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CCSA Brain Builders Lab

March 4–5, 2019

Meeting Summary Report



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This document was published by the Canadian Centre on Substance Use and Addiction (CCSA).

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Production of this document has been made possible through a financial contribution from Health Canada. The views expressed herein do not necessarily represent the views of Health Canada.

This document can also be downloaded as a PDF at www.ccsa.ca

Ce document est également disponible en français sous le titre :

Labo Bâtisseurs de cerveaux du CCDUS, 4 et 5 mars 2019, Compte rendu de la réunion

ISBN 978-1-77178-567-9



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Acknowledgments

CCSA would like to thank the Alberta Family Wellness Initiative, specifically Marisa Etmanski, and Nancy Reynolds, for their support with the promotions campaign and strategic advice on organizing the Brain Builders Lab. We also thank all the experts, speakers, support staff and attendees of the Brain Builders Lab for their continued enthusiasm and commitment in mobilizing this important knowledge across the country.



Introduction

ACEs and Their Significance in Substance Use and Addiction

Early childhood experiences are important contributors to health outcomes across the lifespan. Adverse childhood experiences (ACEs), defined as negative, stressful, traumatizing events that occur before age 18, can increase the risk for negative health outcomes, including mental health and addiction. Research consistently shows a relationship between the number of ACEs experienced across a lifetime and risk for physical and mental health problems later in life. Because of this relationship, ACEs are viewed as an important upstream determinant of health, and an awareness of this relationship can strengthen public health approaches to prevention and treatment. To understand what causes this relationship it is important to understand how the brain develops and how experiences can influence neuro-development to ultimately shape health outcomes. This foundational information is a key knowledge competency for anyone working with people who use substances or are at risk of using substances, as it can inform the development of prevention and treatment programs that are effective and trauma-informed, and can help reframe perceptions around substance use as a health issue.

Adverse childhood experiences (ACEs)

- Typically grouped into three categories:
 - Abuse (physical, sexual, emotional)
 - Neglect (physical, emotional)
 - Household dysfunction
- Surprisingly common; a study of 17,000 participants showed:¹
 - Nearly 2/3 (64%) reported at least 1 ACE in their lifetime
 - Nearly 1 in 8 (12.4%) reported 4+ ACEs
- Dose-response relationship shows that the number of ACEs can predict risk of:
 - Chronic physical and mental health conditions
 - Health risk behaviours
 - Work and academic performance
 - Early death

The Brain Story

Despite its essential significance to public health, the relationship between ACEs, brain development and health outcomes is not widely understood. Moreover, few resources exist that are targeted toward individuals who can implement practices that reflect this information. The [Alberta Family Wellness Initiative](#) (AFWI) has addressed this gap by developing a suite of online educational resources, synthesizing decades of research for non-expert audiences. The resources are collectively called “The Brain Story” and include a website showcasing lay-accessible metaphors that explain key concepts, as well as a 30-hour in-depth certification course detailing Brain Story science. Completion of the Brain Story certification course is eligible for continuing medical education and professional development credits.

CCSA’s Brain Story Initiative

Beginning in 2018, The Canadian Centre on Substance Use and Addiction (CCSA) undertook a three-year initiative to bring AFWI’s resources to a national scale, allowing stakeholders across the country

1 Felitti, V.J., Anda, R.F., Nordenberg, D., Williamson, D.F., Spitz, A.M., Edwards, V., ... Marks, J.S. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults. *Vincent American Journal of Preventive Medicine*, 14(4), 245–258.



to access the science and apply it to policy, practice and public discourse. In Year 1 of the initiative, CCSA accomplished this through two activities:

1. **Promoting Brain Story certification** to spread foundational knowledge and advance professional development across relevant sectors (e.g., health, education, social services, justice); and
2. **Hosting the Brain Builders Lab**, a national forum and workshop bringing stakeholders together to develop initiatives that spread and embed the Brain Story in their communities.

The present report details events at the Brain Builders Lab held March 4–5, 2019, in Ottawa.

The Brain Builders Lab

In fall 2018, CCSA launched an extensive outreach and awareness campaign promoting the Brain Story certification course nationwide. The campaign incentivized registration for the course by offering registrants the opportunity to attend the Brain Builders Lab, which would include them in a growing network of champions and agents-of-change who are transforming policy, practice and public discourse around substance use and addiction (see [Appendix A](#), Promoting and Applying the Brain Story across Canada, for the concept note). The goal of the Brain Builders Lab was to build capacity and cross-sectoral connections to advance relevant fields in a way that is trauma-informed and grounded in science.





Selection of Participants

CCSA gathered expressions of interest to attend the Brain Builders Lab from August 2018 until November 30, 2018. Individuals who expressed interest were requested:

1. To agree to complete the certification course before the March 2019 Brain Builders Lab to ensure a common knowledge base at the event;
2. To demonstrate buy-in from their employer through a commitment agreement form to ensure the required time and resources would be made available; and
3. To send a brief summary outlining how they intended to use the Brain Story to ensure a broad range of ideas would be represented at the event and to facilitate assignment to work groups.

Over 150 individuals met these initial criteria. A selection process in December 2018 narrowed this field down to 65 invitees. The selection process focused on balancing geographical location, professional sector and potential impact of the submitted idea to ensure the broadest possible range of views and capabilities at the event.

The final group of 62 attendees (the “Brain Builders,” see [Appendix B](#)) represented:

- Nine provinces;
- Multiple sectors, including healthcare, public health, education, social work, government, child and family services, and justice and corrections; and
- A broad range of organizational levels ranging from frontline staff and program managers to the head of a national professional organization.

All had completed the online course and were Brain Story certified at the beginning of the event.

Event Agenda and Highlights

The full agenda is attached in [Appendix C](#), and biographies of all speakers, experts, mentors, facilitators and panelists in [Appendix D](#). Activities at the Brain Builders Lab were aimed at working with peers, experts and mentors to find concrete ways to spread and embed the Brain Story in different spheres of influence. To accomplish this goal, the Brain Builders worked in breakout groups to develop a work plan defining a group goal, alongside individual goals aimed at contributing to the group plan. These work plans are intended to guide the Brain Builders in mobilizing Brain Story knowledge over the next two years. In addition, the Brain Builders formed relationships with colleagues and decision makers who are champions for the cause and agreed to help catalyze change after the event.

Day 1, Morning: Setting the Stage and Mapping the Knowledge in the Room

The first morning was focused on showcasing the breadth of expertise available at the event, along with examples of what mobilizing the Brain Story could accomplish. Following an opening by Verna McGregor, Algonquin Elder and counsellor at Minwaashin Lodge, Rita Notarandrea, CEO, CCSA, and Dr. Theresa Tam, Chief Public Health Officer of Canada, provided welcoming remarks contextualizing the importance of the Brain Story within substance use and public health more broadly.



The Lab Guides

- Subject-Matter Experts:
 - Neuroscience
 - Lived and living experience, recovery
 - Indigenous considerations
 - Sex- and gender-based analysis
 - Health and child maltreatment
 - Knowledge translation and implementation
 - Monitoring and evaluation
 - Policy development
- Practice Experts:
 - Already embedding Brain Story science in their work
 - Enlisted to provide perspective on what works for different sectors
- Mentors:
 - Broad-based facilitators and enablers
 - Selected for their systems-level content and implementation expertise related to Brain Story science
 - Enlisted to support work groups over the two years of project implementation
- Breakout Group Facilitators:
 - Experienced in facilitating small work groups and familiar with content
 - Enlisted to structure group discussion, guide project plan development and liaise with experts, as needed

The rest of the morning introduced the “Lab Guides” and encouraged the Brain Builders to draw on their experience for inspiration and support. Lab Guides included eight subject-matter experts, four practice experts, four mentors, and eight breakout group facilitators. Both subject-matter and practice experts were available “on call” to assist the Brain Builders with different aspects of project plan development, as needed, after breaking into their work groups in the afternoon. Mentors were assigned to two groups each, and sat in on each workgroup for about half the breakout time.

The Lab Guides introduced themselves and explained how they could enrich the Brain Builders’ experience during an extensive “Meet the Experts, Meet the Mentors” session. Complementing this session was a keynote address from Dr. Michelle Gagnon, President, AFWI, and two deeper dives into subject-matter expertise. Dr.

