CHILDREN'S HEART NETWORK
of BC Society

Heart Matters

WWW.CHILDRENSHEARTNETWORK.ORG WINTER 2022

Our Heart Story

BY ANGELA PARKER

Having children and a family of our own was a dream and huge priority for my husband and me. Unfortunately, we dealt with fertility issues for many years, and our first son, Quinn, was conceived via in vitro fertilization. Finally, a beautiful boy that we considered our miracle. Little did we know what was to come. Twelve months later we found out I was expecting our second child. We were ecstatic with this news, especially that it happened "naturally." My pregnancy went smoothly, and as my first hospital birth had been a breeze, we made the decision to have a home birth.

Our second son, Cohen, was born on April 10, 2017. It was a peaceful and perfect water birth, in the comfort of our home with my husband and mom by my side and my dad watching Quinn upstairs. Cohen was a perfectly plump, beautiful little boy who immediately won our hearts. Our midwife fully examined both Cohen and me, and we planned a follow-up phone call and visit for the following day. We bonded, soaking in the joys of our new little love. Our midwife returned for the follow-up, and while examining Cohen she noticed that he was working hard while nursing. She checked his oxygen saturation, and

continued on page 3

Heart Matters is the newsletter of the Children's Heart Network, which works to educate, support, and enhance the lives of children, youth, and families living with congenital heart disease.

IN THIS ISSUE

VOLUNTEERS NEEDED

Our families enjoy the spring, summer, fall, and winter gatherings that CHN sponsors. We are always looking for volunteers, so if you have some time, talent, and expertise that you are willing to share, please contact Sam Aitken at saitken@childrensheartnetwork.org.

@ChildrensHeartNetwork
@Childrens_Heart
@childrensheartnetwork

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chn@childrensheartnetwork.org

COFFEE GROUPS NEAR YOU

Our coffee groups are normally held in person; however, due to COVID, we are now hosting virtual get-togethers. Email Sam at saitken@childrensheartnetwork.org for more information.

ABBOTSFORD – Rupe Brah
rupe3395@gmail.com

CHILLIWACK – Melissa Martz
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KAMLOOPS – Miranda Brown
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kwalker@childrensheartnetwork.org

VANCOUVER – Samantha Aitken
saitken@childrensheartnetwork.org

VICTORIA – Teri Godin
terigodin@gmail.com

SIGN UP TO GET CONNECTED

If you have a child growing up with heart disease, please email us at chn@childrensheartnetwork.org so that we can add you to our mailing list to receive invitations to all our fun events!

THANK YOU

CHN would like to thank the Province of BC for its continued support of CHN through its Community Gaming Grants program.

CHN would like to thank the CKNW Kids' Fund for their generous support of our Heart Beats and Hearts of Gold camp programs.

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JADE PALM – Vancouver Island Hearts of Gold youth coordinator

Our Heart Story, continued from page 1

yes, something was off. Her advice was to head to Royal Inland Hospital, our local hospital in Kamloops, where she would meet us.

I was devastated. Something was wrong with Cohen, and we had wanted to avoid being in hospital. Once there, both Cohen and I were admitted, me for postpartum high blood pressure, and Cohen for what they presumed was an unknown infection. Two days later an echocardiogram was completed, and I heard those dreaded words, "There's something wrong with your baby's heart." There was a sense of urgency, and we were airlifted to BC Children's Hospital (BCCH). I called my husband, Emery, who was at home with our eldest, and gave him the news. Our plan was made quickly. Quinn would go with my mom, and Emery would drive to meet us at the hospital. He packed a bag for us, rushed to the hospital for a quick hug, and then started the agonizing four-hour drive to Vancouver. Cohen and I were airlifted to BCCH and arrived late on April 13. I felt like I was living a nightmare: completely in shock at what was happening and what was to come. I was relieved to have my husband and sister waiting at the front doors of the hospital for us as we pulled in. We were whisked away to the Pediatric Intensive Care Unit (PICU), where many tests were done. We learned that Cohen was born with critical congenital heart defects: transposition of the great arteries (TGA), an arterial septal defect (ASD), and patent ductus arteriosus (PDA). The two main arteries connected to his heart (the aorta and the pulmonary artery) were switched, and they said the reason he was doing so well was because of the holes in his heart. We spent that night in the PICU, and then we were moved upstairs to the ward to wait for surgery. During the wait, Cohen did quite well, considering what was going on inside his tiny body. Every day, despite his strength, his oxygen saturation dropped a little lower. He had to work harder to breathe and began to turn blue. We all knew that time was not on Cohen's side, so the surgery date, April 18, could not come quickly enough. Handing him over to the doctors and nurses was one of the hardest moments of my life. On one hand, I wanted to throw him into their arms, as he was deteriorating and needed this life-saving surgery, but on the other hand, the risks were scary and could be devastating.

