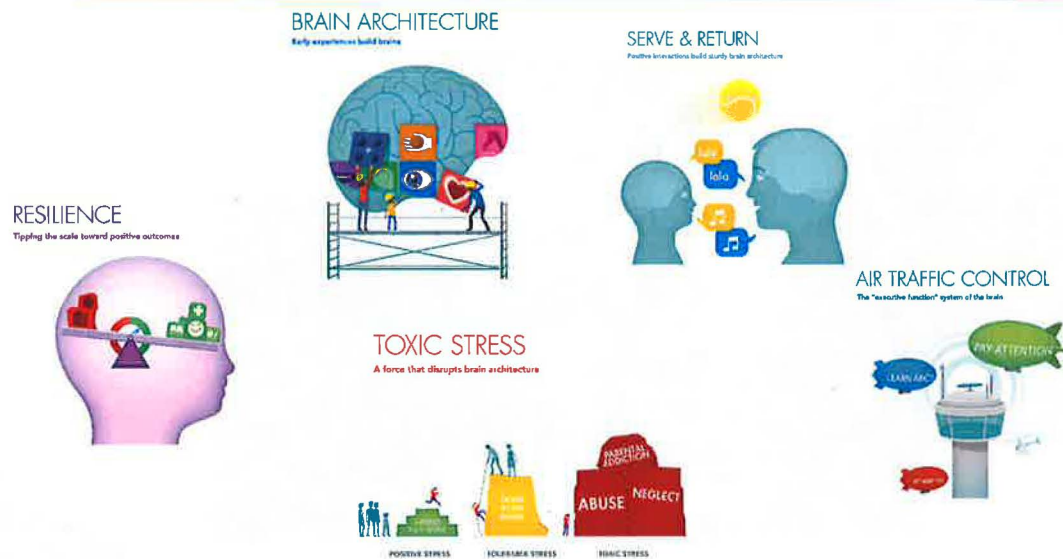


## Harvard Working Papers





## Brain Story Metaphors- Core Concepts



## Testing Scientific Literacy in Alberta:



## Testing Scientific Literacy in Alberta:

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What matters in child development?

- Parents
- DNA
- Character

What is Addiction?

- Anything
- In the substance
- Control / Need

Children's Mental Health

- Children are little adults
- Can't distinguish between mental health and mental illness
- Don't connect mental health to the brain

What causes Addiction?

- Underlying issues
- Chemical imbalance
- Genetic
- Lack of will power

The Importance of Brain Science to  
Mental Health and Addiction

# Traumatized Adults in Primary Care: The Challenge of ACEs

Lauren Allan     Dennis Pusch  
Cynthia Clark     Thomas Burton



## Adverse Childhood Experience (ACE) Questionnaire

### Adverse Childhood Experience (ACE) Questionnaire Finding your ACE Score © 1998 by CDC

While you were growing up, during your first 18 years of life:

1. Did a parent or other adult in the household often ...  
Swear at you, insult you, put you down, or humiliate you?

or  
Act in a way that made you afraid that you might be physically hurt?  
Yes No If yes enter 1 \_\_\_\_\_

2. Did a parent or other adult in the household often ...  
Push, grab, slap, or throw something at you?

or  
Ever hit you so hard that you had marks or were injured?  
Yes No If yes enter 1 \_\_\_\_\_

3. Did an adult or person at least 5 years older than you ever ...  
Touch or fondle you or have you touch their body in a sexual way?

or  
Try to or actually have oral, anal, or vaginal sex with you?  
Yes No If yes enter 1 \_\_\_\_\_

4. Did you often feel that ...  
No one in your family loved you or thought you were important or special?

or  
Your family didn't look out for each other, feel close to each other, or support each other?  
Yes No If yes enter 1 \_\_\_\_\_

5. Did you often feel that ...

You didn't have enough to eat, had to wear dirty clothes, and had no one to protect you?  
or  
Your parents were too drunk or high to take care of you or take you to the doctor if you needed it?  
Yes No If yes enter 1 \_\_\_\_\_

6. Were your parents ever separated or divorced?

Yes No If yes enter 1 \_\_\_\_\_

7. Was your mother or stepmother:

Often pushed, grabbed, slapped, or had something thrown at her?  
or  
Sometimes or often kicked, bitten, hit with a fist, or hit with something hard?  
or  
Ever repeatedly hit over at least a few minutes or threatened with a gun or knife?  
Yes No If yes enter 1 \_\_\_\_\_

