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THE VOICE OF BRAIN INJURY –  
 Help, Hope and Healing  
**ISSUE #78, FALL 2020**

**THE BRAIN INJURY ASSOCIATION OF NEW HAMPSHIRE**  
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# HEADWAY

NEWSLETTER



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## Eryn Martin: A Survivor on a Mission to Help Others

By Sarah Kilch Gaffney

May 11, 2020, started out like any other day for Eryn Martin. Having worked as a nurse for 13 years, Eryn had helped out with floor nursing at Exeter Hospital during the height of the COVID-19 pandemic, and had only recently gotten into her job as a clinical practice nurse coordinator. After finishing up the workday, Eryn headed home and then started a virtual kick-boxing class. Mid-jab, she suddenly experienced an excruciating headache.

Eryn sat down and tried to drink some water, but the headache just kept getting worse. Her nursing training kicked in, and she checked her blood pressure, which was through the roof. Her head and neck were increasingly painful, and she was worried about an aneurysm or a possible injury to her cervical spine. The pain and vomiting became so severe that Eryn's husband Troy called 911. Eryn then traveled by ambulance to Wentworth Douglass Hospital, where the staff quickly did a CT scan and diagnosed her with a subarachnoid hemorrhage, which occurs when there is bleeding between the brain and the surrounding membrane.



Eryn and Troy Martin

At this point, Eryn thought to herself “this is what it feels like to die,” and she was at peace with dying. Troy, who initially had not been allowed to accompany her due to COVID-19 precautions, arrived by her side. Eryn remembered he was wearing a blue mask and he held her hand. As she looked

at his face, she realized she needed to try and live. The staff at Wentworth Douglass quickly arranged emergency transport to Massachusetts General Hospital (MGH) for Eryn. It was too stormy for the helicopter, so Eryn was transported via ambulance, but she does not remember much of the ride other than being wheeled in from the ambulance under a tent.

At MGH, Eryn had a series of imaging and cerebral angiograms, which can help find blockages or abnormalities in the blood vessels of the head and neck. Eryn's bleed had occurred on the lower right side of her brain near her brain stem and cervical spine. The doctors believed it was a venous bleed known as a perimesencephalic subarachnoid hemorrhage, which was very serious, but also the

Continued on page 3



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## PRESIDENT'S MESSAGE

### KUDOS TO STEVE WADE

by Robin Kenney, Ed.D., BIANH President



The BIANH Executive Committee recently undertook its annual review of Executive Director Steve Wade. The results - sterling marks across fourteen measures of competence, character and leadership - confirmed what I know from my own interactions with Steve over the past six years: That the brain injury community in New Hampshire is lucky to have him at the helm.

Steve has led this organization now for 28 years. Over that remarkably long tenure, he has become exceptionally knowledgeable about the medical science of the field, familiar with the wide variety of complex and long-term needs of people with TBI and ABI (traumatic and acquired brain injury), and strategic in devising and implementing effective ways of advocating for them.

Setting a strong example for the 28 program professionals, case managers and administrative staff working under him, Steve is a respectful and responsive leader who regularly seeks ways to elicit their best work and advance their individual professional development. In reviewing his performance during this especially

difficult and challenging year, Executive Committee members commented that Steve's work is "commendable," referring to him as a "true leader" who contributes to an "excellent board experience."

For my part, working closely with Steve has been one of the highlights of my involvement with the Brain Injury Association. I have often observed how highly he is regarded, both within our state and by other brain injury activists and organizations around the country. But I have also observed his willingness to share the spotlight; whenever he receives praise or acknowledgement for his work, he insists that it is a "team effort."

To make a long story short, Steve Wade is a great guy - straightforward, sincere, friendly and professional with everyone in his orbit. He is precisely the leader this organization needs as we seek to navigate the continuing public health pressures of the COVID-19 pandemic.

## EXECUTIVE DIRECTOR'S MESSAGE

### SURVIVOR ENGAGEMENT - LESSONS LEARNED

by Steven D. Wade, BIANH Executive Director



Here is a summary of some key lessons learned by brain injury survivor leaders after reflecting on their advocacy journeys. This was recently shared by the Traumatic Brain Injury Technical Assistance and Resource Center (TBI-TARC) survivor advisory group. It is composed of nine survivors of brain injury, including Carole Starr, an active brain injury advocate based in northern New England. Carole is well known within the brain injury community in both New Hampshire and Maine. This national group of brain injury survivor advocates is co-led by Carole Starr and Kelly Lang.

Lessons learned from these survivor leaders as recently published by TBI TARC:

- **The importance of other people:** Brain injury survivors usually don't become advocates all on their own; survivors need to be supported and encouraged by others - individuals and organizations. Engaged survivors are developed through successful participation in things like peer mentoring programs, brain injury support groups, speaker bureaus, and volunteering.
- **The value of a personal invitation:** Unlike a blanket email looking for survivors to be part of committees, a personal invitation - especially from someone the survivor knows, looks up to, and trusts - makes one feel wanted and more likely to participate.

- **The importance of acceptance:** It is important to understand that survivors need time - they are experiencing a great deal of grief and it may take some time for them to be ready to be advocates. It's a journey that happens slowly, in stages. Offer specific, small opportunities for people to get involved that meet them where they are, so they can grow gradually into larger advocacy roles. Success at small tasks can grow into success at larger tasks.
- **The role of support:** Because survivors often feel "less than," they may need some "hand-holding" to be part of teams and encouragement to recognize ways they can contribute and use their story. Survivors feel alone in their injury. They don't want to feel alone on committees too. They want to feel that their lived experience is valued, listened to, and acted upon, that they are there as a "token."
- **The recognition that advocacy can help with finding meaning after brain injury:** For some survivors who choose to participate on committees, it can be about more than the work of the committee. It can be a place to go, a role, an opportunity to use one's story to help others and find a new identity as a brain injury advocate.

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*Continued from page 1- Eryn Martin: A Survivor on a Mission to Help Others*

best-case scenario for this kind of bleed. She spent four nights in the neuro-ICU and four nights in the neuro step-down unit.

On May 19, 2020, Eryn was discharged home, but her recovery was just beginning. She was still experiencing extreme pain in her head, neck, and the full length of her spine all the way to her tailbone. This pain continued for about a month, and it limited her ability to move and walk at a normal pace. As someone who constantly likes to be on the move, this was a difficult adjustment for Eryn.

Due to the ongoing pain, Eryn was on an extended course of steroids. She experienced numerous negative side effects from the steroids while taking them and for several weeks after. On top of the cognitive effects from the brain injury itself, she became very manic and struggled with extreme insomnia. This was the hardest time on Eryn, her husband, and her family and friends. Typically a very private, introverted person, Eryn explained that she suddenly “had little impulse control and the barriers in my brain came down. Every thought that came into my head came out of my mouth.” Eryn was terrified that she was going to be stuck in this manic state with little control over what she was saying.

A little over a month after returning home, Eryn was finally able to start sleeping again and started to see dramatic improvement. The mania went away and her impulse control improved. Her walking speed increased and, while she still can’t do high-impact activities, she has been able to resume normal activity. After the physical improvements, Eryn focused on her cognitive challenges. The hemorrhage left her with difficulty focusing, reading and memory deficits, as well as photophobia and eye pain associated with screen time.

