

# INSPIRING CHANGE & COLLABORATION: PERINATAL SUBSTANCE USE CONFERENCE 2023



**THURSDAY, OCTOBER 26TH  
&  
FRIDAY, OCTOBER 27**

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## **CONFERENCE PROGRAM**

HOSTED BY THE B.C. WOMEN'S, MENTAL HEALTH & SUBSTANCE  
USE PROGRAMS & INITIATIVES, PROVINCIAL PERINATAL  
SUBSTANCE USE PROGRAM.



# LAND ACKNOWLEDGEMENT

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We respectfully acknowledge that BC Women's Hospital + Health Centre is located on the unceded, traditional and ancestral territories of the Coast Salish People, specifically the x<sup>w</sup>məθk<sup>w</sup>əyəm (Musqueam), Skw̓xwú7mesh (Squamish) and səli'lwətaʔt (Tsleil-waututh) Nations. Further, this acknowledgement, gratitude and respect extends to the diversity of all Indigenous contributions including First Nations, Inuit, Métis and non-status Indigenous identities and communities on whose traditional territories we have the privilege to build relationships and provide services.

# INCLUSIVITY & LANGUAGE STATEMENT

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The conference presentations may contain gendered language such as "woman", "pregnant woman", or "parenting woman" when referring to clients or patients impacted by perinatal substance use to facilitate clear understanding.

We encourage all presenters and audience members to:

- Use language that is inclusive of all individuals who may identify as cisgender, transgender, non-binary and those who identify as Two-Spirit/Indiqueer
- Recognize and respect each person's internal and individual experience of gender
- Engage in respectful conversations about gender identity and preferred gender pronouns in a way that is sensitive to each person's needs

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# INSPIRING CHANGE & COLLABORATION: PERINATAL SUBSTANCE USE CONFERENCE 2023



## CONFERENCE AGENDA

Thursday, October 26th, 2023

8:00 AM - 9:00 AM

**REGISTRATION OPENS - BREAKFAST IS SERVED**

9:00 AM - 9:15 AM

**WELCOME AND PROVINCIAL LAND ACKNOWLEDGEMENT**

*Michelle Green, Master of Ceremony*

9:15 AM - 9:30 AM

**ELDER OPENING BLESSING**

*Elder Glida Morgan, Tla'amin First Nation*

9:30 AM - 9:45 AM

**OPENING REMARKS**

*Cheryl Davies, BC Women's Hospital + Health Centre*

9:45 AM - 11:00 AM

**KEYNOTE PRESENTATION: ETHICS IN THE CONTEXT OF PERINATAL SUBSTANCE USE CARE**

*Alice Virani & Alexandra Omos Perez, PHSA*

11:00 AM - 12:00 PM

**FEATURED PANEL PRESENTATION**

*Peers Support in Perinatal Substance Use Care: Empowering Families in Acute and Community Settings*

1. Collaborating with peers to create PNSU simulations
2. Peer-based models in acute care
3. A Housing Roundtable- Generating the Ideas and Buy-in to Move Forward with a Model of Housing for Pregnant and Parenting People in Substance Use Recovery

# INSPIRING CHANGE & COLLABORATION: PERINATAL SUBSTANCE USE CONFERENCE 2023



## CONFERENCE AGENDA

Thursday, October 26th, 2023

12:00 PM – 1:00 PM

### **LUNCH**

Exhibitor's Booth and Wellness Rooms Open

1:00 PM – 2:00 PM

### **FEATURED PANEL PRESENTATION**

*Harm Reduction and Recovery Oriented Approaches*

1. The Game of Jenga: Building the supports for perinatal substance use clients
2. The Provincial Episodic Overdose Prevention (eOps) Protocol to prevent and respond to drug poisoning with people who are pregnant or parenting
3. Harm Reduction Pregnancy Tests-Engagement Tool for Perinatal Substance Use

2:00 PM – 3:00 PM

### **FEATURED PANEL PRESENTATION**

*Exploring Components of Housing Models for Pregnant and Parenting People Using Substances*

1. XEXE PAHLATSIS LELUM, Sacred Cradle House
2. Moving Towards Decolonizing Perinatal Care: Progress in Culturally Safe Housing for Women Using Substances in Northern BC

# INSPIRING CHANGE & COLLABORATION: PERINATAL SUBSTANCE USE CONFERENCE 2023



## CONFERENCE AGENDA

*Thursday, October 26th, 2023*

3:00 PM - 3:30 PM

### **BREAK**

Exhibitor's Booth and Wellness Rooms Open

3:30 PM - 4: 20 PM

### **WORKSHOP SESSION**

Duty to Support- Building community capacity to support families staying together

4:20 PM - 4:30 PM

### **CONFERENCE DAY CLOSING REMARKS**

*Elder Glida Morgan, Tla'amin First Nation*

# INSPIRING CHANGE & COLLABORATION: PERINATAL SUBSTANCE USE CONFERENCE 2023



## CONFERENCE AGENDA

Friday, October 27th, 2023

8:00 AM - 9:00 AM

**REGISTRATION OPENS - BREAKFAST IS SERVED**

9:00 AM - 9:15 AM

**WELCOME AND LAND ACKNOWLEDGEMENTS**

*Michelle Green*, Master of Ceremony

9:15 AM - 9:30 AM

**ELDER OPENING REFLECTIONS**

*Elder Glida Morgan*, Tla'amin First Nation

9:30 AM - 9:40 AM

**OPENING REMARKS**

*Darci Skiber*, PHSA

9:40 AM - 10:30 AM

**KEYNOTE PRESENTATION: CHILD WELFARE ENGAGEMENT**

*Kerry Shinner*

10:30 AM - 11:30 AM

**FEATURED PANEL PRESENTATION**

Models of Collaborative Care in Perinatal Substance Use

1. A novel care model: Maternity care experiences of pregnant individuals who use substances
2. Exploring the Components of Wraparound Programs
3. Healthy Care Pregnancy Program: Supporting Perinatal People Who Use Substances