Gagnon’s presentation focused on

development of the Brain Story and AFWI’s success in embedding and scaling access to it, concluding with examples of successful individual, organizational and systems change achieved by AFWI in recent years. Her presentation was followed by Gord Garner, Executive Director, Community Addiction Peer Support Association (CAPSA), who represented lived and living experience and discussed how the Brain Story destigmatized his perception of addiction and has fueled recovery efforts. The other deep dive was provided by Dr. Lorraine Greaves over lunch and focused on sex- and gender-based considerations the Brain Builders should keep in mind to ensure their efforts could be tailored in relevant and sensitive ways.

Day 1, Afternoon: Project Plan Development, Session 1 of 2

The afternoon session divided the 62 Brain Builders into eight work groups, established ahead of time based on commonalities in geographical location and vision for embedding the Brain Story in their work, information that was submitted during event registration. The eight groups are described in the next section of this report. Each work group was led by a facilitator who guided the group through the Mental Health Commission of Canada’s [Innovation-to-Implementation \(I2I\)](#) process as a means of structuring their thought process and project planning. Each group was also joined by their assigned mentor for about half the breakout time (each mentor guided two groups). All work groups had “on-call” access to the subject-matter and practice experts depending on their needs during project plan development.



Day 1 ended with a networking reception providing refreshments and an opportunity to connect more informally with other Brain Builders and experts.

Day 2, Morning: Project Plan Development, Session 2 of 2

Before re-grouping into their work groups to complete the I2I process on Day 2, the Brain Builders gathered for breakfast and a panel session aimed at inspiring their project plan development and showcasing concrete actions they could take. In this session the four practice experts gave brief presentations on their specific experience embedding the Brain Story science in their work, including their knowledge mobilization strategies, what worked and what did not, and recent outcomes:

- Annette Bruised Head described her work on Trauma-Informed School Communities, which has shifted a feeling of “they won’t” to an understanding of “they can’t yet” and has led to development of a new concept-based curriculum;
- Jennifer Kuntz described how Alberta Health Services Child and Adolescent Addiction, Mental Health, and Psychiatry Program started integrating the ACEs questionnaire into their work and developed a new conceptual model of care;
- Diana Lowe described how the Brain Story has helped reform the family justice system in Alberta to create a culture shift away from adversarial legal responses towards making supports available to families; and
- Dr. Francesco Mosaico described how the Brain Story has changed practices at a health centre serving marginalized and vulnerable inner-city residents.

The Brain Builders then reconvened into their groups for the rest of the morning to finalize their project plans and prepare for the afternoon’s advisory panel session. In addition to completing the steps in the I2I guide, each group created a single PowerPoint slide to facilitate a five-minute presentation to the advisory panel for high-level strategic feedback. Each presentation contained the group theme (overarching goal), relevant stakeholders, action plans and timelines, resources needed and anticipated barriers, and anticipated impact.



Day 2, Afternoon: Group Presentations and Advisory Panel

In the final Brain Builders Lab session, an advisory panel of high-level decision makers was convened to provide feedback and suggestions on each group's presentation. The panel contained some of the subject-matter and practice experts, but also four new panelists representing a cross-section of organizational levels (from CEO/ED to managerial) and reach (from local to national). Panelists were encouraged to ask the teams questions about their learnings and their implementation plans (i.e., is this project feasible, sustainable, meaningful to stakeholders, aligned with policy priorities, etc.), provide strategic advice on how the project would need to be pitched at their level and, if appropriate, offer concrete resources that could lend themselves to project implementation. Each presentation lasted five minutes, followed by 10 minutes of panel feedback.

Rita Notarandrea and Elder Verna McGregor then closed the event with final remarks.

Work Groups and Themes

The following sections provide summaries of the eight groups of Brain Builders. Each group developed a common, overarching group goal, within which each group member (or team of group members) developed an individual action plan supporting the group goal, to be implemented over the two years following the event. The numbering of the groups is arbitrary and does not reflect a rank order.



Group 1: Ottawa Advocacy to Invest in Early Childhood

Group 1 aims to spread and embed the Brain Story into the services that support young children (birth to six years old and prenatal) within Ottawa in order to improve system-wide practice and policy from within. The group consists of members of early learning organizations and networks, including Growing Up Great and Ottawa Public Health.

Group 2: Atlantic Provinces

Group 2 is a cross-sectoral group from the four Atlantic provinces (N.B., N.L., N.S. and P.E.I.), spanning health, education, justice and social services. Their aim is to develop an Atlantic “hub” to leverage connections, tools and successes across the region and across sectors, with a focus on service provider and community education and influencing policy and decision makers.

Group 3: Northern, Rural and Remote

Group 3 works across sectors and across the country to spread and embed the Brain Story into the work and practice of people living in northern, remote and rural communities in order to enhance community wellness. They will adapt the Brain Story to be relevant to their communities and address some of the unique challenges faced by them, with the key message that building resilience is possible.

Group 4: Substance Use

Group 4 is characterized by a common focus on individuals already using substances, with group members including members of local drug strategies, Ontario Provincial Police and peer support/recovery organizations. Their aim is to spread and embed the core elements of the Brain Story into the practices or work of community service providers in order to improve individual and community outcomes.

Group 5: Educating Current and Future Healthcare and Social Service Providers

Group 5 consists of medical and nursing school instructors and members of professional associations including the Canadian Paediatric Society, the Canadian Association of Social Workers and the Canadian Mental Health Association. Their aim is to embed the Brain Story into post-secondary and professional development curricula.

Groups 6 and 7: Promotion and Prevention

Due to the large number of Brain Builders proposing promotion and prevention plans, this group was split into two smaller groups. The groups include members of regional public health units, municipal governments and provincial health service networks. They aim to embed the Brain Story into the practices of health, education and social service providers in order to promote healthy practices in child and youth development, improve professional practices and enhance population health.

Group 8: Services for At-risk Youth and Families

Group 8 is characterized by a common focus on individuals and families facing barriers to social, emotional and academic success, including as a result of potentially traumatic adoption and family law experiences. The group includes organizations such as the Salvation Army and Big Brothers, Big Sisters, and their goal is to spread and embed the Brain Story into the lives of individuals and families and those who support them in order to improve health, social and educational outcomes.



Evaluation and Lessons Learned

CCSA collected information on the success and impact of the Brain Builders Lab through several means, including a survey distributed at the end of the event, debriefing interviews with facilitators and mentors, and analysis of social media statistics.

Post-event Survey

At the end of the Brain Builders Lab, CCSA distributed a post-event survey in print and online, asking attendees to rate their satisfaction with individual learning, networking and knowledge exchange opportunities, and event logistics. The overall response rate was 68.6% (59/86 surveys returned).

Survey Section 1: Impact of the Workshop

Individual Learning

Most respondents reported an increase in awareness and understanding of different applications (93%) and impacts (98%) of the Brain Story as a result of attending the Brain Builders Lab. 91.5% also agreed that their confidence to apply the Brain Story to their work had increased. Only 59% agreed that their ability to measure the progress of their projects had increased. This lower score is



likely because most of the time was spent on building the project plans, leaving little time to prepare to evaluate their implementation.

Free-form comments in this section focused on:

- Explaining that the event did not increase understanding of substance use or perceptions of those with substance use issues because they were already high;
- Expressing increased understanding of how to apply the Brain Story to practice;
- Noting the shortage of time for evaluation and performance measurement; and
- Commenting on the value of group work and facilitators.

Networking and Knowledge Exchange

A high proportion of respondents (95%) felt they contributed to meaningful conversation and collaborative work. Fewer felt they were able to network with other participants (88%) or receive meaningful feedback from the advisory panel (88%). The lowest level of agreement (85%) was with feeling they had the opportunity to interact with experts.

Lessons

- The event was successful in increasing awareness, understanding, and confidence in moving Brain Story knowledge into practice.
- Breakout group work was a successful way to foster fruitful conversation.
- Presence or “on-call” availability of experts is not enough; future events should increase unstructured networking time or offer different opportunities for interaction with experts.
- Event follow-up should prioritize discussing evaluation and performance measurement with Brain Builders and creating opportunities for interaction.

