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**THE VOICE OF BRAIN INJURY –
Help, Hope and Healing
ISSUE #81, SUMMER 2021**

THE BRAIN INJURY ASSOCIATION OF NEW HAMPSHIRE
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HEADWAY

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THE LUCKIEST MAN ALIVE: KC CHRISTENSEN'S STORY

On December 17, 2008, KC Christensen's life as he knew it was shattered. KC was a passenger in a motor vehicle that left the road and struck multiple trees. The accident killed the driver instantly, and KC was initially declared dead at the scene until an astute EMT double checked and found that KC was still clinging to life.

"They told me KC would probably live for 48 hours," KC's mom, Patti, recalled, "but he fought to crawl back to life. He was in a coma for about two months and then was transferred to a rehab hospital in a repressed neurological state where he was awake but not really with us." KC's injuries were extensive, including a punctured lung, broken clavicle, and fractured skull, and his family did not know whether he would live or what his life would look like if he did survive. When his doctors brought him out of the coma, KC faced challenges with partial paralysis, memory loss, seizures, and issues with balance and walking. He also struggled with cognitive tasks like visual recognition and sequencing, and the accident left him blind in one eye (which was later fixed with surgery).



KC's great love is golf, and he had been well on his way to his dream of playing professional golf when the accident occurred. Only months before, he had successfully passed the Professional Golf Association's (PGA) Player Ability Test, and he had been working as an assistant golf professional at the Owl's Nest Golf Course in Campton, NH, and studying for the final certification test prior to his injury. His experience with golf would serve him well as he learned that, just like in golf, in life he had to "play the ball where it lies."

Every day, KC faced enormous challenges and many long months of rehabilitation ahead, but he tackled them head-on and with unflinching positivity. With great determination and a marvelous sense of humor, he worked tirelessly on rehabilitation to relearn many basic functions like swallowing, facial expressions, and mobility. "If the physical therapist asked him to do 10 reps, KC would do 30," Patti shared, "and his positivity and never giving up has never wavered." Ultimately, KC's positive outlook and hard work paid off in the best of ways.

Continued on page 3

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PRESIDENT'S MESSAGE

Remembering Eldon R. Munson III

by Robin O. Kenney, Ed.D.

Our signature BIANH fundraiser – the 35th Annual Walk-by-the-Sea – was conducted virtually again this year due to COVID, but is nevertheless an event we look forward to for our individual walks. It is impossible to separate the Walk from our memories of Eldon R. Munson III, our dear friend, whom we lost to cancer on April 3 of this year ... at far too young an age. Eldon, III often attended the quarterly board meetings with his father and would provide delicious homemade desserts for all board members.



Eldon was one of the original members of the Walk-by-the-Sea Planning Committee, established in 2016 to plan and oversee the event. He never missed a meeting and never failed to contribute new ideas or volunteer to do the legwork needed to publicize the Walk. On the day of the event, Eldon and his father, Elson Munson, Jr. – also a valued

BIANH Board member - hosted one of the two rest stops along the route, providing water and snacks for hundreds of grateful participants. Father and son contributed their time and resources to the rest stop for at least fifteen years. Supporting the walkers meant a great deal to Eldon; his spirit never wavered and every year his enthusiasm served to energize everyone else.

Our thoughts continue to be with Eldon's family – his parents, Eldon, Jr. and Janet, his four siblings and their spouses, his nieces and nephews. Eldon's bright presence will be missed by one and all this year, both at board meetings and Walk planning meetings. I imagine that everyone whose lives he touched will be thinking of him as we continue our walks in the years to come.



EXECUTIVE DIRECTOR'S MESSAGE

BIANH Feature on NH Chronicle

by Steven D. Wade, BIANH Executive Director

Last November Sean McDonald, co-anchor of NH Chronicle, reached out to Ellen Edgerly at the Brain Injury Association. He wanted to know if she knew of a drum teacher in New Hampshire who had written a series of songs with one of his students who had a brain injury. Unfortunately we were unable to help Sean locate this instructor. Sean had become curious, though, about other types of music therapies, thinking this could make a nice feature and this was something that we could certainly help with.

For many years, Rosalie Johnson had been writing a column for our *Headway* newsletter called *Meet the Artist*. Each issue featured a survivor who had been able to resume, readapt, or find their creative side and use it as a means of relaxation to create joy and find purpose. With all of these inspirational stories, we were able to provide Sean with many examples of music as well as other types of art therapies used. Ultimately, three artists were chosen to be interviewed and share their story: Missy Fellows, Emily Hayes, and Shawn Hiers.

After months of emailing, phone calls, coordinating schedules and pandemic constraints the story, *Creative ways survivors of brain injuries are finding relief*, aired on May 21st. The story opened with Emily playing the ukulele. In 2017 Emily was diagnosed with Anti-NMDAR Encephalitis, an autoimmune disease where the immune system essentially attacks the brain. Since then Emily has found that her music is something that "grounds" her. The ukulele is the most recent addition to the long list of instruments she already plays that include the clarinet, piano and guitar. Prior to her injury Emily

was focused on a career in art, graphic design, and anime and found that this became instrumental in her recovery from Anti-NMDAR Encephalitis. She hopes she will be able to return to anime.

"Shawn considers himself an "Uber Geek." His passion for gaming started in the 80's when his family received an Atari for Christmas." In 2021 Shawn was injured in a fall while at work. He found that his old passion also helped provide relief and became a part of his recovery, helping with memory and comprehension. Shawn began writing online reviews for video games as well as getting published.

In a former life Missy had several occupations including driving big rigs. She was also a student of the arts that included carpentry, weaving, and painting. In 2003 she was in a motor vehicle accident. After Missy's injury she was unable to return to painting, but instead found other creative outlets, including jewelry making. Missy has become an accomplished jewelry maker creating beautiful pieces out of metal. Missy finds it both soothing and relaxing.

Just like no two brain injuries are alike, the same is true for ways to find relief and the creative outlets to help with it. Missy, Emily, and Shawn are all proof of it! A special thanks goes to them for sharing their inspiring stories with NH Chronicle. On a personal note, I would also like to thank BIANH staff person Lori Sandefur for all her good work on this with NH Chronicle.



Submission & Editorial Policy: *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: The Luckiest Man Alive: KC Christensen's Story

KC loves life and is determined to succeed in his efforts and make the best of his abilities, even if they don't look quite like they did before. While the accident slowed him down a little, KC quickly worked towards the goal of playing golf again, and within a few years of his accident he helped start an adaptive golf program. Now, nearly 13 years later, KC is still an avid golfer, and he teaches adaptive golf through the New England Disabled Sports' program, works at the Owl's Nest Golf Course, works with a Wounded Warrior program, and tends bar in the winters on Loon Mountain, in addition to co-owning the consignment store, Boomerang, in Plymouth, NH. KC's successes don't stop there, though. He has received a certificate of recognition

you may have to change your goals, but life can be rewarding." In addition to holding onto hope, KC wants other brain injury survivors to know that they can get stronger and go on to live successful lives, but also that they are not on this journey alone, and he recommends they try to accept help from all the sources that are out there.

