Non-Profit 501 (C) (3) 02-0397683 Phone: (603) 225-8400 Fax: (603) 228-6749 Family Helpline: (800) 773-8400 Office Hours: 8:30 - 4:30 (M-F) Information & Resources (only) (800) 444-6443 THE VOICE OF BRAIN INJURY – Help, Hope and Healing ISSUE #72, WINTER 2019	THE BRAIN INJURY ASSOCIATION OF New HAMPSHIRE Nonpression 52 Pleasant Street Organiza Concord, NH 03301 U.S. Pos CHANGE SERVICE REQUESTED PA I Concord 0330 Permit No	ation stage D I, NH
GOING GREEN? If you would like to receive the HEADW	T T E R Winner of the second sector reproduction has a second second sector reproduction has a second sector reproduction has a seco	
Warriors @ 45 NorthPage 1President's & Executive Director's MessagesPage 2Warriors @ 45 North (cont'd)Page 312th Annual Statewide Caregiver's ConferencePage 4Survey Says: NH Needs Another Brain Injury Survivor ClubhousePage 5Disability Rights CenterPage 7INSIGHTS	Brain Matters Page SAVE THE DATES - Vertical Challenge & Stroke Conference Page Meet The Artist Page SAVE THE DATES - Walk by the Sea & Golf Tournament Page SAVE THE DATES - Walk by the Sea & Golf Tournament Page North Country Independent Living - Happenings! Page March is Brain Injury Awareness Month Page What is the Brain Injury Community Support Program? (BICSP) Page	e 9 e 10 e 11 e 12 e 13 e 14 e 16

Warriors @ 45 North

By Sarah Kilch Gaffney

Tucked away in the small town of Pittsburg, New Hampshire, is a 10.5-acre property that Jon "Chief" Worrall and his wife Dianne purchased in 1986 as a place to get away. Almost entirely undeveloped, Jon built a cabin by himself on the property in 2002, completely unaware of the impact this special place would eventually have on his life and the lives of hundreds of other American veterans.

Jon was born in Pennsylvania, spent a good part of



In 1998, Jon joined the New Hampshire Army National Guard. He went to Iraq for 11 months, was medevaced twice, and then went back to Iraq a second time. On the morning of November 15, 2004, Jon was hit by a roadside bomb, for which he received a Purple Heart. He was 50 years old. Since then, he has had 18 surgeries and has at least one more to go. Jon retired from the New Hampshire Army National Guard in 2009 as a Sargeant First Class.

his childhood in Fryeburg, Maine, and moved to New Hampshire his sophomore year of high school. In 1972, Jon joined the Navy directly out of high school and spent six years active duty, attending nuclear school and serving on the USS Lexington, USS Bluefish, and USS Eisenhower. He then spent 12 years in the Navy Reserves where he made the rank of Chief. Jon also worked for the Hartford Steam Boiler Inspection and Insurance Company for 31 years, traveling all over the world to inspect nuclear plants. In 1990, Jon was in a motorcycle accident. He was discharged due to his injuries and soon found himself out of the Navy without benefits or retirement after 18 years of service.

In the aftermath of his injuries, Jon would often go up to his cabin by himself to get away and heal. He would sit on the back deck of his cabin and watch the trout stream and, for him, there was nothing more healing in the world than the quiet, the fishing, and being in the woods. At some point, Jon began to wonder if others would experience the same healing and peace at the cabin that he did, so he brought three fellow veterans up to the cabin. The next year it was nine and the year after that it was 20. Jon met up with Pat "Doc" Phillips (a registered hunting guide and injured, retired Gulf War Navy Corpsman) and Warriors @ 45 North

HEADWAY Newsletter

BIANH Officers & Board of Directors

EXECUTIVE COMMITTEE

President Freddi Gale, CBIS

Vice-President Robin Kenney, Ed.D.

Treasurer Michael Palmieri

Secretary Scott Dow, CBIST

Family Council Representative Diane Schreck Jeannine Leclerc

Survivor Representative Paul Van Blarigan

Professional Representative Jeremiah Donovan, MBA, CBIS

Immediate Past President Laura Flashman, Ph.D.

Executive Director Steven D. Wade

BOARD OF DIRECTORS

David F. Bauer M.D. Patricia Ciarfella Nancy Craddock Gina England, MA, CC-SLP Jennifer Field Philip Girard, MS David Grant Jay Hamel **Rosalie Johnson** Elizabeth Kenney Jon Lanteigne Eldon Munson, Jr. Michael Redmond **Kris Roberts** Heather Rousseau Schuyler Scribner Garry Sherry, MS Susan Tanner Lauren Weaver, MS., CCC-SLP

EX OFFICIO

John Capuco, Psy.D. Newton Kershaw, Jr., Esq. John Richards, MS, MBA

Publisher	Brain Injury Association of New Hampshire
Editor	Renee Fistere
Design/Layout	Cantin Design Inc.
Printer	Upper Valley Press

PRESIDENT'S MESSAGE GOALS FOR 2019

by Freddi Gale, BIANH President

Winter seemed to arrive early as temperatures dropped precipitously and snow fell with accumulation across the state. Many people hadn't even finished their leaf raking duties and so much of the yard work was unfinished with leaves frozen and fastened to the ground.

I had the opportunity once again to attend the 23rd Annual Affiliate Leadership Conference held in Clearwater Beach, Florida, hosted by the Brain Injury Association of America. Valuable information was dispersed to the many state representatives in attendance. Susan Connors, President and CEO of the Brain Injury Association of America, presented the State of the Association. She spoke of the Vision & Mission, Values, and the Goals for 2019. The Vision: People with brain injury have access to appropriate care, community supports, and ultimately a cure. The Mission: To improve recovery and the quality of life for all people affected by brain injury and promote a cure. The goals for 2019 include:

- Improve care and support for individuals living with a brain injury and to their families;
- Increase awareness and understanding of brain injury and the Brain Injury Association;
- Accelerate research for treatment and a cure;
- Consistently and meaningfully increase BIAA's revenue, capacity, and potency to make an impact

commensurate with the scope of brain injury.



Other exciting news is the roll out of the Brain Injury Fundamentals certificate program which is designed as a training program for direct support to professionals, family members, and caregivers. If you are interested in this program, please go to: <u>www.biausa.org</u> for more details.

Current acquired brain injury facts:

- 3.5 million children and adults acquire brain injuries each year;
- Nearly 10 million live with brain injury-related disability (1 in 60);
- On average, caregivers spend 84 hours per week assisting loved ones;
- The estimated lifetime cost of care for a person with brain injury exceeds \$4 million;
- The cost to society for medical care and lost wages for people with traumatic brain injury is \$76.3 billion per year;
- A brain injury happens every 9 seconds.

Staggering facts to say the least! Be safe this winter while driving, participating in winter sports, and being mindful of your surroundings.

EXECUTIVE DIRECTOR'S MESSAGE

Searching for Interested and Capable Volunteers

by Steven D. Wade BIANH Executive Director

The Brain Injury Association of New Hampshire is searching for interested volunteers to be a representative on the State Rehabilitation Council.

The Department of Vocational Rehabilitation's (DVR) mission and vision are:

Mission: To assist eligible New Hampshire citizens with disabilities to secure suitable employment and financial and personal independence by providing rehabilitation services.

Vision: NH Vocational Rehabilitation seeks to become an organization committed to fulfilling the needs of customers by providing continuously improving quality services through an effort of teamwork and professionalism.

Are you interested in the Department of Vocational Rehabilitation support for individuals living with a brain injury and their quest to be able to return to work? Are you concerned that they have the training and expertise to provide excellent supports to brain injured survivors? Would you like to provide meaningful



and valuable input as to what their priorities should be?

The DVR supports people with a wide variety of disabilities, and therefore, it is certainly a high priority of the BIANH representative to ensure that the Department develops sufficient expertise necessary for brain injury survivors.

For more information about the Department of Vocational Rehabilitation:

https://www.education.nh.gov/career/vocational/advisory.htm

For more information about becoming a representative for BIANH, please contact me.

Steve Wade – (603) 225-8400 or steve@bianh.org.

<u>Submission & Editorial Policy:</u> HEADWAY is published by the Brain Injury Association of New Hampshire. The Editor invites and encourages contributions in the form of articles, special reports and artwork. BIA of NH reserves the right to edit or refuse articles submitted for consideration. The Association does not endorse, support, or recommend any specific method, facility, treatment or program mentioned in this newsletter. Please submit items to: Editor, Brain Injury Association of NH, 52 Pleasant Street, Concord, NH 03301. For advertising rates please call 603-225-8400.