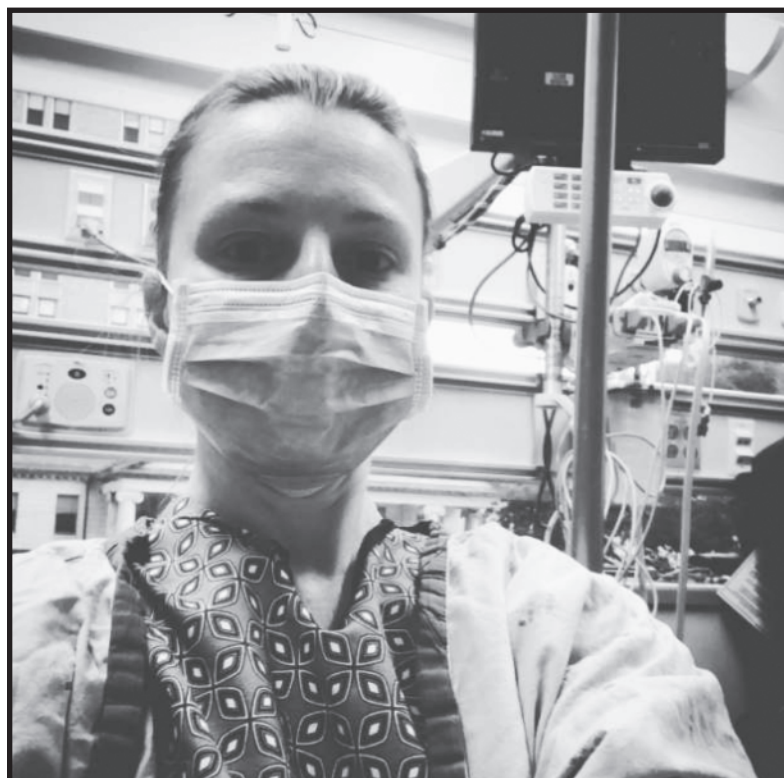
Eryn started speech therapy to help improve her cognitive function. She also started working with a counselor to help address the emotional aspects of having a brain injury. “One of the hardest things for me was going from being completely independent to being

totally dependent,” Eryn said. “I thought I was strong and fine, but looking back, I was a mess



and needed help.” Counseling has been integral to Eryn’s recovery, and she encourages anyone in a similar situation to seek the support of a counselor early on. In addition, Eryn has been participating in BIANH’s virtual support groups. “They have been a great resource,” Eryn said, “and being able to participate virtually was so helpful because I was initially unable to drive.”

In the aftermath of her injury, Eryn decided to take the experience and do something positive with it.



2020 has been extremely difficult for so many people due to COVID-19 and other challenges, and Eryn’s injury really changed her perspective on what’s important in life. “Rather than dwell on the negative,” Eryn said, “I’ve chosen to say ‘DUCK IT!’” Eryn has decided to live in the moment and choose love, kindness, gratitude, relationships, generosity, and happiness. “These are the things that matter. You can only control your own attitude,” she said.

Through her “DUCK 2020” campaign, Eryn is raising awareness around brain injury and raising funds to help support other brain injury survivors through BIANH’s Brain Injury Community Support Program (BICSP) and COVID-19 Financial Assistance Program. Both programs provide direct financial support to individuals living with brain injuries in New Hampshire communities. Eryn is fundraising through the sale of “DUCK 2020” t-shirts and collection of donations at <https://www.customink.com/fundraising/duck-2020-support-brain-injuries>. You can also find Eryn’s campaign on Instagram at @duck2020\_Brain\_Fundraiser. Eryn has already raised over \$3000 to support New Hampshire brain injury survivors and she plans to keep the fundraiser open until December 1, 2020.

She and a close friend of hers, who also has a brain injury, are hosting a podcast called “Making Headway.” It is a podcast for brain injury survivors by brain injury survivors. “For many, brain injuries are invisible. When you don’t have an easily distinguishable disability, it is hard for others to recognize that there is something going on,” said Eryn. The podcast aims to give a voice to survivors, provide advice from practitioners, and develop a community of support. It will be released by November. Watch for it and listen on your favorite podcast streaming service.

For more information about the BICSP and COVID-19 programs or to learn how to apply, you can visit the BIANH website ([www.bianh.org](http://www.bianh.org)) or call the BIANH office at (603) 225-8400.

# SUPPORTING OUR PEOPLE DURING THE COVID - 19 EPIDEMIC

On behalf of the Brain Injury Association of New Hampshire, we are pleased to offer a financial assistance program specifically focused on individuals/families who are struggling with the effects of COVID – 19.

A one-time grant of \$500 per family will be made available to brain injury survivors and family members who are struggling in the aftermath of the pandemic. These funds could be used for things like purchasing food, paying rent, utilities or for other household needs for individuals who are laid off, furloughed, or otherwise out of work. However, there are no restrictions on what may be requested except that it must be related to situations people are dealing with as a result of the pandemic.

*Examples of what the financial assistance may be used for include (but are not limited to):*

- Purchasing food, paying rent or utilities, etc. for those who are laid off, furloughed, or otherwise out of work
- Securing Wi-Fi or Internet services so that interpersonal connections can be maintained.
- Purchasing equipment for a computer, such as a microphone or camera, so that video conferencing capability is established.

*In order to apply, please:*

- Complete a brief application that can be found at [www.bianh.org](http://www.bianh.org). In addition please complete no more than a one page description about the following questions:

What happened/how did you receive your brain injury?

What type of assistance do you need and how will the funding assist you?

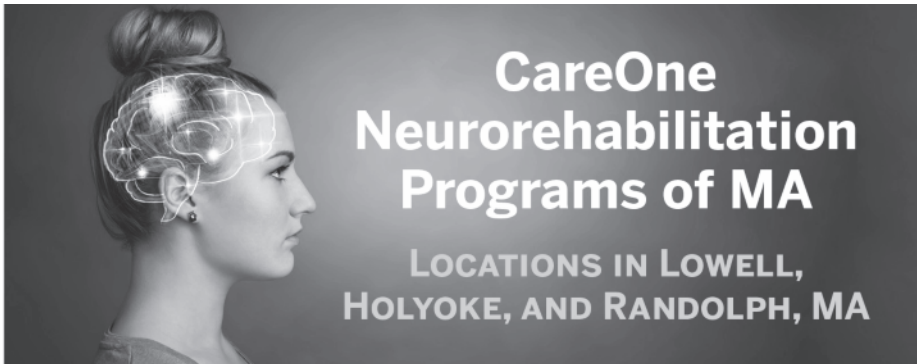
- If we are not acquainted with you, you will need to provide medical documentation of your brain injury.
- On the application, we will ask you: What do you need that will help make the situation better?
- You may email the initial request [mail@bianh.org](mailto:mail@bianh.org), but we also ask you to mail a written or typed copy with your signature on it to BIANH, 52 Pleasant St., Concord, NH 03301.
- Tell us who the check should be made out to and in what amount. CALL us at 225-8400 if you have questions or need assistance!

*Policies:*

- The Association reserves the right to verify any facts or statements made in the initial letter.

The applicant will cooperate with same, including signing releases if so requested.