The 4.5-hour surgery wait was torture. Finally the pager we were given started to flash, and we headed back to the cardiac family waiting area. I will never forget the intense, overwhelming feeling of Dr. Gandhi and the PICU nurse entering the room. They sat us down and told us the surgery had been a success, but that Cohen was not in the clear. Seeing our tiny newborn baby surrounded by huge pieces of medical equipment and covered in wires and tubes was shocking. It was something that parents should never have to deal with. Cohen spent two days in the PICU, two days on the ward, and then 11 days in Vancouver, close to the hospital. On May 3, we were discharged from cardiac surgical care and allowed to return home to Kamloops.

Today Cohen is bustling with energy and is a typical four-year-old boy. He is extremely smart and charismatic, and his beautiful smile lights up rooms. Fortunately, he has not had any cardiac complications, and recently, he was cleared by Cardiology for another two years. I am constantly amazed by how strong and resilient our heart children are, with their consistent urge and fight for life. Cohen's heart journey will be lifelong. Unbeknownst to us, our family heart journey would expand with the birth of our third little boy, Nash.

The decision to have another baby after dealing with trauma and complications with Cohen was not an easy one. Coming from large families ourselves, we knew there was strength in numbers and that we wanted to give our boys another forever friend. We decided to use one of the three remaining frozen embryos that we had stored.

My pregnancy started out uncomplicated, and due to our history, we were very closely monitored. At week 32 I recognized that something wasn't right. My belly was

much bigger than in my previous pregnancies, and yet I followed the same healthy eating and active lifestyle that I had done previously. Ultrasounds confirmed that yes, I needed specialized clinical care. A referral was made to the Maternal-Fetal Medicine clinic at BC Women's Hospital in Vancouver. Eventually we were told that we would need to relocate to Vancouver, as my pregnancy was complicated and deemed high risk. Two days later we were back in Vancouver, as a family. I was diagnosed with polyhydramnios, which is an excessive amount of amniotic fluid buildup. No definitive diagnosis was given for the baby, but our team speculated that something was wrong with his esophagus. Constant monitoring and back and forth from the hospital kept us very busy. We spent five weeks away from home before I was scheduled to be induced. Thankfully, my parents made the trip to be with us during the birth and to help us with our two older boys.

Nash entered our world at 10:30 pm on January 14, 2020. He was quickly placed on my chest for a kiss and then brought over to the group of professionals waiting to assess him. Because of the polyhydramnios and extra pressure on my uterus, the placenta did not shrink. I was unable to push it out, which caused my body to hemorrhage and prompted surgery. Nash was brought to the Neonatal Intensive Care Unit (NICU) at BCCH, which became our home for the next 10 weeks.

While small and mighty, Nash has been facing battles since day one. He was born with a condition called VACTERL association. It is an association of birth defects that affects multiple parts of the body. The term VACTERL is an acronym, each letter representing one of the more common findings seen in affected individuals: V = vertebral abnormalities, A = anal atresia, C = cardiac defects, T = tracheal anomalies including tracheoesophageal (TE) fistula, E = esophageal atresia, R = renal (kidney) and radial (thumb side of hand) abnormalities, and L = other limb abnormalities. Nash is affected by five of the seven letters represented, so is seen as VaCTERl.

Our 10-week NICU stay included three major surgeries, pleural effusion, pyloric stenosis, congestive heart failure, two episodes of supraventricular tachycardia, and numerous tests and procedures. As he was unable to swallow, Nash struggled to eat and was given a gastrostomy feeding tube. He was followed closely by Cardiology, and we were told that surgery was imminent, but they wanted to wait for him to grow bigger and stronger. On March 27, due to COVID and our longing to get home, we were finally discharged.

