

HEADWAY

ONLINE NEWSLETTER

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ISSUE #100, Summer 2026

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NH CONCUSSION RETURN TO LEARN PILOT

The following is a condensed version of the New Hampshire Return to Learn Pilot Overview & Recommendations.

BIANH Board President Jonathan Lichtenstein shared, "A project like this was more than a decade in the making. We began our venture into changing the culture of schools to emphasize the importance of return to learn planning and methodology after concussion in 2014 through a Health Resources & Services Administration (HRSA) grant. There was significant progress achieved, but the reach felt somewhat truncated due to the small selection of schools we could reach within the limits of funding. Then in 2020, the BIANH played a key role in the passing of return to learn legislation, making New Hampshire one of the few states to have such a law – an acknowledgment that concussion is not only a sports issue. We were very proud of this, as it indicated that our work had a larger impact than we may have realized. But then the COVID-19 pandemic challenged the State's ability to extend the meaning of the law to a broader audience. The BIANH never let this go, however, as we made brain injury and schools one of our key priorities in the front half of this decade."



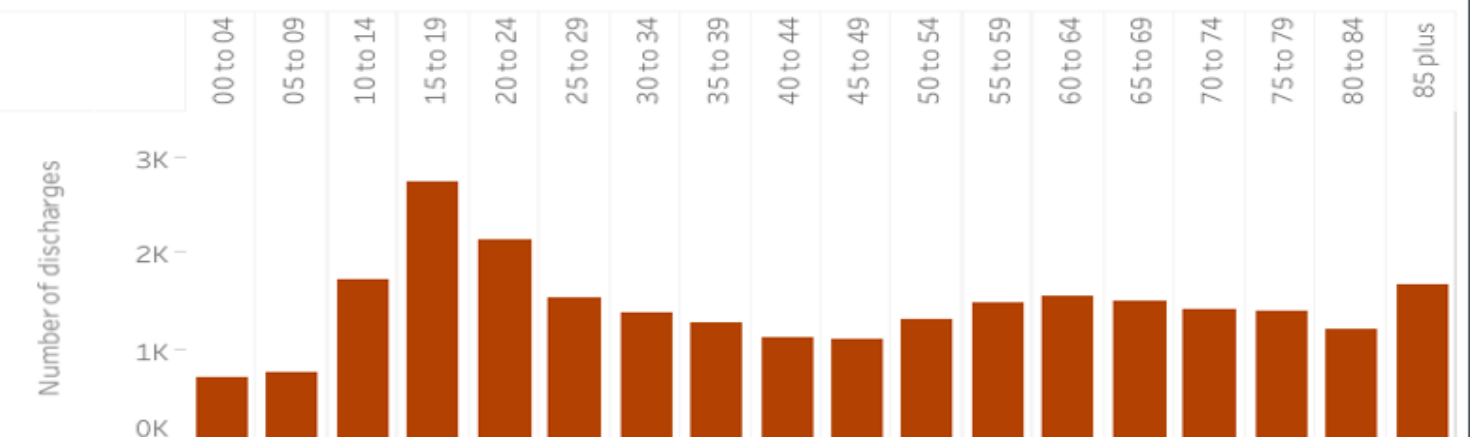
NH Youth & Concussions

An estimated 17,000 NH children and adolescents ages 0-17 (6.8%) experience symptoms of concussion/brain injury before reaching adulthood according to the Center for Disease Control and Prevention.¹ Tragically, accidental injury deaths consistently remain the leading manner of child death (37% of child deaths) among NH children and adolescents according to the New Hampshire Child Fatality Review Committee.² In NH there are between 5,000 and 6,000 traumatic brain injury/concussion-related hospital emergency department discharges every year with concussion counts remaining highest for children and adolescents as shown in the figure on page 2.

Note that the hospital numbers show only part of the story and do not include the concussions that are assessed by primary care providers, urgent care, or that are not assessed by medical personnel at all.³ The leading causes of concussion in children and youth are falls (playground, bike, skateboard), 'struck by/against' events (e.g., hitting head on objects), sports, recreational activities, and physical altercations/roughhousing. Contrary to common belief, more than half of all youth concussions are not from organized contact sports.

---Continued

Traumatic brain injury hospital visits (emergency dept.) by age group; Count; Discharge year: 2019 - 2023; New Hampshire



NH’s Response – 2025 School Pilot

Given clear need among NH youth for head injury prevention and recovery support, the BIANH and its partners within the Governor’s Office, the Legislature, the Department of Education (NHED), the Department of Health and Human Services (DHHS), and the medical community have been working collaboratively for decades. This report highlights our most recent efforts with the 2025 return to learn school pilot.

In 2025 the BIANH launched a pilot program in partnership with the Governor’s Office of Emergency Relief & Recovery, the NHED – Office of Student and Educator Wellness, DHHS, and 12 local school pilot sites. The program supported school staff to learn and deploy return-to-learn after concussion protocols in their districts and to comply with the requirements of RSA 200:63 and the accompanying NHED Technical Advisory (issued in May 2025). Our shared goal is to ensure that every student has a safe and supported transition back to the classroom.

School is the best environment for recovery from a concussion after an initial 48-hour rest period. Schools are the natural environment for youth and students often recover more effectively at school than they do at home. This is because students in school have appropriate behavioral support, structure, and connection to caring adults. School can provide just the right balance of activity and rest to help the brain heal. Small adjustments at school can make a big difference in a student’s recovery.

When school nurses, teachers, athletic trainers, staff, and administrators are well trained in concussion management, follow clear return-to-learn protocols, and coordinate effectively with each other and with medical providers, children do return to baseline functioning relatively quickly (~1-4 weeks).

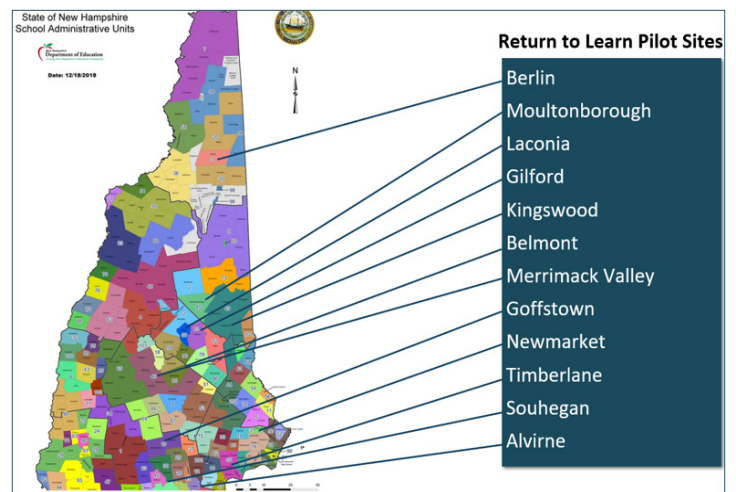
Introduction to the Report

In the spring of 2025 BIANH engaged Integration Sciences as its operational partner to plan and deploy the return to learn pilot program. Together, BIANH and Integration Sciences completed all components of the pilot by year’s end including:

1. Recruitment of pilot schools/school districts.
2. Development of the return to learn training course-and-training of school staff.
3. Facilitation of the community of practice.
4. Development of model school policy-and-dissemination of policy to school districts.
5. Development of student progress tracking with privacy guardrails.