# INSPIRING CHANGE & COLLABORATION: PERINATAL SUBSTANCE USE CONFERENCE 2023



## CONFERENCE AGENDA

*Friday, October 27th, 2023*

11:30 - 12:15 PM

### **FEATURED PANEL PRESENTATION**

Circle of Birth Keepers

1. Intergenerational love: Indigenous perinatal care & ancestral harm reduction
2. Open Hearted Birth Support for Families with PSUD

12:15 PM - 1:00 PM

### **LUNCH**

Exhibitor's Booth Open

1:00 - 2:00 PM

### **FEATURED PANEL PRESENTATION**

Exploring wise and best practice in PSU

1. Substance Use Care in Perinatal Units: Building Bridges
2. Hush Little Baby: Eat, Sleep, Console in Maternity and NICU at University Hospital of Northern BC
3. Exploring the best practices to promote mother-baby togetherness during transitions in the context of perinatal substance use



# INSPIRING CHANGE & COLLABORATION: PERINATAL SUBSTANCE USE CONFERENCE 2023



## CONFERENCE AGENDA

*Friday, October 27th, 2023*

2:00 – 3:00 PM

### **FEATURED PANEL PRESENTATION**

Contemporary Issues and Trends in Perinatal Substance Use

1. Perinatal substance use disorder and the accessibility of health services for perinatal substance use in British Columbia, Canada
2. Neonatal Abstinence Syndrome and Neonatal Apprehension: Trends in British Columbia from 2004–2019
3. Supporting Partners and Family-Based Recovery Approaches

3:00 – 3:20 PM

### **BREAK**

*Exhibitor's Booth Open*

3:20 – 4:20 PM

### **WORKSHOP SESSIONS B**

B1. The Role of Acupuncture in Perinatal Substance Use Settings  
Emily Salomons, title needed

B2. A Perinatal Collaborative Community Laboratory on Substance Use and Harm Reduction: The Mothering Co/Lab  
Lisa Knox, title needed

4:20 – 4:30 PM

### **CONFERENCE DAY CLOSING REMARKS**

*Elder Glida Morgan, Tla'amin First Nation*

# ELDER

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## Elder Glida Morgan, *Tla'amin First Nation*



Elder Glida Morgan is from the Tla'amin First Nation. Elder Glida is determined to bring healing light to our Indigenous People in her role as a front-line worker on Vancouver's Downtown East Side in the areas of Family violence, Mental Wellness & Women's Health. Elder Glida has explored ways in which culture can be integrated into the health care plans for Indigenous people. Performing at community events across the lower mainland.

# MASTER OF CEREMONY

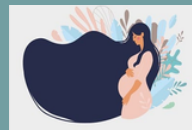
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## Michelle Green



Initially completing a Bachelor of Psychology Hons. in Australia, Michelle began her career supporting youth and families impacted by mental health and substance use issues, initially in Canada and later in Central and South America. Michelle later managed health education programs and small clinics established through NGO and community partnerships in various countries, such as Ecuador, Indonesia, Malawi and Madagascar. After completing a Masters in Global Health, Michelle returned to Canada and worked for Fraser Health's Ethics and Diversity Services, before returning to the field of Mental Health and Substance Use Services, as Provincial Program Manager for BC Women's Hospital MHSU Programs and Initiatives. In Michelle's current role, she oversees a number of different harm reduction, overdose prevention and mental health services at BC Women's Hospital and with community and Health Authority partners across the province.

# PLENARY SPEAKERS



## **Cheryl Davies**, *Chief Operating Officer, BC Women's Hospital & Health Centre*



Cheryl Davies is the Chief Operating Officer, BC Women's Hospital & Health Centre, one of the largest maternity hospitals in Canada and the only facility in BC with a dedicated mandate of advancing the health of women, newborns and their families. Cheryl has over 30 years' experience in women's health as a nurse, educator and senior leader, in both community and hospital settings. She is a passionate advocate for gender equity and decolonizing our health system with Indigenous partners and people with lived and living experience for better health outcomes, access and experiences across the continuum of care.

## **Darci Skiber**, *Senior Director, BCWMHSU Programs & Initiatives*

Darci is the Senior Director of MHSU Programs and Initiatives at BC Women's. She brings over 20 years of direct care and operational leadership experience to this role. She has led and supported regional and provincial mental health and substance use teams and organizations, from community to health authorities. In her work, she has advanced innovative service models, treatment models, promoted best and wise practices, quality improvement initiatives, and collaborated in partnership with the multitude of key service partners to respond effectively to the needs and experiences of people and communities. Darci completed her Masters in Health Leadership at Royal Roads University and is currently completing a PhD at the University of Victoria.

As a woman with lived experience, Darci is thrilled to be supporting and building on the work being done in service of women, children, and communities most impacted by colonization, systemic oppression, and stigmatization across our province. Darci has a fierce commitment to partnership and collaboration across systems to support those who are underserved in our healthcare spaces.

# KEYNOTE PANEL

## Ethics in the Context of Perinatal Substance Use Care



The *Ethics in the Context of Perinatal Substance Use Care* by Alice Virani and Alexandra Omos Perez is a case example that illustrates various ethical approaches, including feminist, intersectional, narrative, and relational perspectives. By doing so, they aim to shed light on how these diverse approaches can effectively support patients, ultimately advancing justice, equity, diversity, and inclusion within perinatal substance use care.