- Every effort will be made to review/reply to requests within seven business days, and checks, if approved, to be issued within 10 business days.
- Checks will only be issued directly to grocery stores, landlords, utilities, etc., not to individuals.
- The Association reserves the right to approve or disapprove any requests. If approved, BIANH will provide an amount up to but not greater than the requested amount based upon available funding.
- This program provides one-time assistance.
- Applicants must be New Hampshire residents.
- Individuals receiving services under a Community Care Waiver are not eligible.



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*William "Bill" Brewster, MD, FACP, CHIE is Vice President of the New Hampshire market for Harvard Pilgrim Health Care (HPHC). Bill is a New Hampshire native who has practiced medicine in New Hampshire since 1987. As a physician, he has worked for decades with patients and their caregivers. In his personal life, he has been an outspoken advocate for combatting stigma around addiction and helping other families find hope and healing. "This is not them; this is us," Bill tells people. "We're all in this together." Dr. Brewster will blend his personal caregiving experience with his professional experience as a physician to offer "lessons learned" and insights into the caregiving experience.*

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**Or visit the Coalition of Caring's website at [www.coalitionofcaring.org](http://www.coalitionofcaring.org)**



## SPOTLIGHT ON KREMPELS

### Improv Invaluable to Brain Injury Survivors at Krempeles Center

By: Katie MacKinnon, Krempeles Center

On Wednesday mornings, members of Krempeles Center – the nonprofit community organization that provides quality programs and services to people living with brain injury in the Seacoast region and beyond – are welcome to take part in an improv-style class called “Let’s Make A Scene”. The benefit of the class is two-fold. Krempeles Center members work on their personal skill sets and comfort levels in social and novel situations, as well as practice being part of a team to create something together.

Led by Craig Werth, Krempeles Center Group Facilitator since 2016, the group is expected to hold a safe space for creative expression and fun. Werth has a personal affection for improv and similar games with brain injury survivors interacting in creative ways and learning how to adapt their communication.

“One member reported that she used to be anxious showing up to work because she didn’t know what might happen in her job and it changed all the time,” Werth shared. “After improv classes, her anxiety about that diminished greatly – she knew she could handle the unexpected better.”

Before March 2020, the improv group gathered in person at the Community Campus in Portsmouth, New Hampshire. Now, the group meets virtually on Zoom. One benefit to going online is that members have direct visibility to one another by easily seeing all the participants’ faces as they communicate and hearing each other “up close” – which equalizes opportunity.

In a recent improv group, eight members were asked to look around their physical space and pick an object to bring up to the camera. With that object, the members were asked to make something up about it that’s not true. To kick it all off, Werth held up a pencil and called it the “biggest match he has ever seen!” followed by a short antidote. Letting go of the usual and inviting creativity in, members each took turns with their objects. One member held up an action figure holding a spiky wand and proceeded to describe the object as the cuddliest teddy bear in the world. Another member used a rock as his object but described in



playful detail how it was actually an alien spaceship he discovered while walking in the park. In addition to rising to the challenge, members engaged in creative play with one another, which supports relaxation, stress-relief and other positive outcomes.

Krempeles Center employs a multi-disciplinary approach to delivering programs by working with allied health and social services interns. The improv group is no exception and is typically co-led by an intern who leverages evidence-based practice and creative thinking to help guide member participation. Krempeles Center Intern Cori Ianni, Occupational Therapy Doctorate (OTD) student at MGH Institute of Health Professions, co-led a recent group with Werth for the first time. Ianni shared that she loved the improv group, and it even pushed her to work on the fly just like the members who had to be flexible with their responses. Ianni’s goals are to continue working with people to improve or maintain their brain functions, including emotions, thought processes, memory, speech, and planning. The improv class at Krempeles Center certainly helps in all those areas.

In response to public health restrictions last spring, all Krempeles Center programs shifted online. The organization remains steady as an example of innovation. Krempeles Center continues to reach many of its members and connect with new brain injury survivors who are joining the program virtually. Support from the community has been a key component to Krempeles Center’s evolution to a virtual platform.

Join an upcoming virtual Fireside Chat to see firsthand the community and fellowship that is Krempeles Center. For more information and to register, visit [www.krempelescenter.org/fireside-chats](http://www.krempelescenter.org/fireside-chats).



## SPOTLIGHT ON KREMPELS 2

### King Challenge Celebrates 10th Anniversary Virtually in 2020

By: Katie MacKinnon, Krempels Center

Every October, cyclists from all over descend on the Seacoast of New Hampshire for the best riding conditions New England has to offer. The King Challenge, which benefits Krempels Center, boasts scenic routes, friendly course support and a lively finish-area celebration. However, due to ongoing social distancing recommendations, this year's bike ride has shifted to an all-virtual-event - still celebrating the season and supporting the important work Krempels Center does for the brain injury survivor community.

This year's virtual ride will be a 10-day-long event from October 9th through October 18th to celebrate King Challenge's milestone 10th anniversary. As it's the 10th annual ride, registration is only \$10.00 and no fundraising minimums are in place for 2020. There will be fun incentives for participants to raise money for Krempels Center, including a custom 10th Annual King Challenge t-shirt for raising \$150, raffles with an increasing number of chances as you raise more funds, and a custom Velocio bike jersey for those raising over a \$1,000. Participants can register at [kingchallenge.org](http://kingchallenge.org).

The King Challenge was created in 2011 by pro-cyclist and Brentwood, NH native Ted King and Arlon Chaffee of LOCO Cycling. Proceeds from this event provide scholarships for Krempels Center members who otherwise would not be able to participate in the high quality, therapeutic programs offered through the organization. Since its inception, the event has raised nearly one million dollars for Krempels Center, significantly impacting the quality of life of brain injury survivors and their families in the community.

Participants are encouraged to share photos with the #RideForBrainInjury or #KingChallengeRide across social media platforms, and stay connected in a dedicated Facebook group and on the popular Strava app. Even non-cyclists can register but skip the mileage in 2020, and instead choose their own challenge while raising funds for those living with acquired brain injury.

Support is needed from the community now more than ever to make this year a success. If you would like to get involved, visit [www.kingchallenge.org](http://www.kingchallenge.org).



# INSIGHTS

Life Perspectives From a Brain Injury Survivor David A. Grant



## FINDING MY TBI GROOVE

It's been almost a decade since my traumatic brain injury. Early on, the losses were staggering. Like so many other brain injury survivors, I lost friends. My personality shifted rather dramatically, and those who knew me for years no longer knew who I was. It was easier for them to fade out of my life than to try to understand the complexities of life after brain injury. I don't blame them – I was no longer the guy they knew. I was a stranger to them and to myself.

There was the loss of most of my business. Being self-employed at the time of my brain injury and having no meaningful ability to remember things for a few years, my work suffered, and many of my clients quietly chose to go elsewhere. Like friends who faded away, I completely understand their decisions. From a business standpoint, if it takes your web developer three months to return a call, you should probably be working with someone else.

There were countless other losses, far too many to list, nor do I have any real desire to revisit those early years. The first few years after my TBI were undoubtedly the toughest of my entire life.

Closing in on my ten year TBI anniversary there are still losses, but these days I have good losses. Wondering how a loss could possibly be good? Time is indeed a healer of so many things.

I have lost my ambiguous grief. For so many years, I wallowed in the overwhelming sadness that a big part of me – of what made me who I was – died that day in 2010. I was a stranger to myself, saying and doing things that I never would have done in my pre-TBI life. Today, that sense of loss is completely gone. Enough years have passed since my injury that it does not matter who I was a decade ago; I am who I am today – and that is perfectly fine.