Recruitment of Pilot Schools

In the spring of 2025, our team set out to recruit 10 sites for the return to learn pilot. By mid-May, 12 schools engaged with our team and we formally kicked off the pilot program. The following figure lists the schools and their associated locations.



Development of the Return to Learn Course and Training School Staff

In the spring and summer of 2025, BIANH created an online asynchronous training to build competency within school teams for return-to-learn after concussion. The training was built in collaboration with BIANH subject matter experts, Jennifer Parent-Nichols and Jonathan Lichtenstein, and draws upon the competencies and content from the text “Concussion

Competencies” by Arthur Maerlender, Jennifer Parent-Nichols, Jonathan Lichtenstein, and Sandra Singer.

The training is comprehensive and includes 5 chapters that teachers and staff may easily access for initial training and for real-time reference when they are supporting a child who is returning to their school after sustaining a concussion.

In early fall 2025, BIANH partnered with Lakes Region Community College (LRCC) to deliver the course through their Learning Management System (LMS). The partnership with LRCC helped create access to the course for the Pilot participants and extends through June 30, 2026.

As of December 2025, 153 school staff have completed the training as part of the school pilot and received Certificates of Completion from BIANH.

Facilitation of the Community of Practice

As part of the school pilot, BIANH facilitated a 6-part Community of Practice. The series ran for six weeks beginning October 16 and ending November 20. The Community of Practice was designed as an “all teach-all learn” format. Each session included a formal didactic portion for sharing current knowledge and evidence regarding concussion recovery. BIANH subject matter experts, Jennifer Parent-Nichols and Jonathan Lichtenstein, provided the content for each session.

Development of Model Policy and Dissemination to School Districts

A critical priority for BIANH is the creation and dissemination of return to learn policy for school districts to adopt and follow. Well-designed policies provide the guardrails for students, parents/guardians, and school staff to create an environment where students can quickly recover from concussion incidents and return to baseline for their academic learning. BIANH worked closely with the Department of Education and with the administrators of the pilot sites to develop clear and supportive policy.

Development of Student Progress Tracking with Privacy Guardrails

The BIANH team set up simple tracking tools and processes which schools could draw upon. Given all participants’ sensitivity to student privacy and the associated education and healthcare privacy laws (e.g., FERPA, HIPAA) all tracking was designed to be anonymous and no student-identifiable data was collected nor disclosed through the pilot.

The tracking process was designed to help reinforce a daily routine where each school’s Concussion Management Team Leader would communicate daily with the Communication Management Team members who were interfacing with the student. By design, the team members can keep track of which color-coded stage of recovery a student is in for a given day, what adjustments are being used to support the student with symptom management, and what decisions a team is making for promoting a student to the next stage of recovery. The pilot

included access to and training with the Better or Worse Index (BoWI), a behavioral screening tool which helps standardize screening a student’s progress relative to the previous day and relative to baseline.

Student progress tracking was the most challenging aspect of the return to learn pilot and only 4 of the pilot sites engaged in formal data tracking. BIANH was fortunate to engage Carly Fleming, a Dartmouth College intern, throughout the pilot term and Carly rounded with these pilot sites weekly to help them set up and manage student stage tracking, to identify new concussion cases, and to assist team leaders with tracking student progress through the stages relative to expected student time with each stage.

Recommendations

The return to learn school pilot was successful in two ways. First, the pilot gave BIANH an opportunity to build enduring assets for NH schools including: the training curriculum; the training delivery environment through Lakes Region Community College; the model policy; the Community of Practice curriculum and format; and, the initial tools and processes for student tracking. Second, the pilot gave NH pilot schools an opportunity to implement return to learn programs with a lot of support from BIANH.

The principal recommendation stemming from this work is to scale return to learn programs to all schools statewide and fulfill the vision of RSA 200:63. This will move all schools forward to a day when formal return to learn programs are routine and students experiencing concussions are fully supported through a staged recovery.

As this pilot project has wrapped up, Jonathan Lichtenstein shared, “My hope is that our return to learn protocol, return to routine concept, and evidence-informed strategic guidance reaches every school, every parent, and every child in New Hampshire. For this to happen and be implemented appropriately, we need school personnel – particularly teachers and school nurses – to access our educational curriculum, which is tailored towards management concussion at school. Doing so requires support from superintendents and school boards to drive these essential stakeholders to these trainings – which are not static, but rather, dynamically designed to fit the packed schedules and high-demand jobs of teachers. We want education to be accessible and actionable, not a box that gets checked.”

Report Authorship

The full report was prepared by Mark Belanger, MBA, Founder and CEO of Integration Sciences.

¹ Black LI, Zablotzky B. Concussions and brain injuries in children: United States, 2020. NCHS Data Brief, no 423. Hyattsville, MD: National Center for Health Statistics. 2021. DOI: <https://dx.doi.org/10.15620/cdc:111174>.

²New Hampshire Child Fatality Review Committee Annual Report, State Fiscal Year 2024., <https://www.dhhs.nh.gov/sites/g/files/ehbemt476/files/documents2/child-fatality-review-report-2024-final.pdf#:~:text=In%20SFY%202024%2C%20the%20CFRC%20held%20six.Center%20provided%20essential%20education%20for%20committee%20members>.

³Source: NH DHHS Wisdom data portal, <https://wisdom.dhhs.nh.gov/wisdom/dashboard.html>

PRESIDENT'S MESSAGE -

Smart Helmets, Safer Seasons *Protecting your head, from summer rides to fall Fridays*

by Jonathan D. Lichtenstein, PsyD, MBA



For those of us who know firsthand how a brain injury can change a life, the value of prevention is never abstract. As summer arrives and bicycles come out of the garage, a well-made helmet remains one of the simplest, most effective ways to protect the brain you or your loved one work so hard to care for.

The encouraging news is that not all helmets are created equal, and you no longer have to guess which ones perform best. Researchers at the Virginia Tech Helmet Lab have spent more than a decade independently testing helmets across cycling, football, and many other activities. Their work is supported through the university rather than by manufacturers, which keeps the ratings objective and free of industry influence.

The lab's STAR rating system (short for Summation of Tests for the Analysis of Risk) measures how well a helmet reduces the forces that lead to concussion during realistic, real-world impacts. Each helmet earns a score of one to five stars, and the researchers recommend choosing only helmets rated four or five stars. Bicycle helmets are tested in partnership with the Insurance Institute for Highway Safety, using two dozen impact scenarios that mimic the falls and crashes riders actually experience.

It is worth knowing that the bar has recently risen. In July 2025, the lab updated its thresholds for bicycle, varsity

football, and youth football helmets, making a five-star rating harder to earn. This was not because helmets got worse, quite the opposite; manufacturers have improved so much that the scale needed to be tougher to keep a top score meaningful.