Though KC is many years out from his injury, as with many brain injury survivors, his rehabilitation journey and the challenges that arise from his brain injury are still present. More recently, due to medical complications, he has stopped driving and is anticipating a third brain surgery this summer. For KC, however, these setbacks are no competition for



from the PGA, and he received a degree in teaching from Plymouth State University. The adaptive golf program he helped start is now so large it has eight volunteers and three different levels of instruction.

"I love teaching," said KC. "I love so many things about it: I love the smiles on my students' faces when they hit a great shot. I love that we are all working together to add something positive to their lives. I know I'm not doing what I thought I might, but I am teaching and playing the sport I love," he added.

KC has also discovered a love for sharing his story, through which he desires to instill hope in others, especially other brain injury survivors. "I want the rest of the world to know that there can be a good life after surviving a brain injury, even a severe one. I know it is overwhelming and difficult, and it does take hard work to rewire the brain, but there is hope," KC said. He added, "It may be different, and

his positive outlook and love of life. "I am the luckiest man alive as far as I'm concerned," he shared.

KC will share his brain injury recovery story at the Brain Injury Association of New Hampshire's 38th Annual Golf Tournament on Tuesday, August 3, 2021, at The Oaks Golf Course in Somersworth, NH. The tournament provides support for brain-injured veterans and their families, helping vets to access brain injury services. The tournament also supports the New Hampshire ThinkFirst program, which helps prevent brain injury by engaging young survivors to share their stories of preventable brain injury with middle and high school students. To learn more about the tournament and to register, please visit the event page on the BIANH website: <https://bianh.salsalabs.org/38golf>. To learn more about KC and his journey, visit KC's website at kccspeaking.com.



2021 VIRTUAL BRAIN INJURY & STROKE CONFERENCE

This past year has been like no other! Due to the pandemic we had to cancel our *37th Annual Brain Injury & Stroke Conference*. Fortunately, most all of the presenters that we had scheduled to speak agreed to present the following year and then, when it was apparent that we wouldn't be able to meet in person for 2021, they agreed to present virtually! I would like to extend my sincere thanks to the following presenters for making this a very successful and memorable conference: David Allard, MS; Michael Blau, MEd, CBIS; Anna Coleman, BA; John Corrigan, PhD; Carolyn D'Ambrosio, MS, MD; Gina England, MA CCC-SLP; Jason Johns, MPAS PA-C; Stephanie Joyce, RN, BSN, CCRN; Carolyn Lemsky, PhD, C.Psych; Abby Maslin; Philip Montenegro, MD, PhD; Sarah Paton, ND; Diana Rojas-Soto, MD; Tammy St. John; Philip St. John; Daniel Seichepine, PhD; Sophia Sheehan; Andy Wegman, L.Ac; Lindsey Whelan, MS, RN, CCRN, ACCNS-AG; and Andrea Witt, MEd, CCC-SLP, CBIS.

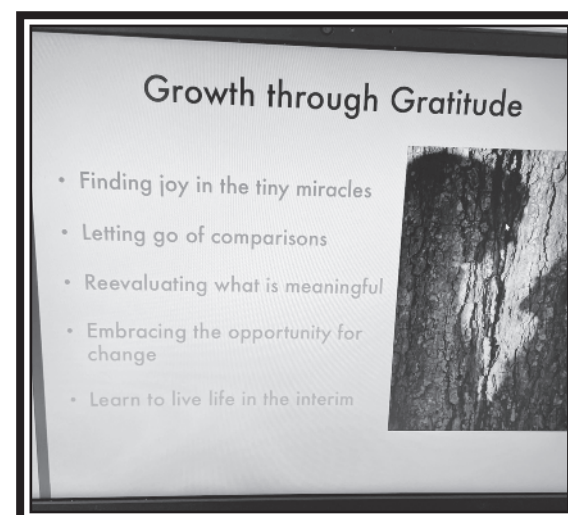
If you take a look at the photos, it shows a very different picture from previous years. In spite of it being virtual, we had 158 conference attendees! Each day began with an opening keynote. On Wednesday, Dr. John Corrigan gave an "outstanding and informative" presentation on *What Substance Use Disorder Professionals Should Know About Traumatic Brain Injury*. On Thursday, Abby Maslin, bestselling author and family member, started the day off with *The New Normal*:

Gratitude, Growth, and Transformation after Brain Injury, speaking about life since her husband's brain injury. As one attendee wrote "Abby was an amazing, compassionate and excellent speaker who spoke from the heart and soul." Each keynote was followed by three tracks offering a variety of equally excellent topics to choose from throughout the day.

A special thank you to our five sponsors this year: Lead Sponsor ~ Abramson, Brown & Dugan, Keynote Sponsor ~ Encompass Health Rehabilitation Hospital, AmeriHealth Caritas New Hampshire, CareOne of Lowell, and The NH

Providers Association. And to our six exhibitors: Neuro-Restorative, Northeast Rehabilitation Hospital, North Country Independent Living, Robin Hill Farm, St. Joseph Hospital Rehab Center, and NH Vocational Rehabilitation. Your support is so greatly appreciated!

I would also like to say thank you to all the attendees who took the time to visit our exhibitors and sponsors and congratulations to the three winners of the \$100 gift cards, Rebecca Murrey, Bonnie Roberts, and Michele Roy!



Upcoming Virtual Brain Matters Trainings

Wednesday, September 22 & 29 ~ Virtual Brain Injury Fundamentals Training & Certification

Erin Hall, MS, CBIST & Krystal Chase, LICSW, CBIS

9:00am – 12:30pm each day

Brain Injury Fundamentals is a training and certificate program designed to address the unique needs and challenges of those who care for or encounter individuals with brain injury. This includes non-licensed direct care staff, facility staff, family members, first responders, and others in the community. The training will cover cognition, guidelines for interacting and building rapport, behaviors, medical complications, safe medication management and family coping strategies. At the completion of the training attendees must take and pass an online test in order to receive a certificate. This two day training will take place on September 22 & 29 from 9:00am - 12:30pm each day.

You must register by August 2nd - No refunds or substitutions.

Cost \$175 – Maximum of 25 attendees (fee includes training, booklet, and post-test)

To register go to: <https://bianh.salsalabs.org/biftt>

Tuesday, October 19, 2021 ~ Brain Injury & Domestic Violence

Presented by Erin Hall, MS, CBIST ~ Senior Director, Brain Injury Association of New Hampshire

9:00am – 10:30am

How are brain injuries and domestic violence connected? How can I identify if someone has suffered a brain injury? How do I best support an individual living with a brain injury and/or their family member? This training will assist you in answering these and other questions regarding brain injury and domestic violence.

Cost: \$25

Contact Hours 1.5

To Register: <https://bianh.salsalabs.org/dvbi/index.html>

For more information contact lori@bianh.org

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Two Opportunities For Public Input

How Can NH Improve Services for People with Acquired Brain Disorders?

The Acquired Brain Disorder waiver (ABD waiver) is being renewed for 5 years and now is the time for people with disabilities, family members, and advocates to share their thoughts and suggestions for how services and programming can be improved.

The ABD waiver provides community supports for approximately 300 people with brain injuries across New Hampshire. In its waiver application, the Bureau of Developmental Services (BDS) describes the eligibility, services, and other details of how it plans to administer the ABD waiver over the next 5 years.

