



# HEADWAY

NEWSLETTER



IN THIS ISSUE!

2023 BIANH Conference Features Tod and Tim O'Donnell .....	Page 1	40th Annual Golf Tournament .....	Page 11
President & Executive Director Messages.....	Page 2	A Better Nights Sleep .....	Page 12
2023 BIANH Conference Features Tod and Tim O'Donnell (cont'd).....	Page 3	Warriors @ 45 North .....	Page 13
39th Annual Brain Injury and Stroke Conference - SAVE THE DATE .....	Page 4	Virtual Brain Matters 2023 .....	Page 14
Conference at a Glance .....	Page 5	Disability Rights Center .....	Page 15
Krepels Road Race .....	Page 6	Brain Injury and Opioid Overdose .....	Page 16
Spotlight on Krepels .....	Page 7	Youth Survivors Network .....	Page 17
INSIGHTS: Let It Begin With Me: The Choice to Advocate .....	Page 8	We Need YOUR Support Now More Than Ever .....	Page 18
NCIL SPRINGS AHEAD!!.....	Page 9	Support Groups in New Hampshire .....	Page 19
Walk-by-the-Sea .....	Page 10	Members and Donors .....	Page 20

The *Headway* newsletter is NOW entirely online!

The *Headway* newsletter is now produced only in electronic form. If you would like to continue to receive our Headway newsletter issue electronically, please submit your email to [mail@bianh.org](mailto:mail@bianh.org).

## 2023 BIANH Conference Features Tod and Tim O'Donnell

By Sarah Kilch Gaffney

BIANH's 39th Annual Brain Injury & Stroke Conference will take place on Wednesday, May 10, 2023, at the Grappone Conference Center in Concord, NH. Father and son duo Tod and Tim O'Donnell will give their keynote titled "Embracing Change with Tod and Tim O'Donnell" and share the story of Tod's brain injury and the important role his family played in his recovery.

The 2023 conference will feature five tracks, including a special track on Substance Use Disorder & Brain Injury featuring sessions on "SUD 101: Levels of Care, Diagnosis and Effective Management," "How Opioids, Such as Heroin, Work on the Brain," and "Brain Injury: The Silent Partner in Substance Use Disorder & Strategies to Assist Those Impacted." Additional sessions will cover topics including craniosacral therapy, spasticity management, cognitive rehabilitation, pediatric brain injury management, and self-care strategies for survivors, among others.



In 2011, Tod O'Donnell lost consciousness while at home, and he hit his head on a bureau and bed railing as he fell to the floor. His wife Gail called 911 and immediately started administering CPR. Gail's quick actions, combined with their close proximity to the hospital, saved Tod's life that day, but the challenges he and his family would face were only beginning. Tod underwent a craniotomy, but the bleeding was extensive, he was in a coma, and his doctors were uncertain whether he would ever wake up. Tod would eventually spend nine days in a coma, and 82 days at Spaulding Rehabilitation before returning home.

Tod and Gail, who have been married for nearly 48 years, reside in Massachusetts. They are the proud parents of four grown children: TJ, Erin, Tim, and Angela, and they have eight grandchildren. Tod's family is also his extraordinary support system. "I would not have survived the brain injury

*Continued on Page 3*

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## **PRESIDENT'S MESSAGE**

### **UNFORESEEN CONSEQUENCES**

*by Robin O. Kenney, Ed.D.*



In November of 2009, the I Unit of New Hampshire Hospital closed its doors. The unit had been established in 1992 by Dr. Tom McAllister as a Neuropsychiatry in-patient resource, specializing in the diagnosis and acute care of patients with traumatic and acquired brain conditions, as well as those with intellectual and developmental disabilities.

These are among the most challenging patients to treat, and working through an inter-disciplinary team approach, the I Unit quickly became an essential component of the continuum of care here in New Hampshire. The patients seen there often presented with complex conditions and the team took great care to see that medications prescribed were followed through to their optimum dosage and efficacy levels. Because the Unit was operated under the umbrella of Dartmouth Medical School, patients were afforded the benefits of "best practices" in the field of Neuropsychiatry.

Not only was the Unit a successful treatment resource, but was also instrumental in allowing patients to return to their community settings after completing stays there. In some cases, the Unit teams were able to follow the course of patients' progress into the community, thereby insuring consistency of treatment practices. This made it possible for patients to live in the least restrictive settings possible and, in many instances, reduced the need for institutional care.

Additionally, the very existence of the I Unit gave community providers and vendors the confidence to accept individuals with very complex needs, secure in the knowledge that, should an individual require urgent short-term mental health intervention, the Unit was there to provide it.

It continues to be perplexing as to why the I Unit was closed, as the consequences of this decision are still being felt around the state. The closure forced providers to return to institutionalization – a treatment alternative that has tragically proven to be unsustainable, as we saw with the Lakeview experience in 2012. Once Lakeview closed, the search for alternative placements has led to patients being transferred out of state – some as far away as Florida. While many of these programs have provided good care, it should not be necessary to send New Hampshire's most vulnerable citizens far from their homes and any family supports they may have.

The bottom line is that the BIANH is committed to working with policy-makers in Concord to advocate for the restoration of a New Hampshire-based resource comparable to the I Unit. We look forward to participating in that important dialogue.

## **EXECUTIVE DIRECTOR'S MESSAGE**

### **Concussion Awareness Now**

*by Steven D. Wade, BIANH Executive Director*



About one year ago, the Brain Injury Association of America joined with Abbott Laboratories of Illinois to form a coalition to change the way society views concussion. BIAA has brought together almost twenty organizations, including the Wounded Warrior Project, National Council on Aging, and American Physical Therapy Association to maximize impact.

Key Messages:

- Over half of people who suspect they have a concussion never get it checked. They walk it off and tough it out (which can have serious negative health consequences).
- Concussions are, simply put, an injury to the brain. The short- and long-term consequences range from annoying to serious. And yet too often, a concussion is treated more like scraped knee. An injury to your brain deserves a diagnosis and proper care for the best possible outcomes. You can't treat what you don't know.
- Concussions affect everyone – from parents, children, older adults, veterans, athletes, and

individuals facing intimate partner violence – which is why we are focused on collaborating with organizations that reach these diverse audiences.

- Experts have long estimated that concussions are under-reported, and a new survey conducted by Concussion Awareness Now confirmed that over half of people who suspect they have a concussion never get it checked. This is because many do not recognize the signs of a concussion and underestimate the severity of this injury.
- Concussions can happen from almost any accident – think about something such as a slip on ice, a fall off a ladder, whiplash from a car crash, an assault, or a collision on the playing field. While most people recognize concussion risk in sports, that's only a small part of the story. About half of all concussions are a result of a fall. The second leading cause is car accidents.

**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: 2023 BIANH Conference Features Tod and Tim O'Donnell*

without the support of my wife and kids," Tod shared.