A few practical reminders as you shop or dust off last year's gear:

- A helmet protects only when it fits well and is worn correctly: level on the head, snug under the chin, and never pushed back off the forehead.
- Replace any helmet that has taken a significant impact, even if it still looks fine.
- Price does not always equal protection; several top-rated helmets are surprisingly affordable.
- Helmets are not a panacea – they do not stop concussions from occurring.

You can explore the full ratings — searchable by sport and sortable by price — at the Virginia Tech Helmet Lab's website: helmet.beam.vt.edu.

EXECUTIVE DIRECTOR'S MESSAGE -

House Energy & Commerce Committee Passes the TBI Act

by Steven D. Wade, Executive Director



On May 21st, the House Energy and Commerce Committee unanimously passed the Traumatic Brain Injury Reauthorization Act by a vote of 43-0. Many Members spoke about the importance of this legislation and the legacy of Congressman Bill Pascrell.

Millions of our fellow citizens are impacted by brain injury... brain injury does not discriminate. This gap in authorization has been unacceptable, and I'm looking forward to closing it... This bill is also a tribute to former Rep. Bill Pascrell's honor, Congressman Pallong (D-NJ).

New Hampshire has received important resources and support from the TBI Act through the TBI Federal State Partnership Grant Funds.

The Brain Injury Association of America, in partnership with NASHIA (National Association of State Head Injury Administrators), has been working with both the House and the Senate to move forward with the legislation and is grateful to the Committee and the legislative champions for taking this important step. The Senate had recent action on the legislation as well and we are working to coordinate with both chambers to ultimately have a final bill sent to the President's desk.



NOTICE OF PUBLIC HEARING

PUBLIC HEARING ON *UNMET NEEDS*

PLEASE JOIN US! - via Zoom or in person

Survivors, family members, caregivers, friends, and service agencies are encouraged to attend this Public Hearing to provide personal and professional input for unmet needs for individuals living with a brain injury or spinal cord injury.

The information provided at the hearing will be submitted in a report to the Governor and the Legislature in order to provide recommendations to better meet those needs.

DATE: **Wednesday, June 24, 2026**

TIME: **4:30—5:30 PM**

IN-PERSON LOCATION: **Dept of Education—Walker Building
2 South Fruit Street, Room 100
Concord, New Hampshire**

Light refreshments will be provided.

VIRTUAL LOCATION:

<https://us02web.zoom.us/j/81816175959?pwd=pabZchLIwBCQ6rbgko9XqmRH5CazkG.1&from=addon>

Registration is required for anyone attending in person as well as via Zoom



For more information or questions, please contact Erin at (603) 225-8400 or erin@bianh.org

**Public announcement provided by:
New Hampshire Brain & Spinal Cord Injury Advisory Council**

c/o Brain Injury Association of New Hampshire
52 Pleasant Street—Concord, NH 03301
603-225-8400



Co Host:
Disability Rights Center
64 North Main Street, #2, Concord, NH 03301
603-228-0432



Brain Injury Association of New Hampshire

BRAIN MATTERS 2026

Tuesday, July 14, 2026 - 11:00 AM-1:00 PM EST

Virtual Training: ***Post Concussion Syndrome: Facts, Families and a Framework for Recovery***

Presenter: Gina England, MA, CCC-SLP, Speech Pathologist

Cost: \$25.00 or FREE to all Survivors and Family Members

Please note that refunds will only be issued for cancellations that are received 48 hours prior to the training.

Register: <https://p2p.onecause.com/bm2025/event/07vtpcs>

This webinar is designed to provide a thorough overview about the realities of Post Concussion Syndrome - how it is clinically defined and its impact on both the client and their families/caregivers. Topics will include the most common emotional, cognitive, linguistic and physical symptoms in addition to identifying the various professionals who comprise the Post Concussion Recovery Team. Attention will also be given to family/caregiver education and the resources available to them. Lastly, the content of this webinar does not only apply to sports related concussions. The information to be shared has relevance for concussions sustained at any stage of life and in any situation.

Thursday, August 6, 2026 - 8:30-10:30 AM EST

Virtual Training: ***Stroke and Brain Injury 101 - An Introductory Presentation on the Early Characteristics of a Stroke or Brain Injury***

Presenter: Gina England, MA, CCC-SLP, Speech Pathologist

Cost: \$25.00 or FREE to all Survivors and Family Members

Please note that refunds will only be issued for cancellations that are received 48 hours prior to the training.

Register: <https://p2p.onecause.com/bm2025/event/08vtsbi101>

The Brain Injury Association of New Hampshire has created this webinar to help individuals navigate their way through the early days of a Stroke and/or a Brain Injury. This webinar is designed for patients, families, and caregivers. The content of this two-hour webinar covers a basic introduction to the functions of the brain as it relates to the location of an individual's stroke or brain injury and the subsequent changes in abilities/ behaviors that can be anticipated. Additional content that will be addressed includes the following: • General behavior management guide lines • The most commonly observed cognitive deficits • Changes in communication skills • The primary rehabilitation goals in the acute (early) stages of recovery • Resources for family/caregiver support • Handouts that can be printed and reviewed for permanent access to essential information.

Tuesday, September 15, 2026 - 12:00-1:00 PM EST

Virtual Training: ***Alternative Strategies to Medication for the Management of Anxiety and Overall Well Being***

Presenter: John Crampton, PhD., Neuropsychologist

Cost: \$25.00 or FREE to all Survivors and Family Members

Please note that refunds will only be issued for cancellations that are received 48 hours prior to the training.

Register: <https://p2p.onecause.com/bm2025/event/09vtasm>

Dr. Crampton will provide an essential overview about Poly Vagal Theory, a non-medication alternative to managing stress after a TBI or Stroke. Examples of this approach to stress management include breathing exercises, visualization, and connecting with nature to name but a few. The science behind Poly Vagal Theory will also be discussed as it relates to the activation of the brain's parasympathetic nervous system.

40TH ANNUAL WALK BY THE SEA & PICNIC - FOLLOW UP

On Saturday, June 13th we arrived at Hampton Beach State Park to be welcomed by a beautiful summer day, warm breeze, and bright, shining faces of more than 375 individuals ready for the 40th Annual Walk by the Sea!

BIANH Executive Committee Member, Jeannine Romeo, welcomed everyone at the start of the walk. Special guest Miss New Hampshire Teen Volunteer, Isabel Dwyer also joined us displaying her sash and tiara and helped out by greeting individuals, posing for photos with individuals, and passing out team prizes. Upon their return to the pavilion walkers were treated to lunch catered by Jeannotte's Market of Nashua. Robin Hill Farm provided a very large batch of delectable cookies for our dessert treat.

