National Substance Use Disorder Summit

Families in Recovery: The First 1,000 Days – The Stories We Tell about SUD and Healing

February 7, 2024

www.brazeltontouchpoints.org
**TABLE OF CONTENTS**

Welcome .................................................................................................................. 1  
About BTC ............................................................................................................. 6  
Agenda .................................................................................................................... 7  
Trainings and Events ......................................................................................... 9  
Speakers ................................................................................................................ 11  
Stay In Touch ...................................................................................................... 20  

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Brazelton Touchpoints Foundation
Thank you for joining the Brazelton Touchpoints Center’s (BTC) second virtual National Substance Use Disorder (SUD) Summit. This year’s theme is Families in Recovery: The First 1,000 Days – The Stories We Tell about SUD and Healing

The Brazelton Touchpoints Center exists to promote the current and future well-being of infants and children by enhancing understanding of development and strengthening all relationships in the system of care. Our relationship-based work optimizes development by enhancing developmental knowledge in families and providers, improving parent-provider relationships, and reducing parental stress; all in service of caregiving that is carefully attuned to each child’s unique needs and profile. This is critically important in the care of infants and children after prenatal substance exposures that present an amplified need for sensitized care in service of the infant’s recovery and whole family relational well-being.

Our founder, Dr. T. B. Brazelton, entered into the world of SUD recovery long ago with his ground-breaking understanding of newborn behavior, the creation of the NBAS, and specifically, his research with infants after exposures. BTC aspires to bring its deep understanding of infant, toddler, and young children’s behavior and needs, and the importance of early family relational health, to prevention, intervention, treatment, recovery and policy systems. Historically, US policies responses to prenatal exposures have been harmful for infants and their birthing parents, including inequities in access to quality care, and the racially disparate imposition of punitive approaches. Parents of color are more intensively scrutinized, reported on, and much more frequently subjected to custody termination and incarceration. Their children are disproportionately held to harmful standards such as longer separations in the child welfare system. Such punitive approaches have added to the generational experiences of loss and grief that compound individual and collective histories of trauma. BTC has been dedicated to the systems of infant and parent SUD recovery to help in break down the silos between the adult recovery treatment world and the systems.
serving the infant, family and community. This includes a social justice lens as we seek to influence and enhance systems that join together to treat infants and parents together in their ongoing recovery journey. Strengthening the parent-child relationship becomes a primary goal of recovery that serves the healing process for all involved. We hold as paramount the goal of parents and their infants having safely supported opportunities to deepen their connections, by focusing on strengths in the child, the family, community, and their cultures.

We know that change cannot be attained through the helping professions alone, and we must engage the judicial and child welfare systems. Initially, many in the court system were highly skeptical of a strengths-based approach. They worried that professionals would be misled by parents with substance use disorders. However, participants in our professional development institutes learned to carefully and respectfully engage with each other’s views, expanding their own perspectives to include the perspective of the parent and of the infants, who need relationships with parents. Gradually, opponents to the strengths-based approach began to see that instead of covering up the realities of families’ lives, this approach might actually help reveal them and point to more effective ways of working with them. Once they began trying out this new approach, they became convinced. In a training session for several hundred service providers in August, 2009, Judge Erica Yew of ________________ explained:

“I have come to understand that in these families, in this system, there is trauma everywhere. The women who give birth to these babies have been traumatized before, during and after pregnancy. That is a big part of what interferes with their recovery. The last thing they need the Court or any of us to do is to traumatize them again. So now, when I’m adjudicating a mother of a baby exposed in utero, I step down from the bench to stand beside her. In my judge’s robes, I open my arms and take her into mine. I want her to know that we are not here to hurt her again, but to help her find her way to her potential, and to help her experience our hope for her so that she can discover her own.”
Here at the Brazelton Touchpoints Center, we know that before they can speak, babies have stories to tell. As Dr. Brazelton said, “we can trust that language.” As families in recovery learn to listen to those stories and to retell their own — beyond SUD and substance exposure — they can reclaim their personhood, their joy, and their futures.

