



# TAKE A STAND!



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With the financial participation of:



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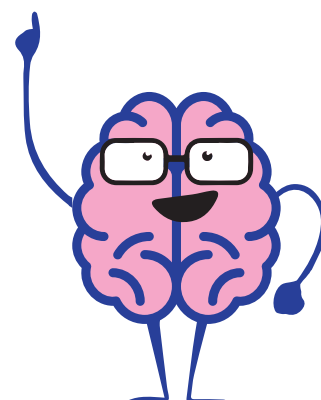
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# PREFACE

**It is an honour for me to present this worthy initiative of the Connexion TCC.QC! organization**

As a psychologist, I have had the privilege of working for more than fifteen years with people who have suffered a traumatic brain injury (TBI), their families and their service providers, primarily through the Association Québécoise for cranial trauma (AQTC), and sometimes through the grouping of such associations known under the name, which suits it so well, of Connexion TCC.QC, a bridge between the various associations in Quebec.

The summary that follows focuses mainly on the social participation of this valuable clientele AND their relatives, resilient guardians who also need to be supported.

It can be difficult for a person with TBI to function as before, to carry out projects without assistance and to integrate into all spheres of society. Whether it be because of a problem with communication, organization, initiative, budget, motor skills, emotional status, or behavioural sequelae, or even difficulties with memory, concentration or orientation, it is probable that life has changed drastically and that survivors have to face many obstacles daily, if only significant fatigue, making a daily nap necessary. Life as this person knew it has been turned upside down, has taken an unexpected turn in a fraction of a second... Therefore, anyone who has had a TBI needs to be recognized, encouraged for their strengths and offered support.

Relatives do their part in the face of other kinds of trauma and challenges, requiring all their resources, and an extraordinary level of adaptation.

These stakeholders can benefit from a conceptual model such as the MDH-PPH (Human Development Model - Disability production process), which considers that "disability situations are the product of the interaction between a person and their environment and are not only related to deficiencies and incapacities..." This is a critical nuance which takes an enormous weight off the shoulders of the person who has a limitation, a difficulty, or an idiosyncrasy and leads to advocacy for changes to the environment, allowing the best adjustment...

***However, it should be considered that the obstacles and facilitators encountered vary for each person with disabilities. What appears to be an obstacle for one person may be a facilitator for another. It is therefore important that people with disabilities and their representatives are consulted before the implementation of facilitators or barrier reduction measures.***

Quote from Mr. Francis Charrier when he was International Network Coordinator for the Handicap Production Process (RIPPH) in 2013.

***When a person can satisfactorily accomplish their lifestyle habits, it can be said that they are in a situation of social participation. If they encounter difficulties that hinder or disrupt the achievement of these, it is only then that they are disabled...***

Quote from Mr. Jean-Pierre Robin,  
President of RIPPH.

We must, therefore, lower as many barriers as possible both for this clientele who have a multitude of issues, many of which are invisible, as well as for their loved ones. The best way to know their real needs is without a doubt to let them talk!

This is precisely what Connexion TCC.QC has been able to do masterfully with the *Take a stand!* Colloquium 2.0: Connected and engaged. You will have the chance to read the summary workshops where people who have suffered a TBI and their relatives were able to take stock of the obstacles and facilitators they have encountered since their accident or assault while offering some possible solutions.

Awareness-raising is at the heart of greater social participation, as the many potential and pernicious prejudices can be challenging obstacles with unsuspected impacts...

In my opinion, the following texts should be read with interest, curiosity, a desire to better understand and act differently, among other things by communicating better, by analyzing more, by opening doors, by facilitating the passage...

In an editorial on the theme of Universal Accessibility, I wrote that I wanted a society that brings people to realize that difference, when not taboo, is incredibly rich through the encounters, the creative adjustments and the accomplishments that it allows... A society that emphasizes the strengths of everyone, which organizes its services, jobs, projects, communications, and infrastructures to be accessible to all... A society that relies on a synergy of adaptation, one person to the other so everyone finds their place, exploits their potential, achieves satisfactory social participation and where unnecessary obstacles no longer exist...

Hats off to you, and thank you, Connexion TCC.QC, for this momentum leading us in this direction!