Tim O'Donnell, Tod and Gail's youngest son, is an Emmy-nominated filmmaker and the director of a new documentary about Tod's brain injury journey, *The House We Lived In*. The film was made over the course of 10 years, and through the film, Tim takes a look at memory, family, and addiction, all while chronicling his father's brain injury recovery. Tim's work has appeared on ESPN, NBC, PBS, OutsideTV, the Sundance Film Festival, and at events around the world.

Tod is now a brain injury advocate, and he is the subject of *The House We Lived In*, as well as the inspiring short ESPN film *No Quit*. Tod has spoken widely, including audiences at Spaulding Rehabilitation, where he received much of his rehabilitation care; Harvard Medical School; Supportive Living, Inc; the Krempels Center in Portsmouth, NH; and ESPN.

Regarding the challenges he has faced, Tod shared, "I never look at the negatives because the older we get, things happen. From my perspective, it's all about "no quit." No matter what you go through, you have to keep moving through and forward." Adjusting to his new normal has taken years, and lots of practice, but Tod has figured out a system that works for him. "I appreciate every day. If I get tomorrow, it's like a present."

For Tim, the creation of the film really honors what his family went through. "Sharing stories was a huge part of how our family got through this, and I want to give caregivers and brain injury survivors a vision of where they can go." Tim spent a decade making the film, and the passing time has given both he and his family the energy and emotional space to see the experience in a different light. "Being in the brain injury community can be so beautiful, but also so hard. Finding another person in a similar situation and

finding your community and your people can be so important."

During their conference keynote, Tim and Tod will talk about the unique nature of *The House We Lived In*. "As a documentary that spans ten years, you see all these changes emotionally, mentally, and physically," Tim said. "It's a survivor and caregiver perspective coming together with back-and-forth conversation, and it's motivational and insightful."

To learn more about Tim and Tod O'Donnell and the film *The House We Lived In*, please visit their website here.

We hope you'll join us on Wednesday, May 10, 2023, for BIANH's 2023 Brain Injury & Stroke Conference to hear Tim and Tod share their remarkable story, the journey of the making of *The House We Lived In*, and the power of family in the face of brain injury.

CEUs and certificates of attendance will be available. To explore presenters and sessions, view the full conference program or to register, see page 4&5 of this newsletter. For questions about the conference, please contact Lori Sandefur at [lori@bianh.org](mailto:lori@bianh.org).



## The Bishop's Charitable Assistance Fund

If you are under 22 or over 60 years of age and in need of financial assistance the Brain Injury Association of NH may be able to help. Through a \$5,000 grant received from the Bishop's Charitable Assistance Fund (BCAF), Roman Catholic Diocese of Manchester, 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 Brain Injury Association of NH office for an application at 603-225-8400.



# New Hampshire Brain Injury & Stroke Conference

the  
HOUSE  
WE LIVED IN



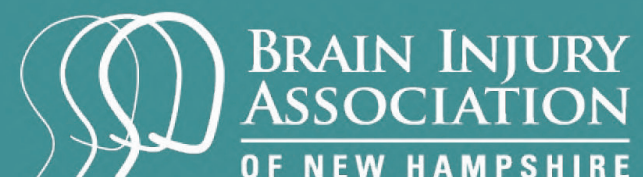
**Tod & Tim O'Donnell**  
Keynote Speakers

**Wednesday, May 10, 2023**

Grappone Conference Center, Concord, New Hampshire



To Register:  
<https://bianh.salsalabs.org/2023bisc>





# Conference at a Glance

Level of Knowledge for Attendees: BEG - Beginner INT - Intermediate ADV - Advanced  
 Topic is geared towards: PRO-Professional SUR-Survivor/Family ALL- Everyone  
 Sessions approved by ASHA are highlighted in yellow

**8:15** *Welcome*  
**8:30-9:30** *Embracing Change with Tod and Tim O'Donnell (brain injury survivor and filmmaker) of the award winning documentary film "The House We Lived In"*

TRACK A	TRACK B	TRACK C	TRACK D - SLP	TRACK E
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<b>Session I</b> 9:45-10:45	Advances in Brain Injury Markers  Francesca Gilli, PhD, MS  ADV/ALL	From Necessity to Opportunity: The Impact of an Online Community Program for Brain Injury Survivors  Jay Lancaster MS, CCC-SLP Kelly Redwine DePierre MS, OTR/L, CBIS  BEG/ALL	SUD 101: Levels of Care, Diagnosis and Effective Engagement  Peter Fifield, EdD MLADC, LCMHC  BEG/PRO	<b>Somatosensory Symptoms After BI: Using Tracking to Help Support Cognitive Rehabilitation</b>  Katya Bowen, MS, CCC-SLP, CBIS  ADV/PRO	Building Resilience and Strategies for Self-Care  Donna M. White RN, PhD, CARN, CADC II, LADC I  BEG/ADV/ALL
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<b>10:45-11:00</b>	<b>Break-----Please visit Exhibitors -----</b>			
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<b>Session II</b> 11:00-12:00	Exercise as Medicine: The Benefits of Cardiovascular Fitness for Stroke Survivors  Sarah Durante, MD, FAAPMR  ADV/ALL	Craniosacral Therapy and Brain Injury: An Experiential Introduction  Sarah Chevrefils, OTR/L, CBIS, NTMTC; Michelle Smith, PT  INT/ALL	How opioids, such as heroin, work on the brain  Daniel Seichepine, PhD  BEG/ALL	<b>Breath Practices: Easy and accessible activities for self-care</b>  Cheryl M. Lundgren, MS, CCC-SLP  BEG/ALL	Survivor Panel  Sandra Chandler BS, SLP-A George Matthews  BEG/ALL
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<b>12:10 - 1:15</b>	<b>Lunch---- Please visit Exhibitors-----</b>			
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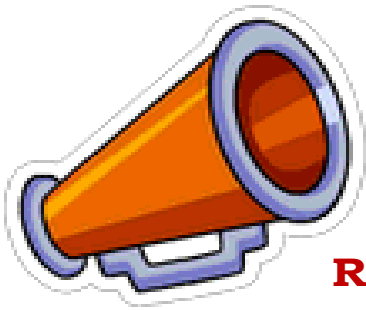
<b>Session III</b> 1:20-2:20	Spasticity Management: Evidence and Ideas  Lisa Doyle, PT, DPT, MS, NCS  ADV/PRO	Expanding One's Environment: An Introduction to Virtual Reality  Charles Douglas Simmons, PhD, OTR/L, FAOTA, FNAP  BEG/ALL	Brain Injury: The Silent Partner in Substance Use Disorder & Strategies To Assist Those Impacted  Krystal L. Chase, LICSW, CBIS  BEG/ALL	<b>Innovating Cognitive Rehabilitation by Understanding How the Injured Brain Relearns</b>  Amy Ramage, PhD, CCC-SLP  BEG/ALL	Depression, Suicide and Concussion: Prediction, Mechanisms, and Management  Shawn R. Eagle, PhD, ATC, CSCS  ADV/ALL
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<b>2:20 - 2:40</b>	<b>Break-----Please visit Exhibitors -----</b>			
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<b>Session IV</b> 2:45-3:45	Assessment and Management of Mild Traumatic Brain Injury in the Pediatric Population  Suzanne Vance, MS, RN, CPNP	Assessments and treatments for "dizziness"  Hannah Zajac, PT, DPT, NCS	Being an Expert Witness in a Brain Injury Lawsuit: Helping Clients with Brain Injury Receive an Equitable Settlement  Donald Robin, PhD, CCC-SLP	<b>Error Detection and Correction in Object Naming in Individuals with Aphasia</b>  Anne O'Donnell, MS, CCC-SLP	(continued) Depression, Suicide and Concussion: Prediction, Mechanisms, and Management  Shawn R. Eagle, PhD, ATC, CSCS
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The Greater Atkinson/Derry Support Group  
For Survivors of Acquired Brain Disorder  
and their Caregivers  
Will be resuming in person meetings again



**EXTRA!!  
EXTRA!!**

**READ ALL ABOUT IT!!!**

We are moving from ZOOM to In Person meetings!!!