Also lost is that sense of being useless, being an anchor – pulling down those close to me. It took me many years to get back to the point of full-time employment again. There were false starts, mental exhaustion, and bouts of frustration and hopelessness. But I am tenacious. At four years out, I was able to read again; at seven years out, I was back to working on a full-time basis.

Added to the losses over the last couple of years is the loss of constant exhaustion that comes with an endless parade of bad nights because of Post Traumatic Stress Disorder. At eight years out, EMDR therapy finally put an end to many years of being tormented by PTSD. Gains took years, but they did come.

Today I suit up and show up, working a very traditional work week. Never have I been more on top of my game professionally – something not only good for our monthly budget, but also good for my self-esteem. I can't even begin to tell you how “normal” it feels to have a pretty regular life. Just thinking about it made me smile rather broadly.

My social circle fits me like a glove. I have a handful of close friends who knew me before and after my brain injury. They love me and accept me for the person I am today. I have others in my life who never knew the “before” version of me. The post-TBI me is all they know. I count myself blessed beyond measure.

Early on after my injury, my life was defined by the loss of so many of the good things that define a happy and meaningful life. Today my life is defined largely by the loss of many of the things that tormented me for so many years. I've got my TBI groove on. Life for the most part is pretty normal. I get up early, work during the week, and play on the weekends. Most anyone who meets me today would have no idea of all that has come to pass.

Like fire tempers steel, my experiences have forged me into who I am today. They have made me stronger in ways that I never thought possible. Seen in that light, it's hard not to be grateful.



### Upcoming Virtual Brain Matters Trainings

Wednesday, October 14 – 9:00 AM – 1:00 PM

*Challenging Behaviors Through  
Cognitive Training*

Presenter: Gina England, MA, CCC-SLP

Wednesday, November 4 – 8:30 AM – 12:30 PM

*Brain Injury 101*

Presenter: Jennifer Parent-Nichols, DPT, EdD, PCS, CBIS

Visit our website at [www.bianh.org](http://www.bianh.org) for more  
information and to register!



# DISABILITY RIGHTS CENTER



Disability Rights Center - NH  
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Advocating for the legal rights of persons with disabilities

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## COVID-19 UPDATES

*DRC-NH is open during this crisis and welcomes calls from people with all types of disabilities on legal issues related to disability and COVID-19.*

Due to the COVID-19 pandemic, some retail stores, restaurants, and other sales and service establishments have modified their entrances, or the way people are able to shop and enjoy a meal. While taking precautions for the health and safety of customers is important, the presence of a pandemic does not negate these business' obligations under the ADA.



Sales and service establishments are public accommodations under Title III of the ADA and must comply with the laws and rules related to accessible parking, routes, and entrances. Specifically, accessible parking must be on the shortest route to an accessible entrance. An accessible route includes not only the distance from the parking to the entrance, but also the presence and maintenance of curb cuts, sidewalks, and pedestrian crossing lines. With some businesses closing one or more entrances to their store or adding barricades to direct foot traffic, accessible parking may no longer be on the shortest route to an open and accessible entrance. This is a clear violation of the ADA.

The ADA requires a specific number of accessible parking spaces to be available depending on the total amount of spaces in the lot and so, if entrances are no longer open, stores must also make modifications to their parking lot to increase the amount of accessible spaces available on the shortest route to the currently open entrance.

The ADA requires that sidewalks be at least three feet in width. As outdoor dining and shopping options become more common, restaurants and retailers must ensure that sidewalks and curb cuts are not blocked by tables, clothing racks, or other barriers. When a business puts tables or other items on the sidewalk, there must be at least three feet between the obstruction and the edge of the sidewalk to allow for safe passage.

Even during a pandemic, people with disabilities have the right to access their community without discrimination. Contact us if you have a question about accessing a business or if you wish to speak with an attorney about a disability-related issue.

### Issue Area Highlight- New Accessible Absentee Ballot

The NH Secretary of State's Office recently launched an accessible absentee voting system for people with print disabilities. Until now, voters with print disabilities, including people who are blind, who were unable to mark a paper absentee ballot themselves had to rely on assistance to complete their ballot. Because of this, voters who had print disabilities were not able

to vote privately. The new system now allows these voters to request and fill out an absentee ballot privately and independently. The system will be used in addition to the existing absentee voting system. More information about the accessible absentee voting system, including how to request a ballot can be found on the Secretary of State's website, <https://sos.nh.gov/elections/voters/register-to-vote/absentee/accessible-voting/>.

Individuals with disabilities have the right to cast their vote privately and independently whether in-person or by absentee ballot. Know your voting rights and contact us at 603-228-0432 or [drcnh.org/issue-areas/voting/](mailto:drcnh.org/issue-areas/voting/) if you have questions or believe your voting rights have been violated.

**Sign up to receive our e-newsletter via the portal at the bottom of our homepage [drcnh.org](http://drcnh.org)**

This July marked thirty years since the passage of the Americans with Disabilities Act (ADA). Each month, DRC-NH has been highlighting a different aspect of this fundamental civil rights legislation in our e-newsletter. We have covered topics including transportation, voting, mental health, employment, education, and much, much more. Register)

**Sign up for the Disability RAPP via the portal at the bottom of our homepage [drcnh.org](http://drcnh.org).**

Sign up for the Disability RAPP (formerly the RAP Sheet). Each issue of the Disability RAPP focuses on a different topic and how it relates to disability. The Fall 2020 issue focuses on the ADA.

*Issue Area Highlight-Accessibility During COVID-19*

*Image credit: Morning Brew via Unsplash*



# 37TH ANNUAL BIANH GOLF TOURNAMENT

BIANH held its 37th Annual Golf Tournament on Wednesday, August 19, at the highly acclaimed Stonebridge Country Club and Golf Course in Goffstown, New Hampshire. Northeast Rehabilitation Hospital Network has been Title Sponsor for our golf tournament for several years now, and Robin Hill Farm and BIANH have partnered together on this tournament for more than 30 years!

Since 2020 has been such an odd year with the experiences of the pandemic, it seemed as if many veteran, as well as amateur, golfers were anxious to get out and hit the course. This year we had 96 golfers with clubs in tow enjoying the picture perfect day together.

Sponsorships and monies received from this event have been specifically designated to assist and provide support for brain injured veterans and their families, helping vets to access brain injury services in the civilian system of care, and to expand upon the services provided by the Veterans Administration. For the past few years, the golf tournament has also sponsored the ThinkFirst program, a National Injury Prevention Foundation, of Northeast Rehabilitation Hospital Network. Staff from Northeast Rehab/ThinkFirst visit area schools and educate students about helmet and seatbelt safety, concussion, fall prevention, as well as making wise, safe choices in life.

### 2020 Winners are:

1st Place – *Independence Care:* Philip Viar, Tony Belliveau, Jeff Dinneen, and James Viar

2nd Place – *Knapton Team:* DJ Knapton, Kyle Knapton, Steve Livingston, and Matt Niven

3rd Place – *Rose Meadow Team:* Shawn Gagnon, Matt Corson, Dan Shea, and Scott Gagnon

“Most Honest Team” – *Felch Team:* Eric Felch, Chris Tremblay, Nathan Routhier, and Brad Moore

Women’s Closest to the Pin – Juliana Emerson

Men’s Closest to the Pin – Peter Bonaventura

Women’s Long Drive – Linda Walters

Men’s Long Drive – Philip Viar

Putting Contest – Kevin Bugeau

After the tournament, golfers, sponsors, and volunteers gathered for a lunch buffet and a brief presentation of awards.