Survey Section 2: Satisfaction with the Workshop

Workshop Agenda and Group Work

Over 98% of respondents gave an overall rating of “satisfied” or “very satisfied” with the event (average score 4.7/5). The highest-rated agenda items were the Day 1 morning session, particularly the presentation on the Brain Story’s impact on lived and living experience and recovery (rated 4.83/5). Respondents also indicated a high level of satisfaction (97%) with the networking reception. The agenda items with the lowest satisfaction ratings were the group presentations and advisory panel sessions (88% satisfied, rated 4.47/5) and the lunch and learn (86% satisfied, rated 4.54/5). Specific to group work, respondents noted the highest level of satisfaction with coaching from facilitators (95%) and opportunities for conversation (95%). The lowest level of satisfaction was with development of action plans (87.5% satisfied, rated 4.39/5).

Free-form comments in this section focused on:

- Accessing mentors, facilitators and experts (although an equal number of comments noted they enjoyed access vs. not enough access);
- Noting the shortage of time for group work and discussion, and feeling overwhelmed with and unclear on the scope and expectations;
- Appreciating networking and knowledge exchange opportunities;
- Appreciating specific facilitators, mentors and experts; and



- Appreciating the event’s approach (e.g., multisector, cross-national nature).

Other Elements

100% of respondents enjoyed the venue. Pacing of the days received the lowest satisfaction ratings (86% satisfied, rated 4.37/5).

Lessons

- The event was successful in meeting attendees’ expectations; overall satisfaction is among the highest for CCSA events.
- Attendees in large part enjoyed the agenda, and the opportunities for learning and expert access within it.
- Trying to pack in too many elements (including over lunch) makes for uncomfortable pacing, and key aspects (e.g., project plan development) are not sufficiently addressed. Future events should try to accomplish fewer things, or extend over more days to allow more time for processing and clarification.

Facilitator and Mentor Debriefing

Day 1 Summary

At the end of Day 1, the facilitators and project staff submitted impressions and thoughts on the day to be included in the following morning’s “Day 1 Recap.” The themes that emerged included:

- Morning session:
 - Impressive expertise in the room and insightful comments from speakers;
 - Synergy of the Brain Story with new and ongoing initiatives from federal and more local governments; and
 - General sentiment of surprise that this information was not already more widely known or communicated in different settings.
- Afternoon session:
 - Group work and applying the I2I framework were helpful in shaping more concrete and nuanced ideas;
 - Some groups were naturally quite cohesive; others took longer to find common ground, but their diversity might actually be an asset;
 - Group work was important in forming new cross-sectoral connections and breaking through the silos; and
 - Group members recognized that work within their individual organizations and sectors would contribute to larger collective impact.

Post-event Debriefing

Follow-up calls with the facilitators and mentors revealed themes that dovetailed with attendees’ comments. These included:

- Feeling rushed in guiding project plan development, and unable to address all group member concerns given the timeframes;
- Wanting to give group members more “time to breathe”;



- Balancing group member contributions, finding common threads and meeting everyone's needs in defining a group goal;
- Timing of expert access and drawbacks of “on-call” availability of experts, noting that groups were not ready to access experts on Day 1 and too eager to complete their work on Day 2 to take full advantage;
- Questioning the utility or at least format of the group presentation and advisory panel session (Day 2 afternoon) as it did not feel as engaged as the rest of the agenda;
- Emphasizing the value of face-to-face team-work;
- Emphasizing the importance of building on already developed tools and collaborating on developing new tools so as not to reinvent the wheel;
- Communicating that group members seemed highly satisfied and got a lot out of the event;
- Group members wanting to connect with other Brain Builders and share resources after the event; and
- Feeling impressed with and proud of Brain Builders' accomplishments in a short amount of time.

Lessons

- Same lessons as above about event timing.
- Not all groups will be naturally cohesive; in future events, prepare for instances where finding common ground may be a challenge.
- Rethink the expert access model; they may be underused while groups are still finding their feet, and compete with demands on time later.
- Rethink the advisory panel format; consider smaller groups instead of a big room presentation.

Social Media

The Brain Builders Lab saw some of the highest engagement numbers in the history of CCSA events. The event's opening session, which was live streamed via Facebook Live, garnered 597 views with a total of 924 minutes watched. Combining the pre-event and live social media activities, engagement reached over 40,500 impressions (measuring how many times the content was displayed).

Lessons

- There is an enthusiastic and engaged community who, despite being unable to participate in the event, is eager to be involved. The community of practice should be set up as soon as possible to capture their contributions.



Next Steps

Community of Practice

To address the Brain Builders' desire to connect and share resources, CCSA is developing a community of practice platform. This platform will serve a dual purpose:

1. To address the networking and project implementation needs of the eight groups by creating a space for conversation and access to resources; and
2. To allow engaged stakeholders who were not able to attend the Brain Builders Lab to connect with the Brain Builders, align with one (or more) projects of interest, and offer additional ideas, connections and implementation support.

We expect that the latter segment of the community will be significant, given that we received far more expressions of interest than we were able to extend invitations. The social media engagement during the event also indicates the same.

Quarterly Check-in Calls

To support implementation of the Brain Builders' project plans, we are planning quarterly calls between each group, their mentor (for strategic guidance) and a CCSA knowledge broker (for knowledge mobilization support). The first of these calls will take place throughout June 2019. In response to the Brain Builders' request for more evaluation and performance measurement support, this first call will be joined by evaluation experts and will focus on completing and finalizing a project tracking and evaluation template provided by CCSA, which will be used to structure their reporting during the two years of implementation.

Follow-up Event Scheduled for 2021

Finally, we plan to organize a follow-up event at the end of the two-year implementation period, reconvening the Brain Builders to assess the impact of their projects. We may also organize a webinar at the one-year mark (2020) to share impacts achieved at the halfway point.



Appendix A: Concept Note: Promoting and Applying the Brain Story across Canada

Summary

The Canadian Centre on Substance Use and Addiction (CCSA) is looking for champions, innovators and agents-of-change across Canada who:

- Want to gain in-depth knowledge about the relationship between childhood adversity, brain development, and substance use and addiction; and
- Have ideas about spreading and embedding this knowledge in their work in order to change perceptions around addiction and improve associated policy and practice.

The Project

The Brain Story is a story about how early childhood experiences shape our brains to influence lifetime health. Part of that story describes how adverse childhood experiences (ACEs) can influence risk for later physical and mental illness, including addiction. The Alberta Family Wellness Initiative has developed an online resource that presents Brain Story science to non-experts, including an in-depth certification course eligible for professional accreditation and continuing medical education.

CCSA aims over the next three years to promote awareness and understanding of Brain Story science across Canada, and to facilitate its application to policy, practice and public awareness through two ongoing activities:

1. **Promoting Brain Story certification** to spread foundational knowledge and advance professional development across sectors linked with child and family welfare and substance use; and
2. **Hosting the Brain Builders Lab**, a pair of national events that bring together champions, innovators and agents-of-change to develop initiatives in their communities that incorporate Brain Story learning. Attendees will be required to complete the Brain Story certification ahead of the event.

Event attendees will:

- **Access expertise**, including scientific expertise from leading researchers, as well as practical expertise from Brain Story course alumni successfully implementing projects that apply the science;
- **Engage and exchange ideas** with like-minded individuals from across the country and sectors;
- **Develop project plans** for their ideas through facilitated group work, and obtain feedback from national leaders and people with lived experience; and
- **Receive implementation support** from CCSA over the following two years.

The Brain Builders Lab is planned for March 2019 and will take place over two days in Ottawa. CCSA will provide room and board, but attendees will be responsible for their own travel. A follow-up event will reunite attendees after two years to assess the success and impact of their projects.

Brain Story certification is a prerequisite for attending the Brain Builders Lab. Certification entails 30 hours of self-paced online coursework, accessible at www.albertafamilywellness.org/training. You **must** register using the following link (rather than through the course website) to be eligible for the Brain Builders Lab: <https://training.albertafamilywellness.org?KeyName=CCSAEnroll>.



