Vol 10, Issue 2 **July 2016 - December 2016**



1. Introduction

Welcome to the second Progress Report of 2016. We open with a profile of some INSWABI members from Singapore. This is followed by a report on a Disability Conference attended by Dr Thomas Strandberg. We then update everyone on two research projects currently being undertaken by INSWABI members in Ireland and Australia respectively. A number of recent publications by INSWABI members and new initiatives are then profiled. In particular, the recent special issue of the Journal of Social Work in Disability and Rehabilitation that

2. Membership Profile



Tess Hng Lijie Tan Tock Seng Hospital **Rehabilitation Centre**

I have been a social worker for the past 10 years. After graduating locally with the

National University of Singapore, my initial years were spent working in the community with the juvenile delinquents and families with children from low income families. In the next 6 years and counting, I have been working as a medical social worker at Tan Tock Seng Hospital Rehabilitation Centre (TTSH RC) with patients with various disabilities, such as amputees, spinal cord injuries as well as brain injuries.

In the recent years, the focus of work with these groups of patients is on social integration. With the larger goal of inclusiveness in mind, the medical social workers in TTSH RC are working on various projects, such as individual case management, caregivers' projects and patient support groups. With the patients support group, published a range of articles led by INSWABI members is showcased. The 10 articles in the special issue addressed contemporary perspectives for social work in acquired brain injury. There is then a notice about upcoming conferences and an update about the work of the Executive Committee. Finally, in our membership news, we have a moving tribute to Ramona Bray, an INSWABI member from Canada who recently passed away at far too young an age.

Please enjoy.

Grahame Simpson Patti Simonson

we hope to build the capacity of the patients for them to reach out to other persons with disabilities to enhance social integrations by reaching out to those in isolation. We are still working on outcome measures to evaluate our progress.

Singapore has made vast improvements for the past 10 years in its provision of physical infrastructure for persons with disabilities. However, much remains to be done in terms of the social integration for persons with disabilities. The lack of support systems for persons with disabilities in the community means that the patients often face great challenges in trying to live independently and face a heightened risk of institutionalization. However, with increasing focus and more national budget allocated to disabled populations, there are growing opportunities ahead. It is exciting as much as it is challenging and in TTSH RC, we look forward to the opportunities ahead.

July 2016 - December 2016

JoJo Yang, Geraldine Foo, Sherylene Heah, Singapore General Hospital



Ms Sherylene (middle),
Ms Geraldine (right)
and Ms Jojo (left) are core members of Neurosurgery

and Rehabilitation Medicine units in Singapore General Hospital.

Ms Geraldine Foo holds an Honours degree in social work from the National University of Singapore. She has worked in two hospitals as a medical social worker (MSW) and has been in the field for about nine years. She works closely with Neurosurgery unit to provide first line of support to patients with TBI and their caregivers. She has co-developed a psycho-education booklet for patients with traumatic brain injuries and their family members. The booklet has contributions from a multidisciplinary team consisting rehab physicians and allied health professionals and covers a wide range of topics such as medical information, nutritional advice, information on managing stress and relevant resources in Singapore. Along with other MSWs, Geraldine has designed a one-to-one education programme for TBI caregivers which incorporates a counseling component. She also collaborated with the National Neuroscience Institute and Tan Tock Seng Hospital to organize a retreat for patients with TBI and their caregivers in 2014 and assisted in some of their support group meetings. Geraldine participates in the weekly TBI grand ward round with Rehab physicians and therapists to identify suitable patients for early rehabilitation. Handover and close collaboration with the Rehab MSWs have contributed to the seamless transition of our patients.

Ms Shervlene Heah completed her Master's degree in social work at The University of Chicago, School of Social Service Administration. She has been in the field of mental health and medical social work for close to 14 years. Her interests include chronic disease management, support for persons with disabilities and integrated care. At the Singapore General Hospital, she supports the department of rehabilitation medicine by providing psychosocial care to patients, leads a team of nine social workers, provides training and education, and deputises the Peer Support Programme. She also oversees the setup and planning for the Singhealth community hospitals which aims to provide excellent sub-acute care and slow stream rehabilitation within regional health systems.