Continued from page 1- Warriors @ 45 North





became a reality in 2009, getting its 501(c)(3) approval the next year.

Now, 11 years after that first trip, Warriors @ 45 North is doing amazing things. They offer time away in the woods for veterans to just get away or to participate in a myriad of different activities like fishing, hunting, kayaking, boating, fly tying, shooting, hiking, snowmobiling, and more, as well as the opportunity to participate in special trips like one-day fishing trips down the Connecticut River and annual female-only trips.

Warriors @ 45 North has gone from

being just Jon bringing a few fellow veterans into the woods to seven board members and 15 staff members, all of whom are volunteers. The group has built a bunkhouse, complete with an accessible bathroom and shower, and as soon as the road is open this coming spring, they will be installing a brand new barn to store (and work on) all of their 4-wheelers, boats, and other equipment. To date, Warriors @ 45 North has served nearly 300 veterans.

This past November, Warriors @ 45 North hosted a Thanksgiving dinner up to camp for participants. It was held the weekend before the Thanksgiving holiday, and they had 22 people attend, including many veterans who did not have family to celebrate with, as well as other veterans and staff members.

Although Jon takes the winter off to recharge his batteries in a warmer climate, the activities offered by Warriors @ 45 North don't stop when the snow flies. Throughout the winter season, they will be offering a number of snowmobile and ice fishing trips. Individuals interested in



participating in winter activities just need to contact Warriors @ 45 North to schedule a trip.

There is no cost for any of the activities or trips that Warriors @ 45 North offers and they are open to any veteran, active, and retired service members from the United States Armed Forces. Most of their participants are from northern New England and some are from New York, but they welcome veterans from all over the country. "If you can make it to New Hampshire," Jon says, "we'll pick you up at the airport and help you get to the cabin." Warriors @ 45 North has also been able to accommodate families, veterans with caregivers, and other flexible arrangements as necessary in an effort to keep the programming open to as many veterans as possible.

The programming offered by Warriors @ 45 North provides an opportunity for veterans to connect with other veterans and helps new attendees know that they can succeed and move on after their experiences. Young and old, across all branches of the military, veterans gather together to fish, hunt, and talk around the campfire late into the night. It's a little bit like a group therapy session as they tell their stories, acknowledge each other's physical and psychological pain, and contribute to each other's healing.

For Jon, he can personally handle the surgeries and the constant pain, but accepting his new normal and losing so much of his cognitive function has been extremely difficult. "I can't remember anything," he says. "I used to be pretty sharp and losing that was so hard. I choose to challenge what I can [about the effects of his traumatic brain injury] but not to be too ridiculous with my challenges." A lot of the veterans they serve are facing similar difficulties and Jon is right there to support them. Jon still runs most of

the fishing trips and his right-hand man, Doc, runs the hunting trips. They both like to attend the trips to the shooting range.

One of the biggest barriers, Jon explains, is getting folks there for the first time. They have started challenging other veterans to bring new veterans with them, and they allow civilians to bring a veteran with them to encourage more participation. Not long ago, Warriors @ 45 North welcomed a 92-year-old submariner from New York. On another recent excursion, a younger veteran shared with Jon that the best part of the trip was watching Jon struggle with the same stuff that he had to deal with every single day and knowing that he was not alone in that struggle.

At the end of the day, Jon says, "We're just a bunch of vets that want to take care of other vets."

Warriors @ 45 North operates entirely on donations and sponsorships. You can find out more at <u>www.warriors45north.com</u>. General inquiries can be sent to <u>warriorsat45n@gmail.com</u>.

12TH ANNUAL STATEWIDE CAREGIVER'S CONFERENCE

By Ellen Edgerly; photo credit by Michael Sterling

The 12th Annual Statewide Caregiver's Conference, hosted by the Coalition of Caring Planning Committee was held on Wednesday, November 14, 2018, at the Courtyard Marriott located in Concord, New Hampshire.

The Coalition was created in 2006 with a mission to promote and strengthen the well being of caregivers who provide care for a disabled or ill child, adult, or seniors. The coalition is comprised of caregivers and organizations that support the elderly, children with disabilities, adults with disabilities and diseases, hospice patients, and other individuals dealing with chronic illness.

At this year's conference, caregivers had an opportunity to network and listen to the Keynote Speaker John Broderick share a compelling story about his family's journey with mental illness. In addition, eight caregiving workshops were offered throughout the day. Topics included: Reaching for the Positives; *I Have Lived Through It; Make the Most of Yourself So You Can Help Others, and more!*

As many as twenty-four exhibitors shared resources with caregivers, in addition, complimentary massages and Reiki therapy was provided; and caregivers enjoyed a plated Thanksgiving luncheon.

Please visit our website at <u>www.coalitionofcaring.org</u> for information on this year's conference, sponsors, and 2018 photos.

Mark Your Calendar! The 2019 Annual Statewide Caregiver's Conference will be held on Wednesday, November 13, 2019, at the Courtyard Marriott in Concord.















SURVEY SAYS: NH NEEDS ANOTHER BRAIN INJURY SURVIVOR CLUBHOUSE

For several years the Brain Injury Association of NH (BIANH) has been considering the need for a "clubhouse" or a "Post-Acute Community-Based Center for Rehab and Recovery" that would serve New Hampshire residents living with a brain injury. The concept is for a place that would be similar to The Krempels Center of Portsmouth, New Hampshire – a place where survivors could meet, socialize, participate in workshops, or take part in work several days a week. We are moving closer to making this dream a reality, thanks to a group of parents from the Keene area, who have advocated strongly for a program that would be geographically closer to them than the Seacoast area.

The International Brain Injury Clubhouse Association provides specific standards on what is required to become an official certified clubhouse. As of October 2018, we are not prepared to become a "certified clubhouse" (which includes a requirement to be open 5 days a week); therefore we are using the term "Clubhouse" more generically to describe a gathering place for brain injury survivors supported and guided by the brain injury community as a whole.

A Clubhouse Committee has been meeting monthly to research options. The committee consists of brain injury survivors, Area Agency representatives, Lisa Couture of The Krempels Center, Matthew Ertas, former Director of the Bureau of Developmental Services, and Robin Schell, Senior Counsel and Partner for Jackson, Jackson & Wagner.

The Clubhouse Committee has visited other programs in Portsmouth, NH, and in Worcester, Haverhill, and Lawrence, MA to learn more about the various Clubhouse program models. In February 2018 a survey was mailed to approximately 3,000 people on the BIANH mailing list. From this mailing, over 200 responses were submitted that provided valuable feedback. A follow-up survey was sent to those who expressed an interest in the Clubhouse program to help narrow down preferences for location, transportation needs, and programs.

Results are as follows:

- A majority of respondents are interested in establishing another Clubhouse in New Hampshire. Comments indicate there is a need for survivors to have a place for social interaction with others;
- There are four preferred locations: **Concord, Manchester, Keene, and Nashua** (respectively), with an ideal commuting time of 30 minutes or less;
- About one-half of the respondents envision attending a Clubhouse program for **2-3 days a week**;
- About **30% of the respondents indicated they would need transportation** to/from the Clubhouse, while 50% of the respondents had their own transportation.

Moving forward, the Clubhouse Committee will be developing a business plan to identify:

- <u>Funding sources</u> for long-term sustainability of a Clubhouse program;
- <u>Partners</u> who would like to help establish a Clubhouse. (Discussion sessions with Area Agencies area being organized.);
- <u>Locations</u> that could house a Clubhouse pilot program of 10-12 survivors who may be able to attend 2-3 times per week;
- <u>Staffing</u> to meet the needs of Clubhouse attendees; and
- <u>Programming</u> that would be most beneficial to Clubhouse participants.

The Committee encourages you to share your thoughts, ideas, input, and comments as this project moves forward. Please email John Richards at john@bianh.org. or call BIANH (603) 225-8400.



On Saturday, September 22, the Great Bay Corvette Club held its 5th Annual Charity Car Show. A variety of muscle cars, corvettes, hot rods, antiques, and imported cars were on display at the event. From donations given at this event, BIANH received a very generous gift of \$10,000. BIANH Board Member, Scott Dow, is receiving the check on behalf of the Association.