Target audiences for this project span service providers and policy advisors in the health, education, social work, housing, justice, corrections, children and youth, and Indigenous sectors, including:

- Physicians, nurses, pre- and perinatal care providers
- Early childhood educators
- Social workers
- Mental health and addictions service providers
- Law enforcement and criminal justice professionals
- Families, parents and primary caretakers
- First Nations, Métis and Inuit community leaders and Elders
- Staff in child welfare organizations
- Staff in community and housing organizations
- Workplace health and wellness program administrators
- Media professionals
- People with lived and living experience

We are looking for innovative individuals who are interested in gaining in-depth scientific knowledge on the connections between adverse childhood experiences and addictions, and who are positioned to spread and apply this knowledge in their sphere of influence. If this sounds like you or someone you know, please contact Doris Payer by emailing brainstory@ccsa.ca.

Background

Early childhood experiences are important contributors to health outcomes across the lifespan, and adverse childhood experiences (ACEs) can contribute to substance use later in life. ACEs include abuse, neglect and household dysfunction, and they are surprisingly common. To understand the complexities of this relationship and to identify appropriate points for intervention, we need to understand how adverse childhood experiences can influence brain development and shape health outcomes. This foundational information is a key knowledge competency for anyone working with families, youth and people who use substances, yet it is not widely understood and few resources present this information in a form easily digestible by the public.

The Alberta Family Wellness Initiative addressed this gap by developing a suite of online educational resources, synthesizing decades of research that experts agree is useful for professionals, policy makers and citizens to understand. The resources include an online course providing free, in-depth training by more than 30 leading experts in neurobiology and mental health. Taking the course results in certification in Brain Story science and eligibility for professional and continuing education credits.

The present project aims to bring the Alberta Family Wellness Initiative resources to a national scale, allowing stakeholders across the country to access the science and apply it in their own communities. Completing the Brain Story certification will prepare Brain Builders Lab attendees to fully participate in the event's workshop sessions by ensuring a foundational knowledge base, while event activities will support the development of community-based initiatives that incorporate Brain Story learning.

The ultimate goal of this project is to build capacity to address childhood adversity and risk for substance use and addiction, and to increase awareness of substance use as a public health issue, reduce stigma, and change policy and practice accordingly.



Appendix B: Brain Builders Lab Attendees

The following positions, organizations, provinces and sectors were represented among the 62 Brain Builders.

Positions	Organizations	Provinces	Sectors
Advanced Practice Leader	Adoption Council of Ontario	Alberta	Childcare and Early Childhood Education
Associate Medical Officer of Health	Alberta Health Services	British Columbia	Primary and Secondary Education
Barrister and Solicitor	Bayview Glen Independent School	Manitoba	Post-secondary Education
Behaviour Consultant	Big Brothers Big Sisters	New Brunswick	Government
Career Counsellor	Canadian Association of Social Workers	Newfoundland and Labrador	Health Care
Chief Nursing Officer	Canadian Mental Health Association	Nova Scotia	Justice
Child and Youth Development Worker	Canadian Paediatric Society	Ontario	Social Work
Clinical Coordinator	Growing Up Great – Ottawa Child and Youth Initiative	Prince Edward Island	Other
Clinical Director	Citizens First	Quebec	
Clinical Social Worker	City of Thunder Bay		
Community Connector	Community Addictions Peer Support Association		
Community Developer	Consortium pour les élèves du nord de l'Ontario		
Community Nurse	EBUS Academy		
Crime Prevention Coordinator	Emily Murphy Non-Profit Housing Corporation		
Developmental Interventionist	Government of Newfoundland and Labrador		
Director, Communications and Knowledge Translation	Government of Prince Edward Island		
Director, Children and Family Services	Guelph Community Health Centre		
Division Director	Health Nexus		
Division Manager	Horizon Health Network		
Drug Court Case Manager	IWK Health Centre		
Drug Strategy Coordinator	Langara College		
Drug Strategy Manager	Niagara Region Public Health		
Early Childhood Educator	Nova Scotia Early Childhood Development Intervention Services		
Early Learning Specialist	Nova Scotia Health Authority		
Education Specialist	Ontario Ministry of Children, Community and Social Services		
Family Support Coordinator	Ontario Provincial Police		
Founder and Creative Director	Open Doors for Lanark Children and Youth		
Infant and Child Development Worker	Ottawa Public Health		
(Mental) Health Promotion Consultant	Parent Resource Centre		
(Mental) Health Promotion Coordinator	Pinecrest Queensway Community Health Centre		
(Mental) Health Promotion Facilitator	Regional Municipality of Durham		
(Mental) Health Promotion Specialist			
Nurse Educator			



Positions	Organizations	Provinces	Sectors
Nurse Practitioner	Regional Municipality of York		
Peer Support Volunteer	Rideauwood Addiction and Family Services		
President	Salvation Army		
Probation Officer	Simcoe County District School Board		
Professor	Simcoe Muskoka District Health Unit		
Program Consultant	Sole Practitioner Law Firm		
Program Development Analyst	Taking Charge! Inc.		
Program Manager	Valley Community Services		
Project Manager	Vanier College		
Provincial Constable	Wellington-Dufferin-Guelph Public Health		
Psychotherapist	YMCA		
Public Health Nurse			
Public Health Nurse Manager			
Research Coordinator			
Social Worker			
Special Education Case Manager			



Appendix C: CCSA Brain Builders Lab Agenda

A forum and workshop to move Brain Story knowledge into action

March 4–5, 2019

Westin Hotel Ottawa

Governor General Ballroom I/II

Day 1

From 7:30 a.m. Registration (Governor General Ballroom I)

8:00–8:30 a.m. *Breakfast*

A.M. Session Setting the Stage and Mapping the Knowledge in the Room

8:30–9:00 a.m. Welcome and opening remarks

- Moderator: Glenn Brimacombe, VP, Strategic Partnerships and Priorities, CCSA
- Verna McGregor, Algonquin Elder and Counsellor, Minwaashin Lodge
- Rita Notarandrea, CEO, CCSA
- Dr. Theresa Tam, Chief Public Health Officer of Canada

9:00–10:00 a.m. Brain Story background and impact to date

- Dr. Michelle Gagnon, President, Alberta Family Wellness Initiative (AFWI)

10:00–10:15 a.m. Brain Story impact on lived and living experience and recovery

- Gord Garner, Executive Director, Community Addiction Peer Support Association (CAPSA)

10:15–10:30 a.m. *Break*

10:30–12:00 p.m. Meet the experts

Subject-Matter Experts:

- Annette Bruised Head, Naato'saakii, Division Principal for First Nations, Metis and Inuit Education, Holy Spirit Catholic School Division — *Indigenous considerations (also Practice Expert)*
- Debbie Curtis, Mental Health and Addiction Consultant, Department of Health and Community Services, NL — *policy development*
- Gord Garner, CAPSA— *lived and living experience and recovery*
- Lorraine Greaves, Senior Investigator, Centre of Excellence for Women's Health — *sex and gender*



- Karolina Kaminska, Evaluation and Performance Measurement Analyst, CCSA — *monitoring and evaluation*
- Dr. Zachary Patterson, Assistant Professor, Carleton University — *neuroscience*
- Dr. Nicole Sherren, Scientific Director, AFWI — *neuroscience*
- Dr. Purnima Sundar, Director of Knowledge Mobilization, Ontario Centre of Excellence for Child and Youth Mental Health — *knowledge translation and implementation*
- Dr. Michelle Ward, Division Head, Child and Youth Protection, Children's Hospital of Eastern Ontario; Associate Professor, University of Ottawa — *health and child maltreatment*

Practice Experts:

- Annette Bruised Head, Naato'saakii
- Jennifer Kuntz, ACE Project Facilitator, Alberta Health Services, Child and Adolescent Addiction, Mental Health and Psychiatry Program
- Diana Lowe, QC, Executive Counsel to the Chief Justice of the Court of Queen's Bench of Alberta; Co-Lead, Reforming the Family Justice System
- Dr. Francesco Mosaico, Medical Director, Boyle McCauley Health Centre

Meet the Mentors:

- Karen Ferguson, Consultant
- Marg King, Consultant
- Nancy Reynolds, Consultant
- Arlene Weidner, Consultant

12:00–1:00 p.m.