This year, we’ll be listening to the stories that harm or heal — from parents in recovery, family members, peer recovery coaches, and health and mental health professionals. Our own stories, and those of our families, communities, and cultures — including the mainstream medical culture — can hinder or help us on our way to finding hope.
BTC’s involvement in this field dates back to the 1970s and the advent of Dr. T. Berry Brazelton’s Neonatal Behavioral Assessment Scale (NBAS). The NBAS has been used in nearly 1,000 research studies to date. Many have assessed the effects of environmental toxins, medications, alcohol, tobacco, and other substances during pregnancy, as well as anesthesia during labor, on newborn behavior. BTC’s frontline work in this area has included a U.S. Health Resources and Services Administration (HRSA) partnership with First 5 Santa Clara County that began in 2007. This comprehensive, cross-sector county-wide initiative brought together 28 agencies working with families with in utero exposed infants to build a shared vision and common language based on the Touchpoints Approach.

BTC has adapted both the Touchpoints Approach and the Newborn Behavioral Observations System (the NBO, a shorter, simpler, clinical version of the research-focused NBAS) for families in recovery. Both are being used in partnerships with clinics, hospitals, home visiting, and other programs across the United States. to:

- Surface stigma, subtle or overt, wherever it resides, and substitute safe, respectful, trust-building, strengths-based parent-professional interactions
- Build parent skills for understanding newborn behaviors as communications and for responding to challenging substance exposure-related newborn behaviors
- Promote parental confidence and sense of competence, and parent-infant attachment
- Leverage the vulnerabilities and opportunities of new parenthood to mobilize parents — who often do not feel they deserve help but know their babies do — to accept and stay with treatment
• Provide anticipatory guidance and additional supports for families for the predictable Touchpoints of development. A new baby can help parents discover new motivation for their recovery, but the first days and years of a child’s life predictably add more stress too. These are challenging times for all families, and more so for infants and young children with self-regulation difficulties related to in utero substance exposure, and for parents with self-regulation difficulties related to SUD and highly co-morbid post-traumatic stress disorder (PTSD).

• Catalyze a shared vision and common, strengths-based language across sectors within communities. SUD is most often a chronic, recurrent disease that disrupts many aspects of a family’s functioning and resources — not just health and mental health, but also housing, employment, legal status, and more. Families living with SUD need comprehensive, relational, developmental supports and treatment.

This Summit is not just a conference. Instead, it is part of a strategic set of activities that are creating a national, cross-sector network and learning community that, together, is transforming mindsets and systems of care for families in recovery.

Sincerely,

Joshua Sparrow, MD
Executive Director
Brazelton Touchpoints Center
About BTC

The Brazelton Touchpoints Center (BTC) provides strengths-based, culturally-grounded, co-constructed professional and leadership development, organizational learning and change, community-based participatory research, and program evaluation for family-facing professionals in prenatal and pediatric primary care, early childhood, infant mental health, home visiting, child welfare, library services, and more. BTC is home to the Touchpoints Approach, the Brazelton Institute (the Newborn Behavioral Observations system and the Neonatal Behavioral Assessment Scale), the Indigenous Early Learning Collaborative, the Family-to-Family Real Talk Series, the BTC Learning Network, and the BTC Research and Evaluation team. BTC is based in the Division of Developmental Medicine at Boston Children’s Hospital, the nation’s leading children’s hospital (*U.S. News and World Report*).

Equity, Diversity, Inclusion, Belonging, and Access Statement

At BTC, we are dedicated to creating a lasting community in which equity, diversity, inclusion, belonging, and access thrive. We engage in reflective practices to enhance equitable processes and outcomes, and to reduce bias — including our own. We come alongside and learn with the infants, children, families, and communities that we have the honor of working with. While we still have much work to do, we see the path to racial equity and justice as a journey — one that we have wholeheartedly embarked on. BTC is committed to creating equitable and inclusive opportunities for learning and growth through collaborative, strengths-based, culturally-affirming approaches within our organization and in our partnerships with all others.
Welcome and Opening
11:00 – 11:30 AM ET / 8:00 – 8:30 AM PT

- **Eurnestine Brown, Ph.D**, Program Director and Director of Relational Equity and Belonging, Brazelton Touchpoints Center
- **Tom Coderre**, Acting Deputy Assistant Secretary for Mental Health and Substance Use, Substance Abuse and Mental Health Services Administration (SAMHSA), U.S. Department of Health & Human Services
- **Dara Fruchter, MS**, Strategic Initiatives and Special Projects Manager, Child Development Services, Part C, Maine Department of Education

Conversation 1: “Good Relatives” – Healing Soul Wounds with Indigenous Story Work
11:30 AM – 1:00 PM ET / 8:30 – 10:00 AM PT

Moderator:
- **Eurnestine Brown, Ph.D**, Program Director and Director of Relational Equity and Belonging, Brazelton Touchpoints Center