After 15 months and many appointments with Cardiology, we were informed that it was time for heart surgery. Nash's surgical dates were rescheduled twice due to him having a cold, but the third time he was healthy, and we were ready to proceed. Dr. Gandhi was once again our surgeon, and I was thrilled with this news. We were comfortable and confident in his abilities. On September 27, 2021, Nash had open heart surgery to repair the hole in his heart (ventricular septal defect, VSD). The surgery went well, and he spent one night in the PICU, one night on the ward, and eight days at Ronald McDonald House. We are hopeful that Nash will not need any more surgical interventions, as he is currently healing from a recent hand surgery.

Looking at Nash, you would never know what he has been through during his two short years. Today I see a vibrant toddler who is full of life, smiles, and perseverance. His determined nature allows him to blaze through life, and he continues to amaze us every day.

The sounds and smells of the hospital will forever be ingrained in my mind. I cannot thank enough those who had a place in saving our boys' lives. I am so very blessed and grateful to my family and friends who have helped us along our journey. Their constant support, positivity, and love have guided us through some of our darkest days. I am also grateful for the Children's Heart Network. We have been a part of this special group for four years now, and the support, education, and resources that we have received have been amazing. We have connected with many other families who have similar journeys, and from this, we are all able to find strength.

Life with two children diagnosed with congenital heart disease has been overwhelming and stressful. Luckily, we have been able to see the silver lining to our journey, which has encompassed many life lessons. Our boys, as well as our nieces and nephews, have demonstrated unwavering compassion while keeping us grounded with their never-ending sense of wonder and joy. We have a greater appreciation for life, and our outlook and priorities have shifted, reminding us to slow down and to appreciate the "little things" a lot more. ♥

Understanding and Managing Medical Traumatic Stress in Children, Youth, and Families

BY DR. WINNIE CHUNG, REGISTERED PSYCHOLOGIST

As you may all know from personal experiences, a child's heart condition can impact the entire family in profound ways. In this article, I will discuss ways for children, youth, and families to cope with a heart condition and associated medical interventions, and to minimize risk for developing longer-term trauma-related mental health symptoms.

What is pediatric medical traumatic stress?

The National Child Traumatic Stress Network provided a definition of pediatric medical traumatic stress (PMTS) a number of years ago: "A set of psychological and physiological responses of children and their families to pain, injury, serious illness, medical procedures, and invasive or frightening treatment experiences."[1] From initial diagnosis (or beyond), to hospitalizations, to treatment-related experiences, to ongoing tests and procedures, there are unfortunately many medical experiences, necessary as they are, that can be traumatic for children and families coping with a cardiac condition.

There are many different ways that PMTS can affect individuals. Some common reactions include symptoms of arousal, re-experiencing, and avoidance. Other reactions can include changes in one's thinking, behaviour, and emotions, as well as dissociation, or a sense of being disconnected from reality. For individuals who experience symptoms of *hyperarousal*, they may be more easily startled than usual, become extra vigilant to signs of something being wrong or dangerous, and react more strongly to different sensations in their bodies and sights and sounds in their environment. For those with *re-experiencing* symptoms, they may find themselves thinking a lot about the trauma, experience intrusive memories of a frightening experience, and have nightmares and flashbacks of the trauma. Individuals can also experience *avoidance* symptoms, where one tries to not think about or talk about the frightening experiences they have had. They may seek to stay away from places, people, or activities that remind them of the trauma. Other traumatic stress symptoms can include changes in one's memory, attention, and ability to manage challenges. Individuals may notice differences in their mood, where they may be more irritable or sad than normal. They may feel more anxious and worried, and sleep can become disrupted. Some also feel disconnected from the world around them and may feel like they are in a dream or in a daze.

How common are these experiences? Is this the same as post-traumatic stress disorder, or PTSD?

It is important to know that many individuals experience some of these symptoms following medical trauma. However, most people do not go on to have long-term significant stress reactions. Some individuals do have persistent symptoms that impact their functioning in significant and distressing ways; these are what health professionals describe as symptoms of acute stress disorder (symptoms that last from several weeks to one month) or post-traumatic stress disorder (PTSD; symptoms that last for more than one month). A qualified mental health professional such as a psychologist or psychiatrist can help identify whether these diagnoses are applicable to your child or you.