8. Did you live with anyone who was a problem drinker or alcoholic or who used street drugs?

Yes No If yes enter 1 \_\_\_\_\_

9. Was a household member depressed or mentally ill or did a household member attempt suicide?

Yes No If yes enter 1 \_\_\_\_\_

10. Did a household member go to prison?

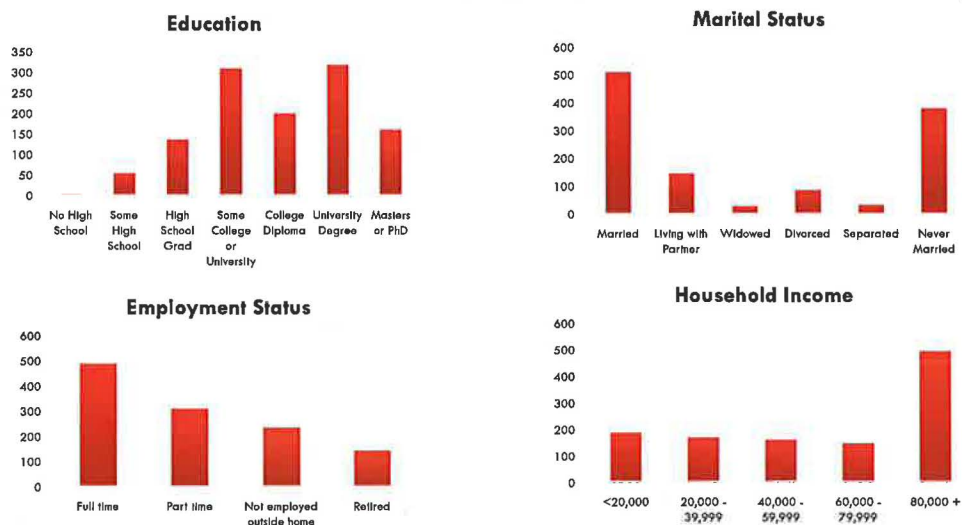
Yes No If yes enter 1 \_\_\_\_\_

Now add up your "Yes" answers: \_\_\_\_\_ This is your ACE Score

## Phase 2 Population Demographics

Adverse Childhood Experiences – Alberta (ACEs – A)

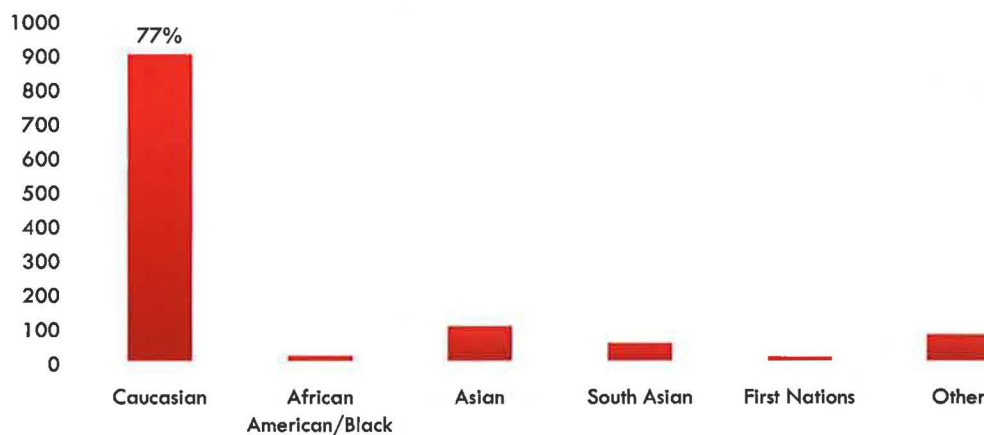
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## Phase 2 Population Demographics

Adverse Childhood Experiences – Alberta (ACEs – A)