In the fall of 2020, BDS held a series of listening sessions to gather ideas and suggestions for improvement of this waiver. Even if you already provided input during the earlier listening sessions, you should share your thoughts again during this formal comment process. BDS is required to summarize public comments that it receives during this period and, if not adopted, explain its reasoning when it submits the waiver application to the Center for Medicare and Medicaid Services for approval so it is critical that you provide input now.

On or around June 1st, BDS will release a draft of the new waiver which will be available at www.dhhs.nh.gov/dcbcs/bds/abd-waiver.htm. It is likely that BDS will schedule several listening sessions to explain changes to the waiver and gather feedback.

Dates for these hearing sessions and deadlines for public comments will be available at: www.dhhs.nh.gov/dcbcs/bds/abd-waiver.htm. It is likely that BDS will accept comments for 30 days.

You can also share your ideas by emailing DLTSSWaiverRenewal@dhhs.nh.gov or by sending a letter to Jessica Kennedy, NH

Department of Health and Human Services, Bureau of Developmental Services, 105 Pleasant Street, Main Building, Concord, NH 03301-3857.

Help Us Select Our 2021-2022 Priorities

From special education to long-term care, the pandemic's disproportionate impact on people with disabilities showed us just how critical our work is. We provided legal advice or representation to almost 1,000 people with disabilities across the state in areas like accessibility, employment discrimination, home and community-based services and Medicaid. Although we were able to pivot and meet the increased demands brought on by COVID-19, we cannot assist everyone who asks for our help. That is why we need to hear from you.

Help us make sure we focus our work on what the community actually needs and wants by filling out this quick survey: drcnh.org/priorities-survey/2021-2022-priorities-survey/



Person sitting at table in light filled room working on their laptop. Photo credit: Cliff Booth via Canva.

STROKE IS AN EMERGENCY



F **A** **C** **E**
Look for an uneven smile

A **R** **M**
Check if one arm is weak

S **P** **E** **E** **C** **H**
Listen for slurred speech

T **I** **M** **E**
Call 911 at the first sign

Act

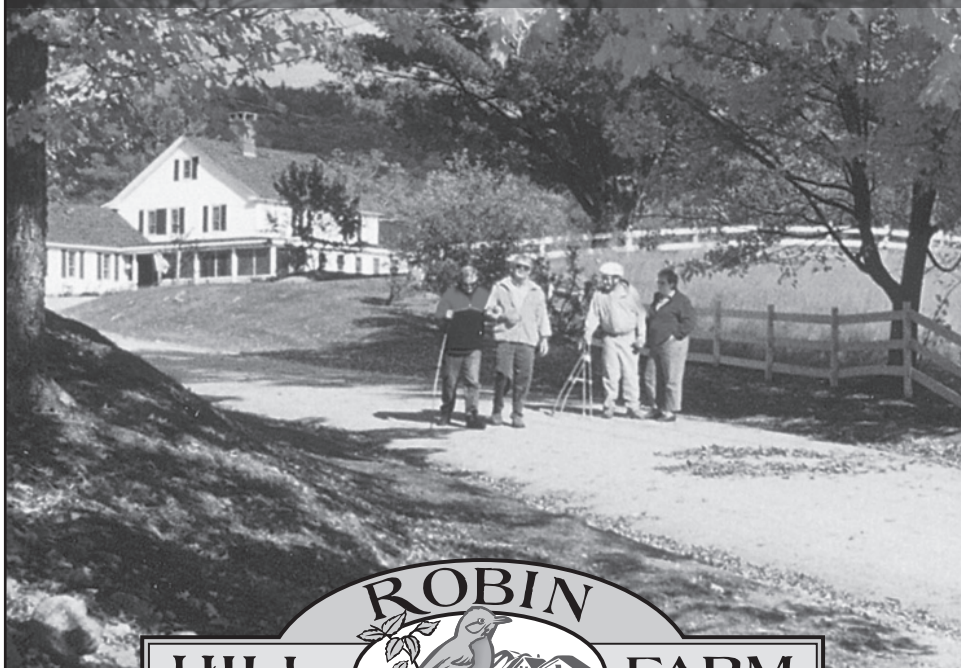
F A S T

Call 911

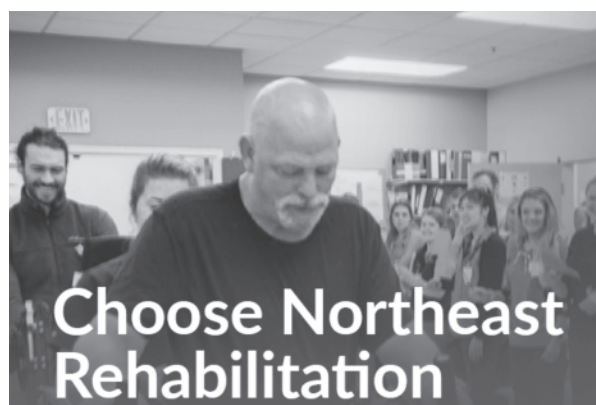
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SPOTLIGHT ON KREMPELS

Headway: Krempels Center Offers Self-Care Series and Support for Caregivers

By: Sarah Lovell, Krempels Center

A brain injury can, unfortunately and unexpectedly, happen to anyone, anywhere, anytime. Della O'Shea's life changed when her adult son experienced a stroke in 2019. O'Shea explains, "In the best of circumstances, being a caregiver is a life-altering experience. It requires stamina, flexibility, emotional stability, patience, a positive attitude, creative thinking, organization, and time-management skills. I have had to research information, learn new ways of doing things, and be willing to make the needs of my adult son a priority."

Krempels Center, a nonprofit dedicated to improving the lives of people living with brain injury, supports all individuals impacted by brain injury: the survivor, their family, friends, and loved ones. In addition to weekly programming designed specifically for individuals living with brain injury, Krempels Center offers a monthly family caregiver support group for the families of Krempels Center members.

Since the onset of COVID-19, the family caregiver support group has met exclusively online and attendance has increased. O'Shea connected with Krempels Center's caregiver support group where she met other family caregivers.

"It has been a lifeline to me to be able to connect with other caregivers who share a common role in caring for a loved one who has experienced a brain injury, even though individual circumstances may vary. The group provides a type of support that other friends and family cannot offer, however well-intentioned they may be," O'Shea describes. "The emergence of COVID-19 compounded the isolation and eliminated coping mechanisms I used to take for granted, like going to the gym or having visitors at home. It was often a lonely, isolated existence with few people in my sphere able to truly know what I was experiencing."

Ernie and Brenda St. Pierre also regularly attend Krempels Center's caregiver support group.

"Being a caregiver, especially for an adult child, has been a life changing event. Being at retirement age, we now have to first and foremost make sure [our son] is taken care of and safe," St. Pierre shared. "The person who has [a brain injury] is not the only one that life changes for at the time of their diagnosis. Caregivers' lives change in a different way and they often are the quarterbacks of the team but always remain on the sidelines, unnoticed."