Panelists:
- **Danica Brown, PhD, MSW**, Behavioral Health Programs Director at the Northwest Portland Area Indian Health Board
- **Dolores Jimerson, LCSW, ADS**, serves the Northwest Portland Area Indian Health Board's Behavioral Health Program
- **Lakota Scott, BA**, professor at the Center for Indigenous Midwifery’s Cedar School of Midwifery and the VacciNative Program Manager at the Northwest Portland Area Indian Health Board

Break
1:00 – 1:30 PM ET / 10:00 – 10:30 AM PT

Conversation 2: Sharing Babies’ Behavior to Co-Construct Stories of Healing – Reflections on the Stories Told within Systems of Care about Infants Exposed Prenatally to Substances
1:30 PM – 3:00 PM ET / 10:30 AM – 12:00 PM PT
Moderator:
- **Jayne Singer, Ph.D, IEHMH-E®, Director of Developmental and Relational Health, Brazelton Touchpoints Center**

Panelists:
- **Angela Reina, MS, NCC**, Serves as the program manager of CGE’s Permanent Supportive Housing program
- **Carolyn Flynn, LPC, CD, IMH-E®, is the Director of Early Relational Health at The Center for Great Expectations**
- **Erica Pulliam, BA**, Manager of Community Engagement and Relations at The Center for Great Expectations
- **Lavinia Adams**, Certified Peer Recovery Specialist and Certified Recovery Specialist Practioner for the Center of Great Expectations

Break
3:00 – 3:30 PM ET / 12:00 – 12:30 PM PT

Conversation 3: Stories of Healing and Recovery within Health and Mental Health Care Systems – Countering the Narrative
3:30 PM – 5:00 PM ET /12:30 – 2:00 PM PT

Moderator:
- **Joshua Sparrow, MD, Executive Director, Brazelton Touchpoints Center**

Panelists:
- **Phaedra Moore, BA**, Peer Recovery Specialist at Boston Medical Center’s Project RESPECT program
- **Dr. Kelley A. Saia**, Medical Director for Project RESPECT, Substance Use Disorder in Pregnancy Treatment Program at Boston Medical Center, Boston MA and Faculty Advisor for Boston Medical Center’s Maternal Health Addiction Medicine Fellowship
- **Mishka Terplan, MD, MPH, FACOG,DFASAM**, Medical Director and Senior Research Scientist, Friends Research Institute, Inc.

Closing
5:00 – 5:30 PM ET / 2:00 – 2:30 PM PT
- **Eurnestine Brown, Ph.D.**, and **Jayne Singer, Ph.D., Brazelton Touchpoints Center**
Trainings and Events

Continue your learning and professional growth at these Brazelton Touchpoints Center trainings and events. Summit participants can receive a 10% discount on registration fees. Use this coupon code when you register: Summit24TY

Learn more and register here

Workshop: Newborn Behavioral Observations for Families in Substance Use Recovery
This half-day workshop is for professionals who are already trained in the NBO and would like to deepen their understanding of infants who have experienced prenatal substance exposure and postnatal withdrawal (NAS/NOWS) and enhance their relationship-based care skills with parents living with substance use disorder.

Dates: April 13 and September 14

Hope in the Face of Adversity: Touchpoints in the Context of Substance Use Disorder
This 90-minute workshop explores how the Touchpoints Approach to family engagement can help providers create and nurture strong, trusting partnerships with families affected by substance use disorder. Participation in a previous Touchpoints Training is preferred but not required.

Date: May 21

Families in Recovery: Touchpoints in the Context of Substance Use Disorder
The Touchpoints Approach is an evidence-based developmental and relational approach to building strong family-child and family-provider relationships. Learn how Touchpoints can help you build strengths-based and trusting partnerships with families living with substance use disorder. CMEs/CEUs are available for specific disciplines.

Dates: September 10
Beyond Trauma-Informed Care: A Developmental-Relational Framework for Engaging Adults and Children in Healing and Resilience

This three-part workshop series explores strengths-based foundational concepts and actionable strategies related to trauma, adaptation, and healing. Deepen your understanding of the individual and systemic impacts of trauma. Learn how to better respond with empathy to behavior displayed by children and adults who have experienced trauma, while building safe and trusting relationships.