On April 11, 2023 we will be resuming in person support group meetings from 6:00PM to 7:30PM

At Community Support offices

8 Commerce Drive, unit 801

Atkinson, NH 03811

To register for the meeting please contact Ellen Edgerly Email:

ellen@bianh.org or 603.834.9570

There will be light refreshments served

This group meets on the second Tuesday of every month from 6:00 to 7:30 PM and is hosted by the Brain Injury Association of NH

### NH Brain and Spinal Cord Injury Advisory Council

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

**NOTICE  
OF  
PUBLIC  
HEARING**

## Statewide Brain and Spinal Cord Injury Advisory Council PUBLIC HEARING ON UNMET NEEDS

**Date:** **Wednesday, June 14, 2023**

**Time:** **3:00 pm – 5:00 pm**

**Location:** **Granite State Independent Living  
21 Chenell Drive, Concord, New Hampshire**

**Online Registration:** <https://bianh.org/bsciac-registration#fe44fb70-a282-40df-bcfc-e793ed41087d>

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

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

We look forward to meeting you and learning about your questions and concerns.

Light refreshments will be served.

For additional information contact Ellen at 603.834.9570 or e-mail address [Ellen@bianh.org](mailto:Ellen@bianh.org).

# KREMPELS ROAD RACE



**CONTACT:** Anne Lynch

alynch@krepelscenter.org

603-570-2026 ext. 231

Cisco Brewers Portsmouth 5K Benefits Brain Injury Survivors



PORTSMOUTH: Registration is filling up for the 26th annual Cisco Brewers Portsmouth 5K on May 28th. Located at Cisco Brewers Portsmouth on Pease in Portsmouth, NH, the race starts at 11am on the

Sunday of Memorial Day Weekend, and attracts over a thousand runners/walkers, as well as a hearty crew of future racers for the kids' fun run at 10:15am. Part of the Seacoast Road Race Series, the 5K course is flat and fast; great for runners intent on setting their personal record. Register for the race at [krepelscenter.org/5K](http://krepelscenter.org/5K).

All participants will be treated to a delicious lunch catered by Cisco Brewers Portsmouth, along with live music, kids' activities and more. BBQ tickets for non-racers are available to purchase at [krepelscenter.org/5K](http://krepelscenter.org/5K).

Looking for the ultimate VIP experience? The race's exclusive "100 Club" embodies superior convenience and luxury for participants, including up-close parking, special treats, massages, a private port-a-let, and patio seating. Registration for the VIP 100 Club is \$100, and there are a limited number of tickets available at [krepelscenter.org/5K](http://krepelscenter.org/5K).

A virtual option will continue in 2023, kicking off on Sunday, May 21st for a full week of fun. Participants can choose either the VIP or Standard virtual race option when registering at [krepelscenter.org/5K](http://krepelscenter.org/5K).

Since 2004, this popular race/walk has benefited Krempels Center, a local nonprofit whose mission is to improve the quality of life of people living with brain injury. Proceeds from this event go directly towards programming that helps brain injury survivors with skill building and social connection. Over 80% of members receive financial aid from Krempels Center to attend programs, with 50% attending for free. In total, the race has brought in over a half a million dollars to Krempels Center, significantly impacting the quality of life of brain injury survivors and families in our community.



## SPOTLIGHT ON KREMPELS

### March was Brain Injury Awareness Month: Our Members are more than their Brain Injuries.

For Brain Injury Awareness Month, Krempels Center staff and interns pulled out all the stops to create meaningful public outreach opportunities and supporting materials for our members to provide education and fight stigma about brain injury. Supported by the BIAA's #morethanmybraininjury campaign; we went to work to make sure that our members voices could be heard, and their stories could be told.

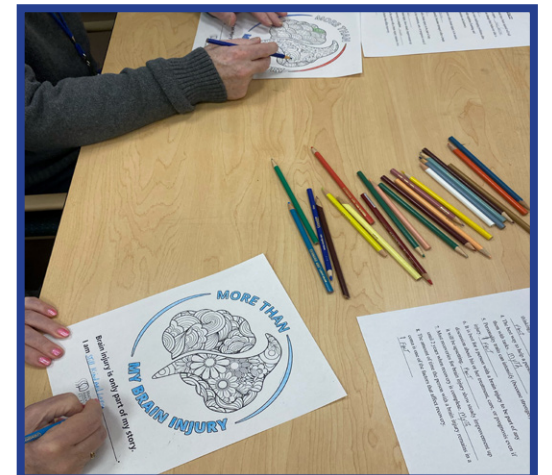
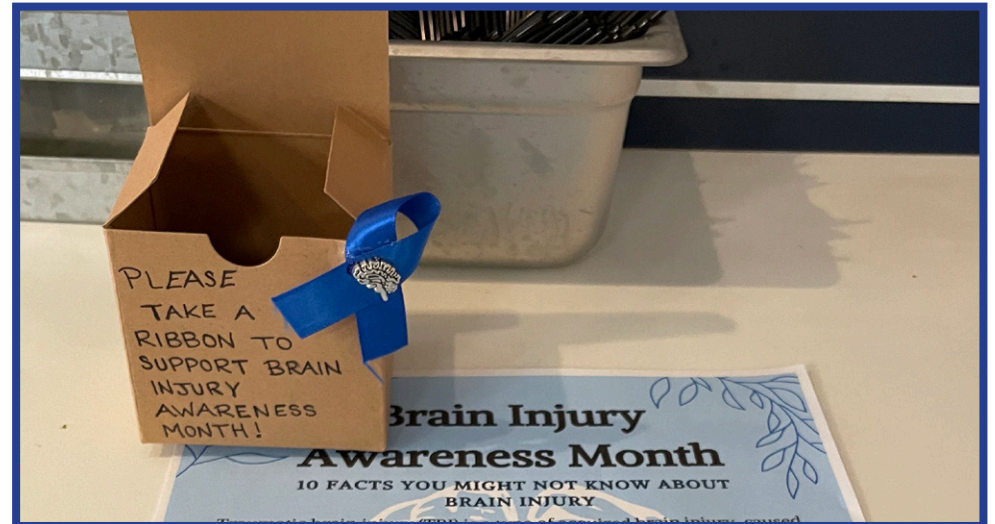
Krempeles Center daily groups are evidence-based programs designed to promote self-determination and ongoing skill development for our members. One recurring program called Community Education, enables members to identify opportunities for educating the public at large about living with brain injury. The group addresses myths and facts, ongoing stigma, and encourages members to share their lived experience as brain injury survivors. By having our member survivors actively participate in creating educational materials, the resulting content is far more meaningful and compelling.