DISABILITY RIGHTS CENTER

Disability Rights Center - NH Protection and Advocacy System for New Hampy

Assistive Technology for Traumatic Brain Injury

A traumatic brain injury (TBI) may lead to cognitive, sensory, or communication disabilities. Assistive technology can be used to help people with TBI to overcome some of these challenges and increase their ability to live and work independently. The ADA defines "Assistive Technology" as "any device that supports an individual with a disability in independently performing a specific task." Assistive Technology, or AT, can range from simple inexpensive items to very expensive customized devices and products. AT can be used to help people function at home, at work, and even at school. For AT to be successfully implemented, it is critical that the user be actively involved in the decision-making process to determine the most appropriate device or system.

There are a wide variety of AT products that help individuals with TBI. Because every brain injury is unique, an individual's assistive technology (AT) needs will be unique as well. For example, someone who has lost the ability to use certain muscles after a stroke would benefit from different AT than someone with memory deficits.

For some types of AT that don't require customization, an individual can select an item themselves based on their personal preference and without the need for an evaluation. For example, an individual with memory deficits may prefer a certain type of alarm clock or prescription medication reminder.

Working with a professional, such as a physical or occupational therapist, is often required before more specialized items (such as a custom wheelchair) are put into place. The professional will evaluate the individual to determine their abilities and limitations, and then work with them to determine their personal preferences.

Giving the evaluator personal feedback is a critical step in selecting the most effective AT. Sometimes, a device may seem like it would work well, but if the individual with TBI does not feel comfortable or is not able to use the device as intended, the benefits from the technology can be greatly reduced. Establishing a working relationship is important because the AT provider is often involved in training the individual how to use the item safely and effectively.

Assistive technology can be used as an accommodation to help an individual with TBI perform the essential functions of their job. There are a wide variety of AT available to benefit employees with TBI, including predictive writing and editing software, smartphone apps to help manage anxiety and stress, as well as digital or analog calendars and schedules to help keep an employee on task.

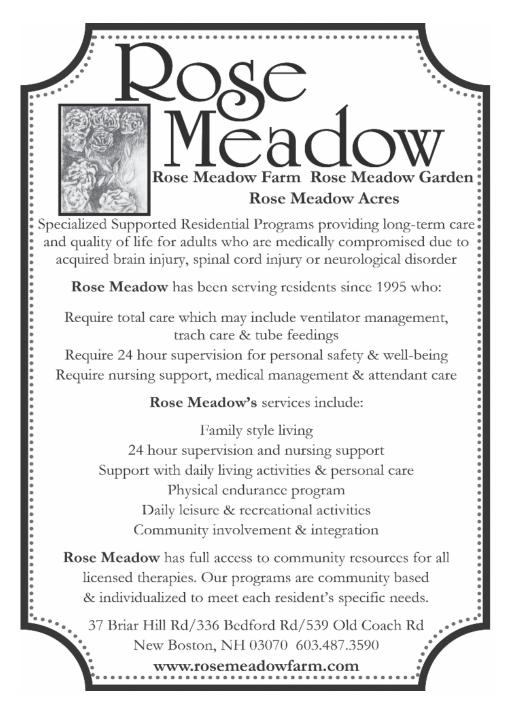
People with TBI often face difficulty with their memory. At home, problems with memory can cause a range of problems ranging from minor -- forgetting to turn off the lights, to something more dangerous such as forgetting to turn off a stove or oven. There are a number of memory aids and products that can help people overcome these issues in the home. New technology helps people with TBI to "automate" their home. Examples of automated AT includes motion sensor lights that turn on and off when a person enters or leaves a room, and an automatic stove shut-off, which has a programmable timer for the stove and oven.

Not all AT has to be expensive and high tech. Many individuals with TBI prefer the "old school" ways of overcoming their disabilities. Memory

books, planners, and daily calendars are used successfully by many people with disabilities, especially people who may not be comfortable with technology. However, it is never too late to learn how to use electronic devices that may help increase independence, and individuals with TBI should be encouraged to explore both digital and analog assistive technologies.

The emergence of smart devices, such as smart phones and tablets, has led to the development of hundreds of apps that can help individuals with TBI. There are applications that can help to keep people organized -- apps that help to remind people, even applications that use a synthetic voice which allows a person who no longer speaks to communicate clearly with other people. There are many apps that are free or inexpensive, but some of the apps can be expensive.

For more information, talk to your doctor, therapist, or case manager about the benefits of AT, how to schedule an AT evaluation, and how to make AT more affordable. If you are facing AT-related legal issues, contact Disability Rights Center at 603-228-0432.



GRANITE ADVANTAGE HEALTH CARE PROGRAM ARRIVES ON JANUARY 1

Attention if you or your loved one is presently on the New Hampshire Health Protection Program (NHHPP)

This is an important change for people presently receiving Medicaid. There is an important change in the program and "community engagement" will now be required, with some exceptions.

Effective January 1, 2019, the Granite Advantage Health Care Program replaces the New Hampshire Health Protection Program (NHHPP). Coverage for individuals in Granite Advantage will be provided through New Hampshire's Medicaid Care Management Program (MCM) plans.¹

Community engagement is a new condition of continued eligibility for Granite Advantage Medicaid, unless you are exempt. Adults who are enrolled in Granite Advantage will need to complete at least 100 hours of work or other community engagement activities each calendar month to remain eligible for Granite Advantage Medicaid, unless you have an exemption.² Emphasis added.

You may be exempt if you are:

- Disabled
- Pregnant
- Medically frail (as certified by a licensed medical professional)
- Temporarily sick, incapacitated, or getting treatment in the hospital, including intensive outpatient (IOP) or residential substance use disorder treatment
- A parent of a dependent under age 6 or a caretaker
- Participating in a state-certified drug court program, as certified by the Administrative Office of the Superior Court
- Exempt from another work requirement, including NHEP and SNAP
- Enrolled in the Health Insurance Premium Payment (HIPP) Program³

People who are not exempt are in a mandatory status.

What does it mean to be mandatory for community engagement? Mandatory is a member status that means you have a monthly requirement of 100 hours of qualifying community engagement activities to remain eligible for Granite Advantage Medicaid.

Unless you are exempt, Granite Advantage members will have to complete a minimum of 100 hours of work or other community engagement activities each calendar month beginning after your planning period. Your planning period is a minimum of 75 days after enrolling. Granite Advantage members who have to complete community engagement activities will have a status of mandatory. You may meet your requirement through one or more of the following activities:

- Employment
- Training
- Education
- Job searching
- Community service or public service
- Caregiving services

Participation in substance use disorder treatment

Participation in another work requirement, including NHEP and SNAP⁴

The answers to all of your questions can be found at : <u>https://nheasy.nh.gov/#/granite-advantage/gahcp-faqs</u>

- 1 https://nheasy.nh.gov/#/granite-advantage/gahcp-faqs
- 2 https://nheasy.nh.gov/#/granite-advantage/gahcp-faqs
- 3 https://nheasy.nh.gov/#/granite-advantage/gahcp-faqs
- 4 https://nheasy.nh.gov/#/granite-advantage/gahcp-faqs

Brain Injury Public Policy Committee Invite

"Never doubt that a small group of thoughtful, committed citizens can change the world; indeed, it's the only thing that ever has." Margaret Mead

The Brain Injury Public Policy Committee is seeking individuals with brain injuries, family members, and professionals who have an interest in advocating for public policy and proposed legislation that impacts individuals with brain injuries and their families.

The committee meets regularly throughout the 2019 Legislative Session. Meetings are held at the Brain Injury Association of New Hampshire, 52 Pleasant Street, in Concord, New Hampshire. If you are unable to attend the meetings, teleconferencing is available.

If you are interested in joining the Public Policy Committee or would like to be added to our Advocacy Matters Newsletter, please e-mail Ellen Edgerly at ellen@bianh.org or call (603) 332-9891 with your contact information.

<u>Did You Know?</u> New Hampshire was the first!

On January 5, 1776, six months before the people of the United States claimed self-government, the people of New Hampshire gave this country its first state constitution. The next day, the House of Representatives was created.

Although the salary of \$200 per biennium puts some practical limits on service in the House, New Hampshire has been fortunate over the years to have a representative cross-section of the state's men and women: business people, homemakers, educators, engineers, doctors, lawyers, students, and retirees.