**Special thanks to our Sponsors:** Northeast Rehabilitation Hospital Network, Crown Healthcare Apparel Service, Encompass Health Rehab of Concord, Enterprise Bank, HUB International, North Country Independent Living, Northeast Delta Dental, Robin Hill Farm, Rose Meadow Farms, and Jim Collins.

Finally we wish to say thank you to Stonebridge Golf Course staff, our Golf Committee, numerous prize raffle donors, and many volunteers for making the day so successful!

**Please join us for our next tournament to be held in August 2021.**





## 5TH ANNUAL NATIONAL CONCUSSION AWARENESS DAY® RECOGNIZED BY CONGRESS SEPTEMBER 18, 2020

*“Knowing you’re not alone in brain injury makes a bigger difference than anyone knows. That is one of the reasons I founded National Concussion Awareness Day®.” – Brooke Mills*

With COVID challenges in mind, this year a strong social media campaign was launched to encourage survivors to share their story publicly on September 18th. Brooke Mills hosted five live social media interviews with experts and survivors on the Brain Injury Association of America’s Instagram page, which are still available for viewing. Among the guests were survivors Dr. Ally Crich, Noah Bond, Jana El-Sayed, Kellie Pokrifka and Allison Cook. Topics included how a concussion can cause a personal identity crisis and a loss of your peer group. They also discussed the challenges to accomplishing goals previously set for yourself and the need to re-evaluate a planned life path. Noah Bond, a survivor with 12 reported concussions, spoke about the risk of depression and suicide associated with Post-Concussion Syndrome. Noah said when a fellow survivor reached out to him it completely changed his trajectory. “He let me know that I wasn’t the only one, which was the biggest sense of relief to me because knowing you’re not the only one hits a lot further than people give credit for.” This feeling of aloneness was a common share throughout the day.

Brooke was also interviewed via zoom by Senator Maggie Hassan on her official Facebook page. Senator Hassan and Brooke discussed the effects of Mild Traumatic Brain Injury and Post-Concussion Syndrome. Brooke shared her personal challenges with Post-Concussion Syndrome in high

National Concussion Awareness Day® was founded in 2016 by a teenager in Concord, NH. It first began as New Hampshire Concussion Awareness Day with a Proclamation requested by Brooke Mills and issued for November 10, 2015 by Governor Maggie Hassan. The following year Brooke established through federal trademark the third Friday in September annually as National Concussion Awareness Day® and partnered with the Brain Injury Association of America to spread the word. In 2019 and again in 2020, National Concussion Awareness Day® was recognized by Resolution in the United States House and Senate, with Senator Hassan leading a bipartisan group of her colleagues. Through NCAD, Brooke endeavors to create community-wide understanding of mild traumatic brain injury to reduce the stigma and to allow survivors to feel supported. National Concussion Awareness Day® brings the concussion conversation into the media, school classrooms and to the family dinner table.

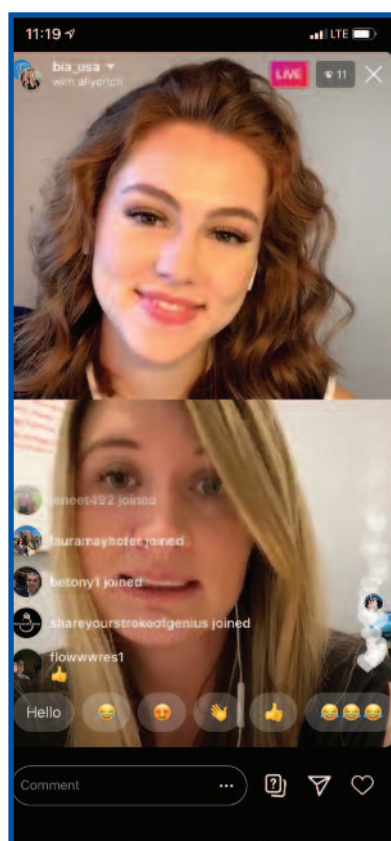
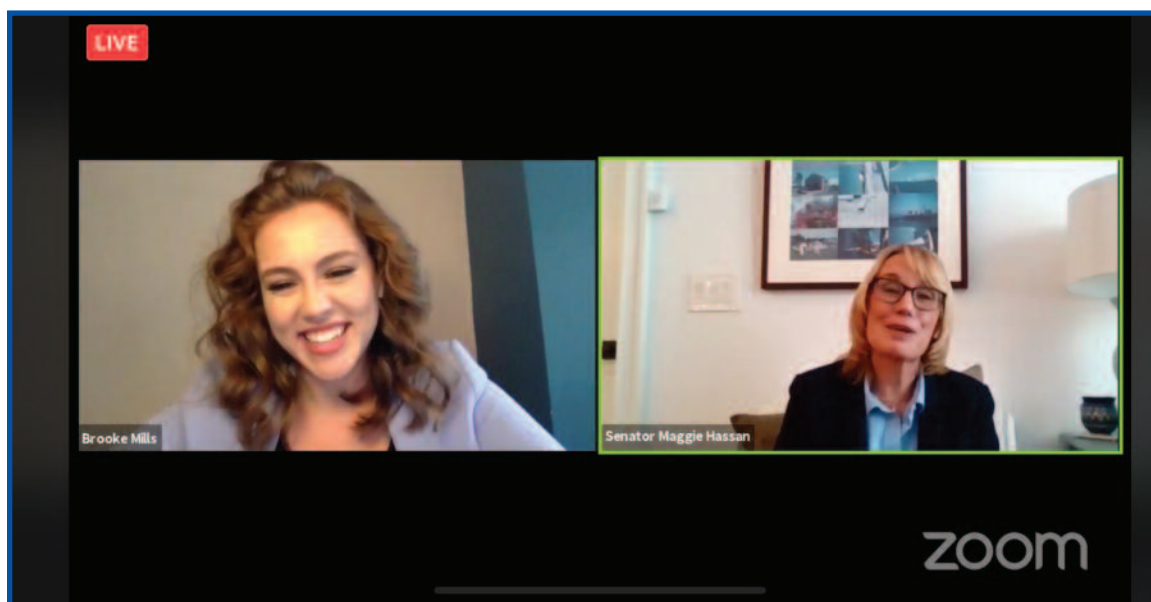
school and college as a result of a kick to the head in her freshman gym class at Concord High School. Senator Hassan and Brooke spoke about bullying, social isolation, and academic challenges for students as well as other unexpected issues survivors encounter during the healing process. Resources shared during that interview included the Brain injury Association of America, the CDC Guidelines and the Heads Up Program.

While National Concussion Awareness Day in 2020 has gone by, raising awareness and improving understanding of concussion is a year-round process. Here are three ways you can participate:

1. Go to the [BIAUSA.org](http://BIAUSA.org) website and take the “Crash Course” video-based learning experience for parents, coaches, officials and athletes. This research based, interactive course by TeachAids is aimed to improve the culture of concussion safety in sports.

2. Schedule Brooke as a virtual guest speaker for your classroom. Since the onset of remote learning with COVID policies, Brooke has interacted with students through live online interviews hosted by the classroom teacher. Go to [www.lessentheimpact.org](http://www.lessentheimpact.org) for more information.