In the first weeks of March, the Community Education group met and discussed strategy. Members, interns, and staff worked collaboratively to determine what would be the best way for members to reach the public directly, and it was decided that staying with the BIAA's theme of "*more than my brain injury*," we should create a basic script to follow and record short videos of members telling us exactly why and how they are more than their brain injuries. The solo videos are available on the Krempeles Center Facebook and on Youtube pages.

Another opportunity for members to reach out to the public in March was the return of a group that had been missing from the Krempeles Center roster since the pandemic: Community Outing. It has been two years since Community Outing has been a recurring group opportunity at Krempeles Center. The Community Outing group, much like the Community Education group, created some materials that could be distributed to the area businesses they'd be visiting. A flyer titled "10 facts you might not know about Brain Injury" as well as a blue brain injury supporter pin were created in house by the members, interns, and staff collaboratively. On March 10th the first outing visited businesses in Portsmouth's Market Square and distributed the materials.

Krempeles Center and BIANH as a chapter of BIAA, have always known that brain injury survivors are more than their brain injuries. Our members are mothers, fathers, sons, daughters, volunteers, woodworkers, artists, hikers, bikers, and so much more. We're proud that during Brain Injury Awareness Month, Krempeles Center members were able to share themselves with the world and show that they are #morethanmybraininjury.

 **Krempeles Center**  
New Life After Brain Injury





# INSIGHTS

Life Perspectives From a Brain Injury Survivor, David A. Grant



## Let It Begin With Me: The Choice to Advocate

Another Brain Injury Awareness Month is now behind us. I'm pretty experienced in living through Brain Injury Awareness Month, as this year marks my 13th consecutive awareness month as a brain injury survivor. This brings to mind yet another poignant reminder: Every March will mark another consecutive year. Once you are in the brain injury club, like it or not, you have a lifetime membership.

While I can attest to the fact that recovery is indeed lifelong (at least so far), once a brain injury survivor, always a brain injury survivor. There is no end date or no future date circled on a calendar that I can look forward to when I'll officially be recovered. In *"The TBI Guide"* by Dr. Glenn Johnson, he notes that, never in decades of clinical practice working with brain injury survivors, has he seen a single case of someone returning to their pre-injury capability.

Truth be told, this never discouraged me. Early on, I began to fight back to a new normal that I hoped would be an enjoyable, sustainable, and relatively happy life. I can recall saying years ago that if I could get back to even 90%, I'd be one happy guy.

Fate and lots of hard work and discipline have given me just that. Now in year thirteen post-injury, I consider myself to be blessed beyond measure. I've come to a point of peace with my limitations. Like crayons color a coloring book, my brain injury quirks color my life. I can say or do things rather unexpectedly thanks to the loss of a filter or two. I have a heretofore unknown purpose in my life: to advocate for those who need a voice. My wife Sarah and I have a happy, healthy, and love-filled home. I am able to work, and just last month I published my newest book: *"Thoughts of Hope: Daily Meditations for Ordinary People Affected by Brain Injury."*

Life is far from perfect, but looking at life today compared to the train wreck that my life was during the early years after I was struck down by a teenage driver while cycling, life is as close to a cakewalk as I could hope for.

Let's circle back to Brain Injury Awareness Month. While many people might be tempted to pat each other on the back for another job well done, my opinion is most likely a bit different than many. Long before my injury, I was a news junkie -- a trait that I still have today. These days I start the day watching thirty minutes of national news. I follow that up by reading local news here in New Hampshire on my WMUR app. During the day I open my *USA Today* app a few times to see how the outside world is doing, and evenings find me watching a bit of local news, and when time permits, the national news. I take pride in being well-versed in current events.

In March, my news feed online was chock-full of content about Brain Injury Awareness Month. Because of my backstory, the internet knows of my interests and "feeds" me related articles. But the moment I step outside of that silo, all references to Brain Injury Awareness Month completely disappear. Over the course of the month, I didn't see a single reference to it. It's not that there were none. I'm sure there were. But as an average consumer of news, using a wide range of media outlets, I would never know about Brain Injury Awareness Month.

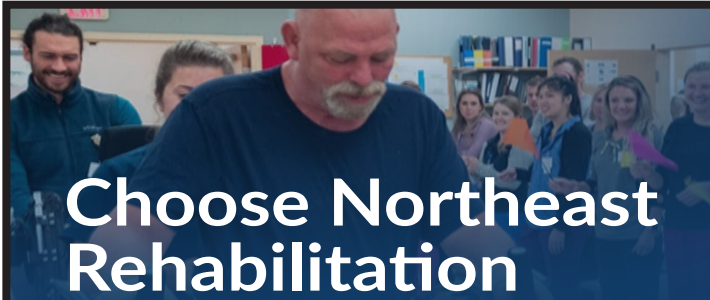
I'm wise enough to know that I am not beholden to the power to change the world, but I have to ask: Could more be done to publicize brain injury to those outside of

our community? There are no easy answers or quick fixes to this, and I am in no way discounting the work that others do. Rather, I am pondering what more can be done. There are millions of us out there living as brain injury survivors.

Back in the 1970s, my parents made the decision to send me to a private high school for the education that it offered, something I remain grateful for. On Friday mornings, I would skip out on second block to attend mass in the auditorium. Some may think that a bit off as I was one of only three non-Catholics in my class. But looking back, one of those early lessons, not taught in a classroom, was a simple five-word statement about how to live life.


"Let it begin with me."

As a brain injury survivor with a voice, I ask, why not? Why not let it begin with me. And I challenge any and all who are part of our community: reach beyond the familiar, dare to bring up brain injury at inconvenient times. You have the power to help end the silence that still remains regarding brain injury.




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# NCIL SPRINGS AHEAD!!

The winter seems to be behind us, the snow is beginning to melt with the last of winter packing a powerful punch. The NCIL residents are looking forward to more outside activities especially in preparation for the BIANH *Walk by the Sea & Picnic* in June. The Barrington residents already have many new ideas for fundraising of this worthy cause while hoping for a beautiful day to walk at Hampton Beach.