Lunch and Learn: Sex- and gender-based analysis

- Dr. Lorraine Greaves, Senior Investigator, Centre of Excellence for Women's Health

P.M. Session

Project Plan Development, Session 1 of 2 (break-out rooms)

1:00–3:00 p.m.

Facilitated group work

- 1 Facilitator per group (see facilitator list below)
- Experts available for input as needed
- Mentors available for ½ of session (2 groups per Mentor)

3:00–3:15 p.m.

Break

3:15–5:00 p.m.

Facilitated group work continued

5:00–7:00 p.m.

Networking Reception (Governor General Ballroom foyer)



Day 2

8:00–8:30 a.m. *Breakfast*

A.M. session Project Plan Development, Session 2 of 2

8:30–8:40 a.m. Welcome back and brief Day 1 recap (Governor General Ballroom I)

8:40–9:30 a.m. Practice Expert perspectives: Practical advice to inspire group work

- Moderator: Dr. Nicole Sherren, AFWI
- Annette Bruised Head, Naato'saakii
- Jennifer Kuntz
- Diana Lowe, QC
- Dr. Francesco Mosaico

9:30–9:45 a.m. *Break*

9:45–12:00 p.m. Facilitated group work (break-out rooms)

- Groups finalize project plans and prepare for presentations

12:00–1:00 p.m. *Lunch*

P.M. session Group Presentations and Advisory Panel (Governor General I)

1:00–1:15 p.m. Introduction to advisory panel of policy, practice and thought leaders

- Moderator: Glenn Brimacombe, CCSA

Panelists:

- Dr. Michelle Gagnon, President, AFWI
- Dr. Rachel Gouin, Executive Director, Child Welfare League of Canada
- Emily Gruenwoldt, CEO, Children's Healthcare Canada
- Dr. Pamela Ponik, Senior Manager, Prevention of Problematic Substance Use, Centre for Health Promotion, Public Health Agency of Canada
- Debbie Curtis, Mental Health and Addiction Consultant, Department of Health and Community Services, Newfoundland and Labrador
- Dr. Kim Corace, Director, Clinical Programs and Research, Substance Use and Concurrent Disorders, Royal Ottawa Mental Health Centre
- Janath Vesna, Manager, National Programs, Boys and Girls Clubs of Canada

1:15–2:00 p.m. Group presentations (15 min each: 5' presentation + 10' feedback)

- First 3 groups present project plans to panel and fellow attendees
- Panel provides feedback to ensure projects are feasible, meaningful and aligned with policy priorities

2:00–2:15 p.m. *Break*

2:15–3:00 p.m. Group presentations continued (3 groups)

3:00–3:15 p.m. *Break*

3:15–3:45 p.m. Group presentations continued (2 groups)

3:45–4:00 p.m. Wrap-up, next steps, and closing remarks

- Rita Notarandrea, CEO, CCSA
- Verna McGregor, Algonquin Elder and Counsellor



Your Lab Guides

* **Subject-Matter Experts** are individuals with expertise in different areas relevant to project plan development. They will be available to assist work groups on an as-needed basis.

* **Practice Experts** are individuals who are already embedding Brain Story science in their work, and who have practical experience and an awareness of what works and what does not for different sectors and stakeholders. They will be available to the working groups as needed (like Subject-Matter Experts) and also speak at the beginning of Day 2 to inspire and give practical advice to attendees.

* **Breakout Group Facilitators** are individuals from a mixture of backgrounds who share expertise in knowledge translation and facilitating small work groups. They will structure the discussion among the work group members, guide project plan development and liaise with Experts as needed.

* **Mentors** are broad-based facilitators and enablers around mobilizing the Brain Story, with systems-level content and implementation expertise related to the brain science. Mentors will be available to the groups over the two years of implementation following the event.

Breakout Group Facilitators:

- Dr. Bryce Barker, Knowledge Broker, CCSA
- Alexa Bol, Knowledge Broker, Mental Health Commission of Canada
- Dr. Jaime Brown, Research Coach, Ontario Centre of Excellence for Child and Youth Mental Health
- Rachel McLean, Senior Project Officer, Canadian Public Health Association
- Claire Rykelyk-Huizen, Knowledge Broker, CCSA
- Kiran Somjee, National Priority Advisor, CCSA
- Becky van Tassel, Training Centre Manager, Centre for Sexuality
- Angela Yip, Knowledge Broker, Centre for Addiction and Mental Health

Please remember to complete and submit your event evaluation form.



Appendix D: Brain Builders Lab Biographies

Plenary Speakers

Glenn Brimacombe, Workshop Facilitator and Master of Ceremonies

Glenn Brimacombe develops strategic partnerships with stakeholders to advance research, policy and practice on services to address substance use in Canada. Before joining the Canadian Centre on Substance Use and Addiction (CCSA) in 2018, Glenn was the CEO of the Canadian Psychiatric Association for almost five years and before that president and CEO of the Association of Canadian Academic Healthcare Organizations for over a decade. He has also worked for the Ontario Medical Association, the Canadian Medical Association and Health Canada, and was the inaugural director of health programs at the Conference Board of Canada. Glenn has served as a volunteer as co-chair of Health Action Lobby, a director on the board of the Royal College of Physicians and Surgeons of Canada and as chair of the Science Media Centre of Canada. He holds a BA and an MA in economics, both from the University of Ottawa.

Elder Claudette Commanda, Opening and Closing Remarks

Elder Claudette Commanda, an Algonquin Anishinabe from Kitigan Zibi Anishinabeg First Nation, has dedicated her career to promoting First Nations rights, history and culture. Elder Commanda is a University of Ottawa alumna, having graduated from the Faculty of Arts (1993) and the Faculty of Law, Common Law Section (1997). She was inducted into the Common Law Honour Society in 2009. A devoted and inspiring mentor, Elder Commanda has taught in the University of Ottawa's Institute of Women's Studies, Faculty of Law, Faculty of Education and Aboriginal Studies Program, teaching courses on First Nations women, native education, First Nations people and history, Indigenous traditions, and decolonization. She is the executive director of the First Nations Confederacy of Cultural Education Centres, and has previously served on the board of governors for the First Nations University of Canada. She has served on the Kitigan Zibi band council on three separate occasions.

Michelle Gagnon Keynote Speaker, Advisory Panelist

Michelle Gagnon is president and CEO of the Palix Foundation and Alberta Family Wellness Initiative, adjunct assistant professor, Cumming School of Medicine, University of Calgary, Department of Community Health Sciences, and member of the Canadian Institutes of Health Research (CIHR), Institute Advisory Board on Population and Public Health. Before joining the Palix Foundation in 2011, Michelle worked in a variety of prominent organizations with a primary focus on research impact and knowledge mobilization to improve health and well-being outcomes for all. Such organizations include CIHR, the Policy Research Initiative in the Privy Council Office and Strategic Clinical Networks with Alberta Health Services. She is active in the community as a member of boards and committees for local, national and international organizations. Michelle is a social scientist with an interdisciplinary doctoral degree in population health, a Masters of Business Administration and undergraduate degrees in liberal arts and nursing. Her research interests focus on public policy as a determinant of population health and on the policymaking process. She is a member of the Institute of Corporate Directors (ICD). She completed the ICD-Rotman Directors Education Program in September 2018 and obtained the ICD.D designation in November 2018.



Rita Notarandrea, Opening and Closing Remarks

Rita Notarandrea, M.H.Sc., C.H.E., has a passion for improving the health of Canadians. She became the Chief Executive Officer for the Canadian Centre on Substance Use and Addiction (CCSA) in 2015 and under her leadership CCSA's work has helped reduce alcohol- and drug-related harms for Canadians. Rita's expertise is in demand from all levels of government and from stakeholders. She is driven by the need to increase the public dialogue on substance use, given the significant toll it takes on the lives of people in our communities and the health, social and economic impact it has on our society. Rita has demonstrated her dedication to Canadian health care through the senior roles in which she has performed throughout her career. Prior to joining CCSA, she was Chief Operating Officer of the Royal Ottawa Hospital. She also serves as a member of the Clerk of the Privy Council's Contact Group on Mental Health. Rita holds degrees from Carleton University and the University of Toronto, where she earned a master's degree in health sciences and health administration.