3. Be a voice! Share your own story on social media. What happened and how has it affected your day to day life? Are there ways you’ve learned to adapt? Have certain treatments been helpful for you? What things can others do to be more supportive of you? Or simply share your advice with other survivors.





# NCIL HIGHLIGHTS!

Still amidst this unprecedented time of COVID-19, staff, and residents alike at North Country Independent Living have become highly creative while using imagination and sheer creativeness.

Months into the pandemic when it was evident that this was going to be a long-term situation, creative sources were at work! Suggestions were made for an outdoor movie screen at the Passaconaway and Westside residences while showing movies on the big screen with the residents socially distancing from each other and masking up. Many of the residents had not seen each other in months, so this gathering was quite delightful. Rave reviews go to Natalie and Stacey for taking on this project. Who knew that we would have a “Drive In Theater” within the parking areas between the two homes while enjoying popcorn, snacks, and self-contained beverages?

In many years past, Camp Huckins in Freedom, NH hosted NCIL residents and staff for overnights of camping, waterfront activities, crafts, outdoor fire gatherings with s’mores and banana boats. This year when NCIL reached out to Camp Huckins they gladly agreed to host us once again for a day of fun, food, and outdoor games. What a glorious August day was had by all, swimming, boating, games, and great food – a great escape!

Once again, the ever-creative team of Terrie and Amy put together an online auction for the benefit of the Brain Injury Association. Many residents and staff missed the annual Shannon Door pizza fundraising event, so they wanted to give back in another way. Flyers were created and contacts were made for donations of “baskets” for the online auction. Stay tuned for the final count.

## Resident Highlight

Michelle F. wanted to share her story; she stated that if she can reach out and help someone who has been affected by a brain injury, she is here to offer hope. Michelle worked up until the time she was involved in a severe automobile accident as an unrestrained ejected passenger in 2009 suffering a traumatic brain injury at the age of 42. Prior to her accident she was a very capable employee, being floor supervisor for thirteen other employees. Michelle completed rehabilitation at Crotched Mountain where she had to learn to walk, talk, and perform daily skills. Currently, in Michelle’s own words “I can walk without a cane and take physical therapy for my injuries; I live in a home with three others with different injuries of their own. Everyone tells me that if I hadn’t informed them, they wouldn’t even know I had an injury of any sort.”

Over the years Michelle will admit that there have been struggles along the way, she is a very outspoken and strong-willed woman, she also has memory deficits. At this time, Michelle is a valued employee at Old Navy and keeps up with her exercises by walking her daily loop around North Conway, she is continually active and will participate in almost any activity to keep herself busy. Her mantra is: “if I can do it, anyone can do it.” As of this writing she is looking forward to a trip to upstate Maine to visit family members that she has not seen in over five years, which includes her mother.

We at NCIL have the pleasure of supporting Michelle and advancing her daily skills to the most independent lifestyle possible.



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1-888-400-6245 (NCIL) ■ [ncil@ncilnh.com](mailto:ncil@ncilnh.com) ■ [northcountryindependentliving.com](http://northcountryindependentliving.com)



**NOTICE  
OF  
PUBLIC  
HEARING****Brain and Spinal Cord Injury Advisory Council  
NEW HAMPSHIRE STATEWIDE PUBLIC HEARING ON UNMET NEEDS****Thursday, October 22, 2020****ZOOM Meeting -- 6:00 - 7:30 PM****ZOOM Link -- <https://bianh.org/general-registration>**

The Brain and Spinal Cord Injury Advisory Council is seeking input from stakeholders (survivors, family members, caregivers, friends, services agencies) with respect to the unmet needs of individuals with brain and/or spinal cord injuries.

Based upon the information gathered and as part of the Council's statutory charge from the New Hampshire Legislature, the Council will subsequently submit a report to Governor Sununu and the Legislature that contains findings and recommendations on how NH can better meet the needs of individuals with brain and/or spinal cord injuries.

**We look forward to your participation and learning about your questions and concerns.**

Questions? Contact Ellen Edgerly at 603.834.9570 or [Ellen@bianh.org](mailto:Ellen@bianh.org)

▶ Are there services and/or supports that are not being met for you? ◀

If so, this is your opportunity to let the council know!

## Gently Used Medical Equipment Available

BIANH has several pieces of gently used medical equipment available for individuals living with a brain injury or stroke. If you or someone you know is in need of equipment for their home, please contact BIANH – speak to Barbara Howard or Renee Fistere 603-225-8400 or email: [mail@bianh.org](mailto:mail@bianh.org)

Pick up by appointment only at 52 Pleasant Street, Concord, New Hampshire





# DOMESTIC VIOLENCE & BRAIN INJURY: A DANGEROUS INTERSECTION

by Sarah Kilch Gaffney

Domestic violence, which is also referred to as intimate partner violence (IPV), is a commonly overlooked and often underreported cause of brain injuries. Domestic violence is a pattern of abusive behavior in a relationship where one partner gains power and control over another partner. Domestic violence and IPV are not limited to physical abuse, but can also include psychological, emotional, sexual, and economic abuse and threats.<sup>1</sup> The National Domestic Violence Hotline indicates that the many different forms of domestic violence and abuse can often overlap and occur at the same time within a relationship. In addition, because abuse is about power and control, individuals with disabilities are at higher risk and may face additional challenges and barriers to accessing help.<sup>2</sup>

IPV is a common occurrence and, like brain injury, it can happen to anyone at any time. According to the American Psychological Association (APA), “More than one in three women and more than one in four men in the United States have



experienced rape, physical violence and/or stalking by an intimate partner in their lifetime, and IPV occurs across age, ethnic, gender and economic lines, among persons with disabilities, and among both heterosexual and same-sex couples.” The APA also indicates that women with disabilities are at a 40 percent greater risk of IPV than women without disabilities.<sup>3</sup>

For brain injury survivors experiencing IPV, there is a considerable lack of awareness, research, and information around this dangerous intersection. Many professionals they encounter may not recognize the signs of brain injury or red flags that might indicate abuse. Victims of IPV are also at greater risk of repeated injury during a short time frame and they are at much higher risk of strangulation (which can cause an anoxic brain injury) than other individuals who are at risk of traumatic brain injury.<sup>4</sup>

Like other brain injury survivors, survivors of IPV can struggle with headaches, fatigue, speech challenges, memory issues, emotional disruption, mental health challenges, issues with executive functioning, depression and anxiety, and other cognitive and physical difficulties. In addition, brain injuries can make it more challenging for someone who has experienced IPV to access services, assess danger, make and keep safety plans, attend school or maintain a job, and leave an abusive partner.<sup>5</sup>

In the wake of the COVID-19, there is an added challenge: incidents of IPV are on the rise with data indicating an increase in domestic violence across the world during lockdowns to prevent the spread of the virus. Awareness around domestic violence and brain injury is vital. Talking about it openly and honestly and being aware of the signs of IPV are important first steps.