Ellen M. Edgerly, Community Organizer

INSIGHTS



Life Perspectives From a Brain Injury Survivor David A. Grant

Brain Injury – A New Caregiver's Perspective

Until earlier this year, my only perspective about brain injury was that of being an actual brain injury survivor. I am intimately familiar with the concept of being a caregiver, but all that I knew was learned from stories that I had read over the years, as well as the stories that others have shared.

After my 2010 brain injury, I knew that things were difficult for Sarah, but I never knew how challenging they really were.

All that changed on September 11th, 2018. It was on that day that my mom was diagnosed with an acquired brain injury. Mom had a cerebral hemorrhage, followed by two seizures. After a week in the Neuro ICU in Portsmouth, mom was moved to a long-term post-acute care rehab in Wolfeboro. It is there that she will remain for the rest of her days.

In two ticks of a clock, I went from being a brain injury survivor to being a caregiver.

Mom had been showing early signs of dementia before her stroke. Like a greased slide, her neuro events have catapulted her into advanced dementia almost overnight. The mom we knew and loved is gone, though she is still with us. Such is the complex nature of ambiguous loss. Here, but not here. It's complicated. Never have we experienced such an exquisite sense of loss.

For as heartbreaking as life became literally overnight, it was about to get even more complicated. Mom and dad were like two links in a chain. My dad is elderly and blind. Mom was his eyes into the world. Now living alone, we have come to find that dad is not capable of unsupported independent living.

My wife Sarah and I are now caregiving for two. While we both consider it a high honor to care for those who cared for me when I was young, it's all quite overwhelming. Concepts like self-care, heretofore only read about, are becoming life savers.

For the first time, I am seeing brain injury from the other side – through a caregiver's eyes.

Life is funny. Over the last few months, I have found myself profoundly grateful to be a brain injury survivor. It has offered me an on-the-job level of experience that I can now use to help my mom. Better still, I am able to explain to my dad what is unfolding in easy-to-understand terms, leaving the medical jargon to the professionals. Had I not been injured back in 2010, I would not have this perspective. How can I not be grateful?

And I circle back to the Brain Injury Association of New Hampshire. Over the last few months, I've learned a lot about the daily struggles that brain injury caregivers face. I've thought about the tireless work of Ellen Edgerly as she pulls together our yearly caregiver's conference, and how much of a vital respite this is for those who have to care for others. I've thought about the yearly caregiver retreat that Ellen coordinates, and I think about how invaluable these are to those who walk a road seemingly without end.

A couple of months ago, I celebrated my eight-year survivor birthday. No longer do I deem my brain injury to be the worst thing that has ever happened to me. Rather, I see it now for what it is: an experience that I can share with others, others like my own mom and dad, to use my experience for the greater good.

INDEPENDENT CASE MANAGEMENT / SERVICE COORDINATION

The Brain Injury Association of New Hampshire offers this <u>Conflict Free</u> service for all disability populations:

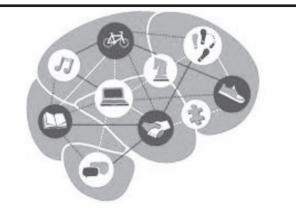
- Private Pay Case Management
- Choices for Independence (CFI) Community Care Waiver
- Acquired Brain Disorder (ABD) Community Care Waiver
- Developmental/Intellectual Disabilities (DD/ID) Community Care Waiver

We are a consumer and family directed non-profit organization, founded by New Hampshire families who came together to strengthen individual and system-wide advocacy.

For additional information about Independent Case Management, contact Erin Hall at 603-225-8400 or email at erin@bianh.org



52 Pleasant Street – Concord, NH – 03301 Phone: 603-225-8400 Helpline: 1-800-773-8400



BRAIN MATTERS

Sponsored by Bureau of Developmental Services & the Brain Injury Association of NH

BRAIN MATTERS 2019

Session I - Wednesday, February 20, 2019

Brain Injury 101 <u>No Charge</u> 8:30 – 12:30 – Brain Injury Association of NH Office Jennifer Parent-Nichols, DPT, EdD, PCS

Session II - Tuesday, March 19, 2019

Opioids & Substance Abuse <u>Fee \$25</u> 9:00 – 1:00 pm Marriott Courtyard, Concord Daniel Seichepine, Psy.D.

Session III—Wednesday, April 17, 2019

Brain Injury 101 <u>No Charge</u> 8:30 – 12:30 - Brain Injury Association of NH Office Jennifer Parent-Nichols, DPT, EdD, PCS

May 15, 2019 ~ Annual Brain Injury & Stroke Conference

For more information and to register go to www.bianh.org and click on Events

For more information—visit our website <u>www.bianh.org</u>. For questions and to register, please contact Lori Sandefur 603) 568-8817 or lori@bianh.org

SAVE THE DATE - VERTICAL CHALLENGE

Saturday, March 9, 2019

Bretton Woods Ski Resort Bretton Woods, New Hampshire

VEBTICAL CHALLENGE WINTER EVENT 2019 Skiers, Snowshoers, Snowboarders, Telemark, and Adaptive Users Cost: \$125/individual

> Check In Begins: 8:00 AM Lunch & Prizes: 1:30 PM To Register: https://bianh.salsalabs.org/vc2019

After lunch, participants are invited to ski/snowshoe for the remainder of the day!

<u>SKIERS</u>: Individual or Teams of 2 - 4 skiers use their skill and strategy: various alphabetical letters will be spread throughout trails which the skiers must record. These letters form an anagram that must be correctly solved in order for a chance to win.

SNOWSHOES: Individual or Teams of 2 - 4 snowshoers enjoy the trails to complete a fun Poker Run.

SPONSORSHIPS: Interested in sponsoring this event? Contact Lori Sandefur for a sponsorship brochure.



GIVING BACK TO THOSE WHO SERVE-

Your sponsorship for the Vertical Challenge Winter Event benefits New Hampshire veterans living with a brain injury.

BIANH provides veterans with information and assistance accessing available services.

Hosted by:

BRAIN INJURY ASSOCIATION OF NEW HAMPSHIRE



For more information on registration or sponsorship for the Vertical Challenge Winter Event 2019, contact Lori Sandefur. (603) 568-8817 or lori@bianh.org



Wednesday, May 15, 2019

Courtyard Marriott & Grappone Conference Center in Concord, NH

For more information, contact Lori Sandefur lori@bianh.org; 603-568-8817

Brain Injury & Stroke

KEYNOTE SPEAKER: Francis R. Sparadeo, PHD Opioids, Substance Abuse & Brain Injury



MEET THE ARTIST: LIZABETH TOMPKINS - MERCHANDISING AND BRAND SPECIALIST

Many little girls have the dream of riding horses. That dream came true for a young girl named Lizabeth Tompkins who starting riding lessons at an early age. At the age of 11, Lizabeth had a riding accident that became the first of multiple concussions and injuries. In 1984, she was ejected through a car windshield and was briefly hospitalized for a concussion. Two years later in another more serious motor vehicle accident Lizabeth sustained a basilar skull fracture and a hip injury. When she was discharged to go home, Lizabeth had no idea of the difficulties in life that these injuries would bring. She spent the next three months in bed. "I felt like a dimmer switch that was turned down."

Her story is a convoluted one. Lizabeth was a college graduate and working full time as a dental hygienist at the time of her last accident. "College was easy-peasy the first time." she said. Fortunately, her employer held the hygienist position for the three months of her recovery. When she was able to return to her employment, she felt young and resilient. However, she added: "Working was very difficult because I couldn't remember which tooth I was working on. Fortunately, the doctor trusted me with the care of the patients. I was always running late." She adds, "I would tell people that I wasn't out to lunch, I just wasn't back from breakfast!" She continued, "I couldn't wait to get out the door to get home."

Hoping to resume a normal life, Lizabeth tried to return to some of the sports activities she used to enjoy as a young girl. Lizabeth tried down-hill skiing, but she felt she needed lessons again because she had forgotten how to ski despite having enjoyed this sport since she was a three-year old girl. Lizabeth turned to aerobics and exercise, but she realized she would forget what she was doing.

Lizabeth moved to Portsmouth in 1987 to be with friends; she enjoyed a new city and a new job. However, the transition was tough in many ways. "My thoughts were there, but organizing them from A to B used to take me about 30 minutes. For a normal person it would only take seconds. If I ran the New York Marathon with a limp, people would be cheering me on." Lizabeth began struggling more at her job. "My brain was working just as hard but you couldn't see it." She was told she was too rigid and she was made for academia, not for clinical work. "People can be cruel," Lizabeth added.