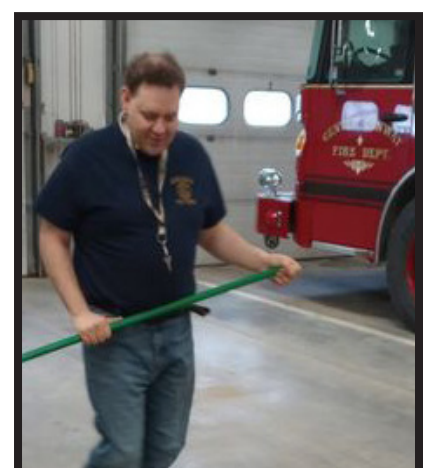
Recent activities for residents still include attending the North Conway Community Center for exercise, games, and camaraderie with friends. Volunteering at the Gibson Center has many residents delivering Meals on Wheels while bringing a smile to those who enjoy a daily visit to include conversation and kindness. One of the most exciting new volunteer positions is with the Conway Fire Department where Nick H. has been a welcome addition to the fire station, he does just about whatever is asked of him whether it is sweeping the floors or cleaning the trucks.

This past winter has found that many residents who enjoy seeking new recipes, shopping for ingredients, and preparing a healthy meal or dessert. NCIL House Coordinator Mike B. has adopted a theme for each month to include healthy habits, the March theme was titled “Marching toward wellness,” The residents sought healthy recipes, healthy exercise, and two residents have quit smoking!

NCIL has continued to offer employee morale incentives with many great ideas that have been put in place, it has been wonderful to hear the creative ideas. The monthly “bucket drawings” were gift certificates to employees. Tasks for the drawings included: chore list completion, community participation notes, and gaining community access hours. Another added incentive for our employees of 5 years or more of dedicated service was a beautifully embroidered North Country Independent Living jacket.

Looking ahead toward nicer weather the NCIL residents are planning weekly bonfires, hiking, and outdoor concerts as well.

HAPPY SPRING!




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## Walk by the Sea to Support Individuals Living with Brain Injury

Sunday, June 4, 2023

### 2023 Sponsorship Opportunities

#### Why should you be a sponsor?

The annual walk has gone from being just a fundraiser to a favorite time for brain injury survivors, family members and the whole brain injury community to come together to celebrate our accomplishments and share a fun day. Your sponsorship will go a long way to help us continue to provide a fun event for all and show your support!

#### T-shirt Sponsor - \$3500

(only one t-shirt sponsorship available)

Includes:

Logo on t-shirt

Signage at walk

Corporate representative to address participants

Prominent recognition in post event newsletter

Free business card ad in post event newsletter

Logo & link on Walk registration page

#### Walk Thank You Sponsor - \$1500

Includes:

Logo on t-shirt

Placement on thank you post card sent to all walkers

post-event

Prominent recognition in post event newsletter

Logo & link on Walk registration page

#### Annual Picnic Sponsor - \$2000

(Sponsorship of post walk picnic lunch)

Includes:

Logo on t-shirt

Signage at walk

Prominent recognition in post event newsletter

Free business card ad in post event newsletter

Logo & link on Walk registration page

#### Morning Coffee Sponsor - \$750

Includes:

Logo on t-shirt

Recognition in post event newsletter

Logo & link on Walk registration page

Signage at Coffee Area

#### Prize Sponsor - \$500

Includes:

Logo on t-shirt

Recognition in post event newsletter

Logo & link on Walk registration page

Please contact Lori Sandefur for your sponsorship - [lori@bianh.org](mailto:lori@bianh.org) or (603) 568-8817



# SAVE THE DATE!

## 40th Annual Golf Tournament

Wednesday, August 9, 2023

The Oaks Golf Course  
100 Hideaway Place  
Somersworth, NH  
*Northeast Rehabilitation Hospital Network*  
Title Sponsor

For more information on sponsorship or team participation, contact [renee@bianh.org](mailto:renee@bianh.org)

### INTERESTED IN GOLF SPONSORSHIP?

**Presenting Sponsor — \$5,000 (2 available)**

Two foursomes of golfers  
Display banner at event (sponsor provides banner)  
Event program advertising – premium location – front inside cover or back inside cover  
One-year representation on Brain Injury Association Veterans website as a supporter of veterans living with traumatic brain injury and link to your website  
50 complimentary raffle tickets

**Corporate Sponsor — \$3,500**

Foursome of golfers  
Full page advertisement in the event program  
One-year representation on Brain Injury Association Veterans website as a supporter of veterans living with traumatic brain injury and link to your website  
25 complimentary raffle tickets

**Team and Hole Sponsor — \$2,000**    **OR**

**Cart Sponsor — \$2,000**

Each of the above include:  
Foursome of golfers  
Signage on the course  
One-half page advertisement in event program booklet  
Six-month representation on the BIANH website as a supporter of veterans living with traumatic brain injury and link to your website

**2023 — 40th Anniversary Golf Shirt Sponsor \$2,000**

Foursome of golfers  
Signage on the course  
One-half page advertisement in event program booklet  
Six-month representation on the BIANH website as a supporter of veterans living with traumatic brain injury and link to your website

**Team Sponsor — \$1,500**

Foursome of golfers  
One-half page advertisement in event program booklet  
Six-month representation on the BIANH website as a supporter of veterans living with traumatic brain injury and link to your website

**Other Sponsorship (please specify) — \$1,500**

- Air Cannon Shot Sponsor
- Closest to Pin Sponsor
- Driving Range Sponsor
- Longest Drive Sponsor

Each of the above include:

- Signage on course
- One-half page advertisement in the event program
- Two tickets to prize/awards luncheon

**Hole Sponsor — \$750**

Signage on course  
One-quarter page advertisement in event program booklet  
Two tickets to prize/awards luncheon

Contact Renee Fistere—[renee@bianh.org](mailto:renee@bianh.org) or 603-225-8400



## A BETTER NIGHT'S SLEEP...

By Dr. Denise M. Pickowicz, BS, DC, FIBFN-FN, CBIS, DACNB (Board Certified Chiropractic Neurologist, Fellow of the International Board of Functional Neurology, Certified Brain Injury Specialist and Owner of NH Concussion Center)



Did you know that about 20 years of an individual's lifetime is spent sleeping, but that most of us don't sleep for the recommended minimum of 8 hours a night? Common sleep mistakes mean we don't reap the numerous health benefits of sleep, or perform to the best of our ability. The demands and expectations of our modern society have placed increasing demands on our time, and more than ever people are making up for those demands by cutting back on sleep.

At the same time, it is becoming increasingly clear that the cost of insufficient sleep is much higher than most people realize. Scientific research is revealing how sleep loss, and even poor-quality sleep, can lead to an increase in errors at the workplace, decreased productivity, and accidents that cost both lives and resources. Awareness can help you improve your sleep habits and in turn, your safety. Lack of sleep exacts a toll on perception and judgment. In the workplace, its effects can be seen in reduced efficiency and productivity, errors, and accidents. Sometimes the effects can even be deadly, as in the case of drowsy driving fatalities. We all know that we need to get a better night's sleep but what are the benefits of sleep and what tips can we employ to ensure we get sufficient rest?