Ms Jojo Yang holds a Master's degree in Social Work from the University of Hong Kong. She has been working with the Rehabilitation Medicine team in Singapore General Hospital for the last seven years. Her interests spans across the provision of clinical services and research development. She has participated in a few research studies i.e. a longitudinal study on the quality of life of patients with TBI and their caregivers and a qualitative study on the needs of caregiver needs in their transition from hospital to the community. She has played a key role in the collaboration with community partners to provide employment support for persons with acquired disabilities and has journeyed alongside patients in achieving their rehabilitation goals.

All three MSWs are active members of Rehab network in Singapore.

July 2016 – December 2016



Yung Hsiang Lee, Changi General Hospital

I obtained my degree in social work from a university overseas and started working as a social

worker in a special school before moving to a hospital. In the hospital, I was in the Rehabilitation Medicine wards and developed an interest in working with the patients who are referred to the wards and clinics. Because of that interest, I pursued my post-graduate studies in Clinical Rehabilitation and am now working in Changi Genral Hospital and am still in the Rehabilitation Medicine wards and clinics.

Presently, I work with the patients of various medical conditions, namely stroke, amputations, brain injury, spinal cord injury, and respiratory issues. These patients have a wide range of issues and I work with the team of therapists and doctors and nurses to assist the patients and their family members to cope with the patients' medical issues as well as try to get the patients back to their previous lifestyle by introducing them to sports and even talking to them about going back to work.

I am also working with the therapists and case managers to run support groups for the patients and their family members. During the support group meetings, we offer them emotional support on top of the information on community resources. I have been advocating a lot for my patients, especially those with traumatic brain injury, to return to work and am actively working with the team to prepare the patients and their family members in this area. Most of the patients do not seem to realize that they can return to work, and I will educate them on the possibility. With their overcoming their apprehension, I will then refer them to the appropriate agencies to assist in getting them jobs. There is a lot more that can be done for those patients with traumatic brain injury as the awareness of their

"invisible disability" is not as well-spread, and I do hope I can be one of those who can help educate the public on this group of patients.

3. Conferences



I participated in a conference in Gothenburg the 28th-29th of November arranged by the Swedish NGO for people with acquired brain injury. The

conference theme was "Living the whole life after ABI". There were keynote speakers from different fields; medicine, occupational therapy, neuropsychology and rehabilitation technology and six different parallel sessions to participate in during the conference. One of the presentations was about the plasticity of the brain and new research across that area. The parallel sessions were more practice orientated with good examples from the field, for examples, rehabilitation activities, daily activities and information strategies for people with ABI and the next of kin. The conference had also invited one person to speak about her own experience of living with ABI (see below for a picture of Jessica Thåström presenting)



Approx. 150 delegates participated in the conference including researchers, practitioner and people with brain injuries and next of kin.

July 2016 - December 2016

On 7 November 2016 doctoral candidate Marie Matérne (and INSWABI Executive Committee member) presented on her progress at the midway point of her PhD at Örebro University. Her study – Returning to working life after ABI – was reviewed and examined by professor Berth Danermark and associate professor Ann Björkdahl. The seminar was well-attended by researchers and practitioners from the research area and the rehabilitation field. We congratulate Marie for a well performed defence of her research and wish her good luck for the rest of her research journey.

Thomas Strandberg

4. Research

From two different parts of the world, we have social workers working on an important issue, namely the needs of children who have a parent or other older relative who have sustained an acquired brain injury.



Family research project at National Rehabilitation Hospital Dublin

The Social Work
Department at NRH
was able to obtain a
small grant so that

one of the staff, Phil Butler, could take some time out to adapt Audrey Daisley's work (UK) on integrating the needs of child relatives into ABI rehab programmes. Phil and myself went to visit Audrey in Oxford in August who was extremely helpful and has so much experience in this area. Phil is now working on adapting this work for use at the NRH by means of a staff manual and other resources. The project has been done in collaboration with University College Dublin.

The other project I have been involved in is reconfiguring the Paediatric service here so that we can do more outreach and pre-admission work particularly with children with ABI. (One of the documents we used as part of the review and plan was the Victorian Paediatric Rehabilitation Service Model of Care 2012).

Anne O'Loughlin, Ireland

Life altering effects on children when a



family member has an Acquired Brain Injury; a qualitative exploration of child and family perceptions.