Research suggests that between 12% and 31% of children with congenital heart disease may develop PTSD following cardiac surgery.[2] Among parents of children

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[1] National Child Traumatic Stress Network. (2003, September). *Definition of medical traumatic stress*. Paper presented at the Medical Traumatic Stress Working Group meeting, Philadelphia, PA.

[2] Meentken et al. (2017). Medically related post-traumatic stress in children and adolescents with congenital heart defects. *Frontiers in Pediatrics*, *5*(20).

with congenital heart conditions, up to 30% of parents are reported to have symptoms consistent with PTSD, and over 80% experience prominent trauma symptoms.[3] In addition to trauma symptoms, 25% to 50% of parents may experience elevated symptoms related to depression and anxiety, and between 30% and 80% of parents have reported significant psychological distress.

Regardless of whether someone meets diagnostic criteria for a "disorder" or not, if you and/or your child are experiencing emotional or other difficulties that impact your daily functioning, it is helpful to speak with your health care team about your concerns.

What are some practical ways to cope with medical trauma and prevent lasting stress symptoms?

Although one has little control over the diagnosis of a heart condition and the interventions that are needed, there are certainly practical things that families and health care providers can do to help minimize negative psychological impacts and promote adaptive coping and adjustment. Let's focus here on ways to foster resilience and coping *at the time* of a potentially traumatic medical experience, *after* the experience, and *ongoing interventions* that can be considered.[4] These ideas are not exhaustive, and some of them apply more to children and youth, while others are more for parents and caregivers. I strongly encourage families to work closely with their health care team to develop strategies and coping plans that are tailored to your family.

At the time of a medical experience (e.g., during a medical test or procedure, during a hospitalization or medical appointment)

- **Have control.** During a frightening and scary experience, having a sense of control is important. This can look like giving your child a choice about who and how many people they want present in the treatment room, what they would like to do to occupy their attention during a procedure, and how much information they would like about their condition or the intervention they are receiving. Encourage your child to express questions or concerns they have, either to you as caregivers or to their medical team. Work with your health care team to figure out how to explain medical information to children and youth in a developmentally appropriate way. For parents and caregivers, having control can look like being given the amount of information you want in the way that you prefer (e.g., having information written down, receiving information in small bits, having information repeated several times), and having the support people that you need when receiving medical information.
- **Build trust and confidence.** Remember and remind yourself and your child that you are being well taken care of by their health care team. As scary as a procedure or treatment experience may be, having the reassurance that your medical team members are experts in what they do can ease some worries and fears. Of course, you should feel free to share any concerns or questions you have openly with your medical team.
- **Focus on basic needs.** Eating, drinking, and getting adequate rest and sleep can often become very challenging in stressful situations. For children and adolescents undergoing medical interventions, their condition and treatments themselves can interfere with these basic needs. For parents and caregivers, it is important to offer yourself permission to take care of your own needs, and to recognize that your wellness in and of itself is critical to prioritize and also allows you to care for your child in the ways that they need.
- **Receive support.** For children and youth undergoing procedures or experiencing other medical-related stress, the presence of parents, caregivers, or other support individuals can often be helpful. Stay connected with friends or other family members, whether that is virtually or in other ways.
- **Understand normal reactions to trauma.** It can be helpful to educate yourself and your child on what are normal and expected emotional reactions to the stressful situation that you are in. It is normal to experience a range of different emotions, and it is important and helpful to acknowledge and be aware of these feelings.
- **Use what already works!** Consider what typically helps you and your child cope with difficult and stressful situations outside of the medical setting, and use those strategies in the medical context where possible. Are there comfort objects, games and toys, or other activities that soothe your child or offer distraction? Are there other strategies and activities that are helpful, such as calm breathing, visualizations, reading engaging books, watching shows, listening to a favourite playlist, journalling, taking walks, or talking with loved ones?
- **Involve psychosocial supports in health care settings.** Ask about services from child life specialists,

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[3] Wolff-King et al. (2017). Mental health among parents of children with critical congenital heart defects: A systematic review. *Journal of the American Heart Association*, *6*(2).

[4] Kazak et al. (2006). An integrative model of pediatric medical traumatic stress. *Journal of Pediatric Psychology*, *31*(4).

medical psychologists, and social workers in your health care setting who can help support your child and your family with medical procedures, appointments, and hospitalization.

