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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.

## **Newfoundland and Labrador Network**

### **Brain Builders Lab Case Study**

### **Project Team**

- Debbie Curtis, Mental Health and Addictions Consultant, Department of Health and Community Services, Government of Newfoundland and Labrador
- Mary Fearon, Respectful Workplace Coordinator, College of the North Atlantic; and Mental Health Practitioner, St John's, Newfoundland and Labrador

#### Location

St John's, Newfoundland and Labrador, with additional network members around the province

## **Introduction and Project Goals**

Debbie Curtis and Mary Fearon have been champions of Brain Story science for years. While there had been previous recognition of the science among their networks, there had been little traction in embedding and applying the knowledge. The Brain Builders Lab was an opportunity to create the awareness and momentum needed to support broader organizational and system alignment with the science in Newfoundland and Labrador.

Specifically, their goal was to use the Brain Story to align the work of multiple yet siloed sectors such as mental health and addictions, primary health care, justice and corrections, children and youth, education, and community organizations, by:

- Providing a common, foundational, scientific evidence base that could ground the work;
- Creating opportunities to develop shared goals and agendas;
- Reducing the stigma associated with substance use and mental illness; and
- Generating new and innovative ways of supporting individuals, children and families.

### **Knowledge Mobilization Activities**

**Network-building:** Recognizing there would be added strength in numbers, the team's first move was to identify and recruit additional champions who were already interested in Brain Story science. Working with the Palix Foundation, they contacted all Newfoundland and Labrador registrants in the Brain Story Certification Course (BSCC), inviting them to join a provincial Brain Story science network. They received about 25 responses spanning both rural and urban areas, and the network was born. The network met quarterly to strategize on advancing the work and leveraging broader networks, significantly expanding the reach and capacity of the original Brain Builders Lab team of two.

Securing local buy-in: While the network was instrumental in building awareness outside of St. John's, both Mary and Debbie also leveraged their own relationships to create buy-in and support. This included relationships within government to bring the information to the attention of policy makers in the departments of Health and Community Services, Children, Seniors and Social

# Presentations delivered at two provincial conferences with over 100 attendees

- One on opioid use targeted to those working in the addiction field
- One targeted to social workers

Development, Education, and Justice and Public Safety, emphasizing that the information was aligned with and would support their work. It also included relationships in the community to reach non-profit agencies, the Royal Newfoundland Constabulary and key professionals such as nurses and social workers.

**Digital communication:** To Mary and Debbie's surprise, their "push" strategy to build awareness turned into a "pull" from the community, with many groups requesting more information. Recognizing they could not meet the demand for in-person sessions, they recorded a 40-minute presentation that is available to all on the provincial resource, Bridge the Gapp, and took advantage of a video on stigma produced by the Canadian Centre on Substance Use and Addiction that featured their work.

### **Outcomes and Impact**

**Increased presence of champions:** All members of the provincial network have been champions of applying the science in their spheres of influence and have become change agents in their own right. Many have started applying the knowledge in their workplaces, using wisdom and support from the

network to help generate and shape ideas for application. For example, one large non-profit service provider has already encouraged all its staff to take the BSCC; a member from Labrador has incorporated many learnings from the Brain Story into her clinical practice with children and caregivers; and a member on the west coast of Newfoundland and Labrador has reported incorporating brain science into all her trauma-informed practice training that is delivered in the community.

#### **BSCC** enrolment success

- Significant increase from 120 registrants before the Brain Builders Lab to 1,170 as of June 2021
- Royal Newfoundland Constabulary considering using the BSCC with new recruits

**Policy change:** Within government, Brain Story concepts and language are appearing in plans and policy frameworks, such as the Life Promotion and Suicide Prevention Plan, the Support for New and Young Families Framework, the Anti-Stigma and Discrimination Approach, and the Bridge the Gapp online resource. This shift will help embed brain science as a key foundational knowledge base for government policy moving forward. In addition, government staff in child protection services enrolled in the BSCC and formed a community of practice. They are discussing how to embed the learning in

their work with staff and contracted service providers, which would represent a significant policy shift in Newfoundland and Labrador and help drive knowledge competencies across organizations.

**Practice change:** Within Thrive, the agency for which Mary recently worked, all staff are encouraged to take the BSCC. They also formed a community of practice that meets every two weeks to discuss implications for programming. Programmatically, they now use the Adverse Childhood Experiences Questionnaire to better understand clients' history of trauma and tailor services to their needs.

**Shifting mental models:** One key impact has been a reduction in stigma toward clients among staff in agencies that used the BSCC for staff training. While anecdotal, staff report thinking about their clients with less judgment and more understanding of clients' journeys, and report being more reflective in their practice, which is a key first step in practice change.

Better system coordination and collaboration: The project helped connect pockets of work across the province into a unified group of change agents who are now able to create shared goals and complementary strategies to support complex system change. The ripple effect has been the creation of distributed leadership across multiple sectors, where many key change agents are now leading the charge, reinforcing common messages and the use of a common knowledge base to support the work.

### **Lessons Learned and Next Steps**

Engaging early adopters to create additional change agents and influencers pays off. Even though both Brain

# Over 700 people reached through activities

- Nurses, emergency room nurses
- Social workers
- Guidance counsellors
- School psychologists
- Mental health occupational therapists
- Teachers
- Mental health practitioners
- Child and youth care workers
- Peer support workers

Builders were well positioned to target and influence key groups, the creation of the provincial network vastly increased and diversified their sphere of influence and accelerated the pace of change. It has also laid the ground for new collaborations to emerge. Finally, it has served as a buffer for time constraints. The team cited the time required to make systemic change as their biggest challenge, as much of the work was done "off the sides of people's desks." The network allowed them to share the load and tackle tasks more efficiently.

**Timing is important.** Compared to their previous efforts, the timing was better as there was already more community awareness about brain development and adverse childhood experiences. At the same time, Mary and Debbie reflected that creating the video presentation sooner would have helped spread awareness more quickly.

Aligning with existing goals can create a favourable policy environment. The science fit well within the government's existing Towards Recovery framework so was not seen as an add-on, but as complementary to the direction in which the province was already moving. Mental health is also a key focus for many organizations now, especially in the context of the pandemic, and having readily available resources can help move the work forward.

Going forward, Debbie and Mary plan to continue cultivating champions wherever possible, but to focus more on supporting the "now what" aspect of the work: What does it actually look like to apply this knowledge in practice and does it produce better outcomes within systems and services? The Brain Story network members will be instrumental in supporting this next phase.

#### Resources

- CCSA impact video: <u>Application of Concepts Across Human-Serving Sectors in Newfoundland and Labrador</u>
- CCSA video on stigma: <u>Brain Story in Action: Addressing Stigma</u>

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