Why is getting enough sleep important? The benefits of sleep include:

- Healthier immune systems, sleep can help your body defend against illness.
- Maintaining a healthy weight.
- A Lower risk for serious health problems, like diabetes and heart disease.
- Reduced stress and improved mood.
- Better cognition allowing for clear thinking, improved attention and alertness, and better memory recall
- Creativity – REM sleep has been proven to be beneficial for creative processes.
- Injury prevention- most importantly, adequate sleep also can prevent injuries at work, at home, or on the road.

Helpful tips to improve your chances for a better night's rest:

- Go to bed at the same time each night and wake up at the same time each morning, even on the weekends. An irregular sleep pattern confuses your internal body clock and causes disruption in your sleeping pattern.
- Avoid watching television or using electronic devices such as tablets 2-hours prior to bed. Not only does the flicker rate and blue light of electronics affect our brain's sleep patterns but electronic use tends to draw us in, leading to the chances of going to sleep later.
- Avoid long naps during the day as this can affect your ability to fall asleep at night. Quick power naps of no longer than 20-minutes can aid in a quick boost of function but any longer could hinder nighttime slumber.
- Using your phone 30 minutes-2 hours prior to bed as the bright light from your phone mimics daylight and stops melatonin from being fully released, keeping you wide awake.
- Avoid caffeinated beverages 6 hours prior to bed
- Enjoy a warm Epsom salt bath to relax muscles and alleviate tension from the day
- Keep the temperature in your bedroom between 60-67 degrees Fahrenheit for the most comfortable sleep

With the benefits of sleep being so important to brain and nervous system functioning, any alterations to the nervous system, especially in the case of brain injury, would be impacted and getting adequate sound sleep would be that much more essential. In a recent study published in the *Journal of Neurotrauma* of military veterans, researchers found that sound sleep plays a critical role in healing traumatic brain injury. The study also suggested that "sleep may play an important role in clearing waste from the brain after traumatic brain injury – and if you don't sleep very well, you might not clean your brain as efficiently. (1)" This is just another important reason to pay attention to proper sleep hygiene. If you have been diligent with sleep recommendations however still have trouble sleeping, consult your doctor on what other therapeutic options may be available and best suited to your particular situation ranging from acupuncture, craniosacral therapy, chiropractic care, diet, alternative medicine/herbs, supplements, or even pharmaceuticals.

### References:

Juan Piantino, Daniel L. Schwartz, Madison Luther, Craig Newgard, Lisa Silbert, Murray Raskind, Kathleen Pagulayan, Natalia Kleinhans, Jeffrey Iliff, and Elaine Peskind.

Link between Mild Traumatic Brain Injury, Poor Sleep, and Magnetic Resonance Imaging: Visible Perivascular Spaces in Veterans.

*Journal of Neurotrauma*. Sep 2021. 2391-2399. <http://doi.org/10.1089/neu.2020.7447>



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Rose Meadow Acres  
Rose Meadow Farm

## Now Hiring!!!

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**Who are we?** Rose Meadow consists of three assisted living programs in New Boston, NH. We are looking for passionate, devoted team members that encourage a comfortable and collaborative work environment. Please contact us if you are interested in a career in helping others and becoming part of our Rose Meadow family.

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**Contact us:**

603-487-3590 ask for Heather Theriault  
www.rosemeadowgroup.com

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### Providing Community-Inclusive Cognitive Rehabilitation

Robin Hill Farm provides licensed residential treatment and rehabilitation specifically for adults with a brain injury. Based upon the belief that no two injuries are alike, we have developed a community-inclusive continuum of care for the past 39 years. This concept allows us to offer the potential resident a program that reflects their individual needs, goals and capabilities.

**All Programs Feature:**

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**MISSION STATEMENT**

*Getting Veterans together in a relaxing environment utilizing outdoor activities to assist in the healing and bonding process.  
Being with others who understand, relate, and have your back.*

We invite all Warriors to join us at the Northern Goat Locker for fishing, shooting, hunting, and most importantly

**RELAXATION!**

The Northern Goat Locker is located in the heart of the Great North Woods of New Hampshire. We are near the Connecticut lakes and have access to multiple trout streams, ponds, and rivers including an area called "Trophy Stretch."

**We have many activities available including:**

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Email: mmcssworrall@gmail.com

HM3 Patrick Phillips, USN RET  
(603) 331-2993  
Email: warriorsat45n@gmail.com

Where the **WARRIOR** comes to rest







# DISABILITY RIGHTS CENTER



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## Headways Spring 2023

### New Supported Decision-Making Toolkit Now Available

Through supported decision-making individuals with disabilities can get help to make their own decisions. It is an alternative to guardianship. Supported decision-making is flexible in how it is applied from individual to individual and even how it is applied to the same individual over time.

#### Supported Decision-Making

TOOLKIT



Keeping **Individuals with Disabilities** and **Aging Adults** in Charge of Their Lives

How to use the toolkit

Think of the toolkit as a workbook. In addition to information and handouts, there are worksheets and forms you can fill out, print, and use.

Learn more about supported decision-making and download the toolkit at <https://drcnh.org/issue-highlight/supported-decision-making-toolkit/>



Alt Text: Front cover of Supported Decision-Making Toolkit with two young adults with different skin tones and abilities. Text along the top reads ‘Supported Decision-Making Toolkit’. The DRC-NH logo is in the bottom left corner next to text reading ‘Keeping Individuals with Disabilities and Aging Adults in Charge of Their Lives’.

#### Winter/Spring 2023 Disability RAPP: Words Matter

*Each issue of the Disability RAPP focuses on a different topic and how it relates to disability.*

The Winter/Spring 2023 issue of the Disability RAPP looks at how the language we use when talking about disability affects the way we see ourselves and each other. Learn how the systemic use of ableist language has cultivated exclusionary policies and how the evolution of language can help us break down barriers to inclusion and foster a sense of dignity for people with disabilities.

Download the Disability RAPP at <https://drcnh.org/the-disability-rapp>.

**Alt Text:** Cover of Winter/Spring Disability RAPP. Cover article is titled ‘A Discussion on Language’.

You can contact DRC-NH at (603) 228-0432, via email at [mail@drcnh.org](mailto:mail@drcnh.org) or online at [www.drcnh.org](http://www.drcnh.org) and set up a time to speak with an attorney free of charge.

Sign-up for our monthly e-newsletter at [drcnh.org](http://drcnh.org).



#### WORDS MATTER

In this issue we look at how the language we use when talking about disability affects the way we see ourselves and each other. Learn how the systemic use of ableist language has cultivated exclusionary policies and how the evolution of language can help us break down barriers to inclusion and foster a sense of dignity for people with disabilities. We want to hear from you. Please share your ideas for future themes, or your suggestions of how we can increase accessibility, by emailing [mail@drcnh.org](mailto:mail@drcnh.org).

#### A Discussion on Language

By Nathaniel Livernois



When describing my diagnosis, would it be better to say I am autistic or that I have autism? These two options are known as identity-first and person-first language. When using the former, it highlights one's disability and relates it back to oneself. The latter acknowledges the person with disabilities before the disability itself. Both have slightly different approaches, but both are acceptable if whoever you are describing is okay with your choice of language.