"In 1991 I went back to school to be more than just a hygienist. response was: "I don't have a TBI, I had I attended the University of New Hampshire in Durham as a a skull fracture!" She immediately the students. It helped to have my own apartment." Lizabeth shared. advice to have an evaluation.

The Organic Chemistry professor at UNH knew about Lizabeth's After the diagnosis of a traumatic brain concerns of potential dangers in the chemistry lab. She had a fear injury, Lizabeth became her own advoof fire due to her lack of smell since her skull fracture. She also cate. She graduated from UNH with a mentioned her learning discrepancies, competence in the lab, and degree in Nutritional Science! She knew extreme difficulties with written tests. The professor called her struggles were real but she made it "I now work with a holistic practitioner who helps me with self-sursuggested the need of a neuropsychological evaluation. Lizabeth's school was not going to be an option.

Interview by Rosalie Johnson





Lizabeth began to educate herself about her TBI, to find explanations, and to get help. She contacted organizations all over the country for information. She had to accept many things as they were but kept pushing on. She had two close friends who greatly supported her. These friends called her "the Looper" because she tended to talk in loops. One subject would lead to another and she started to speak faster and faster so not to forget the original subject.

At one point she contacted a case manager at Blue Cross Blue Shield for assistance in paying for her individual health plan, and for recommendations for speech/occupational therapy per the neuropsych evaluation. All of her requests were denied. The insurance representative said, "At this time, I personally do not know of any therapists in New Hampshire who would be of benefit to someone as intelligent as you."

Lizabeth continued to work as a dental hygienist, teaching herself strategies to remember which tooth she was working on if she was interrupted. She developed a placement pattern of her dental equipment after completing each section. In daily life she depended on post-it notes. At times, a roommate would move her notes not understanding how vital they were to ability to function. "It is stressful when you worry about being so forgetful. Normal activities like doing my hair, dressing, how to remember destinations when driving, and multitasking are a struggle: the list goes on," she said.

In 2011, Lizabeth went for corrective surgery to repair the old hip injury. Postoperatively, a complication briefly led to the lack of oxygen to her brain. The event led to the loss of many of her hard won strategies. The disorganization in

her brain became more prevalent and she again became overwhelmed with the activities of daily living. After more testing she was found to have a decrease in concentration and focus. This news was overwhelming but yet familiar. Due to this event, she had to give up her hard fought career as a dental hygienist that had given her many years of structure.

"The wheels had fallen off the wagon. I tried a new job as a pharmaceutical technician, but I couldn't keep track of the counting. I was transferred to different departments in a retail store. Finally I ended up in jewelry, accessories, and clothing. I still had problems with time management, multitasking, and remembering. I have to write everything down in my notebook, even the little seemingly unimportant points. It is how I remember," Lizabeth stated.

part-time student to begin preparing for dental school. I felt it was turned on her heels and left the room, but "I never give up. I keep trying until I succeed, then I would begin really hard going back to school because I was older than many of later she did follow the professor's the next task. Time is an issue; I take twice as long at completing a task. I'm afraid that I may forget dangerous stuff like the stove being left on or not being able to smell a fire. I will have two or three good days then I need two to three days to rest. Information overload feels chaotic. People may find me rigid or difficult, but I'm not; it is how I am able to concentrate to function."

Lizabeth to her office to try to help with these struggles. The through. Having those struggles gave her vival. I also love working in retail. I find myself in a sea of color and professor mentioned Lizabeth's traumatic brain injury, and the acceptance that pursuing medical texture. I love the branding and merchandising! It's a perfect fit!"

!!! - SAVE THE DATES - !!!



36th ANNUAL GOLF TOURNAMENT

SAVE THE DATE WEDNESDAY, AUGUST 21, 2019

Presenting Sponsor: Northeast Rehabilitation Hospital Network

Co-Host: Robin Hill Farm

NEW LOCATION! Stonebridge Country Club 161 Gorham Pond Road Goffstown, NH

Cost—\$135/player \$540/team

Tournament Sponsorship available Raffle/Prize Donations gladly accepted For more information contact: renee@bianh.org or call 603-225-8400

NORTH COUNTRY INDEPENDENT LIVING – HAPPENINGS!

The drop in temperature and the early snowfall found us with many tasks left undone from the changing of fall into winter. That is not to say that the NCIL residents and staff have not been busy! Taking part in the annual Vaughan Community Food Drive in November had all the residents collecting for the needy folks within their own community. It was an encouraging sight to see the NCIL vehicles lined up at the First Church of Christ unloading their boxes and bags of food donations for this worthy cause. It has been reported that this year was a record setting year with a total of 731 frozen turkeys received and more than \$3,000 in donations. We're very proud to be part of this wonderful community.

The next volunteer project began with Natalie L. organizing the NCIL residences and office with sponsoring children at Christmas for the Angels & Elves project. Once again, all the residents and staff alike took part in shopping for various local children of different ages with their "wish" lists of needs and wants. The staff and residents had a great time shopping, viewing the request lists, and then delivering to the Angels & Elves headquarters in North Conway. Many local children will have a very Merry Christmas thanks to everyone who participated in this wonderful project sponsored by the Kiwanis Club.

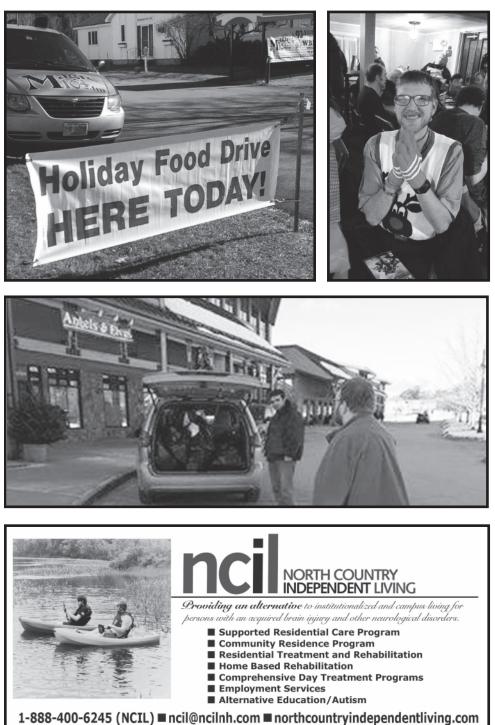




The annual NCIL Christmas party was held at Harley Jack's in Ossipee with a fantastic meal, gifts distributed, and holiday music wafting through the fun filled atmosphere. As tradition continues, every year NCIL presents awards for two categories These awards are voted by staff and given to the resident who has displayed unique attributes -- all are in anticipation throughout the evening for this presentation. This year, Theresa B. was bestowed the *Spirit of Giving Award* as she consistently helps her fellow peers, always has a kind word, and gives back tirelessly. Congratulations Teresa! The *Personal Growth Award* was presented to Justin T., who has made amazing progress in such a short time that he has been with NCIL.

NCIL is to be surely active this winter continuing with the many community activities.

Being mindful, winter poses risk for head injuries. Whether skiing downhill or walking on an icy sidewalk, driving conditions, winter sports, and weather conditions pose a higher risk for a traumatic brain injury.





For more than three decades, the Brain Injury Association of America (BIAA) has proudly led the nation in observing Brain Injury Awareness Month by conducting an engaging public awareness campaign in March of each year.

The theme for the 2018 to 2020 campaign is Change Your Mind.

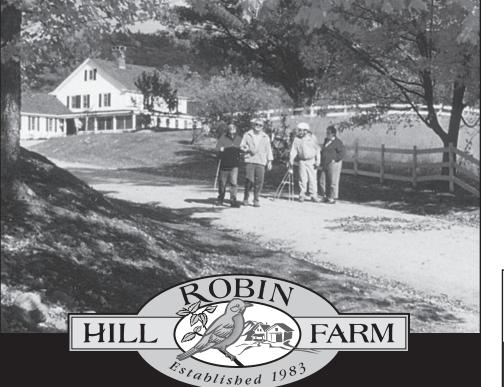
The #ChangeYourMind public awareness campaign provides a platform for educating the general public about the incidence of brain injury and the needs of people with brain injuries and their families. Individuals who join us to help raise awareness with the #ChangeYourMind campaign are essential to:

- De-stigmatizing brain injury through outreach within the brain injury community
- Empowering those who have survived brain injury and their caregivers
- Promoting the many types of support that are available to people living with brain injury

March is Brain Injury Awareness Month

Quality of Life... for adults with a brain injury

- Supported Residential Programs
- Residential Rehabilitation Programs
- Supported Apartment Programs
- 24 Hour Staffing for All Programs



www.robinhillfarm.com 55 Donovan Road, P.O. Box 1067, Hillsborough, NH 03244 Tel: 603-464-3841 Fax: 603-464-3851 e-mail: info@robinhillfarm.com

STOP THE TEXTS. STOP THE WRECKS.