Anna Coleman, a graduate-level Krempels Center intern studying Clinical Mental Health Counseling and Drama Therapy at Lesley University, approached Krempels Center program staff with an idea for an additional resource for caregivers: a six-week self-care series. The idea came to Anna after Program Coordinator, Kelly Redwine-DePierre, led an experiential activity for the interns that highlighted the difficulties of the family caregiver role. It had a profound impact on Coleman.

"The idea of the self-care series is to provide a consistent time each week where the family member can truly take that time for themselves in a supportive group environment. This will just so happen to, somewhat indirectly, benefit the [family member living with a brain injury] as well. This group also provides time where they can be themselves outside of the role as a family caregiver too," shares Colman.



Donna and David Mills connected with Krempels Center in 2019 after their adult son experienced a brain injury. While spending the winter in Florida, the Mills family was able to stay connected with Krempels Center over Zoom.

"Krempels Center has allowed our son to be a part of a community that supports, encourages, and make social connections he might not otherwise have. Beyond that, participating in caregiver workshops has given us a healthier perspective on our roles as caregivers," said Mills. "Being able to converse with other caregivers gives us insight into different ways to cope with the demands of being a caregiver. It has also taught us that it is ok and necessary to take care of ourselves. The workshops have given us the tools and practices to balance our role as caregivers with our own needs. The support we have received from Krempels Center has been invaluable."

Diane Heselton, wife of Krempels Center member Don Heselton, shares, "It wasn't until COVID that I sought out support for myself. Being at home for hours and days on end, showed me just how much caregiving takes a toll...mentally, physically, as well as emotionally. I felt shut off from the world. I had well-meaning friends, loving church family, wonderful therapists, but something was missing - understanding, true understanding - someone who truly 'got it.' I reached out to the caregivers' monthly Zoom meeting. What a blessing! There I met others who shared the same concerns, frustrations, tips, strategies and at times just listened. I find [Krempels Center] right at my side whenever I need them. I feel they are as concerned for [family caregivers] as the [brain injury] survivors."

Krempels Center's mission is to improve the quality of life of people living with brain injury through evidence-based programming, shared experiences, and support in a welcoming community. Established in 2000, Krempels Center has built a reputation for offering high-quality, therapeutic programs for brain injury survivors. Krempels Center is unique to the seacoast; in fact, it is the only service of its kind in New Hampshire, and only one of a few in the country.

Brain injury survivors often experience difficulty returning to their previous roles at work, home, and in the community. Krempels Center offers opportunities for social connection, skill building, and exploration of new life interests to improve quality of life following brain injury. In this vibrant learning community, survivors heal through shared experiences, peer support, and therapeutic programming. Research in partnership with the University of New Hampshire has shown Krempels Center members have higher quality of life, lower stress, and stronger social connectedness than typical brain injury survivors.

Visit www.krempelscenter.org to find out more about Krempels Center.

INSIGHTS

Life Perspectives From a Brain Injury Survivor David A. Grant



RETURNING TO THE (NEW) NORMAL

When I look back over 2020, it feels like it was a year of deconstruction. Bit-by-bit, piece by piece, the pandemic removed some of the most cherished parts of life. By the time early summer was here, it felt like the rug had been pulled out from under humanity.

Gone were birthday parties and family gatherings. The very thought of going out to dinner was absurd. How about a long-standing tradition for my wife Sarah and me – Thursday date night? Dinner and a movie were no longer safe activities.

As we got our pandemic legs under us, we learned to bob and weave, pivoting where necessary and navigating life during the toughest year of our existence.

It was in March of 2020 that the brain injury support group, which I attended regularly, was cancelled. COVID-19 had infiltrated the rehab hospital that hosted our monthly meeting, and the practical decision was made by the hospital administration to suspend all support group meetings.

As 2020 marched on, I attended an occasional TBI support group meeting on Zoom, but they were different groups. Our monthly brain injury tribe had not yet moved over to Zoom. A few of our regular attendees are connected on Facebook, so all connections weren't lost, but it was different. Like looking through a window, I saw other brain injury survivors doing the same things that we were doing – staying safe, making smart decisions, and allowing time to pass. It was a bit like treading water – lots of waiting and no real forward progress.

All that changed last month. The decision was made to take a Virtual Meeting Test Drive. It was not an announced, nor official, support group meeting. Rather, it was a bunch of friends getting together, in real time, catching up on life.

To say that it went well would be an understatement of epic proportion. We talked a lot, caught up on each other's lives, and communicated in real time. There were boundless smiles. Our group was started eleven years ago this spring, and many of our long-term members attended last month's virtual meeting. It had the warm and fuzzy feel of a family reunion.

And we are just that – a family. Brought together by circumstances none of us could have predicted for our lives, we met face-to-face monthly for over a decade. Early on, all we could do was cry as we mourned the loss of our lives before brain injury. Ambiguous loss is such a painful part of the journey. As the years passed, we cried less, and shared our joys, achievements, and victories.

When occasional setbacks came, as they always do, we supported and carried each other. We were, in a very literal sense, each other's lifelines.

The one hour allocated for the meeting test drive passed in a heartbeat. You could feel that no one really wanted it to wind down. But the decision was made to resume our Wednesday night group monthly as a virtual meeting. Sure, we are a little late to the game, but better late than never.

Starting this month, our meeting will be open to anyone who wants to attend. Details on how to attend will be posted on the BIANH website.

While the resumption of our group may sound like a small thing to some, it's huge in my eyes. Last year, life was deconstructed. This year, we are building a life anew. And for the time being, if we need to attend our monthly meeting from home, so be it. I'll be in the company of friends. Seen in this light, I couldn't ask for more.

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NCIL HAPPENINGS!

Summer is upon us; it seems all factors encompassing and surrounding the residents and staff thankfully feels different than one year ago! We at NCIL are most fortunate that the residents are beginning to enjoy more activities and a feeling of return to normalcy. The weather has certainly made an impact of lightheartedness felt with residents and staff participating with hiking, bike riding, planting gardens, dining outside, car shows, and playing outside games. It is the hope of outdoor concerts to return once again.

For the past 14 years, NCIL has participated in the annual Valley Pride Day which is a community day in which individuals and teams come together to pick up litter and trash within the surrounding areas of Conway, NH. In years past, the community would hold an expansive and well attended barbecue for the volunteers in appreciation of their hard work. This past May looked somewhat different in that there was no community barbecue, but of course this would not deter a celebration for the NCIL residents and staff who walked and rolled the roadways cleaning up trash. Once again, management team member Terrie A., stepped up and planned an outdoor barbecue cookout for the NCIL teams at the NCIL residence with Garry Sherry assisting on the grill! All residents and staff enjoyed the camaraderie after a morning of trash pickup, another successful year with the feeling of accomplishment and giving back to the communities in which we live.

Employee of the Quarter was awarded to Cheryl M., who has been with NCIL since 2010 working as the overnight awake at the Passaconaway Residence. Her co-workers have expressed that she is dependable, hardworking, and extremely helpful. Cheryl is the glue that holds the house together. She does medication ordering, deep cleaning, filing, and so much more. On her time off she loves caring for her dogs and often fosters dogs until they find forever homes. Co-workers wrote that “Cheryl is a very caring and kind person.” The management team surprised her with the award and gift card as she was coming off her early morning shift.