Thank you to all who participated and/or donated to this year's Walk! Sponsorships for this year were: *Walk Thank You Sponsor* - Krepmpels Brain Injury Center; *Parking Sponsor*: Minuteman Medical; *Prize Sponsors*: CareOne at Lowell; NeuroRestorative, and Rose Meadow Group; *Cookie Sponsor*: Robin Hill Farm; and *Team Spirit Sponsor*: The Munson Family. We also are very grateful for the generosity of Dunkin Donuts, who donated the coffee and donuts, the Munson Family for the rest stop, Care-

One @ Lowell for added chips and waters, all the volunteers who helped out at the event, and the NH State Parks. A great day was had by all!

Once again teams competed for prizes in the categories of most original name, most pledge dollars, the greatest number of walkers and the Eldon R. Munson, III Team Spirit Award. And the winners are....

Team with Most Original Name:

Blue Brain Brigade - Lillian Deeb, Team Captain

Team with Most Walkers:

Robin Hill Farm - Claire Kearney, Team Captain

Team Spirit Award - *Krepmpels Brain Injury Center*, Erin Fairhurst, Team Captain

Team with Most Money Raised: *North Country Independent Living*, Freddi Gale, Team Captain

Thank you to all of our team captains, team members, individuals, and donors who worked so hard to help us raise awareness and pledge dollars this year.

Be sure to go to www.walkbythesea.org (click on Gallery) to check out this year's photos from the Walk.



42ND ANNUAL BRAIN INJURY & STROKE CONFERENCE - FOLLOW UP

On Wednesday May 13th the Brain Injury Association of New Hampshire held its 42nd Annual Brain Injury and Stroke Conference at the Courtyard Marriott and Grappone Conference Center in Concord. It was a very successful day with 250 people in attendance.

The morning began with the Keynote, *Creating a Brighter Future Together* given by Rick Willis, President and CEO of the Brain Injury Association of America. Rick's keynote gave an overview of BIAA's advocacy work, legislative priorities, resources and educational opportunities, and ways to stay connected. He also presented about the power of community and how by working together the future can change for individuals living with brain injury. Rick covered resources BIAA had to offer that were available and accessible to the New Hampshire brain injury community and beyond.

The conference program was filled with excellent presenters and topics that included: *Microglial Cells in Recovery from TBI: Good or Bad?*; *When Words Fail: Using Singing as Communication Therapy*; *The World's First Prescription Music Product: Innovations in Stroke Rehabilitation*; *Yoga Nidra Guided Meditation for Sleep & Emotional Well Being*; *What is Brain Health & How Does it Relate to Neuroplasticity?* and much more.

As is customary, the winner of the Ellen Hayes award was announced and presented during lunch. This award is the highest honor the Association bestows upon an individual or organization for their outstanding efforts in support of individuals with brain injuries. This year's recipient was Robin Kenney, EdD. For nearly thirty years, his selfless dedication and leadership within the brain injury community accomplished so much to help improve the lives of individuals living with brain injury in our state. He dedicated himself to securing eligibility for many brain injury survivors for the Acquired Brain Disorder Services Waiver and is a strong advocate for brain injury within the New Hampshire area agency support system. Over the years he accomplished much toward improving the care for individuals living with chronic, long term, and intensive care needs from brain injury. As a past president of the Association, he led through the challenging years of the COVID-19 pandemic. After many years advocating for individuals living with brain injury, his own daughter sustained a severe traumatic brain injury. Much like he had done for others, he and his family worked tirelessly to assure the best care and support for their daughter's recovery and long-term support.

A special thank you to all our presenters: Elizabeth Barbin, MS, CCC-SLP, CBIS; Laura Bashour, OTR/L, CSRS, Thomas Brown, BS, CBIST; Rene Camerato; Crystal Carmen; Szu-Han Kay Chen, PhD, CCC-SLP; Collean Combs, MS, CCC-SLP; John Crampton, PsyD, LCMHC; Carolyn D'Ambrosio, MD, MS; Marabeth DeAngelis, MA, CCC-SLP; Gina England, MA, CCC-SLP; Annette Escalante, MSW, MLADC; Brian Harris, MA, MT-BC, NMT/F, FACRM; Serena Jaskolka, MS, CCC-SLP; Alyssa Leslie, MOT, OTR/L; Keri Miloro, MS, CAGS, CCC-SLP, BCS-S; Joanne Morello, PT, DPT, CSRS; Therese

O'Neil-Pirozzi, ScD, CCC-SLP; Kate Phelps, MS, CCC-SLP; Steven Pike, PhD; Allison Pollard, MT-BC; Amy Ramage, PhD; Ellie Spriet, OTD, OTR/L, CKTP, RYT200; Donald Tower, DO; Brionne Turcotte, PT, DPT.

A very big *thank you* to all of our sponsors & exhibitors. Your support enables us to continue providing one of the largest and most comprehensive brain injury and & stroke conferences in New England.

Lead Sponsor: Abramson, Brown & Dugan; Supporting Sponsor: NH Bureau of Developmental Services; other sponsors were: Encompass Health Rehab Hospital; Enhanced Life Options; Guardian Home Care, USA; Heart to Home Meals; Rehab Without Walls/Robin Hill Farm; and Rose Meadow Group.

Exhibitors: Brain Injury Association of New Hampshire; CareOne at Lowell; Gateways Community Services; Governor's Commission on Disability; GT Independence; Guardian Angel Senior Services; Inspire Vision; Krempels Brain Injury Center; LifeStation; The Middle People Project; Minuteman Medical, Inc.; NeuroRestorative; New England Disabled Sports; NH Vocational Rehabilitation; North Country Independent Living; Northeast Rehabilitation Hospital Network; St. Joseph Hospital Rehab Center; Strategic Caring Solutions; SureHands Life & Care Systems; and WellSense Health Plan.

Please join us next year! Wednesday, May 12, 2027



43rd Annual
**Brain Injury & Stroke
Conference**

Wednesday, May 12, 2027
Grappone Conference Center
Concord, NH



Rick Willis, Keynote Speaker



Advocating for the Legal Rights of People with Disabilities

DR DISABILITY RIGHTS CENTER - NH

Help Us Choose Our 2026-2027 Priorities

Each year, we make difficult decisions about how to use our limited resources to address the most urgent issues. Your feedback now helps us decide which issues need the most attention in the year ahead. Don't miss the chance to make your voice heard. Visit drcnh.org/get-involved/help-us-choose-our-2026-2027-priorities/ or scan the QR code below with your smart phone.



*What Issues Matter Most
to You? Take Our 2-
Minute Survey*



New Housing Related Resources

While we are not currently scheduling housing-related appointments, we have expanded and updated the housing resources available on our website drcnh.org/disability-issue-areas/housing.

NORTH COUNTY INDEPENDENT LIVING -- LOOKING AHEAD!

This past spring was unpleasantly cold with more rain than we can remember. Yet despite the weather, NCIL residents kept busy coordinating yard sales and bake sales for the fundraising efforts to benefit the Brain Injury Association Annual Walk by the Sea and Picnic. The Barrington residents enjoyed a historical tour of the USS *Albacore* which had been constructed at the Portsmouth Naval Shipyard and launched in 1953 by the US Navy as a research submarine. This vessel came back to Portsmouth having spent much time in Philadelphia until efforts were made to return it to her birthplace.