*Marie-Leda Fleury*

M.A., psychologist



# INTRODUCTION

The year 2020-2021 will have been different for everyone. The health context caused by the COVID-19 pandemic led to changes in Connexion TCC.QC plans for the Symposium (Colloque) for people who have suffered a **TBI** (traumatic brain injury.) Usually, this seminar organized for people with TBI brings together nearly 200 participants. The working committee on the symposium for people with TBI is proud to have contributed to offering the Colloquium 2.0: connected + engaged to the TBI associations in Quebec for the benefit of their members.

The expertise of the TBI associations on the committee made it possible to be in tune with the reality on the ground. For example, it was essential to consider that not everyone has access to the internet. Therefore, a questionnaire based on the virtual meetings was developed to be more inclusive and to allow these people to express themselves.

Therefore, this document brings together the comments collected (*Take a stand! Workshop*) during the virtual meetings and from interviews carried out by the facilitators in individual and telephone meetings.

N.B. The words in **blue** in the text are found in the lexicon at the end of the document.

## In context

As part of the 2.0 Colloquium, Connexion TCC.QC proposed a series of workshops entitled *Take a stand!* on the theme of **social participation** of people with traumatic brain injury (**TBI**). The virtual workshops made it possible for exchanges on several subjects and they gave rise to a good discussion on the realities of the participants.

Relatives of people with TBI were also invited to “take a stand”. These special meetings made it possible to raise several critical issues in each group which will be detailed in this document. The committee is proud of the excellent social participation.



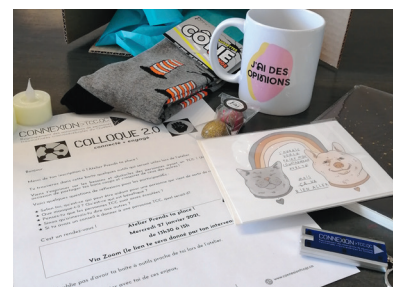
## Boxes



In effort to increase concentration and energy during the virtual workshops and to illustrate their content, participants received a toolbox delivered directly to their homes. The workshops were divided into different themes, and an object was associated with each of them.

It was an impact technique that helped the person reflect or move forward regarding the question being asked.

In order to thank the family caregivers for their participation and to recognize the time they invest for their loved ones' care, a ready-to-eat meal box was delivered to them directly at their homes following the workshop.

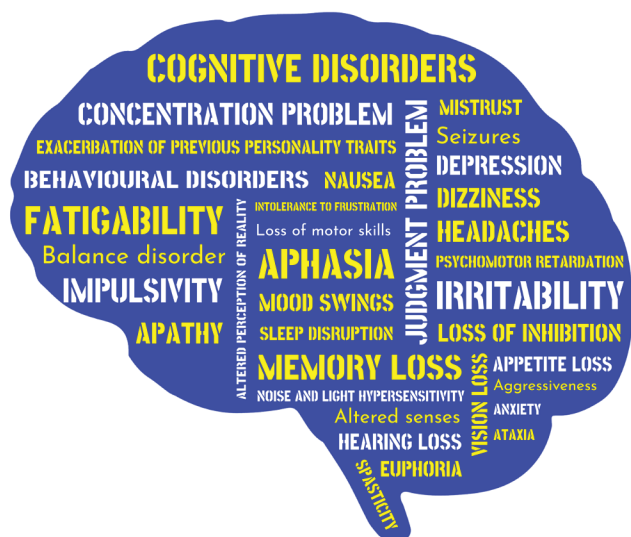


## Connexion TCC.QC: Grouping of associations of people with Traumatic Brain Injury of Québec

Connexion TCC.QC, founded in 1999, is a non-profit organization that defines itself as a privileged speaker in terms of the needs and services offered to people who have suffered a traumatic brain injury and their loved ones. Its mission is to bring together, support, represent and promote cooperation among regional member associations that work to improve the quality of life of people who have suffered a traumatic brain injury and their loved ones throughout Quebec.

Between 2013 and 2016, 6,089 people diagnosed with moderate or severe TBI were admitted to designated trauma network facilities.<sup>1</sup>

The 13 regional associations are members of Connexion TCC.QC and help more than 5,000 people with TBI and their families.<sup>2</sup>



## Definition of TBI

"Brain trauma or traumatic brain injury (TBI) is an injury of a physical nature that involves tissue in the brain. The trauma can damage the cranial bones, for example, by producing a fracture, but it is not uncommon for the trauma to leave no visible mark on the skin or the cranial bones while there is damage to the brain. This injury results in impaired brain functions either temporarily or permanently."<sup>3</sup>

TBI is classified into three categories according to its degree of severity:

- **Mild TBI:**

Often referred to as a "concussion," it does not cause a coma or brain bleeding. Instead, there is usually a loss of consciousness, a disconnection of the brain during this time. The effects are expected to wear off in 2 to 4 weeks.

