



Passing a new judgment

As people working in Alberta's legal system learn about early childhood brain development, they're using their knowledge to reshape their services and decisions—and better understand how people can become entangled in the law. **Valerie Berenyi** explains

The story of brain development is an **important** story for police to hear, and it really resonates with them

It's a heartbreaking case:

A judge must decide what's best for an infant born in a mental-health facility to a homeless mother.

The baby girl, placed in foster care the day after her birth, is now 11 months old. Her mother, a traumatized refugee struggling with mental illness and past drug use, has taken parenting classes and wants to raise her daughter.

But the mom is emotionally flat, sometimes suicidal. When she's able to see her baby, she can't focus on the child or give her basic care, such as changing her diaper.

The father is abusive, has a criminal record and wants no part in raising the child.

In 2014, in a noteworthy case, Provincial Court of Alberta Judge Ted Carruthers drew upon a growing body of evidence about the importance of early brain development to decide whether the baby would be better off with her biological family or adopted into a new one.

Understanding the roots of problems

The human condition—mental illness, homelessness, addictions, violence, family breakup—plays out daily in Alberta's courts. Increasingly, people who work in the legal system are trying to understand the roots of these problems. They're learning how early brain development affects lifelong health.

"As a community we need to be educated so that we all understand the core story of brain development," says Nancy Flatters, a non-sitting provincial court judge who, as a volunteer, teaches legal professionals (such as lawyers, judges, social workers and clerks) and parents to consider children's brain development while they're settling stressful conflicts in court.

Science tells us that when children have warm, positive experiences with family, friends and school, the brain builds strong architecture. On the other hand, if children are neglected or abused they can experience toxic

stress, which can weaken brain architecture and increase their risk of physical and mental health problems, including addiction, throughout life.

People within Alberta's legal system are taking this powerful knowledge and using it in innovative ways.

For example, the Policy and Program Development Branch of the Public Security Division in Alberta Justice and Solicitor General, which oversees policing in the province, began telling the core story of brain development to police officers in domestic violence training sessions in 2013.

"It's an important story for police officers to hear, and it really resonates with them," says Kathleen Collins, executive director of the branch.

"We teach them to note if there are children in the house [when they're responding to a domestic violence incident], to understand what effect toxic stress has on developing brains and to provide resources for the family."

Collins says one of the best teaching tools is a four-minute video produced by the Alberta Family Wellness Initiative. (See the video at albertafamilywellness.org, which is also the basis for The Story of Brain Development on page 5).

“The metaphors it uses, such as brain architecture, serve and return and toxic stress, are wonderful and everyone can understand them,” she says.

Employees with police-based victim service units throughout the province are also learning the core story. “This is where victims of crime are referred by police, and they may be traumatized by their experiences,” Collins says. “We’re trying to get the story and message out wherever we can.”

Legal meets health care

Increasingly, people employed in the legal system are working with those

in health care. “We have a lot of the same clients,” Collins says.

Many of them are repeatedly in and out of the correctional system, says Dr. Francesco Mosaico, a family physician working at the Boyle McCauley Health Centre. The centre offers primary health care and health promotion services to people in inner-city Edmonton experiencing poverty, homelessness, addiction, mental illness and social isolation. The centre is also part of two programs trying to stop the revolving door clients go through.

One is Alberta Justice’s Priority Prolific Offender Program, or P-POP. It targets people who have multiple nuisance offences—shoplifting, theft from vehicles, aggressive panhandling, urinating in public—but haven’t typically caused bodily harm to others. Many are addicted to alcohol or drugs, have mental-

health issues or come from difficult backgrounds. A diverse team works to keep them from getting into more legal trouble.

“We collaborate to support our mutual clients, such as someone who doesn’t have any identification or a health-care account,” Mosaico explains. “These people are the highest users of the justice system. It might be someone who steals to pay for their drug habit.”

Centre staff work to find clients housing, legal assistance, food, clothing and more. “Sometimes, we can address some of the root causes—abuse, for example. I can write a letter documenting untreated abuse issues, advocating for funding so that client can see a psychologist.”

The centre also works with AHS’s Corrections Transition Team, a voluntary program that supports people with mental illness and

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addiction who are about to be released from a corrections centre into the community.

Typically, Mosaico says, the health-care system and correctional services have little contact. “Someone would be released from jail without adequate medications, housing or clothes. He has no work, a criminal record and nowhere to live. It takes a while to save up for rent and a damage deposit. Without support, he’ll relapse quickly and end up back in jail.

“We work with the Corrections Transition Team so that, ideally, we pick up the clients the day they get out of jail. As well as looking after their health-care needs, we get them warm clothing so they don’t get frostbite. We write letters to Human Services, asking for money for damage deposit and first month’s rent,” Mosaico says.

The centre also works with clients with addictions to help reduce their risk of reoffending while awaiting more specialized treatment and support.

“With this program we see less relapse into destructive behaviour.”

Understanding rather than punishing

Addiction is a brain disease that is more likely to affect people who have had three or more adverse childhood experiences.

“Addicts are ostracized, shamed and they’re told they’re bad people,

and when they try to treat their pain, we jail them,” said Dr. Gabor Mate, a Canadian physician and author specializing in addictions, in a recent interview with CBC Radio. “We traumatize them further by sticking them in jail.”

Treating addiction as a brain disease removes the notion that it’s somehow a conscious choice, adds Flatters.

“If you see addiction as a choice, you punish people. But if you see it as a disease—you wouldn’t punish someone for having cancer or diabetes—you respond like you would to any other disease: what’s the plan, what if there’s a relapse?” she says. “And you provide effective, efficient and responsive intervention very early to break those intergenerational cycles of addiction.”

In his Calgary courtroom in the fall of 2013, Carruthers weighed the science-based evidence about toxic stress and early brain development as he decided whether to return a baby girl to her mentally ill, homeless mother.

In his judgment he drew on expert evidence from Evelyn Wotherspoon, a clinical social worker and early childhood mental health consultant. “The child,” Carruthers wrote, “is in a period of exuberant brain growth, she is vulnerable to disruptions in that growth through exposure to toxic stress.”

Adoption, he decided, was in the baby’s best interests. ■