Many of the residents had a great time attending a Sea Dogs baseball game at Hadlock Field in Portland, Maine. The Weekly Walking Group enjoyed the recreation trail in North Conway. Other activities included mini golfing, dining out, concerts, bon fires, and bowling. Most recently, the Barrington residents enjoyed a visit to York's Wild Kingdom.

The annual Brain Injury & Stroke Conference was well attended and as always very informative, the staff at NCIL wish to thank all participants who stopped by our exhibit to chat and learn about our programs and services. We are always looking to hire great people with a passion who wish to develop their skills in the many fields of disabilities.

Resident Highlight:

Jim M. joined NCIL in 2022 after it was determined that he needed additional support for safety reasons. Jim is a lively and enjoyable gentleman with a great sense of humor. Over the past few years, he has become a caring and supportive resident to both his housemates and the staff. He is always ready to lend a helping hand--whether it's pulling out a chair to help someone or menial tasks like taking out the trash.



Jim delivering flowers

In addition to being helpful, Jim cares deeply about his environment and makes a weekly responsibility to pick up litter along the roadside. He also enjoys many of the outings that NCIL offers; such as concerts, playing pool, trips to York's Wild Kingdom, and fishing. He rarely declines the opportunity to participate in any outings. This past year, he found great joy in delivering flowers for Valentine's Day and Mother's Day, recalling how happy it made him to see others smile. NCIL looks forward to many more years with Jim and is committed to supporting him in living his best life.

Wishing everyone a warm and safe summer!

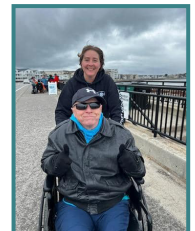


North Country Independent Living

2541 White Mountain Hwy, Building #3, North Conway, NH 03860
Website: ncilnh.com

Programs and Specialty Services

- Supported Apartment Living
- Supported Residential Care/Long Term Care
- Community Residence Program
- Day Support Program
- Behavioral Consultation
- Employment Services



Program Description

North Country Independent Living (NCIL), family owned and operated since 1994 understands the various needs for specialized services and programs. NCIL designs programs for each individual based upon their strengths, abilities, goals, and where they may be in the rehabilitative process.

We pride ourselves in creating compassionate, meaningful living situations that provide individuals the opportunity to regain a sense of self-esteem and the potential to become as independent as possible in the least restrictive environment, while enjoying all aspects of community inclusion. Our residences and individuals have been embraced by the local communities who view NCIL as a community partner offering volunteering, employment, and recreational opportunities for the people we serve. We are extremely proud of our referrals and the individuals that we are entrusted with.

Referrals:

Freddi Gale, CBIS, Executive Director
 603-356-0282
fgale@ncilnh.com



KREMPELS BRAIN INJURY CENTER



Remembering our founder, David Krempels

(Article written by Bryan Marquard, Boston Globe, edited for length)

Married for two days, David, then 42, and Etta-mae Krempels were traveling in Maine on their honeymoon in 1992 and were slowing down for a construction area when a tractor-trailer rammed their car from behind — killing Ettamae and leaving her husband to piece

together the fragments of a life that was shattered physically, emotionally, and financially.

“Everything I had known was gone,” he recalled in a 2007 StoryCorps interview. A residential contractor before the crash, he could no longer work and had to learn to walk again after awakening from a coma. Grieving and devastated, he subsisted on food stamps as his lawsuit wound through the courts. “I was barely making it,” he recalled, “and at one time literally had nothing to eat.”

Surprised by the size of the \$10 million jury award in 1995, Mr. Krempels paid off his debts and took the opportunity to help others whose lives were similarly upended by a traumatic brain injury. That year, he launched an emergency assistance fund that evolved into a foundation and eventually became the Krempels Brain Injury Center, a nonprofit in Portsmouth.

“I had been brought up to believe that I should do something good and important with my life,” he wrote for the organization’s website. “My first career was building houses. Now I had the financial resources to help rebuild lives.”

Mr. Krempels, whose organization aids those who have survived brain injuries from causes including accidents, assaults, brain tumors, and strokes, was 76 when he died April 17 in his Kittery Point, Maine, home of bone cancer that had metastasized.

The impetus for his philanthropy could be found in his own experience after being injured, Mr. Krempels wrote. “For 15 years, I poured a ton of money and all my passion into building this organization,” he said in his founder’s essay.

“At first, we made small grants to help relieve immediate financial crises. Gradually we realized that there were even more lasting and paralyzing needs of survivors and their families — isolation, depression, despair. Krempels evolved to provide a physical space where survivors and families could come to-

gether for companionship, encouragement, opportunities, and hope.”

Nearly everyone who visited what is now the Krempels Brain Injury Center at some point met Mr. Krempels himself. He ran the organization for years and visited regularly after turning over the leadership to others.

“We call them members,” Mr. Krempels said in the StoryCorps interview of those who are assisted by the organization he founded.

The bonds he formed with others made him “an integral part of the center,” said Cariann Harsh Daley, the organization’s executive director. “He never saw himself as the founder. He saw himself as, ‘I’m one of you because I’ve suffered a brain injury.’ “I never saw David and didn’t feel better after I saw him,” said Jim Scott of Portsmouth, who suffered a severe traumatic brain injury in a 2006 drunk driving crash.

“The amount of empathy and support he could give is something I could never get from anyone else,” said Scott, who has written in his blog about his accident and his time as a Krempels center member.

“I started living again when I went to the Krempels center,” Scott said. “As I tell people, the doctors will save your life and teach you how to walk, talk, and function. Krempels is where you learn how to live.”

Marquis Walsh of Dover, N.H., who conducted the StoryCorps interview and formerly served on the center’s board, including as president, said Mr. Krempels was “a great mentor” who became a longtime friend and golfing partner.

“He loved being with the members,” Walsh said. “That gave him so much inspiration over the years. That’s what he did it for.”

In a 2019 essay on the Brain Injury Association of America website, Mr. Krempels wrote that he developed his philosophical approach to helping others with brain injuries while he was recuperating from his own trauma:

“After I was home for about two years, when it started to become clear that the guy I was before the accident was not coming back,” he wrote, “I had a choice to make — give up or keep going? I had an epiphany, which has become the unofficial motto of Krempels center: You’re not who you were. Be who you are!”

Born in Pennsylvania on Nov. 18, 1949, Mr. Krempels was the second of three siblings.

His father, the Rev. Robert A. Krempels, who died in 2022 at the age of 102, was a minister whose church appointments meant the family moved every few years. Mr. Krempels’s

mother, Mary Garns Krempels, was dean of women at Eastern Bible Institute in Pennsylvania early in her adulthood, and later in life was a prison ministry volunteer.