- **Moderate TBI:**

It is characterized by a short-lived coma and bleeding from the brain visible on a scan. The effects are more severe and lasting than a mild TBI.

- **Severe TBI:**

The coma is more profound here, and the sequelae are more significant.

Visit our website:

[www.connexiontccqc.ca](http://www.connexiontccqc.ca)



1 Portrait of the Quebec network of adult trauma: 2013 to 2016, INESSS, p.28

2 Portrait of the 2019-2020 members. A survey conducted among member associations in March 2020 by Connexion TCC.QC

3 National health training consortium, University of Ottawa / Traumatic brain injury component



# FINDINGS

Following the *Take a stand!* workshops, several observations and issues were raised by the participants. While everyone is unique, many elements intersect in the journey of a person with TBI and that of those close to them.



## REHABILITATION, AN ORDEAL TO OVERCOME

### Access to information, not always easy

Little information is available to people with TBI and their families following the accident. They would have liked to have access to more information.

*Access to information is the key!  
I was taken care of (...) : I had access  
to a social worker, an **ergo**, **sexo**, etc.*

### Social isolation

The social isolation that follows an accident can be very difficult. Many lose most or all of their friendships, as well as their jobs, both of which are the main vectors of social bonds.

*I lost all my friends.*

### The importance of having a network

People with TBI feel surrounded and supported. Support of loved ones is essential in the rehabilitation phase, especially when other people from their social network are no longer present in their lives.

*Support from my spouse, friends  
and family was important."*

### Access to care and specialist

Access to care and specialists is, however, a positive point. Medical and paramedical care are repeatedly mentioned as having actively helped in the improvement of their condition during rehabilitation.

*"During my stay at **IRDPO**, I had a  
lot of support from the facility staff.  
I had regular visits from my spouse,  
my daughter, my parents and my in-  
laws which did me a lot of good. My  
support network helped me greatly in  
my rehabilitation.*





## ADMINISTRATIVE PROCESSES, A LONG AND CONFUSED JOURNEY

Those affected by TBI, like their families, find themselves propelled into another world. One of uncertainty, of the hospital, of sequelae, etc.

### Finding the right resources is not always easy!

For many, finding the right resources early on is really difficult. The participants would have greatly appreciated having a written guide to explain what will happen to them, the resources, the possible help, etc.

*“My mother would have liked to have had access to more support, resources and information. She had to miss days of work, she was unaware that she could have had financial support and moral support as well.”*

### The complexity of the procedures, difficult to navigate

The administrative procedures following the accident are cumbersome and complex: lack of access to a family doctor, to a telephone list of good resources, to associations, etc. There is a feeling of being “your own secretary” and the need for more help, especially with administrative aspects.

*“Having contacts to help our situation: home help, driving license to redo... It is very demanding in terms of energy. Just to have someone backing us up would be huge. All this affects morale.”*

*“We don't know where to find the info.”*

### Find the paying agent

Depending on the type of accident suffered, the aid or financial resources are not the same. In fact, a person injured in a car collision will have financial support and a resource person at the SAAQ. For other injured people, relatives must find adequate resources on their own. The loved one may have to quit their job to care for the injured person full time, thus depriving themselves of income altogether. The financial insecurity, but also the possible social isolation that results from it, are experienced as additional hardships.





## THE DIVERSITY OF THE ISSUE

People and each journey are different.

After an accident, a person with a traumatic brain injury goes through different phases and experiences various and similar problems.

*We all have a different story...*

### Aftermath, a harsh reality that strikes

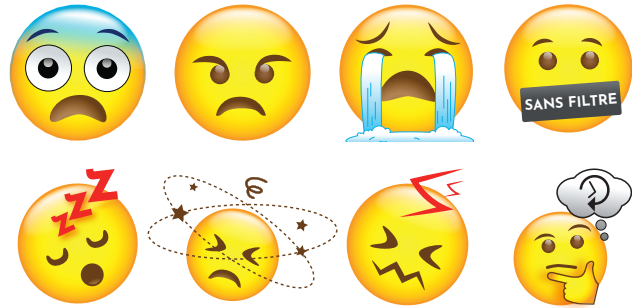
The sequelae of a TBI are multiple: memory loss, attention deficit, speech difficulties, fatigability, motor difficulties...