### PANELISTS



#### **ALICE VIRANI**

*MA (Oxon), MS, MPH, PhD*  
*Executive Director, Clinical Ethics and Spiritual Care Service, Provincial Health Services Authority of BC*

Alice is the Executive Director, Clinical Ethics and Spiritual Care Services at PHSA and a Clinical Assistant Professor in the Dept. of Medical Genetics at UBC. Alice is a passionate advocate for equity based healthcare decisions and provision, with a strong emphasis on cultural safety, trauma informed practice and humility. In addition to her work at PHSA, Alice is passionate about the role of ethics at a national level and proudly serves on the Inter Agency Advisory Panel on Research Ethics, CIHR's Ethics Committee, and the Public Health Ethics Consultative Group for the Public Health Agency of Canada.



#### **ALEXANDRA OLMOS PEREZ**

*Clinical Ethicist, PHSA*

# KEYNOTE PANEL

## MCFD Child Welfare Engagement

A discussion about where they have been, where they are and where they want to be, considering the value and importance of collaboration for improved outcomes.

### PANELIST



#### **KERRY SHINNER**

*BSW, BSSc*

# DAY ONE: FEATURED PANEL PRESENTATIONS

## Peers Support in Perinatal Substance Use Care Empowering Families in Acute and Community Care



### 1. COLLABORATING WITH PEERS TO CREATE PNSU SIMULATIONS

In early 2023, the steering committee for the Perinatal Substance Use Project (PSUP), VCH region, identified a need to upskill interdisciplinary staff to care for birthers who use substances, particularly through a lens of low-barrier, anti-stigma and equity-orientated care. Through SIMS, health care providers (HCPs) are able to engage in a familiar and accessible learning environment, practicing relational skills and behavioural medicine utilizing a “staged” yet realistic scenario.

### PRESENTED BY:



#### ROBIN JANES,

*RN(c), BScN, BA, Substance Use and Priority Populations*

Robin Janes is descended from Irish, British and Austrian immigrants and raised in the unceded and traditional territory of the x<sup>w</sup>məθk<sup>w</sup>əy<sup>əm</sup> (Musqueam), selílwitlh (Tsleil Waututh) and sk̓w̓x̓wú7mesh (Squamish) Coast Salish peoples. Robin graduated from SFU with a degree in Medical Anthropology, then a few years later graduated from UBC Nursing School and continued to peruse supporting vulnerable population with her work at BC Women’s Hospital, Insite as well as various other agencies. She is currently in the position of Clinical Nurse Educator with Priority Populations Substance Use with Vancouver Coastal Health.

#### CHEROKEE FEATHER BENT

*Recipient of B.Cs Council of the Federation Award for Innovation in Mental Health and Addictions Care 2022, Substance Use and Priority Populations*

“ I am Cherokee Bent, I am part of the Nteʔkepmxcín, Nuu-chah-nulth, Secwepemc, Kwakwaka'wakw, Sk̓w̓x̓wú7mesh, and Chilcotin first peoples of this land. I became involved with Vancouver Coastal Health when I was 17 as a peer on the SIMS project, taking on the roles of an actress in the hidden pain film, helping with writing the script, and later on mainly helping co-facilitate trainings/presentations as a peer with lived experience. Since then I’ve been on many other Projects with VCH, and have even branched out with other projects and organizations, under the same umbrella of Innovative health and wellness.”



#### ANDREW WHITE

*Filmmaker, Red Wolf Films  
Substance Use and Priority Populations*



# DAY ONE: PANEL PRESENTATION

## Peers Support in Perinatal Substance Use Care Empowering Families in Acute and Community Care

### 2. PEER-BASED MODELS IN ACUTE CARE

#### PRESENTED BY:

#### DARCI SKIBER

*Senior Director, BCW MHSU Programs & Initiatives*

Darci is the Senior Director of MHSU Programs and Initiatives at BC Women's. She brings over 20 years of direct care and operational leadership experience to this role. She has led and supported regional and provincial mental health and substance use teams and organizations, from community to health authorities. In her work, she has advanced innovative service models, treatment models, promoted best and wise practices, quality improvement initiatives, and collaborated in partnership with the multitude of key service partners to respond effectively to the needs and experiences of people and communities. Darci completed her Masters in Health Leadership at Royal Roads University and is currently completing a PhD at the University of Victoria.

As a woman with lived experience, Darci is thrilled to be supporting and building on the work being done in service of women, children, and communities most impacted by colonization, systemic oppression, and stigmatization across our province. Darci has a fierce commitment to partnership and collaboration across systems to support those who are underserved in our healthcare spaces.



#### LINDSEY COPE

*Patient Advisor, BC MHSU*

Lindsey supports the development and improvement of programs and initiatives by providing insight from the lived experience perspective. Lindsey also provides direct patient support on FIR for families. She believes that harm reduction starts with listening to, and learning from people. This role provides many opportunities to connect; one of the things Lindsey is most proud of. In her spare time she enjoys being outdoors with her family and adventuring with friends!



# DAY ONE: PANEL PRESENTATION

## Peers Support in Perinatal Substance Use Care Empowering Families in Acute and Community Care

### 3. A HOUSING ROUNDTABLE- GENERATING THE IDEAS AND BUY-IN TO MOVE FORWARD WITH A MODEL OF HOUSING FOR PREGNANT AND PARENTING PEOPLE IN SUBSTANCE USE RECOVERY

This presentation will highlight the proceedings and outcomes of a vibrant Provincial Housing Roundtable held in Vancouver on June 14, 2023. The roundtable brought together service providers, policy makers and people with lived and living experience to explore opportunities for implementing a peer-driven model of housing for pregnant and parenting people in substance use recovery.