### Ethnicity





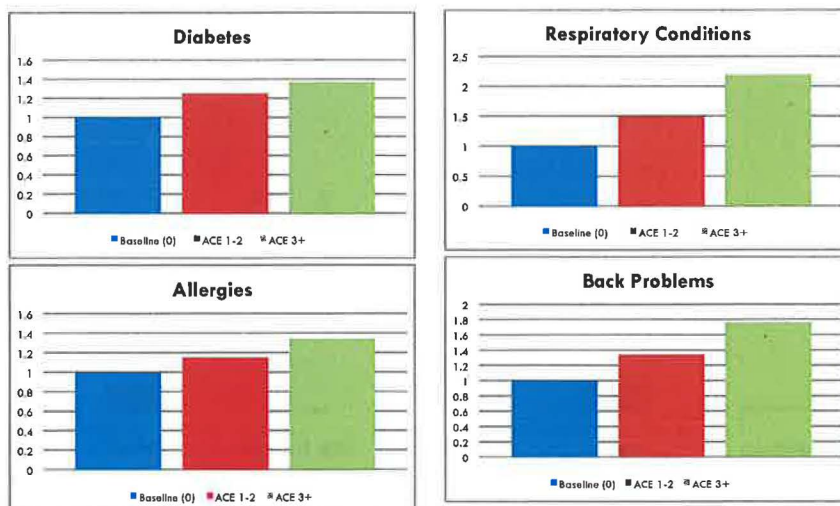
## ACEs Reported by Participants

- Household Mental Illness- 43.4%
- Household Substance Abuse- 36.7%
- Sexually Abused\*- 33.6%
- Emotionally Neglected- 28.6%
- Parental Divorce- 25.9%
- Caregiver Violence- 20.0%
- Emotionally Abused- 18.5%
- Physically Abused- 13.9%
- Household Criminal Behavior- 10.6%

\*Sexually abused drops to 21% in 4000 participant study

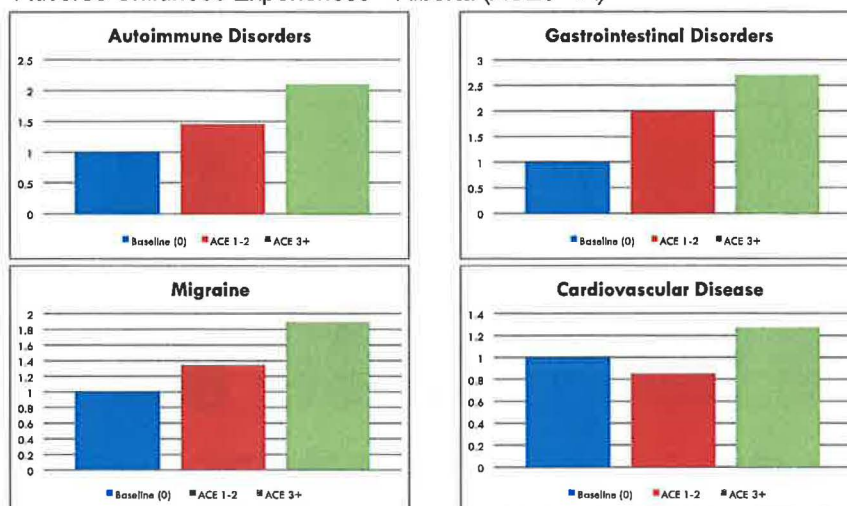
## ACEs and Physical Health

Adverse Childhood Experiences – Alberta (ACEs – A)