Theresa Tam, Opening Remarks

Dr. Theresa Tam became Canada's Chief Public Health Officer in 2017. She is a physician with expertise in immunization, infectious disease, emergency preparedness and global health security. She obtained her medical degree from the University of Nottingham, and completed her paediatric residency at the University of Alberta and her fellowship in paediatric infectious diseases at the University of British Columbia. Theresa has held senior leadership positions at the Public Health Agency of Canada and during her 20 years in public health she provided technical expertise and leadership on initiatives to improve communicable disease surveillance, enhance immunization programs, strengthen health emergency management, and laboratory biosafety and biosecurity. She has played a leadership role in Canada's response to public health emergencies including severe acute respiratory syndrome, pandemic influenza H1N1 and Ebola. Theresa has served as an international expert on a number of World Health Organization committees and has participated in multiple international missions.

Lab Guides

Bryce Barker, Work Group Facilitator

Bryce Barker is a knowledge broker at the Canadian Centre on Substance Use and Addiction (CCSA), a non-profit organization based in Ottawa that provides national leadership and research to mobilize collaborative efforts to reduce the harm of alcohol and other drugs on society. He works with colleagues to promote the use of evidence in fields related to substance use and addiction, specifically focusing on alcohol, as well as alcohol and young adults. Bryce earned his PhD in human kinetics with a specialization in at-risk youth programs and positive youth development from the University of Ottawa in 2014. Before joining CCSA, Bryce worked as a knowledge broker at the Ontario Centre of Excellence for Child and Youth Mental Health and as an evaluation coordinator at the Centre for Addiction and Mental Health.

Alexa Bol, Work Group Facilitator

A knowledge broker with the Mental Health Commission of Canada (MHCC), Alexa Bol has a background as a community development professional and has worked over the years to support families and children in a variety of capacities in local and international contexts. In Canada, she has facilitated the engagement of families and communities in building family-centred service systems alongside the Child and Youth Network in London, Ontario, and as a part of the Oakville Parent-Child Centre in Oakville, Ontario. Alexa is also experienced in the field of international development,



working with children and families in Africa and the Caribbean to increase access to education and support services. Having started with MHCC in October 2018, Alexa is excited to use her skills in facilitation and engagement in knowledge translation and mobilization and strongly believes in the mission and purpose of the MHCC.

Jaime Brown, Work Group Facilitator

Jaime Brown brings her expertise in community mental health, research, evaluation and program design, and her experience as a consultant, educator and facilitator to her role as research coach at the Ontario Centre of Excellence for Child and Youth Mental Health. Jaime earned her PhD in applied social psychology (University of Guelph), focusing on social justice issues and access to publicly funded health care in Canada. She has 15 years of experience working, regionally and nationally, in the non-profit and public sectors on issues related to health, mental health and addictions services, child and youth development, disability supports and cross-sectoral community interventions. Jaime's research has won awards from the Canadian Institutes for Health Research and the U.S. National Council on Family Relations. She is passionate about community engagement and knowledge mobilization, and was involved in developing the Community Engaged Scholarship Institute at the University of Guelph.

Annette Bruised Head, Practice Expert, Subject-Matter Expert

Annette Bruised Head, Naato'saakii, is currently the division principal for Holy Spirit Roman Catholic School District. Her role is to provide support and professional development for First Nations, Metis and Inuit education and programming for all staff and students of the district. She was involved with facilitating awareness of the Brain Story Certification in her roles with Kainai Board of Education. In the last year, she became involved in providing direct support to Indigenous staff in aligning cultural knowledge and the Brain Story Certification. She is very excited to be a part of the Brain Story team at the system level in developing and embedding the core story in the wellness curriculum for Grade 10 and Grade 6, which will be delivered in the spring of 2019.

Debbie Curtis, Subject-Matter Expert, Advisory Panelist

Debbie Curtis is a mental health and addictions consultant with the Newfoundland and Labrador provincial department of Health and Community Services. Her main focus area is substance use and addictions. Previously, she worked as an addictions counsellor in St. John's and as a disability management consultant. She has also worked in the human resources field in learning and development, HR policy development, and respectful workplace harassment investigations. Debbie is a registered social worker and has a Bachelor of Social Work and a Masters of Business Administration from Memorial University. She completed the Brain Story certification and has identified several groups that would benefit from this program. Debbie has been actively promoting the Brain Story in Newfoundland and Labrador since she first heard about it in 2017.

Gord Garner, Subject-Matter Expert

Gord Garner has turned his more than 38 years of substance use disorder into a quest for compassionate, community-based care for those living with addiction. As a peer advocate, Gord is the executive director of the [Community Addictions Peer Support Association](#). He has been the chair of Recovery Day Ottawa from 2015 until 2019. He is a sought-after educator and public speaker. He has been a panelist and speaker at events that include Thursday Night Conversations at the Royal Ottawa Mental Health Centre, CCSA's Issues of Substance Conference 2017, the Biennial Symposium on Violence and Aggression hosted by the University of Saskatchewan, Health Canada's



Opioid Symposium and the Recovery Capital Conference in Toronto. He also participates at the meeting of the United Nations Commission on Narcotic Drugs in Vienna. Gord's message continues to remind local, national and international communities that respect, compassion and knowledge are the key to fostering wellbeing in those dealing with substance use disorders.

Lorraine Greaves, Subject-Matter Expert, Lunch and Learn Speaker

Lorraine Greaves is a medical sociologist, and senior investigator and founding executive director at the Centre of Excellence for Women's Health, a virtual research centre based in Vancouver. She was also the founding director of the Centre for Research on Violence against Women and Children in Ontario. She has worked in academic, government, education and NGO settings, focusing on the integration of sex, gender and equity in research and care, and program and policy development. She holds several Canadian Institutes of Health Research (CIHR) grants in substance use, trauma and gender. She leads a policy-research partnership on cannabis use prevention messaging with CIHR, and co-leads several pan-Canadian projects integrating gender and trauma into the social care and substance use response systems. She has authored or co-authored over 100 articles and 11 books. She is a principal with Galvanizing Equity Group, an international consulting company devoted to gender transformative solutions.

Karolina Kaminska, Subject-Matter Expert

Karolina Kaminska is an evaluator with a background in health research and data science. Prior to her evaluation work, Karolina held a variety of clinical and public health research and data analysis positions, including a consultancy with the World Health Organization's European Region for monitoring the child and adolescent health strategy, a research assistantship for asset-based research approaches at the University of Ottawa, and a data analyst position at Health Canada. She completed her MSc in health systems at the University of Ottawa in 2016, specializing in program evaluation. She has since been employed as an evaluation and performance measurement analyst at the Canadian Foundation for Healthcare Improvement and, currently, at the Canadian Centre on Substance Use and Addiction (CCSA). Karolina's role extends to both corporate- and program-level evaluation and performance measurement, where the purpose of her work is to monitor progress towards outcomes and demonstrate the impact of CCSA's work.

Sarah Konefal, CCSA Project Staff

Sarah Konefal grew up in Vancouver, where she had some close connections with substance use, poverty and mental illness. These connections inspired her to choose a career that could make an impact on improving life for Canadians experiencing these issues. She earned a PhD in neuroscience from McGill University, and wanted to work where she could apply her research to the real world. Working at CCSA, Sarah feels she has the opportunity to apply addiction research to real-world problems. She has a strong interest in how biological, behavioural and social factors in early developmental years play a role in later-life substance use. She is also looking at the links between mental health and addictions. Prior to joining CCSA in February 2018, Sarah held positions at the McGill University Health Centre in Montreal and the Centre for Molecular Medicine and Therapeutics in Vancouver.