#### PRESENTED BY:



#### TRACY BYRNE

*PhD (she/her), Founder and Director of InsideOut Policy Research*

Tracy has over 20 years of professional experience as a researcher, writer, facilitator and public speaker. She is the founder and director of InsideOut Policy Research, a company that specializes in applied research and policy development in the fields of health, education and social service delivery. Tracy holds a PhD in English Literature from the University of Glasgow, Scotland and is an Adjunct Professor with the School of Public Administration at the University of Victoria. Tracy has a particular interest in issues related to mental health and substance use policy as well as to social justice and creating healthy communities more generally. She regularly waxes lyrical on the virtues of evidence-informed policy and practice! As a settler and uninvited guest on the traditional and unceded territories of the ɫəkwəŋəŋ speaking Peoples in what is now called Victoria, British Columbia, Tracy is on a path to learn more about Indigenous ways of learning and knowing, and to integrate the principles of Cultural Safety into her professional practice and daily life.

# DAY ONE: PANEL PRESENTATION

## Harm Reduction and Recovery Oriented Approaches



### 1. THE GAME OF JENGA: BUILDING THE SUPPORTS FOR PERINATAL SUBSTANCE USE CLIENTS

This presentation will discuss the collaboration and coordination to support perinatal clients who use substances in the rural, small town of Vernon. Presenters will discuss the methods used to support unhoused marginalized clients, their success stories and the case-reviews that helped to improve wraparound services and reduce stigma. Presenters will also discuss the new harm reduction policy rollout and how it will support and benefit services for perinatal clients who use substances.

#### PRESENTED BY:



#### WHITNEY CHANTER

*Regional Harm  
Reduction  
Coordinator, Interior  
Health*



#### ALISON HOUELING

*MSW, RSW, Project  
Lead, Sexual Health &  
Harm Reduction,  
IH Population Health*



#### JENNIFER GLEN

*BScPN, RPN, Team  
Lead, Downtown  
MHSU Services*



#### ANDREA NORDSTROM

*RPN, Case Manager w/  
ICM Team, Team Lead  
Case Management,  
Downtown MHSU Services*



# DAY ONE PANEL PRESENTATION

## Harm Reduction and Recovery Oriented Approaches



### **2. THE PROVINCIAL EPISODIC OVERDOSE PREVENTION (EOPS) PROTOCOL TO PREVENT AND RESPOND TO DRUG POISONING WITH PEOPLE WHO ARE PREGNANT OR PARENTING**

This presentation will discuss the best practice recommendations for health and social service providers to deliver eOPS with people who are pregnant or parenting.

#### **Background:**

People who are pregnant or parenting experience significant barriers to accessing drug poisoning prevention services due to stigma, fear of child welfare involvement, child separation, punitive policies, and substance use surveillance, combined with a lack of appropriate harm reduction services. These barriers contribute to a lack of safety and fear of disclosing substance use, which increases risk for harms and death from drug poisoning.

The Provincial Episodic Overdose Prevention (eOPS) Protocol (in publication for release July 2023) was developed to increase access to safe and appropriate drug poisoning prevention and response services for people at risk for harm from substance use. The protocol includes a focus on the perinatal population, who experience disproportionate barriers and stigma when accessing harm reduction services.

#### **PRESENTED BY:**



#### **SAMMY IAMMARINO**

*RN, MN, Senior Practice Leader, Harm Reduction and Substance Use, BC Centre for Disease Control*

# DAY ONE: PANEL PRESENTATION

## Harm Reduction and Recovery Oriented Approaches



### 3. HARM REDUCTION PREGNANCY TESTS- ENGAGEMENT TOOL FOR PARENTING PEOPLE USING SUBSTANCES

This presentation is an overview of free pregnancy test kits and referral information to people who use substances. It provides an understanding about the program and its goal on reducing harms associated with substance use in pregnancy by engaging with clients, helping clients identify they are pregnant, and referring them to perinatal services as early as possible.

#### **Objectives**

- Outline the Harm Reduction Pregnancy Test Strip Pilot Project
- Describe partnerships between sites and services involved in the project
- Share initial evaluation results from the project

#### PRESENTED BY:



#### **SARAH LEVINE**

*RN, BScN, MScN, Clinical Nurse Specialist, Vancouver Coastal Health*



#### **JENNY SLOMAN**

*BA, MA, InReach Program Manager, WISH Drop-In Centre Society*

# DAY ONE: PANEL PRESENTATION

## Exploring Components of Housing Models for Pregnant and Parenting People Using Substances

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### 1.XEXE PAHLATSIS LELUM, SACRED CRADLE HOUSE

XEXE PAHLATSIS LELUM or Sacred Cradle House is a pilot program launched by the Aboriginal Coalition to End Homelessness Society (ACEH) in July 2023 offering cultural, health, and transitional housing support to prenatal and newly parenting Indigenous mothers with histories of homelessness and substance use. Women transitioning into Sacred Cradle House may come directly from the hospital or from living rough and are welcomed home to a private, fully furnished townhouse with all baby essentials and a fridge stocked with homemade meals. While in the Sacred Cradle house program, families are supported by Elder Gloria Roze, who visits regularly to share meals, teachings, songs, family recipes, stories, and quality time. Additional supports provided to families include transportation to appointments and recovery groups; life skills development (i.e., cleaning, cooking, budgeting); land-based healing; and housing navigation. Families are welcome to stay at the program until stable, affordable housing for is secured for them to transition into.