These invisible sequelae lead to sidelining:

*...others don't even think to ask me my opinion, because it's no longer worth anything. My mom has to be with me for me to be taken seriously.*

Speaking difficulties, for example, can be associated with other issues and lead to exclusion from debates or discussions.

*Because of my poor pronunciation, people associate it with intellectual disability, so my opinion does not count; we are seen as less valuable. It should be explained that pronunciation difficulties are not necessarily associated with intellectual disability. Increased awareness is necessary.*



### A hidden handicap: TBI is more present than you think

A multitude of sequelae characterizes traumatic brain injury.

These are all obstacles to everyday life that are not perceived by the outside world and/or are confused with other issues, leading the individual to be excluded from discussions or society in general.

This invisible trauma can cause great harm and create a feeling of misunderstanding, rejection or exclusion.

*It's not physical or mental; it's in our brain. So it's invisible.*





## THE DIVERSITY OF THE ISSUE

### Need for support

After an accident causing a TBI, people need medical follow-up, moral support, and accompaniment.

Well-coordinated medical services and a reassuring presence of the regional association team are essential for moving forward.



### Transport, not always suitable

Named several times as an important issue, the lack of accessibility to transport is a considerable limit to the autonomy of persons with TBI.

Many can no longer drive, and existing transport is either poorly adapted, inaccessible or both.

*Transport is not suitable and not accessible. It becomes a barrier to access other things and seeing people. It leads to a lot of waste of time.*

### Need for recognition

People with TBI wish to have a place in Quebec society and lament not being recognized as full citizens.

Having an activity, even without a salary, would make it possible to continue to be dynamic and connected with other people outside the framework of people with TBI: adapted work, volunteering, etc.

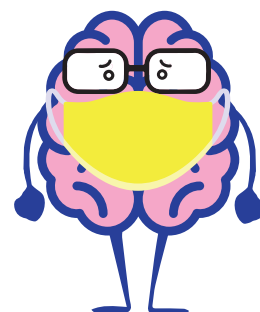
*We can always do a little."*

*"Unite and promote your opinions and your rights because we are human first and foremost!"*

### COVID-19, an additional issue in the process

Participants saw that the COVID-19 pandemic changed what little resources they had. Some people who had been living in a residence then returned to live with their families. The activities and services of the associations were reduced or modified. We had to adjust to virtual activities. It was also mentioned that the support of associations during the pandemic was very helpful, whether it be telephone support meetings or a return to respite services.

Note that respite services are considered essential, and several associations continued them to help clients.





## ISSUES EXPERIENCED BY RELATIVES

### Lack of information

In addition to the anguish of the early days when loved ones didn't know how the situation would unfold, there was a lack of information about TBI once diagnosed. They did not know the consequences of a TBI or what were the steps to come.

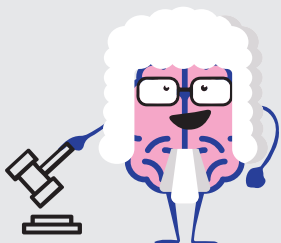
*No one explained everything to me at first. As if they were waiting to see which direction it would go (progress or not). I wish I had received all the info on TBI sooner.*

#### To note:

In the **Law on Health and Social Services**, it is stated that people have the right to know what their state of health is:

*"Everyone has the right to be informed of the existence of the health and social services and resources available in their environment and how to access these services and resources. 1991, c. 42, a.4."*

*"Health and social services users have the right to be informed on the status of their health and their well-being to know as much as possible the different options available to them as well as the risks and consequences generally associated with each of these options before consenting to them."<sup>4</sup>*



### Aging and exhaustion

For parents, it is difficult but necessary to think about their child after their death to ensure that the person with TBI will continue to receive care and have someone present for them. The existence of associations reassures them, but the issue is not resolved.

*We start to think about "After": who will care for our son after we leave?"*

*"We have to think about what comes next; we are tired. We are getting older..."*

### Access to psychological and financial resources

Relatives have to change their life, sometimes stop work, pay for a lot of care and specialists and face great psychological distress.

However, no one clearly tells them where to find support, be it psychological or financial.

The loved one may have to quit their job to take care of the TBI person full time, thus depriving themselves of income altogether. Financial insecurity and the resulting possibility of social isolation are experienced as additional hardships.