The aim of this research is to involve consumers with a lived experience of Acquired Brain Injury (ABI) in how SA Brain Injury Rehabilitation Services (Brain Injury Rehabilitation Unit [BIRU] and Brain Injury Rehabilitation Community & Home [BIRCH]) can best support and educate children about brain injury. Qualitative interviews with children and family members will be the first phase of research which will aim to elicit information about their lived experience of brain injury and gather information specific to their experiences, any perceived lack of support/information and how services could have best supported their children. The second phase of the research is expected to thereafter develop an age-appropriate children's brain injury education program or 'toolbox' of tools which will encapsulate the reported topics, content and method of delivery from consumers regarding children's needs. The developed program and/or tools will thereafter be run and evaluated from the facilitators, children's and family's perspective.

Ethics approval has been granted and the

July 2016 - December 2016

project will get underway in 2017.

Dr Maggie Killington, Kate Dawes and Ashley Belcher, Australia

5. Publications, Resources, New Initiatives

Raising Awareness of Acquired Brain Injury - Dr Andy Mantell



As we know social workers often struggle to understand the impact and implications of acquired brain injuries (ABI).

Consequently, the Brain Injury Social Work Group, in conjunction with the British Association of Social Workers and Irwin Mitchell has produced a practice guidance leaflet to raise awareness in the profession.

The guidance highlights some of the common sequalae of ABI, before exploring some of the dilemma's that can arise. The guidance then suggests important ways to support a person with ABI in their social environment.

Together with tools such as the Brain Injury Screening Index, which helps practitioners to identify if a person may have experienced an ABI and the Brain Injury Needs Indicator, which helps practitioners to assess their social care needs, it highlights initiatives being undertaken to promote good practice with people with ABI.

The Brain Injury Social Work Group's ABI, Practice Guidance is available from:

http://www.biswg.co.uk/ABI%20Practice%20Guidance%20BISWG.pdf

The Disability Trust Foundation's Brain Injury Screening Index is available from:

http://www.thedtgroup.org/foundation/about-thefoundation/brain-injury-screening-index

The Brain Injury Rehabilitation Trust's Brain Injury Needs Indicator available from: http://www.thedtgroup.org/brain-injury/bini)

The Assisted Decision-Making (Capacity) Act 2015, Ireland



The Assisted
Decision-Making
(Capacity) Act 2015,
provides a statutory
framework for
individuals to make
legally-binding
agreements to be

assisted and supported in making decisions about their welfare and their property and affairs. This assistance and support is particularly required where the person lacks, or may lack, the capacity to make the decision unaided and will be particularly relevant for many clients with ABI.

This long overdue legislation which has not yet been commenced will replace the *Lunacy Regulations (Ireland) Act 1871*. A number of new arrangements are covered by the Act, including Assisted Decision-Making and Co-Decision-Making. A process is also set out for the court to appoint a Decision-Making Representative for an individual. Advance Healthcare Directives are introduced into law in Ireland for the first time.

This will bring Ireland more fully into line with EU Directives on Human rights and Disabilities in that it is based on the principles of autonomy and self-determination. Person's rights to their dignity, bodily integrity, privacy, autonomy and control over financial affairs and property must be respected.

July 2016 - December 2016

Effect must be given to will and preferences. beliefs and values in so far as a person shall be presumed to have capacity. Capacity will now be assessed on the basis of the person's ability to understand, at the time that the decision is to be made, the nature and consequences of the decision in the context of the available choices at that time. This issue and time specific approach is a major change for professionals. The new legislation will also move us from traditionally being capacity assessors to now having roles as "capacity enhancers". The onus of establishing and supporting decision making capacity will now lie with the professional and not the decision maker. Any necessary intervention must minimise restriction on a person's rights and restriction on freedom of action. This is a very welcome development for Social Workers as we have been working with very outdated law where patients have to lose all rights by becoming Wards of Court if there are issues around capacity. Interestingly, this legislation is being introduced shortly after Ireland's Health Service Executive is introducing its first National Policy on Safeguarding Vulnerable Persons at risk of Abuse. We do not have a legislative background for this however and it is a challenge to balance risks and rights in the current climate.