### PRESENTED BY:



### JULIA O'QUIN

*Director of Community Programs & Impact, Aboriginal Coalition to End Homelessness Society*

# DAY ONE: PANEL PRESENTATION

## Exploring Components of Housing Models for Pregnant and Parenting People Using Substances



### 2. MOVING TOWARDS THE DECOLONIZING PERINATAL CARE: PROGRESS IN CULTURALLY SAFE HOUSING FOR WOMEN USING SUBSTANCES IN NORTHERN BC

#### **Presentation Objective:**

To utilize indigenous methodology, a decolonizing approach and participatory evaluation to develop personal and programmatic outcome indicators that reflect goal achievement as defined by residents of Harmony House (HH), a culturally safe perinatal housing program for women struggling with substance-use in rural/northern British Columbia.

#### PRESENTED BY:



#### **DR. SHEONA MITCHELL-FOSTER**

*MD MPH FRCSC , Department of Obstetrics & Gynaecology, University of British Columbia*

Dr. Sheona Mitchell-Foster is a first generation Peruvian and 6th generation white settler on her mother's side from Alexander and Paul First Nation in treaty 6 territory and Scottish on her father's side. She has lived and worked in six different countries on four continents and has been living as an uninvited guest on Lheidli T'enneh territory since 2013. Dr. Mitchell-Foster completed medical school at the University of Calgary and went on to specialize in Obstetrics and Gynecology at the University of British Columbia, she then completed a Master of Public Health at John Hopkins University Bloomberg School of Public Health in Baltimore, MD. She is currently practicing Obstetrician Gynecologist and settler researcher with the University of British Columbia's Northern Medical Program.

Dr. Mitchell-Foster has a keen interest in reproductive health of populations that have experienced systemic oppression and is currently the Northern Health regional co-lead for Perinatal MHSU. She also has additional medical leadership roles as the Collaborative Medical Lead for Indigenous Health and the Cervical Cancer Screening Lead with Northern Health.

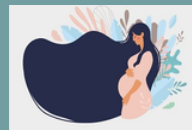


#### **MARIA BROUWER**

*Harmony House*

Maria Brouwer is a first generation Canadian, mother, grandmother, and auntie to many. She has been living on Lheidli T'enneh territory since 1981 and has been a transformative force in advocating for and providing comprehensive perinatal substance-use care in the north; first as an RN as Central Interior Native Health Society for many years where she built a prenatal and postnatal care program and more recently as the Coordinator of Harmony House, supported housing for pregnant and parenting people with mental health and substance-use diagnoses.

# DAY ONE: WORKSHOP



## DUTY TO SUPPORT- BUILDING COMMUNITY CAPACITY TO SUPPORT FAMILIES STAYING TOGETHER

This workshop is a two year project that looking at how to address systemic violence inflicted by the child welfare system and better support families to stay together. They are engaging with families and the community organizations that support these families and looking for harm reduction alternatives for families to be supported to stay together.

### WORKSHOP BY:

#### LINOY ALKALAY

*Project Coordinator, RainCity Housing*

"I am of Middle Eastern Jewish descent and an uninvited guest to the unceded stolen lands of the Coast Salish people. I currently work as a Project Coordinator at RainCity Housing working on a project that looks at addressing systemic violence through harm reduction in the family system. Before joining RainCity Housing, I worked in various frontline roles supporting women, youth, and families that are impacted by trauma, substance use, and mental health challenges. I am passionate about community approaches to break down the system and believe in addressing the impact of trauma through building and strengthening connection. I hold a Masters in Leadership from Royal Roads University and a Graduate Certificate in Complex Trauma and Child Sexual Abuse Intervention from the Justice Institute of British Columbia."

#### CANDICE NORIS

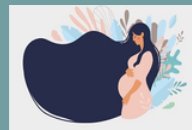
*Peer Facilitator, RainCity Housing*

"Hello my name is Candice, however the spirits recognize me as Eagle Spirit Woman. I am of Dene, Cree, Scottish, and Irish descent. I work proudly in my community as a Dene, Cree cultural facilitator, and cultural research facilitator. Doing openings and Smudging/Brusing in the community to bring in the spirits and welcome our ancestors to gatherings. My goal in life is to re-awaken indigenous people to a connection of healing, through culture and ceremony. To bring indigenous voices culture and Knowledge to the Western world, and incorporate both knowings. To reawaken our DNA to our almost crushed traditions. By healing through our DNA we can safely keep our children out of the Ministry of Children and Family Development, instead foster Indigenous ways of knowing and being to supporting Indigenous mothers with wrap around care so they can safely care for their own children and relearn what was taken away from us as First Nations people."

#### ALISON ELLER

*Public Health Prevention, Vancouver Coastal Health*

"With deep gratitude, I acknowledge I am a mother, sister, daughter, aunt, partner, colleague and settler on the stolen lands of the x<sup>w</sup>məθk<sup>w</sup>əyəm (Musqueam), Skw̓xwú7mesh (Squamish), and səliłwətał (Tsleil-Waututh) first nations peoples. I have worked in many public health nursing roles with the Vancouver Coastal Health prevention program since 2005 including many years working with families living in Strathcona, Grandview woodlands and downtown east side neighborhoods. My current role focuses on supporting nursing practice, education and service delivery, with a commitment to trauma informed practice, equity, decolonization, harm reduction and a relational approach, always learning in partnership with the nurses and families I work alongside."



# DAY TWO PANEL PRESENTATION

## Models of Collaborative Care in Perinatal Substance Use

### 1.A NOVEL CARE MODEL: MATERNITY CARE EXPERIENCES OF PREGNANT INDIVIDUALS WHO USE SUBSTANCES

This presentation is innovative and offers practical and actionable approaches that should inspire change in practice. The interprofessional maternity care team is comprised of a midwife, obstetrician, and psychiatrist - the patients identified the benefits of their collaborative approach which enhanced safety, respect, and dignified care. Their research has been guided by Grandmother and Knowledge Carrier Shingoose and we will share the invaluable insights we gained from this partnership. Our research findings were translated via by Indigenous graphic recorder Michelle Buckholz. We have a graphic image of the research that is unique and engaging that we will share and discuss.