If you or someone you know is experiencing IPV, help is available. The National Domestic Violence Hotline’s website ([www.thehotline.org](http://www.thehotline.org)) has a wealth of information about how to recognize the signs of IPV (including a section on the intersection of IPV and disability) and they operate a 24/7 hotline at 1-800-799-7233 or 1-800-787-3224 (TTY). In New Hampshire, the New Hampshire Coalition Against Domestic & Sexual Violence operates confidential statewide hotlines: 1-866-644-3574 (domestic violence) and 1-866-277-5570 (sexual assault). More information is available on their website: [www.nhcadsc.org](http://www.nhcadsc.org). Those seeking brain injury resources and support in New Hampshire can call BIANH at (603) 225-8400.

1 <https://www.biav.net/traumatic-brain-injury-domestic-violence/?fbclid=IwAR2XD6LIDAXaAXwmbp-neWpGvtHpEIOzLy9nWgRBv1umEEozNQM0PeXAnA>

2 <https://www.thehotline.org/is-this-abuse/abuse-defined/>

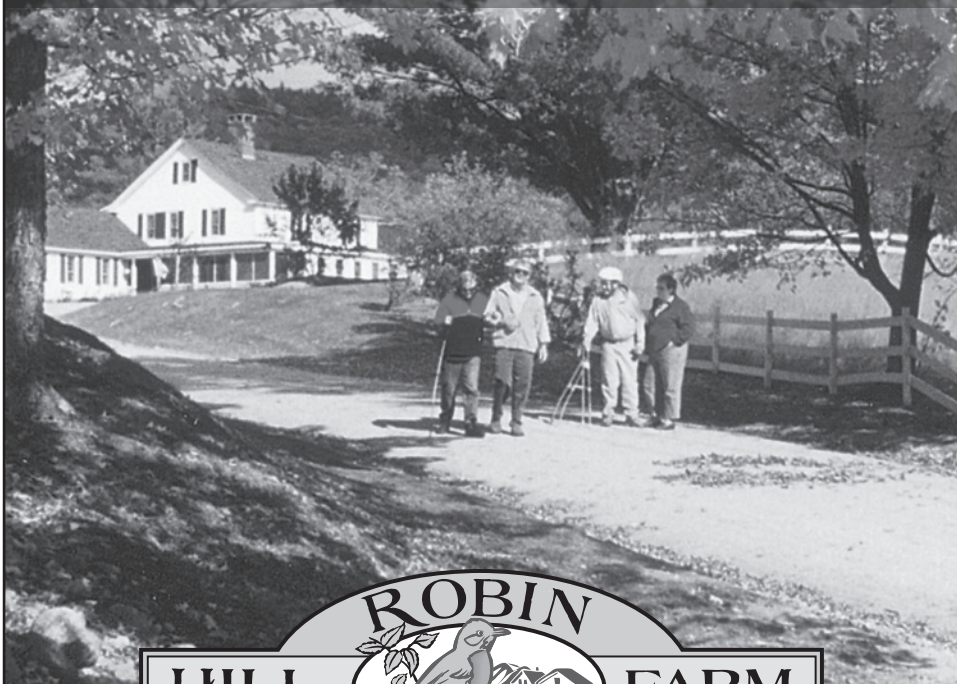
3 <https://www.apa.org/topics/violence/partner>

4 <https://www.acepnow.com/article/dont-overlook-traumatic-brain-injury-in-intimate-partner-violence/2/>

5 <https://www.biav.net/traumatic-brain-injury-domestilid=IwARXD6LIDAX-aAXwmbp-neWpGvtHpEIOzLy9nWgRBv1umEEozNQM0tPeXAnA>

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## HOW TO QUALIFY FOR SOCIAL SECURITY DISABILITY BENEFITS AFTER A TRAUMATIC BRAIN INJURY

More than a million people suffer from Traumatic Brain Injuries each year. TBIs are usually caused by accidents like car accidents, slipping and falling on hard surfaces like concrete, or through sports related injuries. Combat veterans and military personnel have a high risk of TBI and can still qualify for disability benefits even if they are receiving VA disability benefits. The effects of TBI can make it impossible to work leaving victims in a financial bind. Social Security disability benefits can be used to ease the financial burden of being unable to work.

### Medically Qualifying For Disability Benefits Due To TBI

There are two types of TBI: mild and severe. Mild TBI can still cause symptoms that make it impossible to work. The Social Security Administration's Blue Book has a listing for TBI and lists all of the requirements that someone has to meet in order to qualify for disability benefits because of a TBI. In order to be eligible for disability benefits a person must be unable to control the movement of at least two of your extremities for at least three consecutive months after the injury. This must result in extreme difficulty in balancing while standing or walking, standing up from a seated position, or using your arms.

A person with a TBI can also be eligible for disability benefits if they have "marked" physical problems along with a "marked" limitation in any one of the following areas:

- thinking (problems understanding, remembering, or using instructions or other information)
- finishing tasks (problems with concentration, persistence, or speed)
- regulating emotions and controlling behavior (problems with responding to demands, adapting to changes, or being aware of normal hazards),
- interacting with others (problems with socially appropriate behavior)

You will need to submit medical documentation proving that you meet those requirements in order to be eligible for disability benefits. Medical evidence can include MRI and brain scans, a doctor's diagnosis, and statements from therapists, past employers, or family members that have witnessed the symptoms of TBI.

### Medical Vocational Allowance

If you have had a TBI and you have significant behavioral changes or symptoms due to TBI but you don't meet the eligibility criteria listed in the Blue Book you can still be eligible for disability benefits through the Medical Vocational Allowance. In order to qualify for disability benefits through the Medical Vocational Allowance you will need to fill out a claim for benefits and check the box asking for a Residual Functional Capacity evaluation. The Social Security Administration performs this evaluation to see if there is any kind of full-time work that you can do. If your symptoms make it impossible for you to do full-time work with the skills that you have then the SSA will consider you eligible for disability benefits.

### Starting An Application For Disability Benefits

You can apply for disability benefits online or have a friend or family member complete an online application for you if you have trouble using the computer. You can also apply in person at your local SSA office. Make an

appointment to file a disability claim and bring all of your medical evidence with you to the appointment. A staff member will help you fill out the paperwork and file your claim.

### Resources:

Brain Injury Association of New Hampshire – [www.bianh.org](http://www.bianh.org)

SSAs Blue Book: <https://www.ssa.gov/disability/professionals/bluebook/AdultListings.htm>

More on TBI and Benefits: <https://www.disability-benefits-help.org/disabling-conditions/traumatic-brain-injury-and-social-security-disability>

Medical Vocational Allowance: <https://www.disability-benefits-help.org/glossary/medical-vocational-allowance>

Local SSA Office: <https://secure.ssa.gov/ICON/main.jsp>

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## WE'VE BEEN HERE BEFORE

By Laurie Rippon, Writer, A Brain Injury Life Blog

*"This article originally appeared in Vol. 14, issue 2 of THE Challenge!, the quarterly newsmagazine of the Brain Injury Association of America. It is reprinted with permission from the Brain Injury Association of America, Inc. ©2020. Copies of the original issue can be downloaded at [www.biausa.org](http://www.biausa.org).*

In some ways, the COVID-19 pandemic feels like living with brain injury. The world's been turned on its head, the future's uncertain, and every assumption about life has been challenged. Having been here before doesn't help. Our daily struggle managing pre-existing conditions is exacerbated by the palpable fear around us. Being bombarded with constant updates, advice, and new rules every day is overwhelming, and everyone's on edge.

