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Bike Helmet Laws Don't Save Lives – But Helmets Do! Story Page 16

Heather & Derrell's Story Story Page 6

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This Is Not Goodbye! HEADLINE January 1983 – December 2015

The first issue of Headline was launched 32 years ago! That's an amazing production run for any print material. Many thanks go to the original B.C. Head Injury Association for having the foresight to know that a newsletter would be a solid and consistent link to keep the provincial associations and support groups, professionals, families, and individuals connected.

In 2001, Janelle began working with Mike in the production of Headline as part of her role with the Brain Association of BC (BABC) in Victoria. When BABC closed its doors in 2003, Mike Rossiter became the publisher. Janelle joined Mike and Mary Lou to produce Headline and continue to be the provincial voice for groups and individuals.

During its life, Headline has gone from a simple newsletter format to a glossy, coloured magazine. Although the look changed over the years, the content remained inspiring and informative. The success of Headline is something that we can all be proud of; however, it is now time to make our departure and to say thank you for all the support everyone has given to us and Headline over the years.

We want to pay tribute to our advertisers who have been the backbone of this production. Without the willingness to support Headline year after year, we could not have stayed up and running for as long as we have. Your loyalty has not gone unnoticed and we thank you for your dedication.

To our professionals, groups, families and individuals who allowed us to share their stories in Headline – THANK YOU! The inspiration and courage these vignettes and articles gave to others is immeasurable. We believe unequivocally that these stories of rehabilitation and recovery brought hope to so many and spurred individuals and families to do the work needed to move forward in life.

To our readers... there are no words to show our appreciation for your dedication over the years. Without your eyes and open hearts we would not have had an audience. Thank you!

Here is a peek into what the future holds for us: *Janelle*



While I intend to keep busy with contract work, counselling and writing, I am also pursuing opportunities to serve at a higher level where I truly believe I can make a difference

in the field of brain injury. Although I am not at liberty to reveal it all, I am very proud to announce that my family and I are about to launch the Constable Gerald Breese Centre for Traumatic Life Losses in memory of my late husband who died 25 years ago. This centre will provide education, resources, and referrals to families and individuals who have suffered a traumatic loss through death and/or catastrophic injury. To keep informed of our progress, please visit, www.traumaticlifelosses.com.

Mike & Mary Lou



Headline has been mailed out quarterly since Mike and I became involved with the publication. Add to that, the hundreds of digital copies that have found their way to sur-

vivors, families and professionals, many forwarding them on to others, and we have Headline, the 'little publication that could'. All this was possible with the wonderful support of our advertisers and of course, you, our loyal readers.

Mike will continue to be involved in the BIABC and we will continue to advocate for his son and other survivors of Brain Injury.

In closing, we wish you the joy that comes from living in the moments that matter. Take time each day to live, love, laugh, and play – safely!

Many thanks,

Mike, Mary Lou & Janelle

head*line*

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Editor Janelle Breese Biagioni 2031 Gourman Pl Victoria, BC V9B 6A9 Email: headlinenews@shaw.ca

HEADLINE welcomes letters and relevant articles for publication, and reserves the right to edit any accepted submissions for clarity and length. A signature, address, and telephone number are required. Please contact Janelle Breese Biagioni for copy deadlines.

Mike Rossiter and HEADLINE editors take no responsibility for, nor do they necessarily agree with, the opinions contained in articles, letters or advertising.

Contact Janelle Breese Biagioni at 250-592-4460 for information.





CHANGE OF ADDRESS?

We would like to keep our mailing list up-to-date! If you have moved or would like to be on the mailing list, please contact Mary Lou at: 604-274-5478 or email her at: headlinemag@gmail.com (Please put HEADLINE in subject line of email)

Government Resources

Regional Health Authority's ABI Coordinators: Fraser Health - Aquired Brain injury Program-604-520-4175 Interior Health Authority-250-870-4664, **Contact Name: Deborah Preston** Acquired Brain Injury Program, Northern Health Call 250-565-7393 Vancouver Coastal Health Authority-604-714-4159 Vancouver Island Health Authority- 250- 370-8699, **Contact Name: Judith Armstrong** Enquiry BC-to locate Provincial Government Departments • Lower Mainland 604-660-2421 Outside Lower Mainland 1-800-663-7867 Victoria 250-387-6121 Ministry of Advanced Education, Training and Technology: **Open Learning Information:** In and Outside Lower Mainland 1-800-663-1633 Student Loan Information: Lower Mainland 604-660-2610 Outside Lower Mainland 1-800-561-1818- select 1 then 5 Public Guardian & Trustee of British Columbia: 700-808 West Hastings St. Vancouver, BC V6B 3L3 Victim's Info Line:

- 1-800-563-0808
- Adult and Youth Addiction Services:
- Lower Mainland 604-660-9382
- Outside Lower Mainland 1-800-663-1441

