

# LIFE AFTER IMPACT

## A GENDER-BASED VIOLENCE & CONCUSSION SUPPORT PROGRAM

Funded by the Government of Ontario



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### BACKGROUND

#### Brain Injury & Employment

- Barriers to returning to work following a concussion exist at an individual, workplace, and systemic level. Examples include symptom presentation, lack of education and awareness, stigma, and poor resource allocation (1).
- Financial difficulties and unemployment are cited as the most significant unmet rehabilitation need and barrier to community participation following a TBI (2).

#### Gender-Based Violence (GBV) & Employment

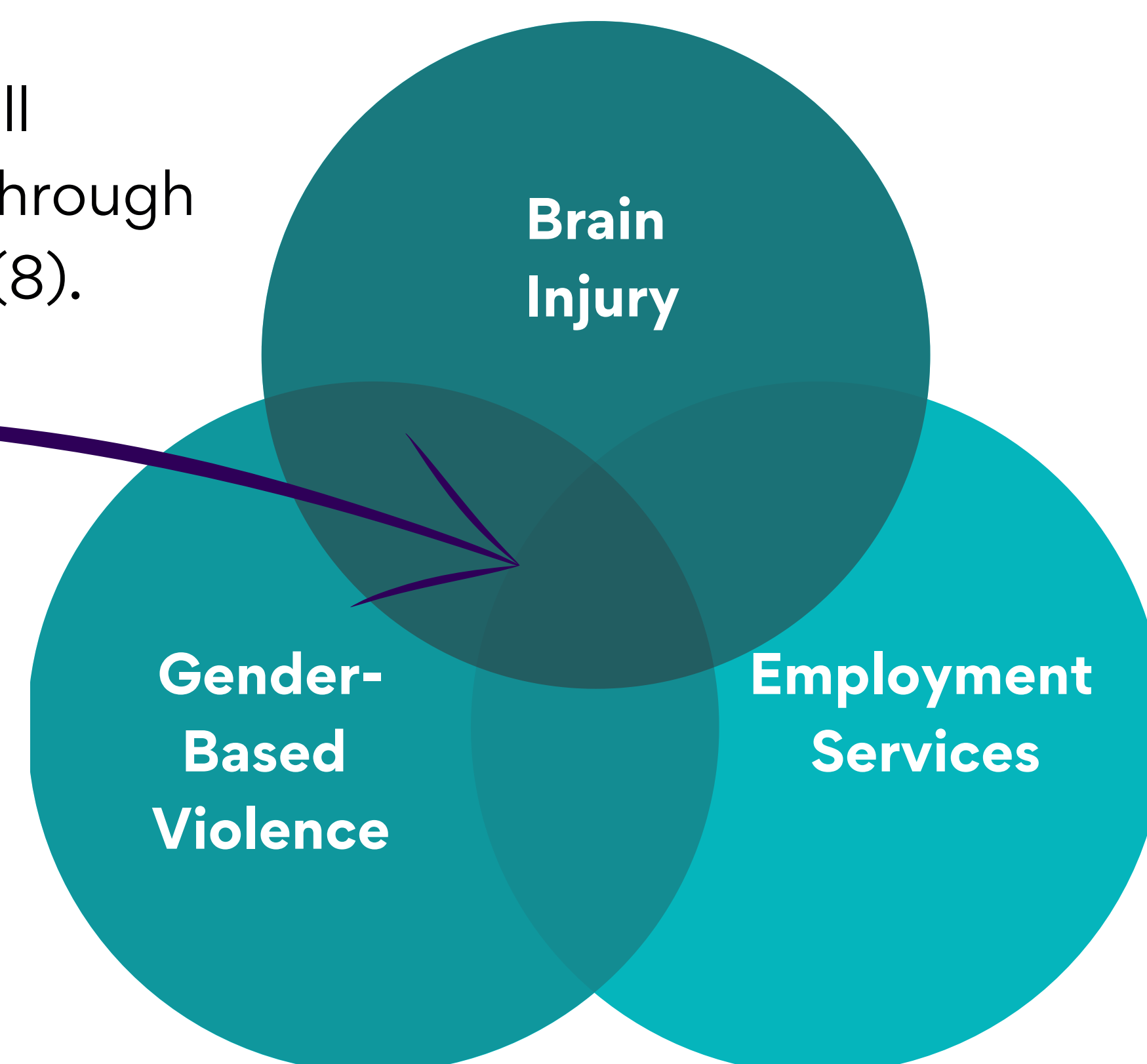
- Experiencing GBV increases absenteeism and time off from work. Further, some research indicates that job loss and unemployment increase following GBV (3).
- In one Canadian study nearly 82% of survivors stated that domestic violence negatively impacted their performance at work (4).