Distracted driving is a dangerous epidemic on America's roadways. In 2016, there were 3,450 people killed and an estimated additional 391,000 injured in motor vehicle crashes involving distracted drivers.



Drivers in their 20s are 24 percent of drivers in all fatal crashes, but are 27 percent of the distracted drivers and 33 percent of the distracted drivers that were using

and 33 percent of the distracted drivers that were using cell phones in fatal crashes.

Nine percent of all drivers 15 to 19 years old involved in fatal crashes were reported as distracted at the time of the crashes. This age group has the largest proportion of drivers who were distracted at the time of the crashes.



"You can't teach the level of compassion they showed me. They always went above and beyond." James Zaniboni, Brain Injury Survivor

Northeast Rehabilitation Hospital Brain Injury and Stroke Recovery Programs

In addition to our overall hospital accreditation from The Joint Commission and CARF, our Stroke and Brain Injury specialty certifications represent our commitment to provide the highest quality care to our patients. For more information call (603) 893-2900.



SPOTLIGHT ON KREMPELS

Kawa Model for "She Shed"

Empowering Women Brain Injury Survivors: Connecting Through the Strength of the River

My first week as an intern and Occupational Therapy graduate student at Krempels Center was a whirlwind of observation, learning, and planning. One group that I was drawn to and became involved in is something called "She Shed," which began as a women's group that focused on self-care projects (e.g. foot soaks), and evolved to include discussions and activities that facilitate a sense of empowerment as well as giving within the community. When I arrived, one of the challenges I identified was the need to find a way to promote strong connections between the participants that would allow for meaningful and enduring relationships between group members. A previous intern had helped to facilitate She Shed Shares, a project through which the women create crafts and/or self-care items, and introduced the concept of "keep one and donate one." The She Shed Shares project helps to build a shared sense of purpose within the group as well as a connection to the greater community. In my role as group facilitator, I endeavored to build on the momentum the group had gained from She Shed Shares by focusing on building further cohesiveness amongst the women.

I was particularly interested in developing She Shed into a community within the Krempels Center community because women are in the minority (at 1/3 of the total membership) at Krempels Center. In order to create cohesiveness, I turned to the Kawa Model, ("Kawa" is the Japanese word for "river.") developed by a team of Japanese occupational therapists. The model uses the metaphor of a river to portray one's path through life. There are 4 main symbols (constructs) to this model: river banks (representing a person's social and physical environments), river flow (occupations and life flow), rocks (barriers/challenges), and driftwood (personal values and characteristics).

Using these and other symbols and art supplies of their choice, each member would create a river representing their lives. My hope was that the Kawa Model would be an enjoyable craft project that would provide valuable insight into many facets of the participants' lives for the artists themselves and that the rivers they depicted could be shared with other group members, helping them to better understand each other's life journeys. I anticipated that the project would ultimately help to develop a sense of kindship and cohesiveness within the group. To begin the project, the group created goals for each group session. Then the facilitators created samples of rivers to help explain the imagery and the purpose of the project, to help members begin to get a picture of what their own river could include. Members completed a worksheet designed to help with planning for each individual river, and explaining the use of metaphors for depicting their lives. As members began to work on their individual rivers, they began sharing the symbolism in their art, the choices they made and challenges they faced.

Then the magic happened. We decided to take the project one step further and create a group river, designed to represent our group of women and the journey we are sharing. Members together brainstormed and then created the flow of the river, the shared supports (river banks), shared obstacles (rocks), shared influences (driftwood), and the shared opportunities for growth - as a community (open spaces). Without prompting, regular She Shed members made new participants welcome, helping them to understand the goals and steps of our river art. The sense of connection amongst members was palpable; it was working!

Since that time, members of She Shed have been more inclusive and seem more connected. They assist and encourage each other more often without involvement of or reminders from the staff. My hope is to continue to refer to the elements from the KAWA model to develop a shared language and to build on the cohesiveness that has developed to date. This model has brought us closer, and has helped to increase understanding and empathy amongst members as well as offered opportunities to encourage each other through hardships and celebrate each other's successes.

Christine Lynch, Occupational Therapy Intern, New England School of Technology



SOCIAL SECURITY DISABILITY INSURANCE ADMINISTRATION

BIANH advocates for improvements in Social Security Disability Insurance Administration

While it has not been widely publicized thus far, representatives of BIANH have been trying to change the rules regarding how much people with disabilities who are receiving Social Security Disability (SSDI) are allowed to earn.

Those of you who receive SSDI are aware that there is a limit on what you can earn and continue to receive SSDI. If you earn more than this regularly, you are no longer eligible. There are many other rules that may be relevant to your situation, including a trial work period, etc.

Speaking on behalf of the Association and on behalf of the many people who are limited to what they may earn, Diane Schreck and John Richards met with staff from Senator Shaheen's and Senator Hassan's office to raise

awareness of this issue. Both agreed to research and study the origins of this rule: SSA only does what is mandated by Congress.

Diane and John spoke about the discouraging aspects of this rule and how there are many survivors who deliberately work less than they are able, for fear of losing their disability payments. Conversely, we suggested that the Social Security Administration develop a graduated system whereby survivors, who are earning a little more would have only a partial reduction of disability payments, encouraging people to continue to work and gain success as their capabilities improve.

It is also encouraging to note that in a small state like New Hampshire, anyone can request an appointment with senators to express opinions about policy and government topics of any kind.

For anyone who is interested in attending our legislative advocacy training, it will be coming up on January 28, 2019.

What is the Brain Injury Community Support Program? (BICSP)



Assistive Technology Are you a survivor finding yourself in financial need?

This program may provide assistance for you.

Medical/ Dental Work



The Brain Injury Community Support Program is financial assistance for eligible brain injury, stroke, MS or Huntington's disease survivors/family members. BICSP was set up to help individuals with financial support on a short-term basis.

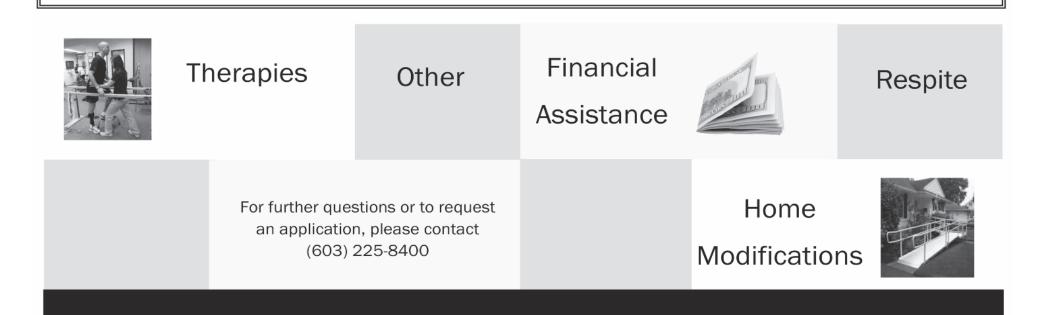
Pending approval by the Brain Injury Community Support Program Committee,

applicants are eligible to

receive funding for requests up to \$2,000.

Applications can be found on our website (<u>www.bianh.org</u>) or by calling the main office. If you need assistance completing the application, please call BIANH. Completed applications received by 2:00 PM on the last Wednesday of each month will be reviewed the following Wednesday.

Services that funds could be used for include (but are not limited to) Assistive Technology, Dental Work, Financial (fuel/rent); Home Modifications, Therapies



SUCCESSFUL AGING OF INDIVIDUALS WITH BRAIN INJURY

This article originally appeared in Vol 12, Issue 3 of THE Challenge!, the quarterly news magazine of the Brain Injury Association of America. Copies of the original issue can be downloaded at www.biausa.org/challenge.