4 "General provisions" in Québec. Act respecting health services and social services, c. S-4.2, updated to December 10, 2020, [Québec], Québec official publisher, chap. Art. \* 4-8.





## ISSUES EXPERIENCED BY RELATIVES

### Recognition of informal caregivers, an appreciable element

Caring for a person with TBI is very demanding mentally and physically. Relatives would like to have real recognition of the work they do daily. Their contribution should be recognized not only by the medical profession by seeking their involvement in decisions related to the person with TBI but also by the administration.

*We should be able to count on help for this “new job,” which is to support the person with TBI. Recognize our contribution and ensure coordination with health teams.*

*I feel lonely. We are alone in front of a big machine. We need to understand, to get support and advice as well as to be heard.*

### A change of life

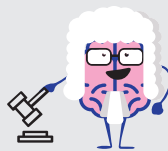
The loss of many faculties, or a change in personality brought on by the accident, causes relatives to feel that they are living with a stranger.

*I thought he was no longer my husband; I felt like I was living with someone I didn't know anymore. It's like he's not the person I had chosen.*

#### To note:

**Bill 56: An Act to recognize and support informal caregivers and to amend various legislative provisions.**

In October 2020, the government adopted Bill 56, the first Bill dedicated to informal caregivers in Quebec history. The primary purpose of the law is to recognize all caregivers and to develop measures to support them in the different spheres of their life.<sup>5</sup>



*The woman I married died the day of the accident. She is now a new person to discover.*

These “family tragedies” often involve a change of life: temporary or permanent loss of employment, frequent medical appointments, significantly reduced social life.

*You have to make family choices; it requires a lot of involvement which means having less time for other things or other people.*

### Loneliness in hardship

Many feel great loneliness in this ordeal. They, therefore, lack documentation, an attentive ear, and support from people who have already been through this situation.

<sup>5</sup> Quebec. *An Act to recognize and support informal caregivers and various legislative provisions*, c. R-1.1, updated to December 10, 2020, [Quebec], Official publisher of Quebec, 2020.



## ASSOCIATIONS FOR PEOPLE WITH TBI, A NECESSITY!

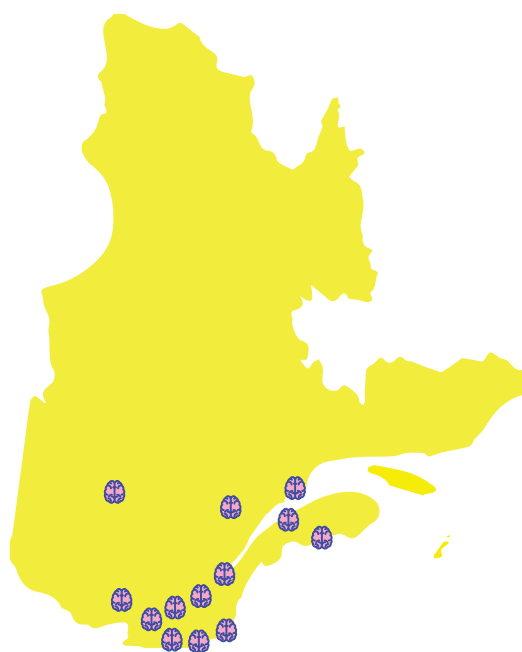
### Rele of the associations

The 13 member associations of Connexion TCC.QC cover 16 regions of Quebec and serve more than 5,000 people with TBI and their families. They support them daily by offering leisure activities, volunteering opportunities, workshops, living environments, psychosocial support, respite, support groups, social events, professional reintegration, etc..

### What the participants are saying

The association to which all the participants belong is a significant vector for social bonding for them. Associations provide a feeling of security, belonging, a place where they find active listening and support.

Everyone agrees that it is a pleasure to have these organizations helping them. People with TBI feel welcomed without judgment, and they feel valued.



#### The association is:

*"...a necessity!"*

*"...the feeling that I have more of a place in society because the activities are adapted to us, allowing us to socialize more."*

*"The TBI group helps me; I like being able to share with others."*

*"...essential for me, it allows me to have activities."*

*"...feel like we are one big family; they sometimes understand me even more than my own parents."*



## ASSOCIATION FOR PEOPLE WITH TBI, A NECESSITY!

### The association is also for me!

Whether it's to participate in leisure activities or volunteer, people feel comfortable and accepted there. Several participants report that it took them a while to decide to go to their association. In addition, some associations have a large territory, the services are centralized, and several people must then travel.