We at NCIL look forward to participating in the Virtual Walk by the Sea, it is advantageous to know that we can plan a day or days when the weather is simply perfect for walking toward raising funds for this worthy cause to benefit the Brain Injury Association of New Hampshire!

We at NCIL only wish for the best of health and safety for everyone. Have a great summer!



ncil NORTH COUNTRY INDEPENDENT LIVING

Providing an alternative to institutionalized and campus living for persons with an acquired brain injury and other neurological disorders

- Supported Residential Care Program
- Community Residence Program
- Residential Treatment and Rehabilitation
- Home Based Rehabilitation
- Comprehensive Day Treatment Programs
- Employment Services

1-888-400-6245 (NCIL) • nciinh.com • North Conway



JOIN US!

Tuesday
August 3, 2021

**THE OAKS
GOLF COURSE**

**100 Hide-Away Place
Somersworth, NH**

Title Sponsor:



Host Sponsor:



Presenting Sponsor:



**INDEPENDENCE
CARE**

JOIN US!!

TO REGISTER ONLINE

<https://bianh.salsalabs.org/38golf>

Please choose either Package 1 or Package 2:

PACKAGE 1 - Registration & Buffet Meal

15 Raffle Tickets

\$150/person

PACKAGE 2 - Registration & Buffet Meal

1 Cheat Bag

15 Raffle Tickets

15 Tickets for 50/50 Raffle

\$180/person

Interested in sponsorships? We have several available!

Special guest: KC Christensen - adaptive golf instructor

For more information:

Renee Fistere - renee@bianh.org

603-225-8400

Save the Date!

**The 15th Annual Statewide
Virtual Caregiver's Conference
Keynote with Dr. Aaron Blight
*"Building Caregiver Resilience:
A Framework for Care"***



Wednesday, November 10, 2021

9:30 am to 11:00 am

Aaron's passion for supporting caregivers is rooted in his personal experience as a family caregiver; his professional work as the owner of a large home care company and as a leader at the Centers for Medicare and Medicaid Services. His thoughtful and inspiring presentation draws upon research to explain caregiving as a phenomenon of social science. Knowledge gained from the discussion will offer caregivers a framework for 1) processing their experiences and 2) developing the resilience needed to continue supporting the people who depend on them.

Lead Sponsors

AARP NH

Bureau of Developmental Services

The New Hampshire Family Caregiver Support Program

For more information contact: Ellen Edgerly

603-834-9570 or Ellen@bianh.org

Or visit the Coalition of Caring's website www.coalitionofcaring.org

BRAIN INJURY

FACTS & STATISTICS



EVERY 9 SECONDS
someone in the United States sustains a brain injury.

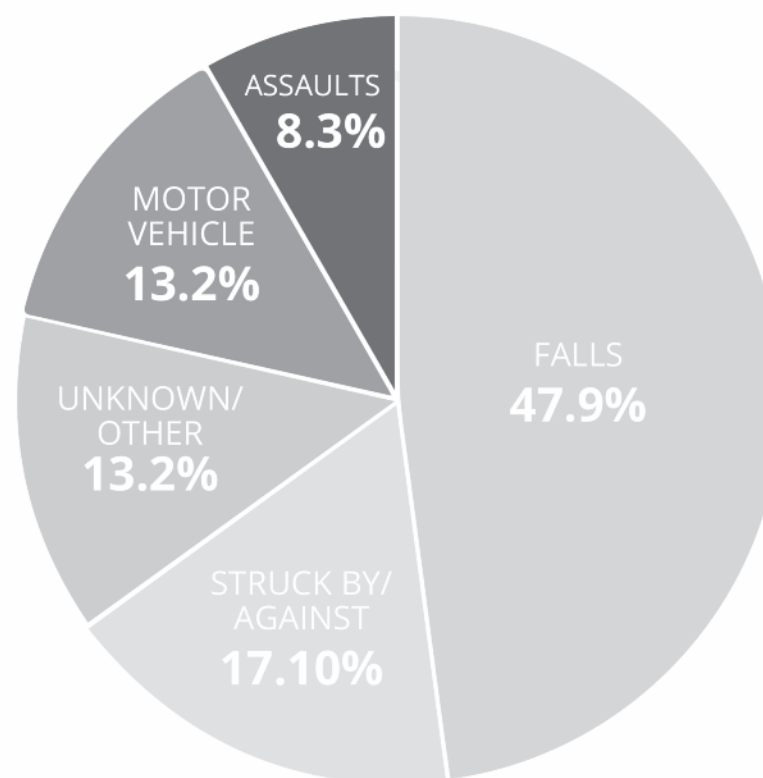
MORE THAN 3.6 MILLION
people sustain an ABI each year.

AT LEAST 2.8 MILLION
people sustain a TBI each year.

TYPICAL CAUSES OF ABI INCLUDE:

- Electric Shock
- Infectious Disease
- Lightning Strike
- Oxygen Deprivation (*Hypoxia/Anoxia*)
- Toxic Exposure
- Vehicle Accidents
- Seizure Disorder
- Trauma
- Substance Abuse/Overdose
- Stroke

LEADING CAUSES OF TBI



AN ACQUIRED BRAIN INJURY (ABI)

is any injury to the brain that is not hereditary, congenital, degenerative, or induced by birth trauma.

TRAUMATIC BRAIN INJURY (TBI)

is a type of ABI. A TBI is caused by trauma to the brain from an external force.

The number of people who sustain TBIs and do not seek treatment is **UNKNOWN**.

At least 5.3 million Americans live with a TBI-related disability. That's one in every 60 people.

THE NEW HAMPSHIRE PROVIDERS ASSOCIATION CAMPAIGN:

GET TO KNOW THE BASICS OF BRAIN INJURY FROM OPIOID OVERDOSE

The New Hampshire Providers Association (NHPA) recently launched a campaign, “Get to Know the BASICS of Brain Injury from Opioid Overdose.” The campaign, which is geared towards healthcare providers as well as individuals at risk for opioid use disorder (OUD) and their support systems, aims to raise awareness around the intersection of brain injury and opioid overdose. The goal is to increase brain injury screening and identification of individuals with co-occurring OUD and brain injury, and ultimately improve treatment outcomes for these individuals.

The campaign and toolkit, which was created as part of Kate Elkins’ project-based internship for her Master of Public Health degree at Southern New Hampshire University, was developed by the NHPA with input from the Brain Injury Association of New Hampshire and the New Hampshire Substance Use Disorder/Brain Injury and Mental Health Interagency Task Force to tackle this difficult public health issue. “What started as an internship project has grown into a comprehensive health communications campaign. It’s so rewarding to see it come to life and to know that my work will be used in communities across New Hampshire,” said Kate.

The lack of awareness around the intersection of brain injury and OUD was identified as a key reason many individuals might not be receiving adequate treatment and the necessary support to be successful in that treatment, and this campaign aims to change that. “Brain injury from opioid overdose is something that we believe everyone should know about. That’s why the NH Providers Association is investing time and resources to provide organizations and individuals with the tools needed to learn about brain injury from opioid overdose and share the message with their colleagues, clients, and communities,” said Kerran Vigroux, Executive Director of the NHPA. The toolkit provides basic information about the intersection of brain injury and OUD, as well as resources and outreach materials like fact sheets, social media tools, and posters. Different materials can be utilized depending on the anticipated audience, and electronic versions of the resources are available at no cost to anyone looking to share the information and increase awareness around brain injury and OUD.