Why should it be okay to accept either option? Let's start with identity-first language. In the previously stated phrase "I am autistic," the word "autistic" is a single word defining one personal trait. Calling myself an autistic person doesn't make any assumptions about me as a whole, any more than calling myself a joyful man means that I can never be sad. The language only relates me to the diagnosis of autism. It says nothing about personality, physical traits, beliefs, relationships, or any other qualities that may belong to me. It only provides the basic information that I'm autistic.

(continued on page 2)



Nathaniel Livernois gives his perspective on disability language.



# Brain Injury and Opioid Overdose: *fast facts*

**Acquired Brain Injury** is damage to the brain occurring after birth and is not related to congenital or degenerative disease. This includes anoxia and hypoxia, impairment (lack of oxygen), a condition consistent with drug overdose.

**Opioid Use Disorder**, as defined in DSM 5, is a problematic pattern of opioid use leading to clinically significant impairment, manifested by meaningful risk factors occurring within a 12-month period.

**Overdose** is injury to the body (poisoning) that happens when a drug is taken in excessive amounts and can be fatal. Opioid overdose induces respiratory depression that can lead to anoxic or hypoxic brain injury.

2.8 million brain injury related hospital stays/deaths in 2013

70-80% of hospitalized patients are discharged with an opioid Rx

63,000+ drug overdose-related deaths in 2016

*“As the number of drug overdoses continues to rise, doctors are struggling to cope with the increasing number of patients facing irreversible brain damage and other long term health issues.”*

## *brain injury and overdose*

### Substance Use and Misuse is:

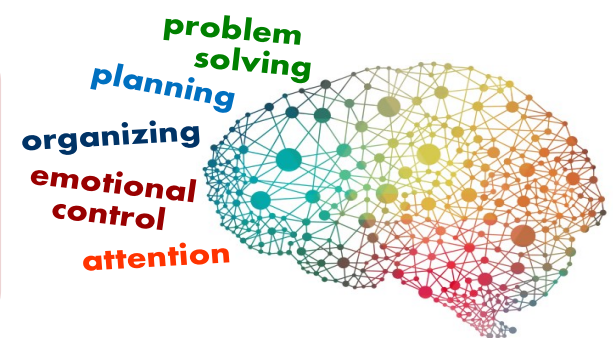
- Often a contributing factor to brain injury. History of abuse/misuse is common among individuals who have sustained a brain injury.
- Likely to increase for individuals who have misused substances prior to and post-injury.

### Acute or chronic pain is a common result after brain injury due to:

- Headaches, back or neck pain and other musculo-skeletal conditions commonly reported by veterans with a history of brain injury.
- Moderate to severe brain injury, highly correlated with increased risk for chronic pain.
- Risk of chronic pain for individuals with co-occurring brain injury, post-traumatic stress disorder and depression.

Individuals treated for non-cancer chronic pain with opiate therapy are at risk for developing an opiate use disorder and are at risk of overdose.

The frontal lobe is highly susceptible to brain oxygen loss, and damage leads to potential loss of executive function.



Sources: Stojanovic et al 2016; Melton, C. Nov. 15, 2017; Devi E. Nampiarampil, M.D., 2008; Seal K.H., Bertenthal D., Barnes D.E., et al 2017; [www.cdc.gov/traumaticbraininjury/get\\_the\\_facts.htm](http://www.cdc.gov/traumaticbraininjury/get_the_facts.htm); [www.cdc.gov/mmwr/volumes/65/wr/mm655051e1.htm](http://www.cdc.gov/mmwr/volumes/65/wr/mm655051e1.htm) Hammond et al, 2015.

For more information contact Rebeccah Wolfkiel: [execdirector@nashia.org](mailto:execdirector@nashia.org) 202.681.7840, or visit [www.nashia.org](http://www.nashia.org)

**nashia**  
*giving states a voice*  
National Association of State Head Injury Administrators

## *recommendations: brain injury & behavioral health*

**Prevention:** Overdose prevention and education initiatives must target individuals living with brain injury, caregivers and providers. State behavioral health and brain injury programs should collaborate to ensure that efforts for prevention target this population. Federal prevention resources/tools should highlight the importance of this issue and recommend strategies for states.

**Substance Use Disorders (SUD) Treatment:** Services designed to address SUD must be accessible to individuals with brain injury. Providers should routinely screen for a history of brain injury among consumers served and ensure treatment services are accessible for individuals with cognitive, behavioral and physical disabilities resulting from a brain injury.

**Brain Injury Services Programs:** Individuals who have sustained a brain injury resulting from an overdose may require specialized services. State programs need to develop capacity and expertise to support a growing number of individuals living with an acquired brain injury from overdose. Understanding best practices in SUD screening, recovery and treatment are critical.





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## 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](mailto:erin@bianh.org).



**BRAIN INJURY ASSOCIATION OF NEW HAMPSHIRE**

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

## YOUTH SURVIVORS NETWORK







**Occurs on the second Wednesday of each month.**

A virtual networking opportunity for youth and young adults (16-25) with acquired and traumatic brain injuries in Maine and New Hampshire to share their experiences and build a community of self-advocates.


If you have any questions, please reach out to [dcampbell@mpf.org](mailto:dcampbell@mpf.org)

**Register Here**

<https://us02web.zoom.us/join/91012990000>

### BENEFICIARY DESIGNATIONS CAN HELP FULFILL YOUR CHARITABLE PLANS



Beneficiary designations are often the simplest way to implement your charitable estate plans. For instance, you can name the Brain Injury Association of New Hampshire as a beneficiary of your IRA or other qualified plan. Doing so can save a significant amount of taxes because your family and loved ones will be required to pay income taxes on the amounts they receive from your IRA at their tax brackets. But having BIANH as a tax-exempt entity, you pay no taxes. So 100% of your retirement plan will be used according to your charitable intent. In addition, many people do not realize that they can designate any amounts remaining in their donor-advised fund (DAF) to charity. This is a very simple process that can be implemented through the specific procedure of your DAF sponsor.

- I would like information about making a gift to BIANH that would also provide income for me and/or others.
- I would like information about including a gift to BIANH in my will or living trust.
- I have already included a gift to BIANH in my will or living trust or by beneficiary designation and would like to notify you.