#### Brain Injury & GBV

- 44% of women will experience physical violence from an intimate partner (5).
- 92% of violent encounters include hits to the head, face, and neck (6).
- 75% of survivors of intimate partner violence have possible brain injuries (7).
- 1 in 8 Canadian women will experience a brain injury through intimate partner violence (8).

### OBJECTIVE

In order to address the gap between brain injury, GBV, and employment services, the Life After Impact (LAI) program was developed and implemented at the Ontario Brain Injury Association.



### PROGRAM DEVELOPMENT

Development of the LAI program used a three-phase approach:

1. Literature review and needs assessment to inform the project using the identified needs and preferences of the target population, including evidence-based practices for working with GBV and BI populations
2. Consultation with survivors, academics, and advocates to inform outreach, accessibility, trauma-informed practice, and evaluation strategies
3. Iterative implementation throughout the program pilot, incorporating feedback from clients and the advisory committee

### LIFE AFTER IMPACT PROGRAM

A highly flexible, trauma-informed program was developed to meet the diverse and evolving needs of participants, grounded in principles of client-centred care which aims to support clients in:

- Rebuilding stability
- Strengthening autonomy
- Improving financial health and well-being
- Enhancing the overall quality of life

Clients are able to choose their level and type of engagement across the following program components:

<b>Online Training Program</b> <small>Available in English &amp; French</small> <ul style="list-style-type: none"> <li>• Self-paced and self-guided learning</li> <li>• Learn skills related to employment readiness, financial health, and long-term stability</li> </ul>	<b>One-on-One Support</b> <ul style="list-style-type: none"> <li>• Occupational Therapy</li> <li>• Social Work</li> <li>• Vocational Rehabilitation</li> </ul>
<b>Together We Thrive</b> <ul style="list-style-type: none"> <li>• Virtual, peer-led support group</li> <li>• Connect, share, learn from others</li> <li>• Monthly meetings for 6 months</li> </ul>	<b>The Learning Group</b> <ul style="list-style-type: none"> <li>• Virtual psychoeducational group</li> <li>• 10-weeks</li> <li>• Facilitated by a social worker and occupational therapist</li> </ul>

### PARTICIPANTS

# 35

Clients with Online Training Program access

# 11

Clients registered in a group

# 25

Clients accessing 1:1 support

Validated measures indicate poor baseline mental health and quality of life, accompanied by a substantial symptom burden.

- Average DASS-21: Stress: **23.41** (moderate); Anxiety: **17.80** (severe); Depression: **21.35** (severe)
- Average QOLIBRI: **37.35** (0 is worst quality of life, 100 is best quality of life)
- Average Rivermead: **RPQ3-7.42** (max. score is 12, indicating highest symptom burden); **RPQ13- 34.79** (max. score is 52, indicating highest symptom burden)
- Average Non-Concussion Score: **20.66** (max score is 36, indicating highest symptom burden)

### PROGRAM FEEDBACK

*“These programs let us know that...there are good people and many supports to help us heal. Life after trauma can be good again, it takes a lot of time, along with the right support and services”*  
-LAI Client

- 90% of clients who completed evaluations reported increased knowledge/skills related to finding or maintaining employment
- 100% of clients who completed evaluations reported that they were satisfied with services

### CONCLUSION

Life After Impact demonstrates that integrated, trauma-informed support for individuals experiencing both GBV and brain injury is both feasible and essential. Future work will focus on evaluation, including repeat validated assessments at program exit, as well as sustainability planning to expand, strengthen outcomes, and enhance long-term impact.

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