Community Resources

BC Coalition of People with Disabilities Advocacy Access Program for assistance with provincial and federal disability benefits Lower Mainland 604-872-1278 Outside Lower Mainland 1-888-663-1278

Bus Pass for Persons with Disabilities and Seniors Lower Mainland 604-682-0391 Outside Lower Mainland 1-888-661-1566

Tim Readman, Executive Director Stroke Recovery Association of BC Phone: 604-688-3603 Toll Free: 1-888-313-3377 www.strokerecoverybc.ca

Cerebral Palsy Association of BC Lower Mainland Voice and TTY 604-515-9455 Outside Lower Mainland 1-800-663-0004

Community Brain Injury Program for Children & Youth in BC Toll Free 1-877-451-5511 Ext. 1272 www.mybrainonline.ca

Epilepsy BC Lower Mainland 604-875 6704 Outside Lower Mainland 1-866-374-5377 Victoria 250-475-6677

Information Services Vancouver 604-875-6381

Save the Dates

Brain Injury Canada (April 2016)

Brain Injury Canada (The Brain Injury Association of Canada) will be hosting the 2016 conference in beautiful Victoria, BC next April. For more information on the dates, speakers, and Victoria location, visit: http://braininjurycanada.ca

Survive to Thrive: Restoring Life after Brain Injury (May 2016)

The Cridge Centre for the Family and the University of Victoria are pleased to announce they will be hosting the third Survive to Thrive: Restoring Life after Brain Injury in May 2016. This free one-day educational event focusses on the firsthand experiences of brain injury survivors and their families and is open to and attended by survivors, family and community members, professionals, and students in medicine, nursing, education, social work, counselling, occupational, recreation, speech language, and physical therapies. For more information on the date, campus location, and when to register, visit: www.cridge.org

Pushor Mitchell Okanagan Conference on Brain Injury (May 2016)

SAVE THE DATE! BrainTrust Canada and title sponsor Pushor Mitchell LLP will once again host their annual brain injury conference in the beautiful Okanagan Valley. The 2016 date is Thursday May 12th at the historic Laurel Packinghouse in downtown Kelowna, BC. Information will be available early in the new year on their website www.braintrustcanada.com. This conference attracts individuals with brain injury and caregivers, and professionals in the field, and will once again offer a wide range of topics from leading experts.



Gateway to a community of brain injury information, education and connections Official website of the BC Brain Injury Association

A Blood Test That Can Detect Concussions In Children



Photo credit: Orlando Health

A recent news report about a simple blood test that can now be used to detect concussions in children is proving to be a game-changer in the way future diagnoses will be made.

The blood test has proven to be 94 percent accurate. Dr. Linda Papa, an emergency medicine physician in Orlando Health reports that this test will absolutely have a positive impact on the ability of emergency medicine physicians to diagnose children. In fact, this will change how a diagnosis is made for anyone with a suspected head injury. Not only does this blood test detect a concussion, but it also provides information to the doctors on the SEVERITY of the brain injury. Dr. Papa, who developed the blood test, has hopes of it one day being used in sports arenas and on the field by coaches and trainers to help decide whether a child should return to play.

For more information or to read the news article in full, visit: http://globalnews.ca/news/2327547/ concussions-in-kids-can-be-detected-by-a-newblood-test-study/



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Bad Things Happen to Good People AND Beautiful Things Do Too



mother, albeit an extremely strong woman, has had more than her share of sorrow, but she put one foot in front of the other and was deter-

No one deserves to suffer the impact of a brain injury, but thousands and thousands have. Each one of their stories sheds

light on the aftermath of living through and with a catastrophic injury. Yet, almost all the stories will have some beautiful nugget that brings a smile to your face when you hear it. This article is about a "beautiful nugget" that is part of two people's stories.

Derrell & Heather are soul mates. You cannot dismiss the genuine respect and love they have for one another when you meet them. One would think they were high school sweethearts! But the truth is that both of them had a lot of living and a lot of pain behind them before they even met.

Derrell

In 1976, Derrell was riding as a passenger in a car in Vernon. He was 19 years of age, living in Kelowna and on his way to Calgary with a buddy. It was four o'clock in the morning when the driver lost control of the vehicle and slammed sideways into a pole. Derrell slipped into a coma where he remained for 4 weeks.

Derrell's brain injury was significant. Two weeks after awakening from the coma, his mother, who happened to be a nurse took him home. His mom was still reeling from the death of Derrell's brother the month before. He had been fishing when his boat capsized and he drowned. When Derrell was 18 months old his father also drowned. Derrell's mined to help Derrell regain his independence.

Derrell had to learn to walk, talk, and feed himself again. His recovery took him from a wheelchair to a walker to a four-point cane to a single-point cane, and finally to no cane. He is using a cane today for balance.

Rehabilitation and recovery have been a long journey for Derrell. He credits, Christine Lefaivre, O.T. and Dr. Bill de Bosch Kemper, Neuropsychologist, along with his mom, as being the ones who helped him the most. Although both Chris and Bill have retired, Derrell remains in contact with them.