Following a difficult medical experience

In addition to the above…

- **Monitor mood and behavioural changes.** Some increase in anxiety, minor behavioural regression (e.g., more clinginess in younger children), and mood fluctuations can be an expected part of their medical experience. Work with your child's health care team to monitor these symptoms and promote coping.
- **Focus on social interactions and routine.** As medically appropriate, continuing to stay connected and have positive and supportive interactions with loved ones can be very helpful. If possible, establish a daily routine to help each day feel more predictable—this is important for children, youth, and caregivers alike.
- **Be mindful of the mutual impacts of children's and parents' coping.** Children's and youth's emotional responses can often mirror those of parents and caregivers, particularly in times of stress and uncertainty. I encourage parents and caregivers to take opportunities to share their emotional experiences openly with other trusted and supportive adults. When interacting with your child, encourage open conversations about any worries, sadness, fears, or frustrations they may have, while also focusing on confidence and trust in the care that your child is receiving from their medical team.

Ongoing interventions

In addition to the above…

- **Re-establish routines and a sense of normalcy.** Traumatic experiences can shake one's sense of safety and predictability in this world. As soon as possible, establishing or re-establishing daily routines and structure can help with recovery from a distressing experience. Resuming normal limit-setting and expectations as medically safe and appropriate can help foster a sense of normalcy and promote confidence and independence in your child's recovery and ongoing coping. For parents and caregivers, scheduling time in your daily life for opportunities for self-care and rest can be very supportive; even five minutes of breaks sprinkled throughout the day can go a long way.
- **Take opportunities to share emotional experiences.** People differ in terms of how much and when they are ready to talk about the impact of distressing experiences. As mentioned above, it can be normal to either spend lots of time thinking about a trauma or to avoid it altogether as much as possible. Identify individuals with whom you and your child can share your experiences, and create time and space to do so, if desired.
- **Explore beliefs about a traumatic event.** This may be done in a therapeutic setting with a mental health professional. How one interprets and makes sense of the distressing experiences they have had can shape their coping and adjustment. For example, excessive focus on the most frightening parts of a medical experience can lead to ongoing fears about the hospital or doctors in general, whereas also remembering the helpful care one has received and the brave ways your child has coped with the difficulties can promote resilience and confidence in one's ability to manage any future challenges.
- **Access therapeutic and other supports.** Working with a mental health professional to help manage experiences of traumatic stress can be beneficial, particularly if you or your child are feeling distressed and finding it difficult to cope with what you have experienced. For many heart families, there can be multiple medical experiences over time that are highly distressing, and establishing a relationship with a mental health clinician who can be a source of support on an ongoing basis can be very helpful. If you or your child is experiencing a mental health disorder such as PTSD, working with a qualified mental health professional is certainly encouraged.

Where can I find additional help?

It can be tough to know where to go or who to ask for help in coping with traumatic stress symptoms. For *children and youth*, you can speak with your child's family doctor, their pediatrician, and your cardiology team about concerns you may have about your child's emotional and behavioural functioning. If your child's cardiac condition has led to impacts on brain function, speak with your health care team about whether a neuropsychological evaluation may be helpful. Your child's school counsellor can be a very helpful part of their support team, particularly as it relates to assisting with a smooth transition back to school after a hospitalization, identifying academic supports that may be needed, and promoting a positive school experience. For *adults*, you are also encouraged to speak with your family doctor about your coping, and consider looking into any workplace employee assistance programs or other mental health benefits that may be available to you. The next section provides more information on finding a therapist who can work with you and your child—both public and private options are available.

Finding a mental health professional in British Columbia

- The **Child and Youth Mental Health** teams form a public service that provides mental health assessment and treatment for children and youth (0 to 18 years old): https://www2.gov.bc.ca/gov/content/health/managing-your-health/mental-health-substance-use/child-teen-mental-health
- **Foundry BC** offers support and information regarding mental health and wellness for youth ages 12 to 24: https://foundrybc.ca/
- For public **adult mental health** services, contact your local health authority for information on accessing mental health supports.
- The following websites contain directories for finding a **private psychologist or registered clinical counsellor**:
  - **BC Psychological Association**: https://www.psychologists.bc.ca/find_psychologist
  - **BC Association of Clinical Counsellors**: https://bcacc.ca/counsellors/