“That’s where David got all this from, a life of service,” said Mr. Krempels’s wife, Mary, whom he married in 2001. “He just had his own spirituality about him,” she said of the inspiration her husband drew from his parents to help others. “He gave to everyone — he was very giving.”

“Thank God he created the Krempels center and it’s going to live on,” Scott said. “I’m still going to Krempels because it saved my life.”

Mr. Krempels brought extraordinary empathy to every encounter at the center, Daley said. One woman, Daley recalled, once wrote that Mr. Krempels “believed in me in a way that not even my doctors and family did.”

“I don’t know many people who can say they’ve directly impacted over a thousand lives,” Daley said, “and he did that.”

David’s celebration of life was held at Krempels Brain Injury Center on May 20, 2026, and over 250 people attended. David’s legacy lives on in Krempels Brain Injury Center’s unwavering commitment to help fellow survivors of acquired brain injuries navigate their new life after injury.

For more information about Krempels or to explore becoming a member, visit www.kbicenter.org.

Live your best life after brain injury.

See what’s next and how to become a member today at www.kbicenter.org



“WE GET IT”

Who knows better what it’s like living with a brain injury than someone already living with a brain injury? For 25 years, our community has offered opportunities for members to support and advocate for one another, as well as share strategies. This is a community that values each individual and can be a place of hope, joy and connections for you.

OUR MISSION

To improve the quality of life of people living with brain injury through evidence-based programming, shared experiences, and support in a welcoming community.

WHERE
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Online every Thursday



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Scan below or call 603-570-2026



NEEDS ASSESSMENT SURVEY



State of New Hampshire
Brain & Spinal Cord Injury
Advisory Council

C/o Brain Injury Association of New Hampshire
52 Pleasant Street
Concord, New Hampshire 03301



NEEDS ASSESSMENT SURVEY

The Brain and Spinal Cord Injury Advisory Council (BSCIAC) is conducting a yearly needs survey to assess needs for individuals living with a brain and/or spinal cord injury who reside in the State of New Hampshire.

We would appreciate your taking time to complete this survey.

<https://www.surveymonkey.com/r/bsciac2026>



INSIGHTS

Life Perspectives From a Brain Injury Survivor David A. Grant *Order This – A Note to My Future Self*



Life after brain injury remains a bit surreal. One might think that after fifteen years, I would have mastered the subtle nuances of this second life, but not even close. Thankfully, the mourning is over. I spent many, many years missing the life I used to live. But the passage of time is a bit of a double-edged sword. With every year that passes, I get older. But the other effect of the passage of time is++ that my past life slips further away. For several years now, I've forgotten who I used to be. You can't mourn someone that you don't even remember. I've come to accept this as part of the healing process.

I deem it to be a healthy attitude toward life and one that honors who I am today. But occasionally, I am reminded that I live on a different plane than the neuro normals of the world. While my injury is invisible, the effect of it often rears its head at unexpected times.

For many years, I've come to rely on my Google Calendar to fill in the blanks of my memory. Instead of trying to remember dozens of dates, times, events, and other things that are noteworthy, I only need to remember one thing. I just need to remember to check my calendar. Thankfully, I've gotten good at that, rarely missing a day. And here's where it gets fun.

On Mondays, I scan my calendar for the week, noting events of significance. Recently, doing my standard Monday scan, I saw an event noted by two words: Order This. Suffice it to say, I was intrigued. When I share that I can hide my own Easter eggs and still need help finding them, I am not exaggerating. Words like *Order This* capture my attention rather quickly.

Clicking on the calendar post, I saw the note that I left for myself sometime last year. It appears that sometime last year, I discovered a specific type of plant for our landscape that was best planted in early May. I noted the plant species, recommended planting date, and best time to plant. Knowing last year that this information would show up during planting season, I promptly forgot about it. Funny thing, the reminder wasn't really a reminder, as I have zero recall of even adding it to my calendar. It's more of an announcement.

In another sure sign of growth, having no memory of adding this to my calendar doesn't bother me at all. I've come to accept the quirks of living with the long-term challenges of having a brain injury. To say this a bit more succinctly, I've got better things to worry about.

Sarah and I recently went out to find Feather Reed Grass for our yard. We might chuckle about never having heard of it before, both of us knowing that it was probably something we discussed sometime last year, but that is also another sign of healing. We playfully joke about things that might offend the sensible minded. Humor is healing.

But all is not completely lost in the memory department. Lastmonth, I completed an eight month class. It was a smaller group, roughly ten of us in class. Every week we met in the basement of a local church in Salem. We all wore lanyards with our names on them. Somewhere in month seven, I realized that I finally knew everyone's name by heart, something I was so excited about. Everything takes longer than it used to. Things were simple and easy in my pre-injury life. But that's okay. This is the only life I've got and I'm making the most of it. So far, so good.

And if you are wondering what a 64-year old guy was doing in class in a church basement for the better part of a year, I was taking what is called an OCIA class. Part of my journey post injury now includes having a religion for the first time in my life, something that has brought me profound peace. As I continue to move forward, I steadfastly refuse to stagnate. I will continue to learn, to grow, and to explore all that is possible to help me live my best life. I am worthy of it, and those closest to me deserve the best version of me possible.

University of New Hampshire
College of Health and Human Services
UNH IRB 2024-145



Come join our AAC research study!

We are collecting language samples from augmentative and alternative communication (AAC) users in order to develop an automatic analysis system. This system will help AAC users and clinicians to better monitor and enhance AAC interventions in the future.



What do I have to do?

- ◇ Complete five 1.5-hour sessions over three months, involving various language activities like describing pictures or repeating sentences.
- ◇ Complete two online surveys and give us feedback in a brief interview.

Do I have to come in person?

- ◇ No. Sessions are remote or in-person at UNH Durham depending on your preference.

Will I be compensated for my time?

- ◇ **Yes!** Every participant in this research study, including AAC users and communication partners, will receive up to a \$150 Amazon gift card for their participation.

Who can participate?

- ◇ AAC speakers and a communication partner (such as caregiver, friend, or speech-language pathologist) participate in the research study as a pair.
 - ⇒ **AAC speakers should be:**
 - ✓ 5 years or older and use a high-tech communication device.
 - ✓ Able to access at least 50 selections (e.g., words, pre-programmed sentences).
 - ✓ Able to follow instructions and prompts from communication partner.
 - ⇒ **Communication partners should be:**
 - ✓ 18 years of age or older.
 - ✓ Able to read & use a standard computer screen & high-tech AAC system.
 - ✓ Able to follow instructions in English.

SIGN UP HERE!

Use the QR code or the link to access our contact form!

QR code



Link
https://unh.az1.qualtrics.com/jfe/form/SV_8dGnPBgpXqFkPly

You can also reach out to
Dr. Kay Chen at
unh.aaclab@unh.edu

MANCHESTER CLUBHOUSE

Building community. Restoring purpose. Inspiring recovery.

Member of the Month Steven

Who We Are

Manchester Clubhouse is an inclusive space dedicated to empowering brain injury survivors and individuals facing behavioral health needs regain autonomy and independence through the International Clubhouse Model of Psychosocial Rehabilitation.