The NHPA encourages healthcare providers, as well as brain injury survivors and caregivers and other members of the New Hampshire brain injury community, to check out the campaign and start sharing information about brain injury and OUD. “The first step is raising awareness,” Kate noted, “but ultimately long term we hope this campaign results in individuals getting the treatment and recovery support that they need.”

The NHPA campaign and toolkit can be accessed at:
www.nhproviders.org/braininjuryoverdose
www.nhproviders.org/toolkit

For questions about the campaign, please contact NHPA at info@nhproviders.org.



THE
NH PROVIDERS
ASSOCIATION



GET TO KNOW
THE BASICS
OF BRAIN INJURY FROM
OPIOID OVERDOSE.

nhproviders.org/braininjuryoverdose

GET TO KNOW
THE BASICS
OF BRAIN INJURY FROM
OPIOID OVERDOSE.

Learn more and
download resources
at [nhproviders.org/
braininjuryoverdose](http://nhproviders.org/braininjuryoverdose).

1
People who have had
an opioid overdose
may now be living
with a brain injury.

2
Brain injury caused
by opioid overdose
can make treatment
and recovery difficult
for some people.

3
If a person has had
one or more opioid
overdoses, they should
visit their doctor to be
checked for brain injury.

SIGNS & SYMPTOMS
OF BRAIN INJURY FROM
OPIOID OVERDOSE

- Short-term memory loss
- Mood and personality changes
- Lack of coordination
- Difficulty with the following:
 - Controlling emotions and behaviors
 - Paying attention
 - Processing and retaining information
 - Following through with assignments
 - Recalling appointments

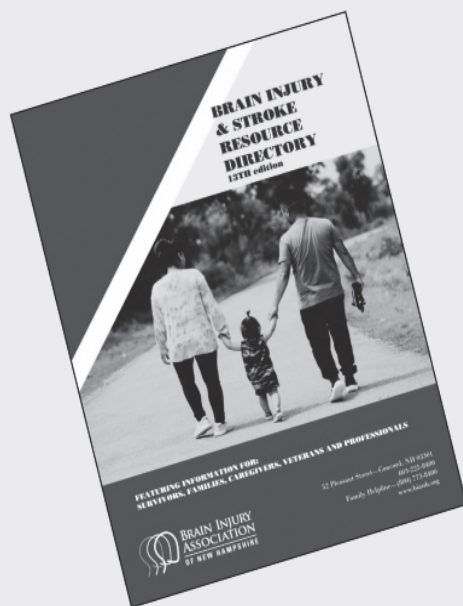


THE
NH PROVIDERS
ASSOCIATION

Representing
Alcohol & Other Drug Service Providers
in New Hampshire

NEW DIRECTORIES and INFORMATION GUIDES!

The Brain Injury Association of New Hampshire has published the 13th edition of their Resource Directory.



We have also made available the

Brain Injury Information Guide as a separate resource of information on the effects of and managing life after brain injury.

Call or email to request these directories to be sent to you

603-225-8400 or mail@bianh.org



INDEPENDENT CASE MANAGEMENT/ SERVICE COORDINATION

The Brain Injury Association of New Hampshire offers this **Conflict Free/Conflict of Interest** services for all 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



You are not alone!

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

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 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.

TIPS FOR PARENTS, GUARDIANS, AND KIDS

BICYCLE SAFETY

Bicycling is fun, healthy, and a great family activity. But a bicycle isn't a toy; it's a vehicle!

Some bike crashes can cause serious injuries and most are related to the behavior of you (the bicyclist) or the motorist. There are a number of things you can do to prevent a crash, and protect your brain if a crash occurs.

Safe Riding Tips

Before riding, make sure you, your family, and the bicycles are ready to ride. Be a "Roll Model" for other adults and children.

Remember to:

- **Wear a Bicycle Helmet.** Everyone – at every age – should wear bicycle helmets. For more guidance on fitting a helmet, see the National Highway Traffic Safety Administration's *Fitting Your Bike Helmet*.
- **Adjust Your Bicycle to Fit.** Stand over your bicycle. There should be 1 to 2 inches between the rider and the top tube (bar) if using a road bike and 3 to 4 inches if using a mountain bike. The seat should be level front to back, and the height should be adjusted to allow a slight bend at the knee when the leg is fully extended. The handlebar height should be level with the seat.
- **Check Your Equipment.** Before riding, inflate tires properly and check that the brakes work.
- **See and Be Seen.** Whether daytime, dawn, dusk, bad weather, or at night, make yourself visible to others. Wear neon, fluorescent or other bright colors when riding, to be most easily seen. Wear something that reflects light, such as reflective tape or markings, or flashing lights. Remember, just because you can see a driver doesn't mean the driver can see you.
- **Control the Bicycle.** Ride with two hands on the handlebars, except when signaling a turn. Place books and other items in a bicycle carrier or backpack.
- **Watch for and Avoid Road Hazards.** Look for hazards such as potholes, broken glass, gravel, puddles, leaves, and dogs. All these hazards can cause a crash.
- **Use Verbal and Non-Verbal Communication.** This includes eye contact with drivers, turn signals, pointing to road hazards for bicyclists behind you, and stating "passing on your left," or "on your left."
- **Avoid Riding at Night.** It's hard for road users to see bicyclists at dusk, dawn, and nighttime. Use reflectors on the front and rear of your bicycle. White lights and red rear reflectors or lights are required by law in all States.



Rules of the Road - Bicycling on the Road

In all States, bicycles on the roadway are considered vehicles, and bicyclists are the drivers, with the same rights and responsibilities as motorists to follow the rules of the road. When riding, always:

- **Go With the Traffic Flow.** Ride on the right in the same direction as other vehicles. Go with the flow – not against it.
- **Obey All Traffic Laws.** A bicycle is a vehicle and you're the driver. When you ride in the street, obey all traffic signs, signals, and lane markings.
- **Yield to Traffic.** Almost always, drivers on a smaller road must yield (wait) for traffic on a major or larger road. If there is no stop sign or traffic signal and you are coming from a smaller roadway (out of a driveway, from a sidewalk, a bike path, etc.), you must slow down and look to see if the way is clear before proceeding. Yield to pedestrians in a crosswalk.
- **Be Predictable.** Ride in a straight line, not in and out of cars. Signal your moves to others.
- **Stay Alert at All Times.** Use your eyes and ears. Watch out for potholes, cracks, wet leaves, storm grates, railroad tracks, or anything that could make you lose control of your bike. Listen for traffic and avoid dangerous situations; don't use personal electronics when you ride.
- **Look Before Turning.** When turning left or right, always look behind you for a break in traffic, and then signal before making the turn. Watch for left- or right-turning traffic.
- **Watch for Parked Cars.** Ride far enough out from the curb to avoid the unexpected from parked cars (like doors opening, or cars pulling out).