Initial Validation of Two Personal Self-Advocacy Measures for Individuals with Acquired Brain Injury



Lenore Hawley, MSSW, LCSW, CBIST, Donald Gerber, Psy.D., Christopher Pretz, Ph.D., Clare Morey, MA, CCC-SLP, Gale Whiteneck, Ph.D

The purpose of this study was to evaluate the psychometric properties of two novel measures

assessing personal advocacy self-efficacy and personal advocacy activities in individuals with acquired brain injury (ABI). Although individuals with ABI and their families have a need to selfadvocate to obtain services and resources. measures of personal advocacy self-efficacy and behaviors post-ABI have not previously been available. This was an instrument development study to develop such measures using 1) expert panel review with a content validity index, 2) consumer survey, and 3) Rasch analysis. Participants were adults (N=162) with ABI recruited through a community survey. The outcome measures developed were the Self Advocacy Scale (SAS) and the Personal Advocacy Activity Scale (PAAS). Using Rasch analysis to inform instrument development, after modification based on IRT analysis, the SAS, a measure of advocacy self-efficacy, was found to be unidimensional with an eigenvalue of 1.6, exhibited monotonicity, and had an item reliability of 0.97. Similarly, the PAAS, a measure of advocacy activity, was found to exhibit monotonicity, is unidimensional (eigenvalue of 1.7) and had an item reliability of 0.97. Both measures demonstrated concurrent validity, as they were significantly correlated with other established measures of related constructs, and with each other. A separation reliability of 0.97 (real not model) for both the SAS and PAAS suggests that items will likely hold their relative positions in a similar sample. This study supported the PAAS and the SAS as reliable and valid measures of personal advocacy activity and associated self-efficacy in individuals post-ABI. Rehabilitation clinicians may consider using these measures when planning interventions designed to empower individuals with ABI as self-advocates. This study was published in Rehabilitation Psychology, 2016, Vol 61, No 1, 308-316.

July 2016 - December 2016

Special double issue of the Journal of Social Work in Disability and Rehabilitation



Contemporary
Perspectives on
Social Work in
Acquired Brain Injury
2016, Vol 15, issues
3-4

Social Work in Disability Rehabilitation

INSWABI has had a unique opportunity to produce a special double issue of the Journal of Social Work in Disability and Rehabilitation with an exclusive focus on ABI. Published in the second half of 2016 with a total of 11 articles, 'Contemporary

Perspectives on Social Work in Acquired Brain Injury' it is the largest single collection of published peer-reviewed papers produced by social workers in the field of acquired brain injury to date. As a mark of the growing capacity of social work in the field, 10 of the 11 papers had an INSWABI member as the lead author. Thanks to Lyndal Hickey, Lenny Hawley, Mark Holloway, Lauren Tyrell, Melissa Cutler, Franca-Butera-Prinzi, Annerley Bates, Maria Matérne, Thomas Strandberg and Martha Vungkhanching for their outstanding contributions.

The list of articles is outlined below. If you would like to access any of the articles, you can either contact the authors directly, or see if your institution has access to the journal. Otherwise please contact Grahame Simpson by e-mail: grahame.simpson@sswahs.nsw.gov.au

 Contemporary Perspectives on Social Work in Acquired Brain Injury: An Introduction.
 Grahame Simpson Guest Editor & Francis Yuen Editor-In-Chief

- Family Forward: Promoting Family
 Adaptation Following Pediatric Acquired
 Brain Injury. Lyndal Hickey, Vicki Anderson
 & Brigid Jordan
- Self-Advocacy for Independent Life: A
 Program for Personal Self Advocacy after
 Brain Injury. Lenore A. Hawley
- Describing an Early Social Work Intervention Program for Families after Severe Traumatic Brain Injury. Grahame Simpson, Daniella Pfeiffer, Shay Keogh & Brigitte Lane
- Acquired Brain Injury, Parenting, Social Work, and Rehabilitation: Supporting Parents to Support Their Children. Mark Holloway & Lauren Tyrrell
- Mindful Connections: The Role of a Peer Support Group on the Psychosocial Adjustment for Adults Recovering From Brain Injury. Melissa Cutler, Michelle L. A. Nelson, Maya Nikoloski & Kerry Kuluski
- Holding Resilience in Trust: Working
 Systemically With Families Following an
 Acquired Brain Injury. Franca Butera-Prinzi,
 Nella Charles & Karen Story
- Brain Injury as the Result of Violence: A
 Systematic Scoping Review Annerley
 Bates, Sarah Matthews, Grahame Simpson
 & Lyndel Bates
- A Clarion Call for Social Work Attention:
 Brothers and Sisters of Persons With
 Acquired Brain Injury in the United States .

