



The Brain Builders Lab was a joint initiative of the Canadian Centre on Substance Use and Addiction and the Alberta Family Wellness Initiative. Its aim was to move Brain Story science, which links childhood trauma to later health outcomes, into action. Between 2019 and 2021, participants in the Brain Builders Lab undertook projects to spread and embed Brain Story science in their communities. This case study along with the others in the series provides practical advice on how to develop and implement projects, along with project impacts and lessons learned.

## Developmental Trauma Action Alliance

### Brain Builders Lab Case Study

#### Project Team

- Kathy Soden, Manager, Permanency and Adoption Competency Training Program, Adoption Council of Ontario

#### Location

- Toronto, Ontario

### Introduction and Project Goals

Kathy Soden is the Manager of Training and Education at the Adoption Council of Ontario (ACO) and chairs the Developmental Trauma Action Alliance (DTAA), which she founded through the ACO in 2017. She brings her experiences as an adoptive mother to this work. The DTAA was launched to raise awareness about developmental trauma among professionals and families living with its impact. The DTAA has over 80 members, including professionals and people with living experience, and over 400 subscribers to its newsletter.

The Brain Builders Lab provided a new opportunity for Kathy to advance the work of both the DTAA and the ACO. In Kathy's experience, the Brain Story itself is an intervention that can help improve relationships between parents and children and between therapists and clients by creating a better understanding of the issues and reducing associated stigma. Through the Brain Builders Lab, Kathy aimed:

- To increase knowledge and understanding of Brain Story science among both professionals and parents; and
- To create additional backbone support for the DTAA's work to improve therapeutic and parent-child relationships and, ultimately, outcomes for adoptive families and their children.

#### DTAA/ACO Stakeholders

- Adoptive, kinship, foster and customary care parents and caregivers
- Adopted persons and those living on permanency journeys
- First and original families
- For DTAA, all those touched by early life or developmental trauma
- The professionals who work with these populations



## Knowledge Mobilization Activities

**Strategic planning:** In its early days, the DTAA invested in formulating a plan to move from awareness to action. The road map identified significant gaps in awareness among key groups, and Kathy used existing champions within the DTAA to help strategize on how best to approach them. The DTAA members then tapped their own networks and identified several opportunities to share information with key groups, primarily in health care.

**Targeted awareness-raising:** Kathy and the DTAA were strategic about choosing messengers for audiences that can be challenging to engage to ensure the information would be seen as credible. Psychiatrists and physicians were identified as key early target audiences, and they took care to have a psychiatrist present to other groups of psychiatrists or a physician to other physicians, while Kathy herself brought the knowledge to staff at the ACO. Whenever possible, people were encouraged to learn more by enrolling in the Brain Story Certification Course (BSCC) from the Alberta Family Wellness Initiative.

**Broad awareness-raising:** Kathy wrote an article about developmental trauma and the Brain Story that was published by the North American Council on Adoptive Children, an organization that has wide reach in both Canada and the U.S. She highlighted the Brain Builders Lab and BSCC in the DTAA newsletter, which reaches about 400 stakeholders, ran a social media campaign that encouraged people to take the BSCC, and referred to the Brain Story on the DTAA and ACO websites.

## Outcomes and Impact

**New resources:** One of the DTAA members has developed and is piloting a new developmental trauma screening tool to improve intake procedures for children’s mental health services, and another physician member has developed a five-minute video explaining to other physicians how to talk about adverse childhood experiences with their patients.

**Program change:** The ACO has started embedding knowledge about the Brain Story in their educational programs for adoptive parents, including role playing to illustrate how to respond to children’s difficult behaviours. All the resources being developed are focused on changing practice, whether for professionals or for parents.

**New partnerships and resources:** One of the DTAA members who works at the Centre for Addiction and Mental Health (CAMH) in Toronto received a grant to support research and knowledge mobilization in the areas of developmental trauma and resilience. As a result, a webinar on developmental trauma was released through CAMH’s ECHO webinar series, considerably expanding the reach and potential impact of the work among healthcare professionals.

**Shifting mental models:** Anecdotally, Kathy has heard reports of shifting attitudes, beliefs and reduced stigma among professionals about children and families accessing services, as well as better self-understanding on the part of parents of adoptive children. These shifts are the necessary precursors to behaviour and practice change and suggest that the work is having a positive impact.

### Nearly 1,600 people reached across 17 presentations:

- ACO staff, board
- ACO trainers, parent leads
- DTAA staff
- Thunder Bay FASD event attendees
- Toronto Catholic Children’s Aid Society trainees

### 10 webinars about ACEs, brain science, and developmental trauma presented to:

- FASD community stakeholders
- Ontario adoption professionals
- Foster parents
- Prospective adoptive parents
- Professionals at a complex trauma symposium
- North American Council on Adoptable Children conference attendees



### DTAA members driving outcomes and impact

- New screening tool: Leticia Gracia, Director, Institute of Childhood Trauma and Attachment, George Hull Centre for Families and Children
- New video: Dr. Bob Maunder, Chair in Health and Behaviour, Sinai Health; Professor, Deputy Psychiatrist-in-Chief and Head of Psychiatry Research, Department of Psychiatry, University of Toronto
- New partnerships and resources: Dr. Allison Crawford, Associate Chief, Outreach and Telemental Health; Medical Director, Ontario Psychiatric Outreach Program; Co-chair, ECHO Ontario Mental Health, CAMH; Associate Professor, Faculty of Medicine, University of Toronto; Adjunct Professor, Dalla Lana School of Public Health

## Lessons Learned and Next Steps

**Backbone support provides added value.** Although the work of the DTAA was already underway, the additional networking, learning opportunities and resources the Brain Builders Lab provided were valuable to Kathy as they gave her confidence that the DTAA's work was on the right track, taught her about evaluation and helped generate new ideas. Being part of a larger, national change process was exciting and motivating.

**Progress requires adequate funding.** Not all work can be done off the side of people's desks, and some resources, such as webinars, tool kits and screening tools, can require investment to turn them from ideas into reality. Kathy's largest barrier has been securing the necessary funds to support the many projects the DTAA would like to move forward with.

**A diverse group of early adopters and change agents can accelerate progress.** Kathy attributes her biggest success to the strength and commitment of the DTAA. The combination of professionals and those with lived experience has produced passion and commitment to the work. People leave their egos and agency hats at the door and are willing to work together for a common cause. The group also has the right mix of individuals and skillsets to create effective new tools and resources.

The DTAA has recently been working with youth to develop youth-centred journey maps that map the state of the current systems they interact with, along with a "desired future state" map of these systems. They have connected with [InsightFormation](#), a U.S. firm, and are using its adverse childhood experiences mapping resources to assist with this work. They are now in the process of disseminating the youths' messages and recommendations and looking for action among DTAA members. Both Kathy and the DTAA remain committed to the goal of spreading and embedding Brain Story science across the sectors that support adoptive families and will continue to look for new opportunities to do so in future.

## Resources

- CCSA impact video: [Developmental Trauma Among Adoptees](#)

ISBN 978-1-77178-916-5

© Canadian Centre on Substance Use and Addiction 2022



Canadian Centre  
on Substance Use  
and Addiction

CCSA was created by Parliament to provide national leadership to address substance use in Canada. A trusted counsel, we provide national guidance to decision makers by harnessing the power of research, curating knowledge and bringing together diverse perspectives.

CCSA activities and products are made possible through a financial contribution from Health Canada. The views of CCSA do not necessarily represent the views of Health Canada.