Where to Ride Safely

- **Use bike lanes or bike paths, if available.**
 - While bicycles are allowed on many roads, riders may feel safer being separated from traffic. A lane or path is a safer choice than riding on a sidewalk.
 - Riding on sidewalks puts you in a place where cars do not look for or expect to see moving traffic.
 - Sidewalk riding puts you at risk for crashes at driveways and intersections.
- **Children younger than 10 years old are not consistently able to make the decisions necessary to safely ride unsupervised in the street.** Therefore, they are safer riding away from traffic.
- **For anyone riding on a sidewalk:**
 - Check the law in your State or jurisdiction to make sure sidewalk riding is allowed.
 - Watch for vehicles coming out of or turning into driveways.
 - Stop at corners of sidewalks and streets to look for cars and to make sure the drivers see you before crossing.
 - Enter a street at a corner and not between parked cars. Alert pedestrians that you are nearby, saying, "Passing on your left," or use a bell or horn.



DOT HS 811 557
January 2013

For more information on bicycle safety, visit the NHTSA Web site at: www.nhtsa.gov/Bicycles.

9300e-011813-v2a

TIPS FOR YOUTH

BIKE SAFETY

Biking is fun, healthy, and a great way to get around and be independent. But your bike is a vehicle, not a toy!

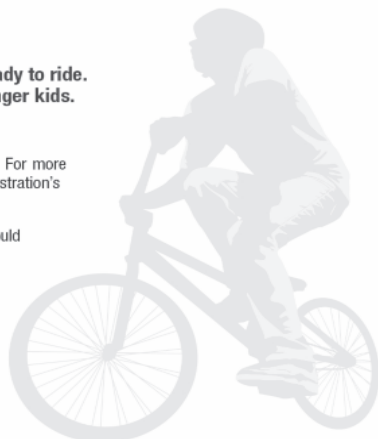
Some bike crashes can cause serious injuries and most are related to the behavior of you (the bicyclist) or the motorist. There are a number of things you can do to prevent a crash, and protect your brain if a crash occurs.

Safe Riding Tips

Before riding, make sure you and your bike are ready to ride. You can be a "Roll Model" for your peers and younger kids.

Remember to:

- **Wear a Bike Helmet.** Protect your brain, save your life. For more information see the National Highway Traffic Safety Administration's *Fitting Your Bike Helmet*.
- **Adjust Your Bike to Fit.** Stand over your bike. There should be 1 to 2 inches between the rider and the top tube (bar) if using a road bike and 3 to 4 inches if using a mountain bicycle. The seat should be level front to back, and the height should be adjusted to allow a slight bend at the knee when the leg is fully extended. The handlebar height should be at the same level with the seat.
- **Check Your Equipment.** Before riding, inflate tires properly and check that the brakes work.
- **See and Be Seen.** Whether daytime, dawn, dusk, foul weather, or at night, make yourself visible. Wear neon, fluorescent or other bright colors when riding, to make yourselves the most visible to others. Also wear something that reflects light, such as reflective tape or markings, or flashing lights. Remember, just because you can see a driver doesn't mean the driver can see you.
- **Control Your Bike.** Ride with two hands on the handlebars unless signaling a turn. Place books and other items in a bike carrier or backpack.
- **Watch for and Avoid Road Hazards.** Look for hazards that may make you crash, such as potholes, broken glass, gravel, puddles, leaves, and dogs.
- **Use Verbal and Non-Verbal Communication.** This includes eye contact with drivers, turn signals, pointing to road hazards for bicyclists behind you, and stating "passing on your left," or "on your left."
- **Avoid Riding at Night.** It's harder for other road users to see bicyclists at dusk, dawn or nighttime. Use reflectors on the front and rear of the bike. White lights and red rear reflectors or lights are required by law in all States.



Rules for Biking on the Road

In all States, bikes on the roadway are considered vehicles, and bicyclists are the drivers of those vehicles, with the same rights and responsibilities as other motorists to follow the rules of the road, including:

- **Go With the Traffic Flow.** Ride on the right side in the same direction as other vehicles. Go with the flow – not against it.
- **Obey All Traffic Laws.** As the driver of your vehicle on the road, obey all traffic signs, signals, and lane markings.
- **Yield to Traffic.** Almost always, drivers on a smaller road must yield (wait) for traffic on a major or larger road. If there is no stop sign or traffic signal and you are coming from a smaller roadway (out of a driveway, from a sidewalk, a bike path, etc.), slow down, look for traffic, and go only when it's clear. Also yield to pedestrians in a crosswalk.
- **Be Predictable.** Ride in a straight line, not in and out of cars. Signal your moves to others.
- **Stay Alert at All Times.** Use your eyes AND ears. Look for potholes, cracks, wet leaves, storm grates, railroad tracks, or anything that could make you lose control of your bike. Listen for traffic and avoid dangerous situations; don't use personal electronic devices when you ride.
- **Look Before Turning.** When turning left or right, always look behind you for a break in traffic, and then signal before making the turn. Watch for left- or right-turning traffic.
- **Watch for Parked Cars.** Ride far enough out from the curb to avoid the unexpected from parked cars (like doors opening, or cars pulling out).

Where to Ride Safely

- **Use bike lanes or bike paths, if available.**
 - While bicycles are allowed on many roads, riders may feel safer being separated from traffic. A lane or path is a safer choice than riding on a sidewalk.
 - Riding on sidewalks puts you in a place where cars do not look for or expect to see moving traffic.
 - Sidewalk riding puts you at risk for crashes at driveways and intersections.
- **If you don't know the rules of the road, or your parents feel like you aren't ready to ride on the street, avoid riding your bike near traffic altogether.**
- **For anyone riding on a sidewalk:**
 - Check the law in your State or jurisdiction to make sure sidewalk riding is allowed.
 - Watch for vehicles coming out of or turning into driveways.
 - Stop at corners of sidewalks and streets to look for cars and to make sure the drivers see you before crossing.
 - Enter a street at a corner and not between parked cars. Alert pedestrians that you are nearby, saying, "Passing on your left," or use a bell or horn.



DOT HS 811 558
January 2013

For more information on bicycle safety, visit the NHTSA Web site at: www.nhtsa.gov/Bicycles.

9300e-011813-v2a



WHAT HAVE WE LEARNED THROUGH NEUROTRAUMA RESEARCH IN THE LAST 10 YEARS?

This article originally appeared in Volume 14, Issue 4 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.

By Grace Griesbach, Ph.D., President, National Neurotrauma Society

The amount of research dedicated to traumatic brain injury (TBI) has notably increased during the last 10 years. This has been reflected in the membership growth of the National Neurotrauma Society (NNS), whose members comprise national and international scientists and clinicians dedicated to advancing neurotrauma research. Recently, NNS sent a survey to its members asking what the main scientific contributions in the field of TBI were during the past decade. The contributions identified through the survey highlight how research from NNS members has broadened our understanding of TBI pathophysiology, its trajectory, and treatment.