Mental health crisis supports

- **Mental Health Support Line**: Call 310-6789 (no area code)
- **Kids Help Phone**: https://kidshelpphone.ca/
- **Youth in BC**: https://youthinbc.com/
- **Crisis Centre Chat**: https://crisiscentrechat.ca/
- **1-800-SUICIDE**

Other helpful resources

- **Children's Heart Network**: https://www.childrensheartnetwork.org/
- **Pacific Post Partum Support Society**: https://postpartum.org/
- **BC Women's Reproductive Mental Health program** (medical professional referral needed): https://reproductivementalhealth.ca/
- **Kelty Mental Health Resource Centre**: https://keltymentalhealth.ca/
- **The National Child Traumatic Stress Network**: https://www.nctsn.org/
- **Anxiety Canada**: https://www.anxietycanada.com/
- **BounceBack** (online skill-building program to manage stress, anxiety, and low mood): https://bouncebackbc.ca/
- **Confident Parents: Thriving Kids** (phone coaching program for parents; health care professional referral needed): https://welcome.cmhacptk.ca/

It is not possible to fully depict the depth and breadth of the challenges that heart families face. It is also not possible to fully describe the inspiring courage and strength displayed by children, youth, and families navigating complex medical concerns and managing experiences of traumatic stress. I hope our heart families are reminded that they are not alone in dealing with these difficult experiences. Support is available to help families take each step forward day by day, one moment at a time. ♥

Parent Education Series: Upcoming Sessions

February 2022

Exercise and Nutrition

Astrid De Souza, Clinical Exercise Physiologist and Research Associate

April 2022

Hearts of Gold Youth Program

Kristi Coldwell, Cole Renner, and the Hearts of Gold Teen Panel

June 2022

Cardiology Advances

Dr. Shreya Moodley and Dr. Shubhayan Sanatani

October 2022

Transitioning Your Heart Child into School

TBA

View session details and recording links for all our past sessions at https://www.childrensheartnetwork.org/parent-education-series/

Resources for Heart Parents

Confident Parents: Thriving Kids

Confident Parents: Thriving Kids is a phone-based skill-building program designed to help parents and caregivers support children aged 3–12 who experience mild to moderate anxiety or behaviour challenges. There are two separate program streams, one for anxiety and one for behaviour. Empower yourself and strengthen your role as a parent with support from a trained coach. ♥

MyBooklet BC

MyBooklet BC is a FREE online tool that families and people with disabilities and/or health conditions can use to create a beautiful and personalized information booklet for a loved one or for themselves.

- Are you tired of constantly repeating your "story" to doctors, teachers, therapists, friends, and family?
- Do you wish all your important information was in one document?
- Do you wish you could share more than just the medical and diagnostic facts?
- If you answered yes to any of these questions, you'll want YOUR OWN myBooklet.

MyBooklet BC Features

- Carefully chosen, easy-to-use forms that will walk you through creating your own booklet
- Ready-to-use professional design templates
- Valuable resources to give you support and inspiration

To get started or for more information, go to https://mybookletbc.com/. ♥

Canadian Mental
Health Association
British Columbia
Mental health for all

Confident Parents
Thriving Kids

Concerned about your child's behaviour?
Worried about your child's anxiety?
We can help!

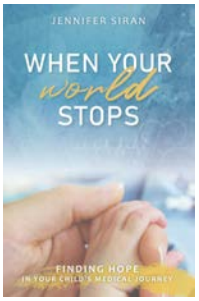
www.confidentparents.ca

Funding for Confident Parents: Thriving Kids is provided by the Province of British Columbia

Available from https://cmha.bc.ca/wp-content/uploads/2016/07/CP-brochure-2015.pdf

Books for Heart Families

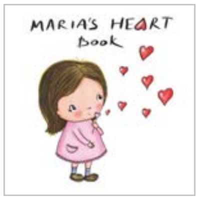
When Your World Stops: Finding Hope in Your Child's Medical Journey



By Jennifer Siran and Rochelle Reimer

This book tackles a wide variety of issues that come with navigating a child's chronic health condition. It takes you through short, experience-filled stories that cover hospital rounds, postpartum depression, roles of medical teams, updating friends and family, and so much more. You will find tips on self-care, prayer, and meditation that can help keep you grounded. You don't have to be alone.