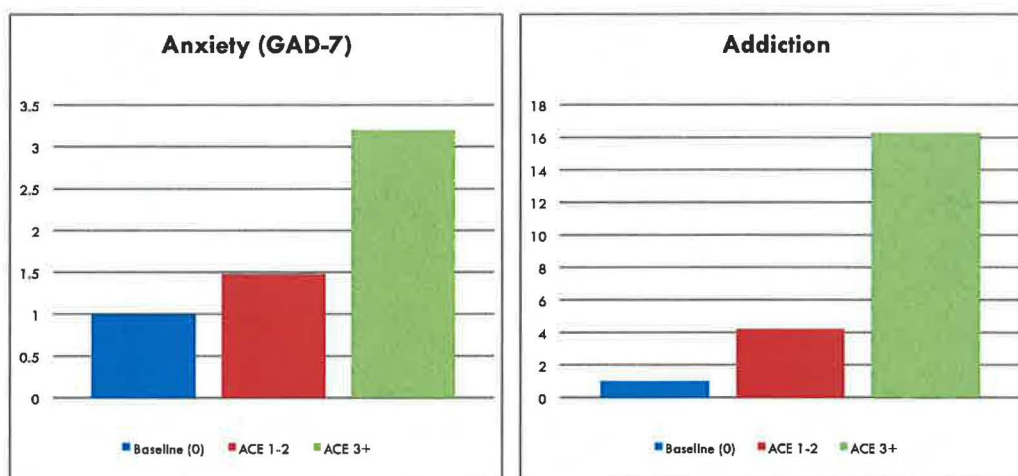
## ACEs and Physical Health

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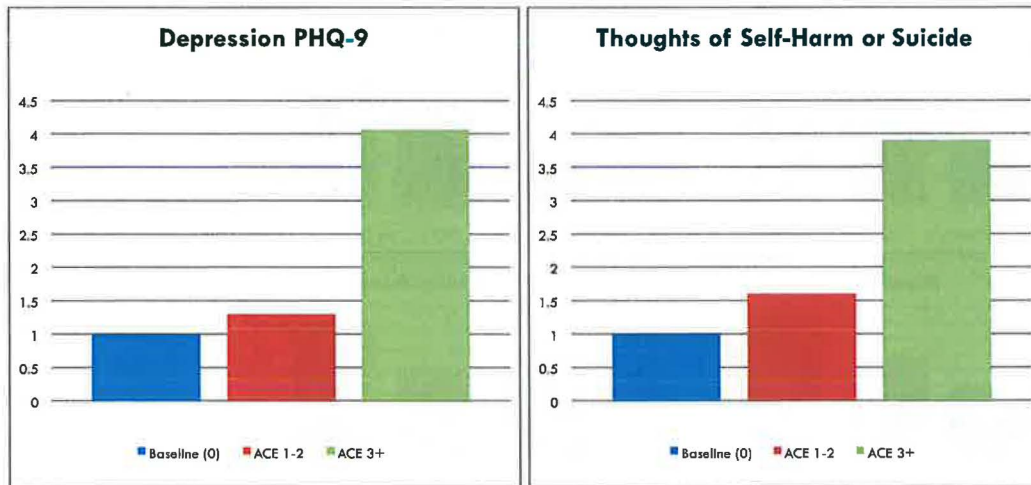
## ACEs and Mental Health

Adverse Childhood Experiences – Alberta (ACEs – A)



## ACEs and Mental Health

Adverse Childhood Experiences – Alberta (ACEs – A)



Professional Development for the  
Workforce

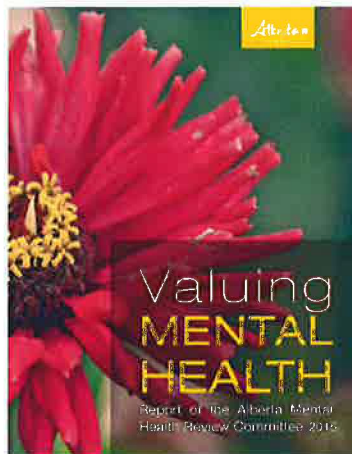
## 2010-2014 Symposia Series

- Held in Banff, Edmonton and Calgary
- Over 473 participants from Canada, Great Britain and Germany
- 150 organizations within:
  - Research
  - Policy
  - Practice
- Focused on early brain development, children's mental health and addiction prevention treatment and recovery
- Key objective to create positive change and outcomes for children by mobilizing knowledge about the intergenerational impact of addictions and toxic stress on the developing brain



## Government of Alberta- Policy Document

### Health



### III. Empowering People: Strengthening Our Communities

- A healthy, informed, and resilient population.
- A compassionate, diverse, and properly equipped workforce.

In recent decades, trends such as mobility of population and intense use of technology have made it difficult to preserve the relationships and communities we have traditionally relied on for support.

For those with addiction and mental health issues, the lack of a good support system can be devastating. It can be frightening to reach out for help and risk being labelled or refused. As a result, many suffer in isolation. Lack of public understanding, inaccurate perceptions, and pervasive stereotypes about addiction and mental illness create perceived and real barriers to help and treatment. How can we respond to their needs with compassion and understanding?

A first step is to invest in public education. If there is greater awareness of the risk and protective factors behind addiction and mental illness, people will be prepared to engage in conversations with greater understanding.

The next step is to increase understanding and awareness of addiction and mental health issues in places that usually provide support, such as health care settings, workplaces, and schools. Doctors and teachers at all levels should be included. Finally, service providers should have access to better training, developed in partnership with the stakeholder groups, to adequately address these issues.

The following recommendations will strengthen the understanding of the general population and those who work directly with individuals suffering from addiction and mental illness.

16. Create public awareness opportunities and programs to enable people to support their own mental health and the health of those they care about through collaboration between the Government of Alberta and non-government organizations including:
  - a. Educating the public on brain development, and risk and protective factors related to addiction and mental illness;<sup>16</sup> and
  - b. Supporting individuals to develop skills to engage in conversations that reduce stigma and direct people to help.