#### PRESENTED BY:

##### KRISTEN GUBLANSON

*RN, MN, PhD candidate,  
University of Manitoba*

##### DR. HEATHER ASHDOWN

*MD, University of Manitoba*

##### KELLIE THIESSEN

*RN RM PhD, University of Manitoba*

##### DR. HEATHER WATSON

*MD OB GYN, University of Manitoba*

##### WANDA PHILLIPS BECK

*RN PhD, University of Manitoba*

# DAY TWO: PANEL PRESENTATION

## Models of Collaborative Care in Perinatal Substance Use



### 2. EXPLORING THE COMPONENTS OF WRAPAROUND PROGRAMS

The Co-Creating Evidence Evaluation Project was a first-of-its-kind-in-Canada multi-site evaluation of eight community-based programs located across the country that support women in the perinatal period through harm reduction oriented, trauma informed, culturally safe and women centered approaches. These programs deliver services to pregnant and parenting women and gender diverse individuals with substance use and related health and social concerns using a wraparound model.

In a final phase of the project, a Digital Handbook on Wraparound Programs was produced to support the creation, development, ongoing operation, and sustainability of wraparound programs reaching pregnant women and new mothers and their children. The Digital Handbook is interactive, free of cost, and was developed with multiple audiences in mind, including program planners, managers and staff, service partners from a variety of health and social sectors, funders, researchers, community members, and families affected by perinatal substance use.

### PRESENTED BY:



#### NANCY POOLE

*PhD, Director, Centre of Excellence for Women's Health*

Nancy is the Director at the Centre of Excellence for Women's Health (CEWH) and Prevention Lead for the Canada FASD Research Network. For CEWH, she leads research and knowledge translation projects related to alcohol, other substance use, trauma informed approaches, Indigenous wellness and incorporating sex, gender and equity based analysis (SGBA+) in all health research. Nancy is also known for her leadership in online participatory methods for knowledge generation and exchange on complex women's health issues. She received an Honorary Doctor of Laws degree from the Justice Institute of BC in 2021.

#### Co-Authors

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# DAY TWO PANEL PRESENTATION

## Models of Collaborative Care in Perinatal Substance Use



### 3. HEALTHY CARE PREGNANCY PROGRAM: SUPPORTING PERINATAL PEOPLE WHO USE SUBSTANCES

This presentation will describe Healthy Care Pregnancy Program (HCPP) and share strategies related to HCPP that can support perinatal people who use substances to promote the best possible health outcomes.

#### **Background:**

HCPP is a pilot program aimed to better support pregnant, postpartum, and newly parenting people who use or have used substances in BC. The pilot leverages formal connections between 10 acute care facilities and 10 BC Association of Pregnancy Outreach Programs (BCAPOP) members to provide system navigation support throughout their perinatal journey, walking alongside participants and supporting their access of basic needs, services, transitions, etc. This presentation will describe HCPP and findings from the pilot's two-year evaluation, including key learnings and strengths-based approaches with tangible examples of how to support HCPP participants. Evaluators conducted focus groups with supervisors and inreach workers, interviews with acute care and community organization partners, and journey mapping with participants.

#### PRESENTED BY:



#### **NANCY POOLE**

*PhD, Director, Centre of Excellence for Women's Health*

Nancy is the Director at the Centre of Excellence for Women's Health (CEWH) and Prevention Lead for the Canada FASD Research Network. For CEWH, she leads research and knowledge translation projects related to alcohol, other substance use, trauma informed approaches, Indigenous wellness and incorporating sex, gender and equity based analysis (SGBA+) in all health research. Nancy is also known for her leadership in online participatory methods for knowledge generation and exchange on complex women's health issues. She received an Honorary Doctor of Laws degree from the Justice Institute of BC in 2021.



#### **ANDREA GRADY**

*MSc., Project Manager, BC Association of Pregnancy Outreach Programs*

Andrea has over twenty years of experience of working in various roles for health regions, school divisions, not-for-profit organizations, and different levels of government.



# DAY TWO CONCURRENT SESSIONS

## Circle of Birth Keepers



### **1. INTERGENERATIONAL LOVE; INDIGENOUS PERINATAL CARE & ANCESTRAL HARM-REDUCTION**

This presentation will discuss the roles of midwives and doulas in Indigenous health promotion and share their understanding of wise practices for contemporary Indigenous perinatal care. It is their belief that Indigenous perinatal care must consider the rural, remote and urban perspectives with an emphasis on holistic wrap-around care and harm reduction that promotes feelings of safety and results in the strengthening of emotional, spiritual, mental and physical health. This presentation hopes to engage participants by sharing actionable tools that can be used in service delivery to create a safer health care experience for Indigenous families and Indigenous health care providers.

#### **PRESENTED BY:**

**KEISHA CHARNLEY**

*Vancouver Coastal Health*

**TIA FELIX**

*Vancouver Coastal Health*

**DANETTE JUBINVILLE**

*Vancouver Coastal Health*

**OLIVIA LOUIE**

*Vancouver Coastal Health*

# DAY TWO PANEL PRESENTATION

## Circle of Birth Keepers



### 2. OPEN HEARTED BIRTH SUPPORT FOR FAMILIES WITH PSUD

#### **Background:**

This program brings educational and cultural support, training for Indigenous Birth Keepers in the community and throughout the Nations of the Salish regions, as well as one to one family support. They work closely with Fraser Health and BCAAFC in bringing comprehensive wrap around supports. The premise of the program is that all parents, no matter where they are at in their journey with substance use, deserve respect and support for the sacred ceremony of their births, and part of the calls to Truth and Reconciliation is to be growing a foundation of compassion and understanding within the systems supporting Indigenous families.