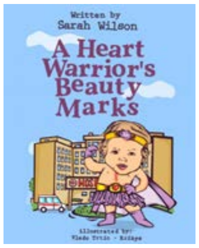
Maria's Heart Book



By Natalie and Maria Bergman

This is a story about a little girl who has gone through heart surgery. She shares her experience from the minute she learns about her heart defect until she is fully recovered. She lives in Canada, and this is a true story.

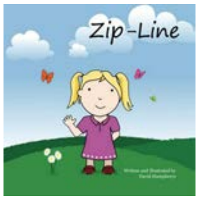
A Heart Warrior's Beauty Marks



By Sarah Wilson

The heroine is a precious baby named Lillian. Her body is covered in surgical scars, which the author and baby's mother fittingly refers to as "beauty marks." This children's non-fiction book shows young readers everything Lillian and other heart warriors (children who have had heart surgery) must courageously endure to survive and explains how they received these beauty marks.

Zip-Line



By David Humpherys

This is a book for kids that have a scar on their chest from open heart surgery to repair a CHD. Used by families, schools, and hospitals, *Zip-Line* whimsically explains the answer to the question "How did that line get there?" The story centres on a little girl and her bunny rabbit.

The Abilities in Me: Congenital Heart Defect

By Gemma Keir

This picture book is dedicated to young children born with a congenital heart defect, also known as CHD. Explore a day in the life of a little girl with CHD through bright, colourful illustrations and text. Perfect for teachers, parents, and children alike, this book will bring awareness of the condition and teach children how to be supportive and kind.

Charlie the Courageous

By Joslynn Jarrett-Skelton

Meet Charlie! She's a courageous young girl who has had her fair share of battles in this world. After being born blue, Charlie needed a special surgery on her heart. Charlie was given superpowers that only she knew! ♥

What's Happening?

18th Annual Wine Gala & Dinner

Friday, April 29, at the Terminal City Club in downtown Vancouver. After two years of cancellation, this will be the best yet! Our exciting fundraiser, hosted by Vancouver celebrity Fred Lee, will include a four-course dinner with wine pairings, a riveting guest speaker, and the city's best auction. See the back page for more information on how to purchase tickets or become a sponsor.

Family Camp

Vancouver Island Family Camp

June 3–5 at Camp Thunderbird in Sooke. Watch for an invitation to all our Island heart families in the spring (provided COVID allows).

Lower Mainland Family Camp

September 24–26 at Camp Stillwood near Cultus Lake. Watch for an invitation to all our BC heart families in the spring (provided COVID allows).

Hearts of Gold Camp (for youth ages 13–18)

July 1–4 at Zajac Ranch in Mission. This camp is for our Hearts of Gold (HOG) youth groups that currently meet monthly. If your heart teen is interested in joining the monthly HOG group, please contact Samantha at saitken@childrensheartnetwork.org.

HeartBeats Camp (for children ages 8–12)

July 5–9 at Zajac Ranch in Mission. Our heart kids will join other children for the mixed medical camp, which will include horseback riding, canoeing, swimming, archery, crafts, and more! Watch for an invitation in the spring (provided COVID allows). ♥

ZAJAC RANCH FOR CHILDREN

www.zajacranch.com

Camp for Heart Kids at Zajac Ranch

If you live in the Southern Interior region of BC and would like to come to a camp, we will cover your transportation costs.

Flights and bus travel are sponsored by Cops for Kids.

Camp dates are as follows:

Hearts of Gold

(for youth ages 13–18)

July 1–4, 2022

HeartBeats

(for children ages 8–12)

July 5–9, 2022

For more information, email Samantha Aitken at *saitken@childrensheartnetwork.org*

THE 18th ANNUAL

Wine Gala & Dinner

Benefitting Children and Youth with Congenital Heart Disease

Silent and live auctions
Butler-served hors d'œuvres
Three-course dinner with wine pairings

Friday, April 29, 2022
6:00 pm – 11:00 pm

TERMINAL CITY CLUB
837 West Hastings Street
Parking can be found below the club or in other more affordable parking houses downtown

EARLY BIRD $225 ($250 AFTER APRIL 1)
A portion of the ticket price will be issued as a tax reciept

To order tickets, visit https://chnevents.org.

To become a corporate sponsor or to donate to the auction, please email Hege Bolthof Hoegler at hhoegler@childrensheartnework.org.