Understanding how our early experiences shape brain development is important for prevention, intervention, and treatment of addiction and mental illness. Work by organizations, such as the Alberta Family Wellness Initiative, has contributed to research and knowledge in this field.

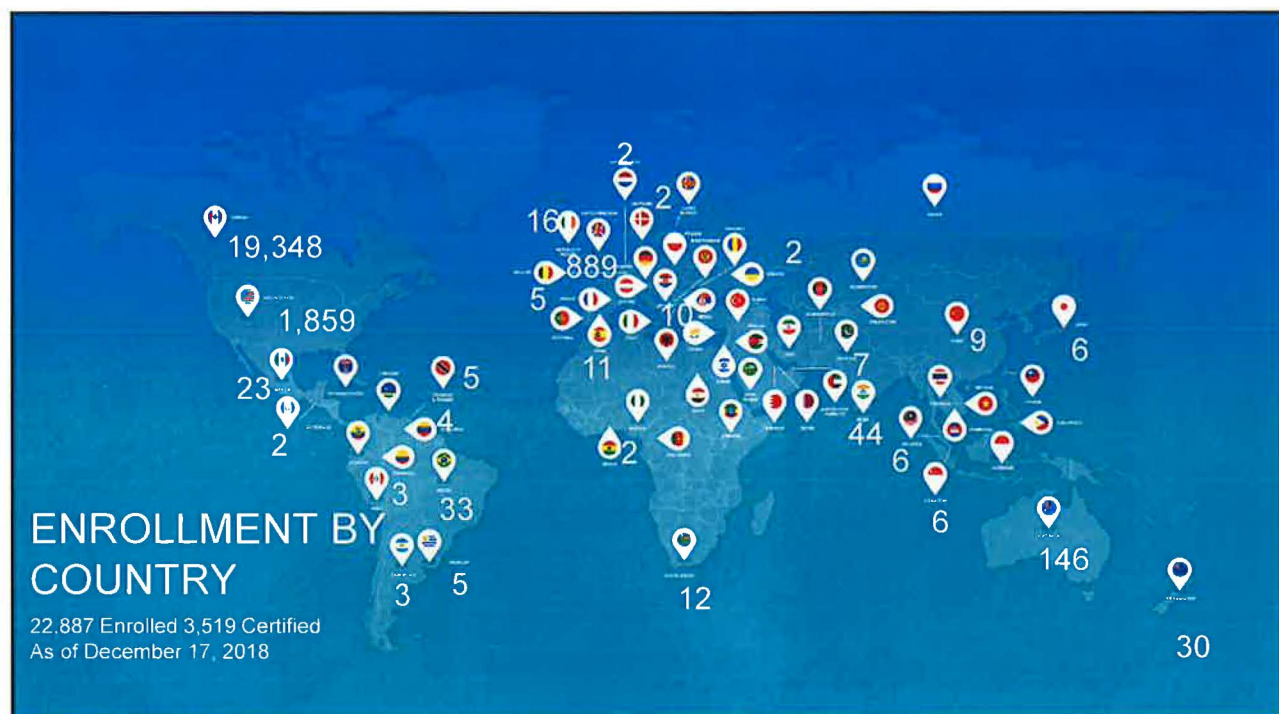


## Brain Story Certification Course

**Brain Story Certification is an in-depth course for professionals and the public interested in the scientific underpinnings of the Brain Story**

The course offers:

- Videos of over 30 leading experts in neurobiology, mental health and addiction
- 19 modules
- Certification in Brain story science
- The AFWI is providing the course at no cost to learners