#### **PRESENTED BY:**



#### **CORINA BYE**

*Fraser Region Aboriginal Friendship Centre Association*

Corina Bye is a settler of Welsh and Norwegian ancestry, and whose matrimonial parents are Ronni Dawson of the Musgamagw Dsawada'enuwx Tribe, and Teresa McDougall of the Namgis tribe, (both of the Kwakwaka'wakw Nation). She is immensely grateful to live, work and pray upon the lands of the Coast Salish peoples, with gratitude to all of the Ancestors of the traditional unceded Semiahmoo territories upon which she resides as a guest. She is a mother to three of her own beautiful children and has been helping to support the peaceful entry for hundreds of other children over the last 13 years. Corina is back in her role as pregnancy outreach and Early Year Doula Program Coordinator with the Fraser Region Aboriginal Friendship Centre Association. She is a childbirth educator with Douglas College and is blessed to be an ally birth keeper in the Kilala Birth Keeper Collective. Corina has recently certified as a Postpartum Fitness Specialist with a focus upon pelvic floor and core recovery for birthing people. Corina feels that last 6 years have been an incredibly humbling journey of decolonizing her perspective as a birth worker and hopes to be a resource for others dedicated to the path of showing up in better ways for Life Givers and families across Turtle Island.



#### **STACEY WILLIAMS**

*Fraser Region Aboriginal Friendship Centre Association*

Stacey Williams is from the Skwxw7mesh (Squamish) and Snuneymuxw (Nanaimo) Nations on her fathers' side and Kwakwaka'wakw (Campbell River, Fort Rupert, Alert Bay, Port Hardy) Wuikinuxv (Rivers Inlet) and Haisla (kitimaat) Nations on her mothers' side. She is a mother to three beautiful children. Stacey has been a birth keeper for the last 4.5 years but has been supporting her family and friends long before that. Stacey provides a full spectrum of services such as: prenatal, post natal and postpartum support as well as still births and terminations. Currently, she is a high-risk birth keeper support work for an Indigenous, non-profit organization. Her passion is to create a safe and welcoming place for families to seek support in their birthing plans and to birth their babies in a less colonized/more holistic way and a culturally safe way. Her dream for the future is to support the opening of a birthing centre for Indigenous, Metis and Inuit families.

# DAY TWO PANEL PRESENTATION

## Exploring wise and best practice in PSU



### 1. SUBSTANCE USE CARE ON PERINATAL UNITS: BUILDING BRIDGES

#### **Objectives:**

- Outline the knowledge/practice gaps of the perinatal team regarding the management of opioid withdrawal/OAT initiation/substance use disorder in the acute care perinatal setting.
- Describe our education initiatives and cross-program collaborations integrating other provincial educational offerings

#### **PRESENTED BY:**



#### **JENNIFER RASMUSSEN**

*RN, BScN, Perinatal Substance Use, Project Lead, Fraser Health Authority*

Jennifer has worked in perinatal nursing since 2007. During this time, she has held various roles including working at the bedside in both community and tertiary settings, patient care coordination and perinatal complex care planning. She is currently working on her Masters in Nursing (Advanced Practice Leadership option) through the University of Victoria. She has also taught clinical and problem based learning in the BScN program at BCIT. Her most recent work and passion has been as the project lead for Eat-Sleep-Console implementation within the Fraser Health Authority.

#### **SIMRAN RIARH**

*RPN, Regional Clinical Nurse  
Educator, MHSU, Fraser Health*

#### **JENNIFER CONWAY-BROWN**

*RSW, MSW, Regional Harm  
Reduction Coordinator, Toxic Drug  
Response and Priority Populations,  
Fraser Health*

# DAY TWO PANEL PRESENTATION

## Exploring wise and best practice in PSU



### 2.HUSH LITTLE BABY: EAT, SLEEP, CONSOLE IN MATERNITY AND NICU AT UNIVERSITY HOSPITAL OF NORTHERN BC

#### **Objectives:**

- To provide trauma informed, age-appropriate, and culturally safe care,
- Promote attachment and bonding of the substance exposed newborn to their parent(s)/caregiver(s),
- Promote rooming-in whenever possible (dyad care),
- Promote responsive and consistent assessment, interventions, and care for substance exposed newborns,
- Decrease the need for Neonatal Intensive Care Unit (NICU) admissions and pharmacological treatment of withdrawal.

#### **PRESENTED BY:**



#### **MADISON FRIESON**

*Northern Health*

I have worked for Northern Health since 2011. My main practice area is perinatal nursing, but I have worked in various settings including rural nursing, public health, and neonatal intensive care. I have a passion for teaching and education and have had many opportunities to work in education including as a Neonatal Program Resuscitation instructor, teaching for the University of Northern British Columbia, and working in two capacities as a Clinical Nurse Educator for Northern Health. Outside of work, I enjoy spending time with my family outdoors, playing and coaching hockey, and finding new DIY projects.

# DAY TWO PANEL PRESENTATION

## Exploring wise and best practice in PSU



### 3. EXPLORING BEST PRACTICES TO PROMOTE MOTHER-BABY TOGETHERNESS DURING TRANSITIONS IN THE CONTEXT OF PERINATAL SUBSTANCE USE

This presentation will discuss the doctoral research which seeks to investigate how Chapter Nine of The Provincial Blueprint for a Perinatal Substance Use Continuum of Care is being implemented in central Okanagan tertiary sites to support mother-baby togetherness during the transition from the acute care setting to the community.