**Dates:** 3-part Workshop series on March 6

[Register for trainings and events here](#)

[Visit our website to view all BTC events!](#)

Want to bring a BTC training to your specific group? [Contact us today!](#)
Eurnestine Brown, PhD, Program Director and Director of Relational Equity and Belonging, Brazelton Touchpoints Center; Director of Equity, Diversity, Inclusion, Belonging, and Access, Division of Developmental Medicine, Boston Children’s Hospital; Senior Strategic Advisor on Equity, Diversity, Inclusion, Belonging, and Anti-Racism, Rosamund Stone Zander Translational Neuroscience Center

Dr. Eurnestine Brown leads BTC’s efforts to become an anti-racist and inclusive Center that promotes sustainable excellence by creating an organizational culture that is committed to equity, diversity, inclusion, and belonging. As a developmental psychologist with 25+ years of experience, doula, and equity influencer, she is dedicated to improving the lives of birthing people, families, infants, toddlers, and children — especially those who are racially and historically marginalized. She moderates BTC’s Parenting While Black, Family-to-Family Real Talk Series.

Dr. Brown has extensive experience in research design, implementation, analysis, and evaluation, and all aspects of data collection, observation, and coding with infants, children, and families. She has consulted for nonprofit agencies, school districts, and child and adolescent clinics across the United States. She is a former Early Head Start/Head Start Program Director. She is the co-editor of African-American Women: An Ecological Perspective and has published papers in journals such as Developmental Psychology and Development and Psychopathology. Dr. Brown is a Board Member for Infant Massage USA.
Danica Brown, PhD, MSW
Behavioral Health Programs Director at the Northwest Portland Area Indian Health Board

Danica Love Brown, PhD, MSW, is a citizen of the Choctaw Nation of Oklahoma born and raised in Northern New Mexico. Dr. Brown is the Behavioral Health Programs Director at the Northwest Portland Area Indian Health Board and has worked as a mental health and substance abuse counselor, social worker and youth advocate for nearly 30 years. She has a history of working in the areas of prevention, drug and alcohol/mental health treatment, community and restorative justice, and sexual health with Native American and adjudicated youth. She specializes in working with culturally and socio-economically diverse populations and Tribal communities. Dr. Brown is an Indigenous Wellness Research Institute ISMART fellow alumni and current INSPIRE fellow, Council of Social Work Education, Minority Fellowship Program fellow alumni and Northwest Native American Research Center for Health, fellow alumni. Her research has focused on Indigenous Ways of Knowing and Decolonizing Methodologies to address historical trauma and health disparities in Tribal communities, and she loves puppies.

Dolores Jimerson, LCSW, ADS, serves the Northwest Portland Area Indian Health Board’s Behavioral Health Program
Dolores Jimerson, LCSW, ADS (Seneca) serves the Northwest Portland Area Indian Health Board’s Behavioral Health Program. She is an advocate of ‘nothing about us without us’ and the importance of growing our own to bring healing to tribal communities.

Her passion for behavioral health comes from witnessing the impact of boarding schools and trauma on her own family. Dolores has over three decades of experience in behavioral health, twenty with tribes. Her career includes inpatient psych, community mental health, tribal behavioral health, integrated care with previous administration experience as CEO of an FQHC then Quileute Health Director.
Dolores serves on the Northwest ATTC Advisory Board in addition to being a member of the Portland Area CHAP Certification Board. Some of her more rewarding experiences included indigenizing therapy with those she served, becoming an acudetox provider, creating integrated care programs and witnessing children grow into thriving adults thanks in part to culturally resonant prevention and the presence of “Good Relatives.”

**Lakota Scott, BA, professor at the Center for Indigenous Midwifery’s Cedar School of Midwifery and the Vaccinative Program Manager at the Northwest Portland Area Indian Health Board**

Lakota Scott is Ashiihi and born for Todichiinii. Her maternal grandparents and paternal grandfathers are Tlizilani. She is Diné from White Mesa, Arizona. She is a mother, doctor and educator. She earned her Bachelor of Arts in Native American Studies from Dartmouth College and her Naturopathic Doctor degree from the National University of Natural Medicine. She is a professor at the Center for Indigenous Midwifery’s Cedar School of Midwifery and the Vaccinative Program Manager at the Northwest Portland Area Indian Health Board.

**Angela Reina, MS, NCC, Serves as the program manager of CGE’s Permanent Supportive Housing program**

Angela Reina, MS, NCC serves as the program manager of CGE’s Permanent Supportive Housing program. Angela earned a bachelor’s degree in psychology and sociology from Kean University and a master’s
She began her career at CGE as a counseling intern in the Adult and Adolescent Residential programs. Upon completion of her graduate degree, Angela was hired as the Early Relational Health clinician in the Adolescent Residential program where, working closely with the young mothers, she strengthened her clinical understanding and expertise.

