

Childhood Brain Injury and Vocational Outcome: What's One Got to Do With the Other!

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Outline for Today

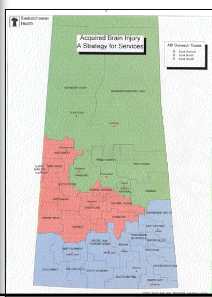
- ↪ Introduction
- ↪ Childhood Brain Injury
- ↪ Let's look at some cases and see what worked
- ↪ Concepts and ideas to go away with
- ↪ A personal touch

ABI Outreach Teams

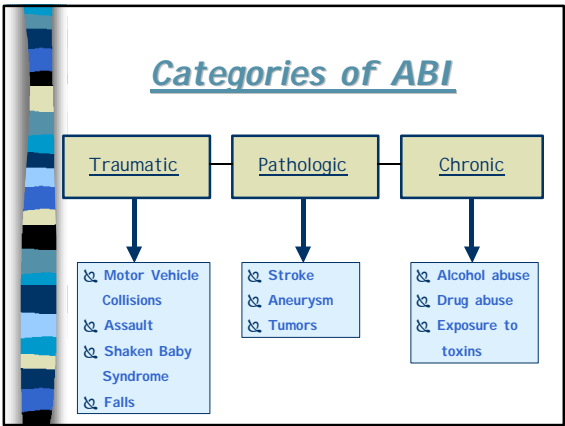
- ↪ 3 interdisciplinary teams developed as part of the ABI Pilot Project to provide community based service and support for individuals with acquired brain injuries and their families
- ↪ The 3 teams are located in Prince Albert, Saskatoon and Regina
- ↪ Discipline composition varies on each team

Provincial Demographics Saskatchewan

Total Pop: 1,024,835 Total Area: 649,609



- ↪ **Sask North (2002)**
 - Total Pop.: 156,190
 - Total Area: 386,126
- ↪ **Sask Central (2002)**
 - Total Pop.: 405,107
 - Total Area: 105,845
- ↪ **Sask South (2002)**
 - Total Pop.: 463,538
 - Total Area: 157,638



Childhood Brain Injury

- ↪ The child with the injury is not a 'little adult' and should not be treated as such
- ↪ One must consider when working with children:
 - The brain injury effects what knowledge, skills and abilities they have at present and may effect those that develop in the future
 - Long-term effects can be cumulative
 - Onset of some deficits are delayed (Frontal lobe maturation)
 - Family involvement is crucial.

Childhood Brain Injury (Cont'd)

- ↪ Their brain injuries are life-long so it follows that their supports should be life-long.
- ↪ Preparation for vocational programming should start early.
 - It is age and injury dependent
 - Often means a shift from an academic stream in high-school
- ↪ "Ambiguous loss" of both the client and family
- ↪ Sometimes difficult to know what is brain injury related.

The People I've Worked With

- ↪ The ABI Outreach Team has been in existence since 1996. As a result, we have the opportunity to follow our client's through the years.
- ↪ Most (~2/3) of our pediatric and adolescent client's sustained their brain injuries in MVC's.
- ↪ I'll outline some of the "successful" and some of the "not so successful" cases and offer what helped and what did not.

Case Study #1

A.B.

A.B.

- ↪ Young lady injured in 1998, at age 11 in a single vehicle rollover (Mom was the driver).
- ↪ Initial GCS 10/15, blind in one eye.
- ↪ Slow/gradual return to school post-injury.
- ↪ Textbook family support in conjunction with ongoing educational and prn professional supports.
- ↪ Initial career goal was pharmacy.
- ↪ At present, in first year university in Business Administration with some educational support.
- ↪ Biggest limiting factor is fatigue.
- ↪ Has worked part-time in the summer but not consistently during the school year.

Positives

- ↪ Bright academically pre-injury.
- ↪ Nice young lady that people like.
- ↪ Wonderful family support who advocate for her and continue to fight for her.
- ↪ Knows her limitations, but still pushes the envelope.

Negatives

- ↪ Socially, very shy.
- ↪ Ongoing headaches which are fatigue related.
- ↪ Won't ask for help.
- ↪ Insurer does not "appreciate" the decrease in her academic abilities or vision loss.

The Future

- ↪ Will probably finish university with a degree in a longer time period.
- ↪ Has had part-time vocational successes.
- ↪ Difficult to provide objective information to insurer's on ability to work and go to school
- ↪ Whether she can work full-time or not is questionable.
- ↪ Whether she can work, be a wife and mother are tougher to answer questions.
- ↪ Hopefully, will become her own advocate.

Case Study #2

C.D.

C.D.

- ↪ Young lady 9 years post-injury. (Was a passenger thrown from a vehicle and the driver of the other vehicle was killed)
- ↪ Initial GCS 5/15, coma X 2/52.
- ↪ Acute and rehab stay of 9/12.
- ↪ Amazing family support. (Tough love)
- ↪ Significant language and memory impairments.
- ↪ Initial career goal was to become a teacher.
- ↪ Completed a technical school diploma program in Early Child Development.
- ↪ At present, employed in a clerical support position with a government department.