Jennifer Kuntz, Practice Expert

Jennifer Kuntz, MSW, RSW, has been a social worker with Alberta Health Services for 15 years. She completed her Masters of Social Work degree at the University of Calgary in 2002, specializing in clinical practice. She is currently the Adverse Childhood Experience (ACE)/Trauma-Informed Care



(TIC) project facilitator for the Child and Adolescent Addiction, Mental Health and Psychiatry Program (CAAMHPP) in Calgary. The goal of the ACE/TIC Initiative is to identify, treat and reduce cumulative mental health risks by reviewing available research; applying this research to clinical practice; capturing and analyzing CAAMHPP ACE data; developing opportunities for knowledge translation; and developing system-wide services to target the reduction of cumulative risks associated with children and families who have experienced significant trauma. Previously, Jennifer was a senior project manager for CAAMHPP and before that worked in a clinical capacity at Child Development Services in the Cumulative Risk Diagnostic Clinic and the Autism Spectrum Disorder Clinic.

Diana Lowe, Practice Expert

Diana Lowe, QC, is Executive Counsel to the Chief Justice and Deputy Executive Director of the Court of Queen's Bench of Alberta. She holds a bachelors degree from the University of Alberta (LLB, 1984) and masters degree from the University of Edinburgh (LLM, 1991), and was appointed Queen's Counsel in 2008. Diana has extensive experience in systems reform and is currently co-leading an initiative to Reform the Family Justice System (RFJS). The RFJS is a collaborative action initiative, designed to effect system-wide change in the family justice system in Alberta based on brain science and knowledge about the impact of adverse childhood experiences. The RFJS is seeking to shift the focus in family justice matters away from adversarial, legal responses, towards making supports available to assist families with the social, relational, parenting and financial issues that arise in family matters. The outcome collaborators are seeking is family well-being.

Rachel MacLean, Work Group Facilitator

Rachel MacLean is a senior project officer at the Canadian Public Health Association, a national, non-profit organization committed to health for all, leading various national projects and initiatives related to sexual health and harm reduction. She coordinates a project directed towards preventing stigma and discrimination within health and social service settings, as well as a project focused on preventing youth dating violence through the implementation and evaluation of a comprehensive sexuality education curriculum. Rachel holds a Masters of Public Health from the University of Toronto (2013) and a Bachelor of Science in biomedical science from the University of Ottawa (2009). She has been working for over a decade at both policy and community levels to help advance healthy sexuality in Canada.

Francesco Mosaico, Practice Expert

Dr. Francesco Mosaico, a family physician, completed medical school at the University of Alberta and residency at Queen's University. He has been a staff physician at the Boyle McCauley Health Centre (BMHC), a not-for-profit community health centre serving marginalized and vulnerable inner-city residents of Edmonton, for the past 12 years and is currently the organization's medical director. Francesco is a member of Alberta Health Services Addiction and Mental Health Strategic Clinical Network. He was involved in the Integration of Opioid Agonist Therapy in Primary Care Settings. He is a clinical lecturer with the University of Alberta and trains medical students and residents. He has also helped lead the BMHC's participation in the Change in Mind Initiative, a partnership between several Alberta non-profit organizations and the Palix Foundation. He serves on committees to improve the health status of members of the community who are incarcerated or involved with the justice system.



Zachary Patterson, Subject-Matter Expert

Dr. Zachary Patterson earned a PhD in neuroscience in 2014 from Carleton University where he studied the link between stress and motivated behaviours. Following his PhD, Zachary completed a post-doctoral fellowship where he continued to examine the link between chronic stress and hormonal dysfunctions. After his post-doctoral studies, Zachary joined the Canadian Centre on Substance Use and Addiction as a knowledge broker. In 2018, he joined the Department of Neuroscience at Carleton University as a faculty member. His current academic interests are related to the effects of drugs — particularly novel psychoactive substances and other illicit substances — on the brain, and how these drugs influence human behaviour. His research is aimed at understanding the mechanisms through which these drugs impact the brain and behaviour in order to effectively design interventions — programs, policies and practices—to improve the health and safety of Canadians.

Doris Payer, CCSA Project Staff

Doris Payer is a knowledge broker at the Canadian Centre on Substance Use and Addiction (CCSA). She earned her PhD in neuroscience from the University of California, Los Angeles, in 2009, and was a clinical research scientist at the Centre for Addiction and Mental Health and assistant professor of psychiatry at the University of Toronto before leaving academia to pursue her passion for knowledge mobilization. This journey took her to the United Kingdom as a neuroscience advisor at the Beckley Foundation (Oxford, U.K.) and later coordinator of the Mental Health Innovation Network, a knowledge exchange platform jointly led by the Centre for Global Mental Health (London, U.K.) and the World Health Organisation. Doris has a longstanding passion for drug harm reduction and peer education, and is thrilled to combine her neuroscience background with her desire to change how society views and treats people who use drugs for CCSA's Brain Story initiative.

Claire Rykelyk-Huizen, Work Group Facilitator, CCSA Project Staff

Claire Rykelyk-Huizen has a BA in anthropology and an MA in social work, both from Carleton University. She is a registered social worker with a career focus on addictions and mental health. She is particularly interested in how stigma creates barriers to treatment for people who use substances and how changing stigmatizing language and behaviours is a critical first step in being an effective ally. Claire has been a knowledge broker at Canadian Centre on Substance Use and Addiction (CCSA) since January 2019 and is currently organizing CCSA's upcoming Stigma Ends with Me workshop in Saskatoon. Prior to joining CCSA, she worked as a research assistant at the Canadian Association for Social Work Education.

Nicole Sherren, Subject-Matter Expert, Moderator

Nicole Sherren is the scientific director and senior program officer with the Palix Foundation. She has a PhD in neuroscience from Carleton University and moved to Alberta in 2003 to hold an Alberta Heritage Foundation for Medical Research/Neuroscience Canada research fellowship at the University of Lethbridge. Her research focus includes experience-based brain development, neurodevelopmental disorders and brain plasticity. Nicole joined the Palix Foundation in 2007 to focus on mobilizing the science of early brain development into public policy and professional practice. She both designs and delivers professional development opportunities across the health, education, human services and justice sectors, and lends her expertise to organizations seeking to apply the science in their own settings. She also volunteers as a member of the board of directors for Calgary Alpha House Society.



Kiran Somjee, Work Group Facilitator

Kiran Somjee is a registered nurse and national priority advisor for strategic partnerships and knowledge mobilization at the Canadian Centre on Substance Use and Addiction. Specializing in the areas of cannabis public education, nursing, substance use and addiction, mental health promotion, social determinants of health and health equity, Kiran brings both a public health and population health promotion lens, focusing on priority populations such as children and youth. Kiran holds a BSc in nursing from the University of Ontario Institute of Technology, as well as a registered nurse designation from the College of Nurses of Ontario.

Purnima Sundar, Subject-Matter Expert

Purnima Sundar is the director of knowledge mobilization at the Ontario Centre of Excellence for Child and Youth Mental Health. She has over 20 years of experience doing community-based, participatory action research and program evaluation in the areas of community mental health, and diversity and multiculturalism. At the Centre, Purnima leads a team of experts that support practitioners by gathering, sharing and using relevant information to strengthen services for children, youth and families. She works with government partners across ministries to facilitate knowledge mobilization in sectors that serve Ontario's children and youth.

Michelle Ward, Subject-Matter Expert

Dr. Michelle Ward is a pediatrician and division head of Child and Youth Protection at the Children's Hospital of Eastern Ontario (CHEO). She is an associate professor at the University of Ottawa, a clinical investigator at CHEO and in-coming president of the Child and Youth Maltreatment Section of the Canadian Paediatric Society. She is certified in pediatrics in Canada and the United States and in child abuse pediatrics in the U.S. Michelle's clinical work involves the medical care of children who have suffered from maltreatment. Her teaching, research and advocacy work includes medical aspects of child maltreatment, the needs and care of children involved with the child welfare system, the education of professionals and knowledge translation across sectors. Michelle has published many scientific articles, book chapters and commentaries, has appeared in various media, and testifies as an expert witness in court. She has been honoured with awards for professionalism, advocacy and community collaboration.