People are coming together by sewing face masks, checking in on their neighbors, even banging pots for front line workers. The news keeps saying we're not alone even when we're isolated. I don't know about you, but I still feel alone. Screen time is no substitute for human contact, nor is shouting hello from across the street.

Before I ever heard about "social distancing" I went to Florida to visit my three-year-old granddaughter, Mila. Coronavirus hadn't clobbered us yet, and I wasn't scared enough to cancel. But I was feeling edgy. Really, my most pressing concern was if she'd recognize me and I wasn't disappointed. The moment I arrived, she ran to me then back to her friend and said, "My grandma's here!" I swept her up in my arms, her mom took photos, and I was set for the weekend.

For those few days, I was happy and relaxed. Coronavirus hadn't gone away; instead, I'd turned away from it, entirely engrossed by what is truly important and good in life. Back in New York, anxiety returned with a vengeance. But looking at photos of Mila sent COVID-19 packing. Unintentionally, I'd stumbled on a way to cope.

Mila taught me well. Although we can't change the world, we can change how we face the world, managing our fears by immersing ourselves in what we love – family, music, a walk in the park, or, for me, setting a challenge that demands focus, attention, and creativity.

### What helps me might help you



#### Avoid information overload

Stop the assault of COVID-19 news. Turn off the TV, delete unnecessary emails, and avoid social media and streaming (I know myself – once I start, I can't stop).



#### Find some structure

Everything falls apart if I don't have a schedule. I have no idea what day it is, the date, month, or year. The answer?

- Create a routine. Every morning wake up, shower, get dressed, and eat breakfast before starting your day.
- Use a calendar. Schedule your week including laundry, shopping, even washing your hair.
- Set alarms: a nap, take meds, bedtime, and a reminder to call a friend. Put big signs on your fridge: "WEAR A MASK OUTSIDE," "TURN OFF THE STOVE," and a shopping list.



#### Take a breather

Slowly breathe – in through your nose, out through your mouth. Release the tension in your body and let your mind wander. Be in the moment, as you are, worries pushed away. Make space for ideas to start dancing in your head. Just stay like this for a few minutes, and now you're ready for the day.

*Continued on page 17*





## Make a clean sweep

Make a list of the things you've been meaning to do around the house.

- Toss old papers. Clean out the fridge. Organize closets, drawers, and the kitchen. It's hard work deciding where to put things so you can find them again, especially with a brain injury. I've tried, then tried again and again. It's a cognitive workout, but that's good, too.
- Look around and reimagine your space. Mix it up – maybe that chair is better in the corner or the table by your bed. Then try something else.



## Get up and move around

Try different kinds of physical activity to improve overall health.

- Put on music and dance.
- Practice chair yoga, tai chi, or other gentle exercise.
- Really go for it. YouTube has millions of videos for anyone from seniors to seasoned athletes, sitting or standing, or whatever works for you.
- Go outside for a brisk walk (but remember to keep your distance).



## Exercise your imagination

Have fun – the best antidote to isolation.

- Pick up a pencil and draw. Remember, it's about the process, not the result.
- Take photos from your window.
- Play virtual games with friends online: a sing-along, karaoke, or video charades.
- Put pen to paper. Write something, anything. Maybe start a journal.
- Have clay or Play-Doh? Mush it around. Who knows? You could be a sculptor in disguise.
- Put together a jigsaw puzzle or do Sudoku.



## Stay connected with loved ones

Everyone's in the same situation, and some are fragile, have brain injuries, or need support. Check up on your neighbors and reach out to friends and family, always. We all need to hear someone else's voice or see their smile. Email, phone, text, or FaceTime; it doesn't matter how, but talk to each other – about anything but coronavirus or politics. We have nothing but time and there's no better way to use it. This is an opportunity to really listen to people, learn what makes them tick, and to open up to them in return.

## We are community

I'm no stranger to living alone and self-isolating. Home is my "nest," where I retreat when I'm overwhelmed by the world outside. In silence, surrounded by what I love – books, art, light – I am calm, re-centered. But for now, coronavirus is at the door and alone is no longer a choice.

This long, painful experience has deepened my gratitude for community, and I know that same community will be waiting for us when we return. After all, even when scattered and afraid, we are here for one another. Keep that in your heart, knowing that we truly are not alone even when we are apart, even in a time of isolation. Even now.

To read more of Laurie's work, visit [www.abraininjurylife.com](http://www.abraininjurylife.com).



Laurie joins other members of the Brain Injury Association of New York State NYC Chapter group.



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

⇒ **Are you a brain-injury survivor finding yourself in financial need?** ←

The *Brain Injury Community Support Program* provides short-term financial assistance for people living with brain injury, stroke, MS, or Huntington’s who meet BICSP eligibility requirements.

**Pending approval by the BICSP Review Committee, approved applicants may receive funding for requests up to \$2,000.**

Individuals currently supported through the Acquired Brain Disorder Waiver (ABD) may apply for financial assistance for dental needs only.

Applications can be found on our website ([www.bianh.org](http://www.bianh.org)) 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, Respite, Therapies*



Assistive Technology

Medical/ Dental Work



Home Modifications

Therapies



Respite Care

For further questions or to request an application, please contact (603) 225-8400



# SUPPORT GROUPS IN NEW HAMPSHIRE

(Times and places may change without notice – please call in advance)  
Revised September 21, 2020

## 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:** Currently suspended; for more information, call Laura. 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:

The Brain Injury Association of New Hampshire will be hosting three statewide monthly support groups that will be held through a ZOOM Virtual Platform, all are welcome to attend.

These virtual support groups will not start until November 2020.

Virtual Statewide Peterborough Brain Injury Support Group -  
Meets the 1st Tuesday of the month 6:00 pm-8:00 pm

Virtual Statewide Atkinson/Derry Brain Injury Support Group-  
Meets the 2nd Tuesday of the month - 6:30 pm-8:00pm

Virtual Statewide Concord Brain Injury Support Group-  
Meets the 3rd Tuesday of the month - 6:30 pm-8:00pm

Please check the website at [www.bianh.org](http://www.bianh.org) for online registration. If you have any questions, please email Ellen Edgerly at [Ellen@bianh.org](mailto:Ellen@bianh.org) or call at 603-834-9570.

## CAREGIVERS SUPPORT GROUP (CAREGIVERS ONLY):

**Concord:** Caregivers Support Group – ON HOLD UNTIL FURTHER NOTICE

Concord: 2nd & 4th Thursday of the month, 7:00 pm, Primetime Wellness, 117 Manchester Street, Concord, NH

Contact: Erin McGovern Phone: (603) 608-6044

## MILD BRAIN INJURY SUPPORT GROUP:

**Salem:** Currently suspended; for more information call BIANH, Northeast Rehab Hospital,

Reception will direct you to the room, Salem, NH

Contact: BIANH Phone: (603) 225-8400

## STROKE AND BRAIN INJURY:

**Dover:** Expected to restart in June; Call Lindsey.

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: Shandra Plourde Phone: (603) 226-9812

**Lebanon:** 1st Friday of even-numbered months (Feb, Apr, Jun, Aug, Oct, Dec), 10:00 - 11:30 am, DHMC Aging Resource Center, 46 Centerra Parkway, 2nd floor, Lebanon, NH.

Contact: Shawna Malynowski, Phone: (603) 653-1117

Contact: Sarah Braginetz, Phone: (603) 650-5104

Contact: Aging Resource Center Phone: (603) 653-3460

**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



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