Our Mission

Manchester Clubhouse is dedicated to empowering individuals living with brain injury and mental health challenges to achieve meaningful recovery through community, purpose, and opportunity.

Member of the Month for June

Steven has been a Member since 2024



JUNE 2026

How long have you been a member of the clubhouse?
Almost two years

What is your favorite unit or activity in the clubhouse?
Podcasting

What do you enjoy most about coming to the clubhouse?
Interacting with the other members and helping the staff

What is something you've learned or improved since joining?
Patience and professionalism

What are your favorite hobbies outside of the clubhouse?
Nature walks, playing video games, and comic books

What is a goal you are currently working toward (job, education, personal)?
Trying to be a more active member

What advice would you give to new clubhouse members?
Just be yourself and be the best you that you can be



Daily Work-Day

9:00am - Open

9:30am - Unit Work

11:00am - Morning Meeting/Unit Work

12:00pm - Lunch

12:30pm - Unit Work

4:00pm - End of the Day

*On Thursday's at 1:00pm - Social

June Events

1	2	3 Cypress Center visit @ 2:30	4 Guided art	5
8	9	10 On the Road Wellness visit @ 12:30	11 Friendship bracelets	12
15	16	17 Cypress Center visit @ 2:30	18 Tie Dye shirts	19
22	23 Social Planning Meeting	24 Fisher Cats Mental Health Awareness Night	25 Mini golf and ice cream	26
29	30			

- Social
- Event
- Meeting

Thank You For Reading!
Come in for a tour!

MANCHESTER CLUBHOUSE

Manchester Clubhouse
60 Rogers Street, Suite 204, Manchester, NH 03103

Phone: 603-263-1300

Email: manchesterpathwaysgp@gmail.com

Learn more and Visit our Social Media:
<https://linktr.ee/manchesterclubhouse>

Join us for our monthly Brain Injury Support Group, hosted in partnership with the Brain Injury Association of New Hampshire. This group provides a welcoming and supportive environment for individuals living with brain injury.

Meeting times: Third Wednesday of every month - 4:30 -5:30 PM

Location: 60 Rogers Street, Suite 204, Manchester, NH 03103

Our support group offers an opportunity to connect with others who understand the challenges and successes of living with brain injury. Through conversation, shared experiences, education, and encouragement, participants can build meaningful connections and gain valuable support.

DISABILITY ADVOCACY OFTEN BEGINS WITH A SINGLE VOICE—AND GROWS STRONGER WHEN MANY VOICES JOIN TOGETHER

My name is Mikal Payne and I have been a proud member of the Brain Injury Association since 2017. I currently serve as the Chair of the Brain and Spinal Cord Injury Advocacy Council, a member of the Board of Directors, and a co-facilitator of the Concord Brain Injury Support Group.

My own brain injury occurred at age 23 as the result of an unexpected accident. In September 2025, I was honored to be nominated for and accepted into the University of New Hampshire's Institute on Disability Leadership Series. Although I was excited, I also felt uncertain about whether I belonged in such a space. I was not a parent advocating for a child, nor someone born with a disability seeking to improve the world they had always known. My disability journey was new, and I was still learning how to navigate it.

Throughout the Leadership Series, we explored the history of the disability rights movement, the passage and ongoing evolution of the Americans with Disabilities Act (ADA), and the continuing work required to ensure equality, dignity, and visibility for all disabled people. During this time, I finally asked the question that had been weighing on me: Where do I fit in?

The answer was clear and empowering: You have walked in both worlds. That is your strength. This insight helped me recognize a pattern I had experienced repeatedly since my injury: being spoken over, spoken around, ignored, or addressed only through the able-bodied person accompanying me. These moments are not isolated—they are part of a broader issue faced by many people with disabilities.

To address this, I have launched a new website and initiative dedicated to raising awareness and amplifying the voices of those who have experienced similar treatment. <https://www.lookmeintheeye.net>.

The goal is simple: to collect stories, build visibility, and spark a campaign for meaningful change. I invite you to visit the site, share your experiences, and join this growing movement. Together, our voices can reshape the way the world sees—and speaks to—people with disabilities.



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THE MIDDLE PEOPLE PROJECT

What is Pacing?
By Jenn Williams

Whether you are talking to a clinician, at a support group, or checking out The Middle People Project website, the phrase “pace yourself” comes up often. Which truthfully can sound borderline offensive when you are newly injured and trying to figure out your new normal. But what does it actually mean to pace yourself?

The most basic explanation of pacing is going about your activities in a way that preserves your mental, physical, emotional, and/or spiritual energy. Pacing yourself is different for everyone and every situation. But a big part of successfully pacing yourself is listening to your body and mind.

When it comes to pacing, there are three major areas to consider: before activity, in the moment, and after activity. Activity can mean a single event or just how to tackle your day.

Before Activity

Have I done this before? If yes, how did it go? If not, do I know what to expect? What other responsibilities do I need to have energy for today? What are my options if I need a break?

In The Moment

Pause, close your eyes, and ask yourself, what do I need right now? Mentally scan each part of yourself, body, brain, and spirit. If I continue, will I be completely drained? Can a quiet break allow me to come back refreshed?

After Activity (generally 12-24 hours later)

Did I do too much, the right amount, or could I have challenged myself and done more? What were the challenges and successes? If there were challenges, what could be done differently in the future? Meaning, could I move more slowly, would the activity be better with less noise, etc.

Listening to your needs allows you to not only be prepared for similar activities in the future, but it can help with setting boundaries with yourself and others.

Let’s talk about breaks. For myself, I get overstimulated with extended periods of noise and activity. My brain just stops working, and if I try to push through it, I can get seizures. That’s why pacing is so important in my life. When this happens I need to remove as many stimuli as possible. This means no sound, no sight, and certainly no people; I call these “silent breaks”. I typically carry ear plugs with me and on occasion, an eye mask, so that I can remove myself and create a safe, silent break whenever I need it.

I want to share one other little trick that has worked for me. When I am in the moment feeling like I’m headed towards overstimulation or burnout, I try to count to ten in my head. If I can easily make it to ten, then I have more energy to give. If it’s a little slower and challenging, then it’s time for a break. If I can’t reach ten at all, then I overdid it and need to rest immediately. This may not work for everyone, but it has saved my brain on several occasions.

Knowing what you need and being prepared is one of the kindest things you can do for yourself.

To learn more about the Middle People Project, please visit www.middlepeopleproject.org.
Team MP: Jenn Williams, David A. Grant, Sarah Gaffney

BISHOP’S CHARITABLE ASSISTANCE FUND

If you are under 22 or over 60 years or age and in need of financial assistance the Brain Injury Association of New Hampshire may be able to help. Through a \$5,000 grant received from the Bishop’s Charitable Assistance Fund (BCAF) eligible and approved applicants may receive up to \$500.00. Some of the items/services that we will consider funding are: rent, food, oil, home modifications, assistive technology, specialized equipment, medical/dental, and transportation. All approved requests are awarded one time only. Once BCAF funds have been dispersed, applications or requests for funds will no longer be accepted. Please contact the BIANH office for an application -- 603-225-8400.



