



# The Impact of COVID-19 on Developmental Trauma for Adopted Children and Families in Ontario: Key Informant Perspectives I

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November 2021

## Introduction

This Information Sheet explores the perspective of child welfare workers and allied professionals on developmental trauma in the child welfare sector in Ontario. These findings are based on qualitative interviews conducted with those who have worked within and alongside the child welfare sector. This study is a community-based research partnership between the Factor-Inwentash Faculty of Social Work at the University of Toronto and the Adoption Council of Ontario. Funding for this study was provided by the Social Sciences and Humanities Research Council of Canada's Partnership Engage Grant.

Trauma has been known to negatively impact development, especially for children and youth involved in the child welfare system. The goal of this study is to strengthen the Ontario child welfare sector's capacity to identify and respond to the developmental trauma needs of adopted children and youth. The following statements describe an understanding of the challenges and opportunities faced by the child welfare system and allied sectors in identifying, assessing, responding to, and mobilizing resources to address the developmental needs of adopted children and their families. This Information Sheet focuses on the key informant responses specific to the impact of COVID-19 on the developmental trauma needs of children and families who have been involved with the child welfare sector.

## Findings

Key informant interview respondents indicated that the COVID-19 pandemic has had a dramatic impact on service accessibility for the child welfare sector and allied sectors. Pandemic-related impacts include an increase in waitlists for in-person services, discontinuation of community-based services, and the transition to virtual supports. According to a respondent, "waitlists [have] significantly increased... for any service that needs to be done in person" due to COVID-19 restrictions. The additional "stress on the system" has made it "much [harder] for our kids to kind of find their way in" when accessing services. Community-based services such as extra-curricular activities and in-person programming for children and youth became discontinued, which a respondent indicated "are so important for our kids... [to] build self-confidence and feel like a sense of mastery and they can't do that when all of their extra-curriculars are like not happening." Although some child welfare services were able to transition to an online format,

“the pandemic... has made it much more difficult [to do] screening... treatment and assessment” with child welfare involved families. The lack of service accessibility has made it difficult to monitor children, identify their needs, and “understand what families are experiencing [and] children are experiencing.”

Key informants also perceived a rise in mental health and trauma-related symptoms for children and families due to the pandemic. One respondent indicated that they found “90 percent [of their clients] are actually experiencing extreme isolation [and] experiencing intensity in their homes.” Another respondent stated, “I think the isolation impacts our kids and families more so than other families... our kids have lots of transitions in their lives and lots of losses, and for school to end kind of abruptly in that way would have been really, really hard for lots of them. You know, just the change of routine is also very hard for our kids and our [families].” When asked about caregiver well-being, respondents noted that, “parents... are more distressed” due to COVID-19 and “are less able to parent” which has led to an increased risk of caregiver stress and family conflict. One respondent noted that the pandemic “might be an opportunity to think of trauma in a broader way” specifically regarding developmental trauma and its long-term impacts.

Conversely, respondents noted some families have experienced an increase in family connectivity due to prolonged isolation. For example, for “kids who have difficulties with attachment...being at home all the time and not having to separate, not having to deal with the stress of being physically in school...has been very positive...and allowed that time for bonding and attachment to happen.” For some children and youth quarantine has protected against “things that would have been difficult for them [like] social situations, bullying, things like that.”

## Methodology

Purposive snowball sampling was used to obtain a total sample of seven key informants interviewed for this study. Respondents were provided a brief literature review on developmental trauma in the child welfare sector and participated in a 60-minute semi-structured interview via Microsoft Teams. The study was conducted from April to September in 2021. Researchers used an interview guide to prompt discussions on the following domains: (1) the state of the research (applicability, relevancy) with respect to their work in supporting adopted children and families who have had involvement with the child welfare system; (2) identifying needs and opportunities to address developmental trauma and promote well-being of adopted children and families within child welfare and across sectors and services; (3) gaps in supports and service delivery within child welfare and across sectors; (4) considerations and recommendations for promoting trauma-informed practice, policy and research for the child welfare system and those that work with adopted children and families. The interview guide included questions pertaining to COVID-19 impacts across the child welfare sector specific to developmental trauma and service accessibility. Key informant interviews were recorded, transcribed, and coded into NVivo software for qualitative analysis. Members of the research team discussed and re-coded informant responses until a saturation of core themes emerged.

**Suggested Citation:** Alman, I., Giokas, D., Filipelli, J., & Fallon, B. (2021). The Impact of COVID-19 on Developmental Trauma for Adopted Children and Families in Ontario: Key Informant Perspectives I. CWRP Information Sheet #227E. Toronto, ON: Canadian Child Welfare Research Portal.