Prior to joining CGE, Angela spent over a decade in corporate banking, where she strengthened her skills and experience in overseeing internal operations, customer service, and employee development. In her role as program manager, she leverages her broad experience in both the for-profit and non-profit sectors to ensure quality and comprehensive care is being delivered to the mothers and children of CGE’s supportive housing community.

Carolyn Flynn, LPC, CD, IMH-E®, is the Director of Early Relational Health at The Center for Great Expectations

Carolyn Flynn, LPC, CD, IMH-E® is the Director of Early Relational Health at The Center for Great Expectations. She earned her Master’s in Mental Health Counseling from Kean University, is a licensed professional counselor in New Jersey, and a level III endorsed Infant Mental Health Specialist. Her passion for working with families began at the YMCA where she lead parent-child programming and provided adventure-based counseling for Veterans in recovery and families who lost loved ones on September 11th. Her specialization in pregnant persons began in 2006 with her work as a doula, serving families in both private practice and community-based models. She is experienced in model and program development, having co-created START, The Center for Great Expectations’ community-based home visitation program and co-leading the development of CGE’s unique model for parents in recovery, Relational Recovery. As a senior trainer at The Institute of the Center for Great Expectations, she has presented both locally and internationally on topics including early relational health, trauma-responsive childbirth, and trauma-informed care, and is trainer for New Jersey’s

Families in Recovery: The First 1,000 Days — The Stories We Tell about SUD and Healing
Child Trauma Training Consortium site. Carolyn is rostered in Child Parent Psychotherapy and certified in Brazelton Touchpoints and trained in Brazelton Newborn Behavioral Observation. She is a graduate of the University of Massachusetts Infant-Parent Mental Health Post-Graduate Certificate Program and is a trained reflective supervision practitioner. Carolyn owns a small private practice and is a mother to three spirited boys. She refills her cup by writing, drumming and being in nature.

**Erica Pulliam, BA, Manager of Community Engagement and Relations at The Center for Great Expectations**

Erica Pulliam is the Manager of Community Engagement and Relations at The Center for Great Expectations. Erica is a graduate of Pillar College with an Associate degree in Biblical Studies and a Bachelor of Arts in Counseling and Psychology, a marriage and family concentration.

Erica is a certified Domestic Violence Response Team member and a Perinatal Doula. She has worked at The Center since 2012, with advancing experience in our Adolescent Residential program and the START Program. Erica is a Trainer at the Institute of CGE, and she facilitates “Abuse Across the Spectrum” at CGE’s New Employee Orientation. Erica is a demonstrated change agent for populations who are marginalized, mistreated, and subjected to silence. Additionally, Erica serves as an Advisory Member for several committees, including DMHAS Multicultural Services, New Jersey Birth Equity Funders Alliance, Federal Maternal Mental Health Task Force, and the HOPES CAP, Inc. Head Start Policy Council Chair. Erica values self-care and prioritizes spending time with her husband and two children.
Phaedra Moore is a Peer Recovery Specialist at Boston Medical Center’s Project RESPECT program. Phaedra has worked closely with pregnant and postpartum women with SUD in both residential treatment settings and through one-on-one peer coaching. She uses her lived experience to reach across boundaries to find places of identification and understanding that inform each outreach.

Lavinia Adams is a Certified Peer Recovery Specialist and Certified Recovery Specialist Practitioner for the Center of Great Expectations. She is a person in Long Term Recovery from Substance Use and has worked in the treatment and Recovery Field of my Recovery on the professional level and within a 12 Step program. Lavinia decided to work as a Peer Recovery Specialist because I thought who better to understand someone with Substance Use than someone that has prior experience and understands the struggle getting to willingness to Change and finally finding freedom. She chose to work with the START that is a community based in home program, working with pregnant or post-partum mom’s working through Substance Use. Working with moms and in powering with as Mom’s that are the expert in their recovery journey and raising their children.