Positives

- ↪ Bright academically pre-injury.
- ↪ Nice engaging young lady with limitations that people accept.
- ↪ Amazing family support.
- ↪ Lack of awareness of her limitations (Could not remember the kids names)
- ↪ Very goal oriented.
- ↪ Knows what's "pointless"
- ↪ Strong work ethic.

Negatives

- ↪ Lack of awareness of her limitations.
- ↪ Extremely vulnerable in the community. Socially naïve.
- ↪ Not always agreeable or compliant with others suggestions or recommendations.
- ↪ Tends to "fly by the seat of her pants".

The Future

- ↪ Surpassed most everyone's expectations, except her own.
- ↪ Has had vocational success including promotions.
- ↪ Has been involved in a long term relationship.
- ↪ Whether she can work, be a wife and mother remain to be seen.
- ↪ Will be vulnerable for life.

Case Study #3

E.F.

E.F.

- ↪ Young man 9 years post-injury. (Was a passenger thrown from a vehicle)
- ↪ Initial GCS 6/15
- ↪ Acute and rehab stay of 2/12.
- ↪ Supportive family (Some enabling)
- ↪ Had lots of follow-up and opportunity.
- ↪ "Academic under-achiever"
- ↪ Behavioral related interpersonal problems is the overriding issue
- ↪ At present, vocational programming is recommencing.

<u>Positives</u>	<u>Negatives</u>
<ul style="list-style-type: none"> ↪ Successful short-term work trials. ↪ Unlimited potential!!!! ↪ Supportive family. ↪ Supportive school. ↪ Supportive insurer. 	<ul style="list-style-type: none"> ↪ Difficult to engage. ↪ Confrontational ↪ "Goalless" ↪ Justice system involved. ↪ Substance use issues. ↪ People do not want to have him around them.

The Future

?

My best guess is that the ongoing problems are more the result of the brain injury than anything else.

Ideas to go Home With

- ↪ Start thinking about vocational options early on. Maintain a proactive approach.
- ↪ Use of volunteer and/or work trial placements.
- ↪ Use of high-school work preparation/experience programs
- ↪ Academic success does not ensure vocational success.
- ↪ Poor academic performance does not equate to poor vocational outcomes.
- ↪ Job site visits must include physical, psychosocial and cognitive demands analyses.
- ↪ Monitor the RTW for a long time. Job maintenance is more important than job attainment.

Ideas to go Home With (Cont'd)

- ↪ What's tolerated at home or school is often not tolerated in the work force. (Tardiness for eg.)
- ↪ Get to know what's available in your own community. Often government vocational funding is directed at disabled and low-income earner's.
- ↪ On the job training is more successful than academic retraining.
- ↪ Get them in the door and let them show their stuff.
- ↪ Timing is everything !!!!!!!

Ideas to go Home With (Cont'd)

- ↪ "Start low and go slow"
- ↪ Don't burn an employer.
- ↪ Job demands WILL have an impact on other aspects of their lives and their ability to function.
- ↪ Remember, most of the clients that we deal with at this age have no established work history.
- ↪ Severity of injury does not equate to vocational outcome.
- ↪ Success is more often related to behavioral and/or interpersonal issues than actual job performance.

Case Study #4

A Personal Touch

Megan Patterson

- 19 yrs/1996
- Completed 2 yrs Commerce at U of S -
- MVA
- Initial GCS 8/15 , Coma 2/52
- Acute/Rehab stay 2/12
- Vocal chord damage
- Diplopia (crossing double vision)
- Right side hemi-paralysis
- Significant speech/breathing difficulties
- Returned to University

At University...

- Audited 1 class - took 1 class for credit
- Took summer of '97 off to have eye surgery at John Hopkins
- Utilized Disabilities council
- Change major from Finance to Marketing
- Finished last 2 years in 3 years
- 2000 Graduated with BComm

Vocational Experiences:

1 - CIBC:

- Summer '98
- Customer Service Rep

2 - Procter & Gamble

- Summer of '99
- FTE 2000 - now
- Account Manager

Vocational Experiences:

1 - CIBC: Customer Service Rep

- Customer Service Rep = bank teller
- Known employment - in different city
- 4 Month summer position
- New work process introduced - balancing at the end of each shift

Megan Patterson

- What didn't work:
- Assuming previous job would be a good fit
- No consideration to limitations
- Demanding work environment
- No workplace adaptations
- Lack of confidence
- Not utilizing vocational counseling

Vocational Experiences:

2 - P&G: Various positions

- Account Manager: Summer '99
- Tracheotomy: Jan'01 - Disability
- Analyst: Sept'01 - Mar'02
- Special Project Manager: Mar'02-Jan'03
- Planning & Operations Manager: Jan'03 - ?

Megan Patterson

↪ What worked (P&G):

- ↪ Employer committed to finding right fit
- ↪ Breathing - self confidence - believing in myself
- ↪ Being an amicable employee
- ↪ Controlled environment - flexible hours
- ↪ Understanding how I would be successful
- ↪ Willing to put in extra effort
- ↪ Open discussions with employer/other employees
- ↪ Work place adaptations
- ↪ Being patient!

The Future

- ↪ Interests have changed based on experiences
- ↪ Foresee myself at P&G in Toronto for awhile
- ↪ International transfer?
- ↪ Continue to volunteer, within ABI community for now
- ↪ Certainly be a good wife and mother if those are the roles I choose

Questions?