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- Jenna N. Northeast Rehab Patient



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SEACOAST BRAIN INJURY SUPPORT GROUP

Meeting the 1st Tuesday of the month
12:00 PM - 1:00 PM

NEW LOCATION

HCA Healthcare, Portsmouth Regional Hospital
 155 Borthwick Avenue, West Building, 3rd Floor, Room #333
 Portsmouth, NH

for additional information, please contact BIANH - mail@bianh.org or call 603-225-8400

INDEPENDENT SERVICE COORDINATION/ CASE MANAGEMENT

The Brain Injury Association of New Hampshire offers these **Conflict Free/Conflict of Interest Free** 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!

BIANH is a non-profit, advocacy organization founded by New Hampshire Families in order to strengthen individual and state-wide systems.

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

SUPPORT GROUPS IN NEW HAMPSHIRE

Revised Summer 2026 —Times and places may change without notice—please call in advance

VIRTUAL SUPPORT GROUPS

The Brain Injury Association of New Hampshire will be hosting two monthly online support groups that will be held through the ZOOM Virtual Platform and six in-person support groups. All are welcome to attend.

Virtual Statewide BIANH Brain Injury Caregivers Support Group, Caregivers Only

Meets the 4th Tuesday of the month, 6:30 – 7:30 PM

To Join Meeting: <https://us02web.zoom.us/j/84489789058>

IN PERSON SUPPORT GROUPS

Concord Brain Injury Support Group – Meets the 3rd Tuesday of the month, 6:30—7:30 PM
Granite State Independent Living, 21 Chenell Drive, Concord, NH

Conway Brain Injury Support Group –Meets the 1st Monday of the month, 6:00—7:30 PM
Journey Church, 15 Hutchins Drive, Conway, NH

Greater Atkinson/Derry Brain Injury Support Group - Temporarily on hold at this time.
Community Crossroads, 8 Commerce Drive, Unit 801, Atkinson, NH

Keene Brain Injury Support Group – Meets the 3rd Sunday of the month, 1:30—3:00 PM
Southwest Community Services, 49 Community Way, Keene, NH (use door facing the Food Co-Op Building)

Manchester Clubhouse Brain Injury Support Group – Meets the 3rd Wednesday of the month, 4:30 PM – 5:30
Manchester Clubhouse, 60 Rogers Street, Suite 204, Manchester, NH

Peterborough Brain Injury Support Group –Meets the 1st Tuesday of the month, 6:00—7:30 PM
Monadnock Community Hospital, Conference Rooms 1 & 2—452 Old Street Road, Peterborough, NH

Seacoast Brain Injury Support Group - Meets the 1st Tuesday of the month, 12:00—1:00 PM
HCA Healthcare, Portsmouth Regional Hospital, 155 Borthwick Avenue, West Building, 3rd Floor, Room #351, Portsmouth, NH

If you have any questions, please contact BIANH — mail@bianh.org or call at 603-225-8400. Visit www.bianh.org for any calendar changes.

APHASIA:

Exeter: Aphasia Support Group for the Seacoast of NH
Meets the first Thursday of the Month, Meeting Time: 11:00 – 12:00 PM
Exeter Hospital, Conference Room 1 North, 5 Alumni Drive, Exeter, NH
Contact: Kate Phelps at 603-778-6548, kphelps@ehr.org

Nashua: St. Joseph Hospital Outpatient Rehab Clinic, 75 Northeastern Blvd, Nashua,
2nd Tuesday of the month, 4:00 PM —5:00 PM
Contact: Lesley Renzi
Phone: (603) 595-3076, ext. 63608

BRAIN INJURY & STROKE

Concord: Encompass Health Rehab Stroke Support Group, 1st Wednesday of the month, 10:30 – 11:30 AM, Encompass Health Rehabilitation Hospital at Concord.
Contact: Nick Allard, 603-226-9840

Dover: VIRTUAL Wentworth Douglass Hospital Stroke Support Group. 3rd Thursday of every month; 2:00-3:00 PM. Call or email Lindsey to receive the Zoom link.
Contact: Lindsey Wyma Phone: (603) 609-6161 x2731
Email: Lwyma@mgb.org

Durham: UNH Occupational Therapy Department, Hewitt Hall, Room 139, Durham, NH. Meets Tuesdays; 12:30—3:15 PM
Contact: Dr. John Wilcox, OTD for semester start up
Phone: (207) 314-3180 or email john.wilcox@unh.edu

Kennebunk, ME: Currently Suspended - 1st Tuesday of the month, 3:00 PM, Upstairs small conference room, RiverRidge Neurorehabilitation Center, 3 Brazier Lane, Kennebunk, ME—Phone: (207) 985-3030 ext: 326

Lebanon: VIRTUAL Stroke Support Group, 1st Friday of even-numbered months (Feb, Apr, Jun, Aug, Oct, Dec), 10:00—11:30 AM, DHMC Aging Resource Center, Lebanon, NH **Contact:** Jennifer Larro, Aging Resource Center Phone: (603) 653-3460

Nashua: St. Joseph Hospital Stroke Support Group
Meets the first Monday of the month, 5:30—6:30 PM
St. Joseph Hospital Inpatient Rehabilitation Unity Community Road
Email: gmorris@covh.org

Portsmouth: VIRTUAL Northeast Rehabilitation Hospital Stroke Support Group, Meets the Second Tuesday of the month, 4:15-5:00 PM. Registration at StrokeSupportGroup@northeastrehab.com

Portsmouth: Northeast Rehabilitation Hospital at Pease Stroke Support Group, Meets the Third Wednesday of the month, 4:00- 5:00 PM, Northeast Rehabilitation Hospital, 1st Floor, Pease, Portsmouth
Contact: Strokesupportgroup@northeastrehab.com

Salem: Virtual Northeast Rehab Mild Brain Injury Support Group; Meets the 2nd Wednesday of the month, 4:00 PM – 5:00 PM
Email: bcapobianc@northeastrehab.com to RSVP

BRAIN TUMOR:

Derry: Appointment Only Due to COVID-19.
Contact: Urszula Mansur
Phone: (603) 818-9376

CAREGIVER:

Portsmouth: Portsmouth Regional Hospital's Caregivers Support Group, Meets the last Wednesday of the month, meeting time: 5:00 – 6:00 PM, Main Hospital building, classroom 4, 333 Borthwick Avenue, Portsmouth
Contact: PRHPSTROKESUPPORT.NH@HCAHEALTHCARE.COM

BIANH Virtual Brain Injury Caregivers Support Group

Fourth Tuesday of the month
Time: 6:30 – 7:30 PM
Contact: 603-225-8400
To Join Meeting: <https://us06web.zoom.us/j/84489789058>

2026 DONORS

Thank you to all of our members and donors. This list reflects donations received from January 1, 2026 to present.

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