#### **Objectives:**

- Determine what is informing perinatal nurses' practice and their understanding of perinatal substance use
- Explore if and how perinatal nurses are operationalizing the blueprint guidelines during transitions between the acute care setting to the community during the baby's first transition

#### PRESENTED BY:



**LISA KNOX**

*RN, MA, Ph.D. Student in Nursing, UBC Okanagan*

#### *Co-Authors*



**DR. SANA SHAHRAM**

*Ph.D., MPH, Assistant Professor,  
UBC Okanagan Faculty of Health  
and Social Development*

**SARAH DOW-FLEISNER**

*UBC Okanagan*

**LENORA MARCELLUS**

*University of Victoria*



# DAY TWO PANEL PRESENTATION

## Contemporary Issues and Trends in Perinatal Substance Use

### 1. PERINATAL SUBSTANCE USE DISORDER AND THE ACCESSIBILITY OF HEALTH SERVICES FOR PERINATAL SUBSTANCE USE IN BRITISH COLUMBIA, CANADA

This presentation will provide an overview of a study that aimed to identify the population with perinatal SUD in BC and evaluate the availability of health services for perinatal substance use by region.

#### **Learning Objectives:**

- Understand the prevalence of perinatal substance use disorder (SUD) in British Columbia (BC) and the availability of acute care and community-based services for perinatal substance use
- Recognize the geographic disparities in access to acute care and community-based services for perinatal substance use throughout BC.

#### PRESENTED BY:



**SHANNON JOYCE**

*Research Assistant, BScN, Simon Fraser University*

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*Evaluation Specialist, MSc, Provincial Perinatal Substance Use Program*

**BOHDAN NOSYK**

*Research Scientist, PhD, Centre for Advancing Health*



# DAY TWO PANEL PRESENTATION

## Contemporary Issues and Trends in Perinatal Substance Use

### **2. NEONATAL ABSTINENCE SYNDROME AND NEONATAL APPREHENSION: TRENDS IN BRITISH COLUMBIA FROM 2004-2019**

This presentation will discuss the rates of opiate use during pregnancy as it continues to rise in British Columbia. This is leading to increasing rates of neonatal abstinence syndrome (NAS). Although historically these neonates were often separated from their parents and treated in NICU environments there have been changes over time to implement rooming in as well as harm reduction programs in pregnancy to improve pregnancy outcomes. Pregnant and parenting people with substance-use disorder (SUD) including opiate use experience higher rates of neonatal apprehension with long-term implications for child-development as well as maternal health

#### **PRESENTED BY:**



#### **DR. EMMA CROWLEY**

*BC Women's Hospital, FIR Unit*

Dr Emma Crowley is a family physician in Prince George, BC who practices full scope family medicine, including obstetrics. She works as an addictions physician as well, with a particular interest in perinatal substance use, in particular the Northern context. She practices mainly in Prince George, with some stints down in Vancouver working at BCWCH FIR unit.



# DAY TWO PANEL PRESENTATION

## Contemporary Issues and Trends in Perinatal Substance Use

### 3.SUPPORTING PARTNERS AND FAMILY-BASED RECOVERY APPROACHES

Together We Can, a pioneering organization dedicated to addressing the intricate challenges posed by substance use during the perinatal period. Their presentation emphasizes three crucial learning points:

- First, the significance of family cohesion as a nurturing force during this critical time, promoting healthier outcomes for both mothers and infants.
- Second, the urgency of promptly providing treatment and family support services to individuals struggling with drug and alcohol addiction, acknowledging the pivotal role these services play in the recovery process.
- Finally, Together We Can underscores the importance of seamless collaboration with professional teams to establish a fluid continuum of care, ensuring that perinatal individuals receive comprehensive, coordinated support.

#### PRESENTED BY:

##### STEVEN HALL

*Community Relations Manager, Together We Can*

##### ALEX LEKEI

*Program Manager, Together We Can*





## B1. THE ROLE OF ACUPUNCTURE IN PERINATAL SUBSTANCE USE SETTINGS

### *Learning Objectives:*

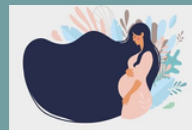
- To highlight the multifaceted role and integration of acupuncture in perinatal substance use settings.
- To showcase the efficacy of acupuncture in regulating the nervous system and providing, trauma informed, culturally sensitive, non-pharmacological support for pregnant individuals who use substances.
- To present three compelling case examples from the BC Women's and Children's Hospital FIR Unit, demonstrating the integration of acupuncture in perinatal substance use care, emphasizing pain management, "resistant"/non-participating patient support, and nervous system regulation during periods of instability.

### WORKSHOP BY:



**DR. EMILIE SALOMONS**

*TCM, ADS, Doula, BC Women's Hospital, FIR Unit*



## **B2. A PERINATAL COLLABORATIVE COMMUNITY LABORATORY ON SUBSTANCE USE AND HARM REDUCTION: THE MOTHERING CO/LAB**

The majority of perinatal substance use (PSU) research, policy, and services are based on paternalistic, colonial, racist, and biomedical discourses. Inattention to the social and structural drivers of harms for mothers who use substances, and their families lead to health and social system responses that can be expected to widen health inequities, owing in part to a lack of equity-oriented monitoring informed by and produced for community-driven needs. There is an urgent need for perinatal substance use monitoring that is focused on equity.



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**DR. CHRISTINE EDET**

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# EXHIBITORS



Doulas for Aboriginal  
Families Grant Program



**TOGETHER WE CAN**  
DRUG & ALCOHOL RECOVERY & EDUCATION SOCIETY