## Alberta Health Services

**2,126** AHS Employees Enrolled in the Course

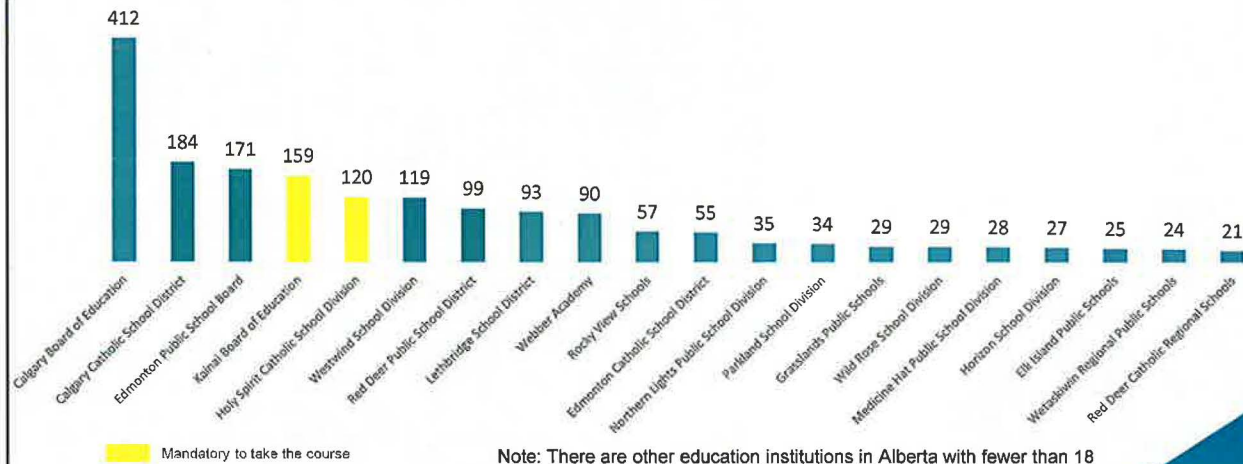
These people include but not exclusively:

- Registered Nurses
- Addictions Counselors
- Dietitians
- Social Workers
- Occupational Therapists
- Psychologists
- Physicians

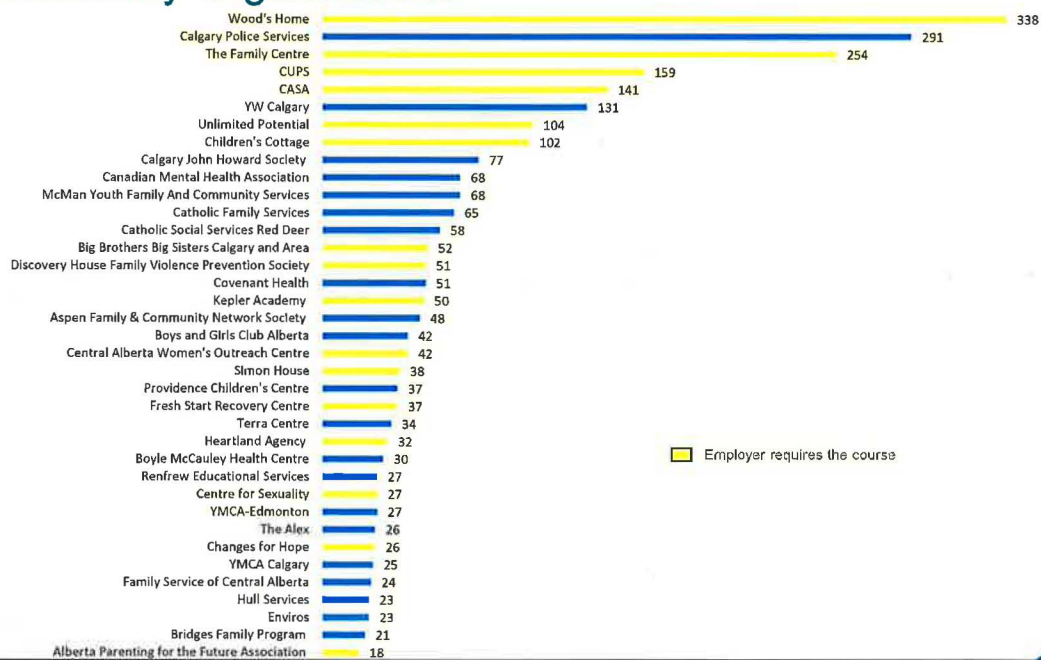


## Alberta Participants- Education

2,651 Enrolled from an Education Institution



## Community Organizations



## Brain Story Metaphors- Core Concepts

### RESILIENCE

Tipping the scale toward positive outcomes



### BRAIN ARCHITECTURE

Early experiences build brains



### SERVE & RETURN

Positive interactions build sturdy brain architecture



### AIR TRAFFIC CONTROL

The "executive function" system of the brain



### TOXIC STRESS

A force that disrupts brain architecture



## Resilience Scale

### RESILIENCE

Tipping the scale toward positive outcomes





WHERE SCIENCE  
MEETS REAL LIFE.