 Charles Edmund Degeneffe
- Support Persons' Perceptions of Giving Vocational Rehabilitation Support to Clients With Acquired Brain Injury in Sweden.
 Marie Matérne, Lars-Olov Lundqvist & Thomas Strandberg
- Social Workers' Perceived Role Clarity as Members of an Interdisciplinary Team in Brain Injury Settings. Martha Vungkhanching & Kareen N. Tonsing

July 2016 - December 2016

6. Upcoming Conferences

THE 12TH WORLD CONGRESS ON BRAIN INJURY



12th World Congress on Brain Injury

The International Brain Injury Association will be running the 12th World Congress on Brain Injury in New Orleans from 29th March – 1st April 2017. INSWABI member Grahame Simpson is on the International Planning Committee. The call for abstracts is now open. The IBIA World Congresses are normally held biennially, however they have wanted to move the conference from the even years to the odd years to avoid clashes with other conferences and so the New Orleans conference is a one-off, in being only one year after the recent 11th World Congress that was held in The Hague (see point 3. Conferences above).

NNDR 14th Research Conference



The 14th Research Conference of the Nordic Network of Disability Research is being held at Örebro University in Sweden. INSWABI Executive Committee member Thomas Strandberg is closely involved in the organisation for this conference which provides a forum for researchers, policy makers, activists and practitioners to share scholarship and ideas. The call for abstracts is now open.



9th International Conference on Social Work in Health and Mental Health

The 9th International Conference on

Social Work in Health and Mental Health will be held in York in the United Kingdom in 2019. INSWABI Executive Committee member Andy Mantell has been invited to be part of the conference organising committee which is very exciting as it will mean that INSWABI will be able to liaise closely with the organising committee in planning our participation in the conference. Read about the INSWABI participation in the recent 2016 8th International Conference in Singapore in the Special Progress Report supplement.

7. Committee news







The INSWABI Executive Committee was established in 2010 during the International Social Work conference held in Dublin. The committee runs on 3-year terms. The Executive Committee for 2016-2019 has been finalised and met for the first time in September 2016. In addition to the usual general business, the committee will be working on establishing the INSWABI website and kicking off the psychosocial assessment framework projects.

Finally the INSWABI website is coming soon. We are hoping for the website to go live in May/ June 2017!

July 2016 – December 2016

Our hope for this website is that it is a resource for Social Workers who work in Acquired Brain Injury all over the World. This website will have have information about INSWABI and who we are, information about the committee, ABI Social Work research, a resources page, information about past and upcoming conferences, a FAQ page and a registration tab for new Social Workers.

If you have ideas or there is information you would like to see on the website please let Grahame know. We would love to hear your ideas as we want this website to a resource you use.

8. Membership

New members

A warm welcome to our new members from

Naoise Waldron Ireland

Sarah Carroll Canada

Sherylene Heah Singapore

In memory of Ramona Bray



I am grateful to have been asked to write something to remember our late colleague, friend, and fellow INSWABI member, Ramona Bray. Grateful because it's helpful to piece together the many recollections I

have of Ramona since Jane Stretton and I first interviewed her in 1986. Ramona's resume was unusual and piqued our interest, but it was her interview style that made such a strong impression. Ramona was applying for a job, yes,

but it had to be a job she really wanted and she had lots of questions!

Of course we offered her the job-what else could we do?

From the outset, Ramona was a force to be reckoned with. Several traits stood out above all: her endless commitment to new learning, her capacity for hard work, her intense pride in our profession, and her love of order. There was no situation Ramona could not wade into and set things right. The most angry, conflicted or desperate clients and families were her people and she cared deeply about finding a way to help them. She did this through reading, reflecting and developing assessment tools and educational manuals to help her refine her counselling skills and to encourage clients to help themselves.

After many years in public health care, Ramona made the leap to private practice and was very proud of her success in this area and the high regard in which she was held in the legal and private service communities.

Ramona had surgery in August and despite a promising early recovery, had to be re-admitted to hospital late last fall and sadly died in ICU on January 17, 2017. She leaves her partner, Andrew, her mother, Carmen, her sister Diana, and her brothers Charles and Sean. She was predeceased by her beloved father, Charles Sr.

Cathie Percival

July 2016 - December 2016

9. Pass this on.

Please circulate the progress report to any of your colleagues who might be interested.

10. Interested in joining INSWABI?

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Acknowledgements:

Thanks to Catherine Simpson for design and formatting.