*The association allows me to:*

*Help me better understand what is happening to me. Meet people who have a past or a reality very close to mine. The workers have a vital role in my life. Do activities. Break the isolation.*

*Not to feel judged in the face of the situation I am going through. Not everyone understands TBI, but we have confidence in them (the workers).*

### The service providers, precious gems

Several people with TBI have mentioned that the stability of employees in their association has a positive social impact on the bond that unites them. People with TBI recognize the importance of having a follow-up with stable and qualified staff.

*It's priceless to have a worker for 10 years!*

and the need to vent is still present. They also stated that having a place where loved ones can talk about what they are going through is essential, even after several years.

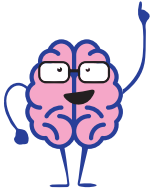
### Respite is essential!

The respite offered by associations allows loved ones to have time and feel supported. People with TBI benefit from a pleasant moment of respite adapted to their conditions.

### Group for loved ones, a vital need

Those close to them have spoken loud and clear about the importance of family groups for their support. Often, other people have been through the same thing and sharing the experience becomes more accessible. The family no longer wants to hear about issues related to the TBI, especially if it has been several years, if the situation is still ambiguous,

*These are crucial activities because it gives the caregiver a break.*



## TIPS AND SUGGESTIONS FROM ONE TBI PERSON TO ANOTHER

### Information

People with TBI and those close to them have no shortage of great ideas and suggestions for improving the situation that affects them.

In particular, all of them want the entire Quebec population to be made aware of TBI to understand their reality better:

*To be part of society like everyone else, there is a lack of a project, such as a soap opera to make oneself understood, a discussion table so that society can know what a TBI is. Find a project that allows us to explain our reality to the rest of Quebec society. There would be a significant impact if it were shown on television at times when workers could see it.*

### Awareness

During the discussions, it was recommended to sensitize young people because many accidents could be avoided or create a guide, a document explaining TBI and its consequences.

*A great book with all the possible sequelae and what to do when.*

Ask for and accept the available help.

Respect their new rhythm.



### Advices

By respecting their new limits, comparing themselves to themselves yesterday rather than to their old self, using the services of associations, believing in themselves, remaining hopeful, accepting the new person they are, by respecting themselves with their differences or by becoming active, people with TBI move towards self-acceptance and see a better future.

*Compare yourself to yesterday and not to before.*

*"No one knows how far you will go, forget the prescribed goals, believe in yourself and go for it."*

*"Accept that you are different, a new person."*

*"Become well-informed about TBI, to better understand what happens to them, because living without knowing the consequences is very difficult."*

### Sponsorship

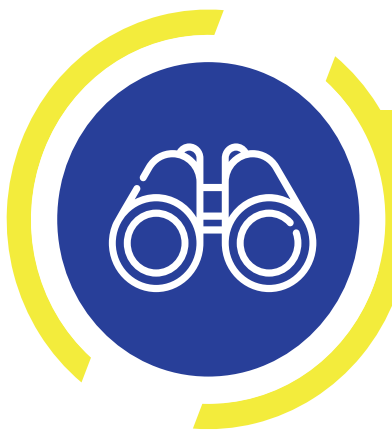
Having a match between a person who experienced a TBI some time ago and a newly injured person would make it possible to be informed of the procedures, the steps, to know the organizations to contact, but also to be listened to and supported.

### Create a routine

Having a regular rhythm, stable schedules seems essential to a harmonious daily life. This greatly helps people with TBI get used to their new reality by having stable **spatiotemporal** reference points.

*A word of advice: follow a routine schedule!*





# OUTLOOK

## There is no shortage of ideas!



Despite the winter, the confinement, and the pandemic, we can say that the *Take a stand!* workshops have been a real success. More than 96 people took part, and a whirlwind of ideas abounded; we would have liked more time!

The committee was aware of the limitations of virtual mode participation (connection difficulties, fatigue related to the screen, etc.), but the workshops still brought a breath of fresh air and collective inspiration. Those present left with a smile and the feeling of participating in a joint movement: this is an outstanding achievement of this redesigned 2.0 conference.