By Paul F. Aravich, Ph.D., Eastern Virginia Medical School, and Anne H. McDonnell, MPA, OTR/L, Brain Injury Association of Virginia



Successful aging is a goal for all creatures great and small. This is true for the lowly mayfly living one day and for the inspiring, if not scrawny, bristlecone pine tree living 4000 years. However, successful aging in people requires more than longevity: it requires the maintenance of physical, cognitive, and social function (Lowry, Vallejo and Studenski, 2012).

Aging is not a disease; it starts at birth and continues across various developmental life stages. But environmental and lifestyle factors play a more important role in successful aging than genetic factors. More research is needed to identify the modifiable environmental and lifestyle factors that are unique to long-term survivors of brain injury. This requires a leap beyond the simple biology to a greater understanding of the biopsychosocial model of successful aging.

The following 10 rules, built upon concepts identified by the Alzheimer's Association, are designed to promote successful aging in persons with brain injury:

Rule 1: Take Care of the Heart

Since brain injury survivors have an already increased risk for Alzheimer's disease, survivors with diabetes, hypertension, or an adverse lipid profile compound that increase their risk for heart disease and stroke. The promotion of successful aging in brain injury survivors requires a focus that goes beyond the brain and includes the early diagnosis and treatment of cardiovascular risk factors.

Rule 2: Exercise the Body

There is little doubt that physical fitness protects against the three leading causes of death in North America: heart disease, cancer, and stroke. It is also clear that moderate exercise promotes respiratory fitness and improves balance, reducing the risks of falls (which are a leading cause of traumatic brain injury). Regular movement also reduces the risk of deep venous thrombus (DVT) formation and premature death from pulmonary thromboembolism. Exercise is not just for rehabilitation – it promotes successful aging. Consider innovative ways to overcome the limitations of brain injury, such as combining exercise with the virtual reality (Lee et al., 2003) and dance therapy (Pratt, 2004).

Rule 3: Exercise the Brain

There is good evidence that cognitively stimulating activities protect against Alzheimer's disease and other potential complications of aging with a brain injury. Stimulating your brain through intellectual activities like taking a class, learning a new language, and volunteering provides benefits for brain health and can affect how well the brain functions. Strategies building on the principles of music therapy (Kleinstäuber, et al, 2001), art therapy (Rentz, 2002), and theater arts (Noice et al., 2004) are beneficial in exercising the brain.

Rule 4: Feed the Brain

Nutrition is critical to successful aging; it is vital for immunity and essential for cognitive function. Evidence suggests that a Mediterranean

diet, rich in whole grain, vegetable, fruit, and olive oil, is beneficial for overall health. A heart healthy diet, which is also a brain healthy diet, should also include regular fish consumption. Fatty fish are rich in various nutrients, including omega-3 fatty acids, which are associated with a reduced risk for Alzheimer's disease (Morris et al., 2003), potential benefits in mood disorders (Freeman, 2000), and the promotion of neuroplasticity.

Rule 5: Promote Mental Health

Mental illnesses, such as depression, bipolar disorder, and schizophrenia, are major risk factors for suicide and increase the risk of a traumatic brain injury (TBI) by 70% (Fann et al., 2002). Even without a pre-injury history, once a TBI occurs, the lifetime risk of depression is increased by 54% (Holsinger et al., 2002). Psychiatric disorders negatively affect successful aging by affecting cognition, emotion, cardiovascular fitness, and general quality of life. Issues of loss and social isolation, combined with the psychological burden of finding adequate housing, education, and transportation, are significant stressors affecting mental health. The importance of early and aggressive mental health interventions, the battle to reduce the stigma against mental illness, and the battle for health insurance parity for mental health coverage are imperatives for the promotion of successful aging.

Rule 6: Avoid Drugs of Abuse

Substance use increases the risk of brain injury and is linked to worse outcomes (Substance Abuse and Mental Health Services Administration, 2010); users are at greater risk of falls, seizures, and certainly damage from use of the substances themselves. Persons with brain injury are more susceptible to developing substance use disorders and they are often prescribed opioids after their injury to manage pain. Nearly 25% of people entering brain injury rehabilitation are there as a result of drugs or alcohol, and approximately half of people receiving substance abuse treatment have at least one brain injury (Brain Injury Association of America, 2018). It is important to recognize that drugs of abuse affect the reward circuitry of the brain, and once this circuit is injured, it is difficult for the chemically dependent person to just say no.

Rule 7: Avoid Social Isolation

It has been said that the human brain is a social brain. Fundamental human emotions like love and happiness depend upon social and physical contact with others. Animal research shows that social isolation causes physical injury to the brain and is associated with cognitive and emotional deficits (Whitaker-Azmitia et al., 2000). Social engagement and enrichment are essential requirements for brain fitness and successful aging in both survivors and caregivers.

Rule 8: Protect the Brain

While the human brain is one of the most miraculous things in the universe, it is also among the most fragile. A brain injury is terrible, but a preventable brain injury is much worse. Protection of the brain goes beyond personal protective equipment and includes regular fall assessments in older people and in people with disabilities (Chang et al., 2004). Protection of the brain also involves letting it sleep; driving skills of sleep-deprived people are similar to those who are intoxicated

with alcohol (Arnedt et al., 2001). Sleep deprivation related to lifestyle issues and to various pathologies also impairs impulse control, cognition, mood, attention, abstinence from drugs of abuse, and immune function (Roehrs and Roth, 2004). Data indicate that more sleep disturbances occur in survivors with mild TBI than those with severe TBI (Mahmood et al., 2004). Protect your brain: get some sleep.

Rule 9: Form More Partnerships for Individuals with Brain Injury

Mental health, brain injury, and Alzheimer advocacy groups have overlapping issues regarding lack of services, social isolation, guardianship, end of life issues, stigma, and the need for respite care. It is obvious there should be close partnerships between brain injury, Alzheimer's disease, and mental health professionals. Brain injury can cause behavioral and psychiatric symptoms that are distinct from those associated with mental illnesses, and injury to the prefrontal lobes often impairs the empathy and bonding necessary for psychotherapy; these problems are not unlike the behavioral and psychiatric problems associated with the irreversible dementias.

Rule 10: Look for Greatness in Each Person

The human brain is the last frontier of science. We will know more about parallel universes, colliding galaxies, and black holes long before we understand the universe between our ears. The human brain has nearly as many neurons as there are stars in the Milky Way Galaxy (more than 100 billion). Each neuron makes connections with thousands of other neurons, and these synaptic connections change each time we do something, experience something, or learn something. This continuing, unrelenting reorganization of the brain is called neural plasticity. Another name for neuroplasticity is hope. Every person, with or without a brain injury, has a magnificent and unique brain. There are an infinite number of possible synaptic connections in every brain, injured or not. The organization of the human brain has limitless possibilities. If you look for greatness in people with brain injury, you will see it. If you look for greatness in caregivers, you will see it. If you look for greatness in other professionals, you will see it. Valuing the bonds you have with other people will help you as you age.

About the Authors:

Paul F. Aravich, Ph.D., is a neuroscientist and associate professor in the Department of Pathology and Anatomy and the Glennan Center for Geriatrics and Gerontology at Eastern Virginia Medical School in Norfolk, Va. He has served as Chair of the Virginia Brain Injury Council and as a member of the Governor's Public Guardian and Conservator Advisory Board, the National Alliance for the Mentally III of Virginia, the Southeastern Virginia Chapter of the Alzheimer's Association, and the Society for Neuroscience. His research interests include nutrition, exercise, and the brain.

Anne McDonnell, MPA, OTR/L, CBIST, is executive director of the Brain Injury Association of Virginia. She has 30 years of experience in brain injury rehabilitation across a continuum of hospital and community-based settings and holds a clinical faculty position in the School of Occupational Therapy at Virginia Commonwealth University. She is interested in increasing public awareness of brain injury, expanding community-based service options for survivors, and educating of survivors, caregivers, and professionals. References available at www.biausa.org/successfulaging.