Historically, TBI research focused mainly on injuries that were evident by their initial severity. Thanks to this research, we have a better understanding of acute pathophysiology and have seen notable improvements in neurointensive care that have saved many lives. However, during the last few years, focus has shifted to those injuries that are less severe and categorized as moderate and mild. It is now widely accepted that mild injuries like concussions, with no overt structural damage in humans,

result in enduring cognitive deficits. This observation has been confirmed in experimental TBI models. These basic science studies have demonstrated that injuries presenting little tissue degeneration result in measurable behavioral deficits, subsequently allowing for the discovery of some of the mechanisms behind these deficits. Given the high occurrence of concussions, multiple research groups have demonstrated that a history of recurrent concussions is a risk factor for later-life cognitive impairments. This has led to serious discussion on sports-related injuries at all levels and substantial efforts to increase public awareness and make sports safer.

During the past decade, research has made it clear that TBI pathophysiology is a long-lasting dynamic process, as is the brain's ability to adapt – known as brain plasticity – in response to injury. Alterations in molecular markers of plasticity after TBI depend on factors ranging from the proximity to affected tissue to how much time has passed since injury.

Continued on page 17

Continued from page 16: What Have We Learned Through Neurotrauma Research in the Last 10 Years?

Significant strides have been made in understanding chronic changes in brain neuroinflammation and neurodegeneration. We are now aware that TBI can influence normal aging and is likely to have an impact on diseases associated with aging. The realization that there are ongoing changes long after the very early time window has led to substantial research focusing on subacute and chronic changes in neuroinflammation and neurodegeneration, which in turn have allowed for the testing of new targeted therapeutic approaches. Moreover, the use of new bioengineering techniques has increased every year, introducing new therapeutic strategies.

As scientists, we know that neuroplasticity and function within the context of TBI is not only dependent on variables intrinsic to the injury, but also on multiple factors associated with individual lifestyle and environment. Understanding the influence of diet, fitness, sleep, education, and other environmental factors has expanded from the laboratory to the clinical realm. When addressing physical exercise after TBI, for example, we know that factors such as the timing, intensity, quality, and duration of exercise will dictate whether exercise has a beneficial effect on recovery. In cases of concussion or mild TBI, recent evidence indicates that active rehabilitation promotes recovery as long as the timing and intensity of exercise are adapted to each patient's limitations and ability to tolerate exercise. In addition, we have begun to appreciate that TBI is not just a brain disorder, but involves peripheral organs such as the gut and liver, which have been shown to have a bidirectional interaction with the injured brain and ultimately influence the recovery processes. Over the past 10 years, there have been substantial discoveries regarding the influence of other systems, such as endocrine and cardiovascular systems. These systems have been shown to have a significant influence on the recovery trajectory of TBI and provide exciting new therapeutic avenues. As rehabilitation is currently the predominant post-acute treatment for TBI, increased research will help us create new rehabilitative strategies.

Importantly, research over the past years has better informed clinicians of the challenges when investigating and treating TBI. In the past, TBI researchers were aware that age had to be considered, given that a TBI endured at a developmental stage differed greatly from an adult TBI. As research has progressed,

epidemiological considerations have greatly expanded. Whereas during the past decade, most basic science studies were limited to males, it is now a requirement that these studies include females. In addition, the extended involvement of our military in conflict zones has also increased our awareness that brain injury suffered by military personnel differs significantly from injuries encountered by civilians.

It has become evident that a better understanding of individual characteristics is necessary in unwinding the complexity of TBI. In order to tackle TBI heterogeneity and improve the success of clinical trials, collaborations and consortiums across multiple national and international sites have been formed to gather data on individuals with brain injury. These efforts have resulted in multiple collaborative projects that are advancing clinical research in biomarkers, analytics, and imaging. Noteworthy examples of these are the Transforming Research and Clinical Knowledge (TRACK-TBI) and International Initiative for Brain Injury Research (InTBIR) projects. These collaborative projects have taken advantage of leading-edge technological advances in the fields of imaging, genotyping, and machine learning. As a result of these efforts, notable achievements have recently been made in diagnostics Imaging such as OsiriX CDE and fluid-based biomarkers such as Banyan Brain Trauma have recently been approved by the FDA as diagnostic tools for TBI. The benefits of these brain injury monitoring tools have already been appreciated, especially in the mild TBI and concussion populations.

These collaborative efforts have motivated the TBI research community to increase efforts in data sharing utilizing systems such as the Federal Interagency Traumatic Brain Injury Research Informatics System. The collaborative efforts across the entire TBI research community will continue to accelerate research progress. Along with these successes, we should also acknowledge the dedication and efforts of TBI researchers within the general community, as many more are aware of the impact of TBI. There is still a strong need for advocacy of TBI research. With increased advocacy and proper research support, the 2020's will bring greater advances in the understanding, management, and treatment of TBI.

Save the Date!

2021 Caregiver's Conference
Monthly Listening Series
6:30pm – 7:45pm

Thursday, June 24, 2021

Holding Space for Caregiver Inner Wisdom"-Patti Schmooch, Life Coaching

Thursday, July 22, 2021

"Preparation and Expectations for Caregivers Named as an Agent under Power of Attorney Documents, a Health Care Surrogate, or a Guardian." –Judith K. Jones, Esquire

Thursday, August 26, 2021

"Seva Stress Release for Self-care to the Caregiver" -Beth Benham, RN, LMT, BSN

Thursday, September 23, 2021

"Caregivers, You Can't Pour From an Empty Cup" –Marjorie Burke, Author

For more information or to register please contact:

Ellen Edgerly, 603-834-9570 or Ellen@bianh.org

Or visit the Coalition of Caring's website at www.coalitionofcaring.org

Facebook: <https://www.facebook.com/CoalitionofCaring/> Twitter <https://twitter.com/coalitioncaring>

SUPPORT GROUPS IN NEW HAMPSHIRE

(Times and places may change without notice – please call in advance)

Revised June 2021

APHASIA:

Manchester: Currently suspended; for more information, call Larissa

Catholic Medical Center – Rehabilitation Medicine Unit, Level F,
100 McGregor Street, Manchester, NH.

Contact: Larissa St. Amand Phone: (603) 641-6700

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

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.

**Virtual Statewide Peterborough Brain Injury Support Group -
Meets the 1st Tuesday of the month 6:00 pm-7:30 pm**

**Virtual Statewide Atkinson/Derry Brain Injury Support Group -
Meets the 2nd Tuesday of the month - 6:00 pm-7:30pm**

**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 for online registration. If you have any questions, please email Ellen Edgerly at Ellen@bianh.org or call at 603-834-9570.

CAREGIVERS SUPPORT GROUP (CAREGIVERS ONLY):

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

STROKE AND BRAIN INJURY:

Northeast Rehab Virtual Statewide Mild Brain Injury Support Group

Meets the Second Wednesday of the month, 5:00 pm - 6:00 pm

Contact Barbara Capobianco at 603-680-3220 or

bcapobianc@northeastrehab.com for online registration information.

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

Currently Suspended 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

Currently Suspended 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

Currently Suspended 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: For Appointment Only Due to COVID-19.

Contact: Urszula Mansur

Phone: (603) 818-9376

STROKE:

Concord: Virtual 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: Virtual 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

Currently Suspended Salem: 1st Wednesday of the month, Northeast

Rehab Hospital, Family Conf. Room, 70 Butler Street, Salem, NH

Phone: (603) 893-2900

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(This list reflects donations received from January 1, 2021 to present)

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