Beyond Diagnosis: Meet People Where They Are and Provide Care

By Janelle Breese Biagioni, CEO, CGB Centre for Traumatic Life Losses & Community Lead, National Strategy on Brain Injury

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When someone sustains a brain injury, there's often a focus on the diagnosis—the CT scan, the medical chart, the list of symptoms. But what happens after that? For too many Canadians, the answer is: not much.

We have built a system that often begins and ends with a diagnosis. But real recovery—and real care—requires more. It requires that we meet people where they are, in every sense: emotionally, physically, spiritually, socially, and economically. A diagnosis is just the beginning of the story. It's what comes after that matters most.

A System That Misses the Mark

In our communities, we see people with brain injuries every day—though we may not realize it. We see them struggling to navigate public systems that aren't built for cognitive disability. We see them mislabeled as "non-compliant," "aggressive," or "too complex." We see them in line at food banks, in emergency shelters, in prison, or dying from toxic drug poisonings.

And we ask: Why don't they just get help?

The real question is: Why aren't we helping them in the ways that work?

Meeting People Where They Are

To truly support people living with brain injury, we must go beyond the clinical lens and see the whole person:

Meet them with empathy when their words don't come easily or their frustration erupts without warning.

Meet them with patience when they miss appointments or can't fill out forms.

Meet them in the community—in the places they feel safe, not just in offices or institutions.

Meet them without judgment for using substances to cope with overwhelming pain.

Meet them with housing, food, peer support, and unconditional belonging.

Meeting someone where they are means adjusting our approach—not expecting them to conform to a system that was never designed with brain injury in mind.

Care That Wraps Around, Not Cuts Off

Wraparound care is not a luxury—it is a necessity. When someone has a brain injury, they may need support in nearly every area of life: income, housing, employment, relationships, mental health, addiction recovery, and more. When these supports are disconnected or conditional, we set people up to fail.

What if we built a system that actually walked with people on their journey, instead of handing them a map and saying, "Good luck"?

What if we saw care as a relationship, not a transaction?

What if we stopped waiting for people to “stabilize” before offering help, and instead made connection the first step?

A National Strategy Rooted in Dignity

At the CGB Centre for Traumatic Life Losses, and through the National Strategy on Brain Injury initiative, we’re advocating for a new approach. One that:

Integrates care across systems—health, housing, justice, and education

Recognizes the intersections of brain injury, trauma, violence, and systemic inequality

Elevates lived experience as central to service design and delivery

Respects dignity and embraces flexibility over rigid policy

Invests in peer support, trauma-informed care, and Indigenous-led solutions

This is what a National Strategy on Brain Injury must deliver: care that is humane, holistic, and grounded in reality.

People Before Paperwork

Too often, the system asks people to “prove” their disability, “qualify” for services, or “comply” with rigid requirements before they are eligible for support. This only perpetuates harm.

We must flip the script: care first, systems second.

Because behind every diagnosis is a person with a story. A person who is grieving, adapting, surviving. A person who doesn’t need to be fixed—they need to be met. With compassion. With consistency. With care.

Final Word

Let’s move beyond diagnosis.

Let’s build a Canada where no one with a brain injury falls through the cracks—because the cracks no longer exist.

Let’s meet people where they are.

And let’s walk with them, every step of the way.

Janelle Breese Biagioni is the CEO of the CGB Centre for Traumatic Life Losses and Community Lead for the National Strategy on Brain Injury. With over three decades of experience in brain injury advocacy, she works across sectors and regions to ensure no one is left behind.