SUPPORT GROUPS IN NEW HAMPSHIRE

(Times and places may change without notice – please call in advance) Revised January 3, 2019

APHASIA:

Manchester: 4th Tuesday of every month, 4:30pm – 5:30pm, (no meetings held in June, July, or December) Catholic Medical Center – Rehabilitation Medicine Unit, Level F, 100 McGregor Street, Manchester, NH. Contact: Jean Manning or Larissa St. Amand Phone: (603) 663-6694

Nashua: 2nd Tuesday of every month, 4:00pm – 5:00 pm, (no meetings held in July, August or December). St. Joseph Hospital Outpatient Rehab Clinic, 75 Northeastern Blvd, Nashua, NH. Contact: Laura Fonden Phone: (603) 882-3000 (x67530) Contact: Lesley Hill Phone: (603) 595-3076

BRAIN INJURY:

Atkinson: Greater Salem/Derry Brain Injury Support Group for Survivors, Families and Caregivers, 1st Tuesday of the month, 6:30pm-8:00pm, Community Crossroads, 8 Commerce Drive, Atkinson, NH Contact: BIANH Phone: (603) 225-8400

Concord: Contact BIANH for future meeting dates & time Contact: BIANH Phone: (603) 225-8400

Conway: 1st Wednesday of the month, 5:00pm-6:30pm, Northern Human Services, Center Conway, NH Contact: BIANH Phone: (603) 225-8400

Keene: Monadnock Pacers 4th Tuesday of the month, 6:00pm-7:30pm – Southwest Community Services, Railroad Senior Housing Building, 63 Community Way, Keene, NH Contact: BIANH Phone: (603) 225-8400

Lakes Region: 1st Thursday of the month, 6:00pm-7:30pm, Lakes Region Community Services, 719 Main Street, Laconia, NH Contact: BIANH Phone: (603) 225-8400

Manchester: Greater Manchester Brain Injury and Stroke Support Group; 2nd Tuesday of the month, 6:00pm-7:30pm, Catholic Medical Center, Rehab Medicine Unit F200, 100 McGregor Street, Manchester, NH Contact: BIANH Phone: (603) 225-8400

Nashua: 1st Wednesday of the month, 6:00pm, St. Joseph Hospital (4th floor), Nashua, NH Contact: BIANH Phone: (603) 225-8400

Peterborough: 1st Tuesday of the month, 6:00pm-8:00pm, Monadnock Community Hospital, 452 Old Street Road, Peterborough, NH Contact: BIANH Phone: (603) 225-8400

Plymouth: 2nd Wednesday of the month, 6:00pm-7:30pm, The Whole Village, 258 Highland Street, Plymouth, NH Contact: BIANH Phone: (603) 225-8400

Salem: 1st Wednesday of the month, 5:00pm-6:00pm, Northeast Rehab Hospital, Administrative Conf. Room, Salem, NH Contact: BIANH Phone: (603) 225-8400

Seacoast: 1st Tuesday of the month, 7:00pm-8:30pm, North Hampton United Church of Christ, North Hampton, NH Contact: BIANH Phone: (603) 225-8400 **Upper Valley:** 2nd Wednesday of the month, 6:00-7:30pm, Dartmouth Hitchcock Medical Center, Fuller Board Room, Lebanon, NH Contact: BIANH Phone: (603) 225-8400

CONCUSSION:

Concord: 3rd Wednesday of the month, 6:00-7:30 pm., Concord Hospital, 250 Pleasant Street, Concord, NH Contact: BIANH Phone: (603) 225-8400

MILD BRAIN INJURY SUPPORT GROUP:

Salem: 2nd Wednesday of the month, 5:00pm-6:00pm, Northeast Rehab Hospital, Reception will direct you to the room, Salem, NH Contact: BIANH Phone: (603) 225-8400

STROKE AND BRAIN INJURY:

DOVER: 3rd Thursday of the month, 2:00pm-3:00pm, Wentworth-Douglass Hospital, Federal Savings Room – Garrison Wing; Dover, NH Contact: Lindsey Flynn Phone: (603) 740-2271

Kennebunk ME: 1st Tuesday of the month, 3:00pm, Upstairs small conference room, RiverRidge Neurorehabilitation Center, 3 Brazier Lane, Kennebunk, ME Contact: Steve Fox Phone: (207) 985-3030 ext: 326

Nashua: 1st Wednesday of the month, 6:00-7:30pm, 4th Floor, St. Joseph Hospital, 172 Kinsley Street, Nashua, NH Contact: Patti Motyka Phone: (603) 882-3000 ext: 67501

Portsmouth: 2nd Monday of the month, 5:00pm-6:00pm, Northeast Rehab Hospital in Portsmouth, 1st floor Dining Area, Portsmouth, NH Contact: Liz Barbin Phone: (603) 501-5572

BRAIN TUMOR:

Derry: 2nd Monday of the month, 5:30pm-7:00pm, Derry Public Library, Paul Collette Conf Room A, Derry, NH Contact: Urszula Mansur Phone: (603) 818-9376

STROKE:

Concord: Community Stroke Support Group, 3rd Tuesday of the month, 4:30pm, Encompass Health (formerly Healthsouth), 254 Pleasant Street, Concord, NH Contact:Susan Tanner (603) 226-9812 Phone: (603) 226-8843

Lebanon: 1st Friday of every even-numbered month, 10:00am-11:30am, Dartmouth-Hitchcock Stroke Support Group 1 Medical Center Drive, Lebanon, NH Contact: Shawna Malynowski Phone: (603) 653-1117 Contact: Sarah Murphy Phone: (603) 650-5104

Salem: 1st Wednesday of the month, Northeast Rehab Hospital, Family Conf. Room, 70 Butler Street, Salem, NH Contact: Jessica Anderson Phone: (603) 893-2900 x3218

2019 MEMBERS AND DONORS

Thank you to all our members and donors!

(This list reflects donations received from January 1, 2018 to December 2018)

DONORS AND MEMBERS Abraham Burtman Charity Trust

Anonymous Donors BAE Systems Linda Bartlette Dave & Carol Bovee Concord Lions Club Joan Cormier Neal & Lynn Dini Jennifer Dodge Ann Fitzgerald Rosemary Garretson Paul & Charlotte Hamilton Merchants Mutual Insurance Company Betty Montgomery Warren & Susan Rockwell Donna Stinson Stanley Zube St. Patrick's Council 6902 <u>IN MEMORY OF MARK BLOOM</u> Michael & Carol Daly Donald Senechal TEACH Program

Bonnie Ward

IN MEMORY OF HELEN BOURQUE Norwalk Wilbert Vault Co., LLC

IN MEMORY OF DIANNE BURELLE Gilbert Burelle

IN MEMORY OF SCOTT DOWNEY Patricia Downey IN MEMORY OF CHERYL PARE Paul & Charlotte Hamilton IN MEMORY OF VIVIAN MCGUIRE

Sarah Arsenault Lisa Boyajian ID Metrics, Inc Gary Miller Pier59 Studios

IN MEMORY OF BEVERLY SPRAGUE Maggie Smith

IN MEMORY OF REBECCA WILSON Melissa Hermran IN HONOR OF RONALD BARCOMB Eveleen Barcomb

IN HONOR OF LARRY HANLON Corey Hilderbrand

IN HONOR OF CAROL BOVEE

Carol Richards

IN HONOR OF PETERBOROUGH SUPPORT GROUP Elaine Sokoloff

IN HONOR OF MARY QUINN Vicky Mowers IN HONOR OF JOHN RICHARDS Dave & Susan Richards

IN HONOR OF TIMOTHY STANLEY Cross Insurance

IN HONOR OF STEVE WILBUR & FAMILY Carl Lampart

IN HONOR OF "THOSE LOST IN THE WOODS" Jeffrey Therrien

BRAIN INJURY ASSOCIATION of new hampshire	ANNUAL FUND		
Gift Amount: □ \$1000 □ \$250 □ \$100	0 □ \$50 □ \$35 □Other \$		
Gift Frequency: Monthly Quarterly	Annual One-time gift		
MY GIFT IS A TRIBUTE — IN MEMORY OF			
IN HONOR OF			
 Donate Online — You can easily donate online; go to <u>www.bianh.org</u>, and use the GIVING tab. Bill Me — We will invoice you based on your gift frequency designated above. Check Enclosed 			
NAME			
ADDRESS, CITY, ZIP:			
EMAIL ADDRESS:	PHONE:		
YOUR DONATION IS FULLY TAX DEDUCTIBLE. OUR TAX ID IS 02-0397683			
52 Pleasant Street Concord NH 03301 603-225-8400 800-773-8400			
WWW.BIANH.ORG			