The main concern about this document is that it stays alive and not “shelved” and gathering dust. The opportunity to have testimonials, ideas, suggestions, and heartfelt pleas is too good to be ignored. As soon as it is possible to travel, Connexion TCC.QC aims to organize a tour to get feedback on the realities that were described, especially for implementing courses of action.

In the meantime, one of the ideas is already underway; that of creating opportunities to see the daily reality of people with TBI in a broad public context. Indeed, this idea inspired Connexion TCC.QC team, which set up a competition of life stories in the spring of 2021 that will be translated into comic strips to creatively illustrate the everyday life of people living with traumatic brain injury and their loved ones.

Associations have a crucial role in supporting people with TBI and their families. Those who attended all the workshops will take note of everything that was expressed and follow up on the proposals.

These Proceedings are a foundation for supporting future action plans; excellent prospects are opening up to improve the daily lives of people with TBI and their loved ones.



In this section, you will find ideas for services to be developed to better meet the needs of people with TBI, according to what was discussed during the *Take a stand!* workshops.

- ☒ Allow recognition of the right to receive accurate information
- ☒ Publish a directory of resources for people with TBI and their families
- ☒ Develop a distinctive sign (for people who want it) indicating that the person has a TBI
- ☒ Organize more activities, situations where people with TBI are invited, included, where they are asked for their opinions, ideas, advice
- ☒ Help improve transport
- ☒ Provide Internet access for everyone
- ☒ Promote the services offered specifically to informal caregivers in regional associations
- ☒ Further develop work experiences
- ☒ Offer group meetings between relatives, allowing them not only to share their experiences but to make friends who understand each other and to share valuable tips and resources
- ☒ Set up a committee of people with TBI to develop a guide by and for people with TBI



# ACKNOWLEDGEMENTS

Thank you to everyone who participated for sharing their experience. Thanks to you, the workshops were filled with empathy, respect, and active listening. Thank you to the service providers who attended and mobilized their members to participate in this conference!

Thank you to the TBI associations of Quebec who were able to make this virtual conference possible. Their collaboration is always invaluable.

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## ABITIBI-TÉMISCAMINGUE

Association des traumatisés crâniens de l'Abitibi-Témiscamingue (Le Pilier)

Phone number: 819-917-5487, extension 406

Website: [www.pilieratcat.qc.ca](http://www.pilieratcat.qc.ca)



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## BAS-SAINT-LAURENT

Association des personnes ACVA-TCC du BSL

Phone number: 418-723-2345 / Toll free number: 1-888-302-2282

Website: [www.acvatcc.com](http://www.acvatcc.com)



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## CÔTE-NORD

Association des handicapés adultes Côte-Nord (Comité nord-côtier des accidentés de la route)

Phone number: 418-589-2393 / Toll free number: 1-877-589-2393

Website: [www.ahacn.org](http://www.ahacn.org)



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## ESTRIE

Association des accidentés cérébro-vasculaires et traumatisés crâniens de l'Estrie (ACTE)

Phone number: 819-821-2799 / Fax: 819-821-4599

Website: [www.acteestrie.com](http://www.acteestrie.com)



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## GASPÉSIE / ÎLES-DE-LA-MADELEINE

Association des TCC et ACV de la Gaspésie et des Îles-de-la-Madeleine

Phone number: 418-759-5120 / Toll free number: 1-888-278-2280

Website: [www.tccacvgim.org](http://www.tccacvgim.org)



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## LANAUDIÈRE

Association des personnes handicapées physiques et sensorielles du secteur Joliette  
(Groupe d'entraide TCC) (APHPSSJ)

Phone number: 450-759-3322 / Fax: 450-759-8749

Website: [www.aphpssj.com](http://www.aphpssj.com)



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## LAURENTIDES

Centre d'aide personnes traumatisées crâniennes  
et handicapées physiques Laurentides (CAPTCHPL)

Phone number: 450-431-3437 / Toll free number: 1-888-431-3437

Website: [www.captchpl.org](http://www.captchpl.org)



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## MAURICIE / CENTRE-DU-QUÉBEC

Association des traumatisés crânio-cérébraux Mauricie-Centre-du-Québec

Mauricie: 819-372-4993

Centre-du-Québec (Victoriaville): 819-604-6720

Centre-du-Québec (Drummondville): 819-967-1220

Website: [www.assotcc.org](http://www.assotcc.org)



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## MONTÉRÉGIE

Association des Traumatisés crânio-cérébraux de la Montérégie

Phone number: 450 446-1111

Toll-free number: 1 877 661-2822 (450 et 514 seulement)