Phaedra Moore, BA, Project RESPECT Peer Recovery Specialist, Boston Medical Center

Lavinia Adams, Certified Peer Recovery Specialist and Certified Recovery Specialist Practitioner for the Center of Great Expectations

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Dr. Kelley A. Saia, Medical Director for Project RESPECT, Substance Use Disorder in Pregnancy Treatment Program at Boston Medical Center, Boston MA and Faculty Advisor for Boston Medical Center's Maternal Health Addiction Medicine Fellowship

Dr. Saia is board certified in both Obstetrics and Gynecology and in Addiction Medicine. She serves as the Medical Director for Project RESPECT, Substance Use Disorder in Pregnancy Treatment Program at Boston Medical Center, Boston MA and Faculty Advisor for Boston Medical Center's Maternal Health Addiction Medicine Fellowship. She provides direct clinical care and advocacy for birthing persons with substance use disorders. Her clinical research focuses on innovations in pharmacologic treatment for substance use disorders in pregnancy and post-delivery. Her advocacy centers on promoting dignified and trauma informed care for birthing persons with substance use disorders, health equity, and legislative action.

Jayne Singer, PhD, IECMH-E®, Director of Developmental and Relational Health and Director of Clinical Training, Brazelton Touchpoints Center; Clinical Psychologist, Boston Children’s Hospital; Assistant Professor of Pediatrics and Psychiatry, Harvard Medical School

Dr. Jayne Singer is a clinical psychologist and Endorsed Infant and Early Childhood
Mental Health Clinical Mentor at the Brazelton Touchpoints Center in the Division of Developmental Medicine at Boston Children’s Hospital. She serves as Director of Developmental and Relational Health and Director of Clinical Training at BTC, and is past president of the Massachusetts Association for Infant Mental Health. She engages in clinical practice and continuous national and international teaching and intensive mentoring of the Touchpoints Approach to family engagement and the Newborn Behavioral Observations (NBO) system. She spearheaded adaptations of the Touchpoints Approach that developed within the field of primary care pediatrics for application in the fields of early intervention and developmental disabilities, early care and education, mental health practice, and substance use disorder recovery. She also helped develop a special application of the NBO to support pregnant and birthing parents and their newborns in their recovery journey.

Joshua Sparrow, MD, DFAACAP, Executive Director, Brazelton Touchpoints Center; Associate Professor of Psychiatry, Harvard Medical School, part-time

Dr. Joshua Sparrow is executive director of the Brazelton Touchpoints Center (BTC) in the Division of Development of Medicine at Boston Children’s Hospital, where he also holds an appointment in the Department of Psychiatry. Dr. Sparrow’s care in the 1990s for children hospitalized for severe psychiatric disturbances, often associated with physical and sexual abuse, and for developmental delays aggravated by social and economic deprivation and systemic racism, prompted his interest in the social determinants of health and mental health, and community self-strengthening, community-based prevention, and health promotion.
Dr. Sparrow has led numerous governmental and philanthropic research, training and technical assistance grants, and advised government agencies, nonprofits, academic centers, and philanthropies. He has given hundreds of lectures nationally and internationally; written numerous scholarly papers, nine books translated into more than 20 languages, and hundreds of articles for the general public; and is a recipient of the American Academy of Child and Adolescent Psychiatry Jeanne Spurlock, MD Award for Culture and Diversity. He is also associate faculty at Ariadne Labs, T.H. Chan Harvard School of Public Health/Brigham and Women’s Hospital, and has served as a visiting professor at the Shanghai Mental Health Center/Jiao Tong University School of Medicine and the School of Medicine of the University of Marseille, France.

Mishka Terplan, MD, MPH, FACOG, DFASAM, Medical Director and Senior Research Scientist, Friends Research Institute, Inc.

Dr. Mishka Terplan is board certified in both obstetrics and gynecology and in addiction medicine and Medical Director and Senior Research Scientist at Friends Research Institute, Inc., in Baltimore, Maryland.

His primary clinical, research, public health, and advocacy interests lie along the intersections of reproductive and behavioral health. Dr. Terplan has published extensively on health inequities, discrimination, and access to treatment and is internationally recognized as an expert in the care of pregnant and parenting people with substance use disorder. He has been central to guidance document development at the American Congress of Obstetrician Gynecologists (ACOG), the American Society of Addiction Medicine (ASAM) and the Substance Abuse and Mental Health Services Administration (SAMHSA) and has participated in expert panels at Center for Disease Control, Office of the National Drug Control Policy, Office of Women’s Health, US Food and Drug Administration, the National Institutes of Health, and the United Nations Office on Drugs and Crime, primarily on issues related to gender, reproduction, and addiction. In addition to his work for the Friends Research Institute, he is adjunct faculty at the University of California, San Francisco, where he is a Substance Use Warmline clinician for the National Clinician Consultation Center.
Stay In Touch!
We'd love to hear from you! Here is how you can reach us...

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