Angela Yip, Work Group Facilitator

Angela Yip is a knowledge broker with a neuroscience background obtained at the University of Toronto. Located in the Toronto office of the Provincial System Support Program at the Centre for Addiction and Mental Health, she has worked for over a decade in knowledge exchange, health systems and services, and research and consulting. Angela enjoys working with diverse stakeholders in the mental health and substance use field, including bringing allied sectors together to tailor evidence for local contexts and implement that evidence in practice and policy. Projects in her portfolio focus on housing, early psychosis intervention, community treatment orders, racialized populations, mental health court diversion, responding to the evidence priority agenda for Ontario's mental health, substance use and addictions systems, and working with stakeholders to build capacity in knowledge exchange, implementation and evaluation.



Mentors

Karen Ferguson, Mentor

Karen Ferguson worked nearly 40 years in the Alberta public service, retiring in 2015 as assistant deputy minister, Human Services. She provided strategic leadership to cross-ministry and community initiatives supporting improved outcomes for children, youth and families. She led the development of a cross-ministry early childhood development strategy to improve child health and development. The strategy led to a number of outcome-based programs being implemented or expanded, enhancing supports for young children and their families. Karen attended the Alberta Family Wellness Initiative multi-year symposia series. The learnings from the symposia informed the work of the Ministry and the knowledge was integrated into policy and practice. Prior to her role as assistant deputy minister, Karen developed and implemented the *Family Support for Children with Disabilities Act*, and was responsible for the administration of the program, which provides support to over 9,000 children with disabilities and their families. Her previous experience includes 25 years in the youth corrections field at the policy and service delivery level, including eight years as director of the Calgary Young Offender Centre. Karen currently serves on the board of Norwood Child and Family Resource Centre, an Edmonton based non-profit organization focused on early childhood programming and parent and family supports. She is the board vice-chair of the National Institute of Families for Child and Youth Mental Health and chair of the governance committee. She also volunteers as a tutor with the Centre for Family Literacy.

Margaret King, Mentor

Margaret King is director and president of Glenorchy Consulting Ltd. She has worked in health services delivery, education, research and policy development at the local, provincial and national levels. She has several years of experience working for the Government of Alberta, most recently as Assistant Deputy Minister (ADM), Community and Population Health, Alberta Health, 2007 through 2012. While with Alberta Health, she supported the development of Community Treatment Orders and an overarching strategy for addiction and mental health services, *Creating Connections, Alberta's Addiction and Mental Strategy*. She was Alberta Health's lead for several cross-ministry initiatives including *Safe Communities* and the *Ten Year Plan to End Homelessness*. As ADM, Margaret coordinated Alberta's response to both waves of the 2009 pH1N1 influenza pandemic and oversaw the launch of several health promotion initiatives. Additionally, she launched the first International Wellness Symposium in 2011. Through Glenorchy Consulting, Margaret has participated as a consultant and facilitator on projects that address public health and mental health, including projects focused on communication strategies for child and youth mental health services, educational initiatives supported by the Alberta Family Wellness Initiative and policy development in public health service delivery.

Nancy Reynolds, Mentor

Nancy Reynolds is managing partner in Sterling Lifestyle Solutions (Canada) Corp., a management consultancy focused on child and youth mental health and wellbeing, early childhood development and public policy. She is also a faculty member of the Max Bell Foundation's Public Policy Training Institute where she lectures on the role of research in public policy. After many years as a clinician and health service administrator, Nancy joined the Government of Alberta in 1993 and held several senior portfolios in the Ministry of Health, including assistant deputy minister of Population Health. She was seconded for two years to the role of CEO of the Provincial Mental Health Advisory Board. As the assistant deputy minister of Partnership and Innovation for Alberta Children's Services, she



developed the concept for the Alberta Centre for Child, Family and Community Research. Nancy was the inaugural president and CEO of the Centre from its founding in 2003 until 2012. As CEO of the Centre, her goal was to ensure that it was recognized as a global leader in mobilizing research findings towards achieving its vision of improving the wellbeing of children, their families and communities. Under her leadership, the Centre became a well-respected organization within both the academic and policy communities. An active volunteer, Nancy currently serves as the Chair of the National Institute of Families for Child and Youth Mental Health and is a member of several advisory councils and boards of directors.

Arlene Weidner, Mentor

Arlene Weidner has worked in nursing and healthcare positions as a direct nursing care provider and in research, program evaluation, nursing education and healthcare administration positions over the past 40 years. From 1983 to 2005, she served in senior leadership positions in the Alberta healthcare system, including regional and urban health settings. She has had a consulting practice since 2005, working on a variety of projects related to health system review and nursing issues, and projects on addiction and mental health. She was a health systems surveyor with Accreditation Canada for 10 years, is a former member of the Alberta Registered Nurses Educational Trust (ARNET) board and is now a member of the finance committee of ARNET. Arlene has a BSc in nursing and MSc in educational psychology, and has been a certified health executive since 1994. She served in the member-at-large position for professional development with the Southern Alberta chapter of the Canadian College of Health Leaders from 2014–2017 and has done consulting work with the Palix Foundation since 2006.

Advisory Panel

Kim Corace

Dr. Kim Corace is the director of Clinical Programming and Research in the Substance Use and Concurrent Disorders Program at the Royal Ottawa Mental Health Centre, an associate professor in the Department of Psychiatry at University of Ottawa, a clinical investigator with the Institute of Mental Health Research, and a clinical health psychologist. Working at regional, provincial and national levels, her work focuses on improving treatment access and outcomes for vulnerable populations struggling with substance use and mental health co-morbidities, with a focus on developing collaborative care models. In 2013, the Ontario Ministry of Health Innovation Fund awarded the Best Innovation in Mental Health Care Delivery to Dr. Corace and her colleague for their Regional Opioid Intervention Service.

Debbie Curtis

See above.

Rachel Gouin

Rachel Gouin brings extensive experience to her current role as executive director of the Child Welfare League of Canada. She holds a PhD in education (McGill University) and an MA in political management (Carleton University). Rachel is known for rallying people to a common cause — most often the rights of women and girls, and young people living in vulnerable situations. She recently served as director of research and public policy with Boys and Girls Clubs of Canada, where she advocated for children and youth, and raised millions for innovative programs. Before that, she worked at Inter Pares, where she supported women's rights activists in Sudan and led research on



feminist approaches to international development. Rachel also serves on the board of the Canadian Advocacy Network, which matches charitable and not-for-profit organizations looking to access pro-bono communications and government relations services with professionals who want to volunteer their time and expertise.

Michelle Gagnon

See above.

Emily Gruenwoldt

Emily Gruenwoldt is the president and CEO of Children's Healthcare Canada (formerly the Canadian Association of Paediatric Health Centres (CAPHC)) and executive director of the Paediatric Chairs of Canada (PCC). Previous to her work with CAPHC and PCC, Emily spent ten years with the Canadian Medical Association in various director-level roles, including professional affairs, physician learning and development, and strategy and innovation. Emily has significant healthcare governance experience having served two terms as a board member for each of Carefor Home and Health Services and the Ottawa Hospital, and one term on the board of Arnprior Regional Health. Emily is also a co-founder of Emerging Health Leaders. In 2017, she was recognized by the Ottawa Business Journal as a recipient of the Top Forty Under Forty Award. She is also the recipient of the Canadian College of Health Leaders Robert Zed Young Health Leader Award (2011).

Pamela Ponio

Dr. Pamela Ponio is the senior manager of the prevention of problematic substance use team at the Public Health Agency of Canada. Her team is responsible for supporting upstream efforts to reduce risks and harms associated with problematic substance use, particularly among youth. Prior to her work with the Public Health Agency, she worked as an academic researcher in the areas of violence against women and children, trauma-informed approaches to policy and practice, health equity and the social determinants of health.

Janath Vesna

Janath Vesna is one of the managers of National Programs at Boys and Girls Clubs of Canada (BGCC). She has over 15 years of experience working with youth in the areas of physical and mental well-being, leadership development and employment in the non-profit sector. She has been with BGCC for nearly nine years as part of the National Programs Team where she designs, develops and implements a variety of programs, conducts training and administers scholarships. Along with the other managers of national programs, Jan is responsible for the development and delivery of more than 25 programs in the areas of healthy active living, learning and career development, leadership and youth engagement. Most recently, she has been working closely with experts and clubs on the creation, implementation and evaluation of a trauma-informed sports program at BGCC.