Website: [www.atccmonteregie.qc.ca](http://www.atccmonteregie.qc.ca)



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## MONTREAL / LAVAL

Association québécoise des traumatisés crâniens (AQTC)

Phone number: 514-274-7447

Website: [www.aqtc.ca](http://www.aqtc.ca)



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## OUTAOUAIS

Association des neurotraumatisés région de l'Outaouais

Phone number: 819-770-8804

Website: [www.ano.ca](http://www.ano.ca)



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## QUÉBEC / CHAUDIÈRE-APPALACHES

Association des TCC des deux rives (Québec / Chaudière-Appalaches)

Phone number: 418-842-8421 / Toll free number: 1-866-844-8421

Website: [www.tcc2rives.qc.ca](http://www.tcc2rives.qc.ca)



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## SAGUENAY / LAC-SAINT-JEAN

Association Renaissance des personnes traumatisées crâniennes

Phone number: 418-548-9366 / Toll free number: 1-855-548 9366

Website: [www.associationrenaissance.net](http://www.associationrenaissance.net)







# PARTNERS

- Confederation of organizations of disabled people of Quebec (COPHAN)
- Martin-Matte Foundation
- National Institute of Excellence in Health and Social Services (INESSS)
- Quebec Automobile Insurance Company (SAAQ)
- Proche Aidance Québec





- **Loi sur les services de santé et les services sociaux**  
Available on the Légis Québec website  
[www.legisquebec.gouv.qc.ca](http://www.legisquebec.gouv.qc.ca)
- **Portrait du réseau québécois de traumatologie adulte : 2013 à 2016, INESSS**  
Available on the INESSS website  
[www.inesss.qc.ca](http://www.inesss.qc.ca)
- **Définition du Traumatisme craniocérébral**  
National health training consortium, University of Ottawa / Traumatic brain injury component mecranio-cérébral  
Available on the website: [www.cnfs.ca](http://www.cnfs.ca)
- **Loi 56 : Loi visant à reconnaître et à soutenir les personnes proches aidantes et modifiant diverses dispositions législatives**  
Available on the website of the National Assembly of Quebec  
[www.m.assnat.qc.ca](http://www.m.assnat.qc.ca)
- **Continuum de services en traumatologie**  
Available on the INESSS website  
[www.iness.qc.ca](http://www.iness.qc.ca)
- **Sondage du RANQ qui démontre l'épuisement et l'appauvrissement des personnes proches aidantes durant la pandémie**  
Available on the Proche Aidance Québec website  
[procheaidance.quebec](http://procheaidance.quebec)
- **Ton cerveau, c'est de l'or ! – Craniocerebral trauma awareness brochure**  
Available on the Connexion TCC.QC website  
[www.connexiontccqc.ca](http://www.connexiontccqc.ca)



# LEXICON

<b>Connexion TCC.QC</b>	Grouping of associations of people with Traumatic Brain Injury of Québec
<b>Ergo</b>	Occupational therapist: supports the person as soon as a health problem limits their possibilities for personal care, movement and communication.
<b>INESSS</b>	National Institute of Excellence in Health and Social Services
<b>IRDPO</b>	Quebec Physical Disability Rehabilitation Institute
<b>Social participation</b>	Social participation is taking part in activities of a social nature, that is, maintaining meaningful relationships, being part of a community, and participating in group activities, volunteering or paid work.
<b>RI</b>	Intermediate resource
<b>SAAQ</b>	Quebec Automobile Insurance Company
<b>Sexo</b>	Sexologist: specialist in sexuality disorders, can help solve the sexual problems of people who do not have a fulfilling sexuality.
<b>Spatio-temporal</b>	Belonging to both space and time
<b>TBI</b>	Craniocerebral trauma / traumatic brain injury
<b>TBI-M</b>	Mild traumatic brain injury (also called concussion)
<b>TBI-Mod</b>	Moderate traumatic brain injury
<b>TBI-MS</b>	Moderate or severe traumatic brain injury
<b>RANQ</b>	Quebec Natural Helpers Association

CONNEXION >TCC.QC

Grouping of associations of people with  
Traumatic Brain Injury of Québec



Connexion TCC.QC  
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Phone number: 514-543-4800  
Website: [www.connexiontccqc.ca](http://www.connexiontccqc.ca)  
Facebook: @ConnexionTCC.QC