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Email \_\_\_\_\_

Please mail to BIANH—52 Pleasant Street—Concord, NH—03301 — Attention: Steve Wade



## Why We Need YOUR Support Now More than Ever

### What your donation can do -



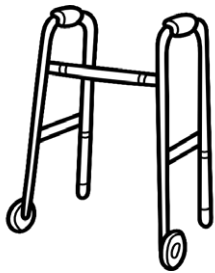
\$25 can provide a new bike helmet for a child



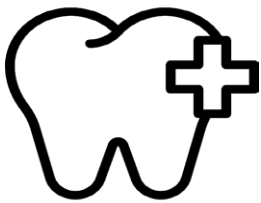
\$50 helps cover a utility bill or provide a gas card so an individual living with a brain injury can get to a doctor's appointment



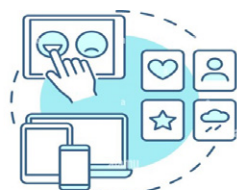
\$75 helps with groceries



\$100-\$200 can provide assistance towards purchasing mobility, adaptive equipment, or assisting with medical procedures not covered by insurance



\$500 assists with dental bills, necessary home modifications, or computer needs



ASSISTIVE  
TECHNOLOGIES

\$1000 may provide aid for assistive technology, a specialized bed, or equipment for a survivor transitioning to live at home

**We need your help now! With your generous donation, we continue to foster hope and healing for those with a brain injury so they can thrive, not just survive.**

See page 20 of this newsletter to send in your donation



# SUPPORT GROUPS IN NEW HAMPSHIRE

Revised March 2023 —Times and places may change without notice—please call in advance

## VIRTUAL SUPPORT GROUPS

The Brain Injury Association of New Hampshire will be hosting three statewide monthly online support groups that will be held through the ZOOM Virtual Platform and two in person support groups, 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**

register at: <https://bianh.salsalabs.org/peterborough>

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

register at: <https://bianh.salsalabs.org/concord>

**Virtual Statewide Brain Injury Caregivers Support Group, Meets the 4<sup>th</sup> Tuesday of the month, 6:30 pm – 7:30 pm**

register at: <https://bianh.salsalabs.org/bicsg>

**Virtual Youth Survivors Network - For brain injury survivors age 16-25, From Maine, New Hampshire & Vermont  
Meets the Second Wednesday of the month, Meeting Time: 4:00 – 5:00 pm**

Register at: [https://us02web.zoom.us/join/register/tZ0lcOmvqT8vH9NeQ8v9Yokb\\_woX0tWWuvJC](https://us02web.zoom.us/join/register/tZ0lcOmvqT8vH9NeQ8v9Yokb_woX0tWWuvJC)

Registration contact: Dylan Campbell: [dcampbell@mpf.org](mailto:dcampbell@mpf.org)

## IN PERSON SUPPORT GROUPS

**Seacoast Brain Injury Support Group - Meets the 1<sup>st</sup> Tuesday of the month, starting May 2<sup>nd</sup>, 6:00 pm-7:00 pm**

Community Campus, 100 Campus Drive, Portsmouth, NH

**Greater Atkinson/Derry Brain Injury Support Group - Meets the 2nd Tuesday of the month, starting April 11th, 6:00 pm-7:30 pm**

Community Crossroads, 8 Commerce Drive, Unit 801, Atkinson, NH

Please check the website at [www.bianh.org](http://www.bianh.org) for online registration.

If you have any questions, please email Ellen Edgerly at [Ellen@bianh.org](mailto:Ellen@bianh.org) or call at 603-834-9570

### APHASIA:

**Nashua: Currently suspended**—for more information, call Laura St. Joseph Hospital Outpatient Rehab Clinic, 75 Northeastern Blvd, Nashua, NH.

Contact: Laura Fonden

Phone: (603) 882-3000 (x67530)

Contact: Lesley Hill

Phone: (603) 595-3076

### BRAIN INJURY & STROKE

**Concord:** Virtual Community Stroke Support Group, 3<sup>rd</sup> Tuesday of the month, 4:30 pm, Encompass Health (formerly Healthsouth)  
Phone: (603) 226-9812

**Dover:** Virtual Wentworth Douglass Hospital Stroke Support Group. 3rd Thursday of every month; 2:00-3:00. Call or email Lindsey to receive the Zoom link.

Contact: Lindsey Wyma

Phone: (603) 609-6161 x2731

Email: [Lindsey.wyma@wdhospital.org](mailto:Lindsey.wyma@wdhospital.org)

**Durham:** IN PERSON—UNH Occupational Therapy Department  
UNH OT Stroke Survivor Group  
Meets Tuesdays; 1:00 – 4:00 pm  
Contact: Dr. John Wilcox, OTD  
Phone: (207) 314-3180 or email [john.wilcox@unh.edu](mailto:john.wilcox@unh.edu)

**Kennebunk, ME: Currently Suspended** - 1<sup>st</sup> Tuesday of the month, 3:00pm, 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: Shawna Malynowski, Phone: (603) 653-1117  
Contact: Sarah Braginetz, Phone: (603) 650-5104  
Contact: Aging Resource Center Phone: (603) 653-3460

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

**Salem:** Virtual Northeast Rehab Statewide Mild Brain Injury Support Group; Meets the 2<sup>nd</sup> Wednesday of the month, 5:00 pm - 6:00 pm (currently via Zoom)  
Contact: Barbara Capobianco  
Phone: 603-681-3220  
Email: [bcapobianc@northeastrehab.com](mailto:bcapobianc@northeastrehab.com) to RSVP

**Salem:** Virtual Northeast Rehab Stroke Support Group: Meets the 3rd Wednesday of the month, Meeting Time: 4:00 pm - 5:00 pm  
Email: [StrokeSupportGroup@northeastrehab.com](mailto:StrokeSupportGroup@northeastrehab.com) to RSVP

### BRAIN TUMOR:

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



# 2022-2023 MEMBERS AND DONORS

Thank you to all our members and donors!

(This list reflects donations received from December 1, 2022 to present)

DONORS AND MEMBERS

Anonymous  
Eveleen Barcomb  
John Capuco  
The CMH Foundation  
Bob & Missy Fellows  
Rosalie Johnson

IN HONOR OF ROBIN KENNEY, Ed.D

Michael Jourdan

IN HONOR OF JOHN RICHARDS

Dave & Carol Bovee

IN HONOR OF JASON SCHRECK

June Rose

IN HONOR OF PAM DUBE

GFWC-Amoskeag Community  
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Gilbert Burelle

IN HONOR OF THE PAGE FAMILY

Tara Eggleston-Johnson

IN MEMORY OF PAUL ANTKOWIAK

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**BRAIN INJURY  
ASSOCIATION**  
OF NEW HAMPSHIRE

## ANNUAL FUND

**Gift Amount:**    \$1000    \$500    \$100    \$50    \$25    Other \$\_\_\_\_\_

**Gift Frequency:**    Monthly    Quarterly    Annual    One-time gift

**What your donation can do -**

\$25 can provide a bike helmet

\$50 help cover a utility bill

\$100-200 help purchase mobility, adaptive equipment, or assist with medical procedures not covered by insurance

\$500 assist with dental bills, necessary home modifications, or computer needs

\$1000 offers assistance with technology or specialized equipment not covered

**MY GIFT IS A TRIBUTE —**

IN MEMORY OF \_\_\_\_\_

IN HONOR OF \_\_\_\_\_

**Donate Online** — You can easily donate online; go to [www.bianh.org](http://www.bianh.org) and use the DONATE tab.

**Bill Me** — We will invoice you based on your gift frequency designated above.

**Check Enclosed**

**NAME** \_\_\_\_\_

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**YOUR DONATION IS FULLY TAX DEDUCTIBLE. OUR TAX ID IS 02-0397683**