Derrell pushed himself to move forward in life. In fact, he returned to school and became a Teacher's Assistant and worked in a school. "I learned how to advocate for myself, too, working as General Manager of The Handicapped Action Committee in the 1980s," Derrell stated with conviction. He reports that in learning to be a self-advocate, he was able to have ICBC reopen his case. He has no real memory from before the crash and struggles with mobility and speech issues today. The biggest challenge remains his speech. "People find it difficult to understand me," he reports. "It's an issue with the police. They always assume I have been drinking." Although this is frustrating, Derrell also shrugs it off as "Oh, well, just one of those things." He does find that having a medic alert bracelet helps.

Heather

In 1989. Heather was working late. She was in the business of insurance. She didn't feel well and asked a colleague if he could drive her home. She began vomiting during the trip home and it was apparent something was terribly wrong. She was taken to hospital where she was diagnosed with an aneurysm and underwent surgery.

Heather's life was full and her responsibilities were great. She had four children and raised them as a single parent. Her first husband left after the fourth baby arrived and she had separated from her second husband prior to the aneurysm.

When Heather was discharged from hospital, she went to stav with her mother. "I would walk around and around the kitchen table for hours," she recalls. Heather was very confused and she was unable to talk. Heather, like Derrell, worked hard in her rehabilitation and recovery to bring her life to a level of independence. She reports that reading and writing remain a challenge for her today.

Then One Became Two

Derrell was married 3 times and Heather was married twice before they found one another. They met through BrainTrust Canada (formerly the Central

Okanagan Brain Injury Society). Heather declared herself an "introvert" when they met and Derrell recalls that he thought she was "pretty cute". They married only a few months later and while others may have been concerned, Derrell and Heather believed they were made for each other. They have been together now for eighteen years, so any concerns can definitely be put to rest. Derrell welcomed Heather's four girls in his life. They now have 8 grandchildren (7 boys and 1 girl) and 3 great-grandchildren (1 boy and 2 girls) to keep them busy.

The two say they compliment each other guite well. Although they love being together, they also recognize the need to do things away from one another too. They volunteer in two different thrift stores and on different days. With a giggle Heather declares, "Because we both have memory issues, if we do fight, we easily forget about it." Derrell substantiated Heather's claim with a deep belly laugh and nodding of his head.

Derrell & Heather work hard each day to have a life that is meaningful and filled with love and we wish them many more years of happiness together.



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The Story of Rick Gration

By Deborah Dee, Executive Director, Powell River Brain Injury Society

We first met Rick at the Brain Injury Society in Powell River on the day we were moving to a larger space. Rick came to visit us for the first time and jumped in to help, no questions asked. He was in a power wheelchair and insisted on us loading him up with boxes and hanging bags off the back of the chair. This was the first glimpse into the man we would come to know as our brother and a valued member of our "Brainiac" family. Rick never stopped trying and never stopped giving.

He was diagnosed in 2006

with brain cancer. He had surgery and the doctors were confident that they removed the whole tumour, but they could not remove the tentacles. They told him that he would likely never walk again. As with everything in his life, Rick had a chat with the Lord and set to the task of getting up and walking. His mission was to walk his daughter down the aisle at her wedding. Mission accomplished. Although he still required his chair for most of the day, he got up and walked whenever he could. He would come to the Centre and leave his chair at the door. He walked as much as he could, but the tumour and the surgery had left him with left hemi paresis. He pretty much had no use of his left arm. Although working, his left leg had drop foot, making it extremely difficult for him.

Rick married Val in 1984. Their son, Stephen was born in 1986 and their daughter, Kerrin followed in 1989. She met the love of her life, Tim Fraser; they married in 2010 (with her father walking her down the aisle). Two beautiful grandchildren followed; Jordan in 2012 and Emily in 2015. Family was everything to Rick. He was the quintessential photo-carrying, video-posting grandfather.

Rick went to Vancouver on a regular basis for an MRI. For years, the scan was clear. Then one day in 2014, deep in the recesses of his brain, the tumour reappeared. He went through rounds of chemo and



the tumour appeared to be shrinking. Hope was high for the treatment to work, as surgery was out of the question due to the placement of the tumour. Sadly, the tumour started growing and Rick went through more chemo, as well as a new regimen of chemo alongside the traditional treatment. It didn't work and the tumour became more aggressive. This spring, treatment was suspended and Rick was given one year to live.

True to who he was, Rick had a conversation with the Lord and continued living life to the fullest. The

family took vacations. The entire family went on three Alaskan cruises, he and his wife Val took trips to visit grandchildren, and he never let his diagnosis get him down. He made the most of each and every day. He came to the Brain Injury Centre almost on a daily basis and took delight in playing crib. With a big smile and a laugh, he would taunt for days after skunking someone. We would play crib, drink coffee, and solve the world's problems. We will miss that so much.

Rick was a special member of our brain injury family. I don't think he ever intended to be an inspiration, but that is what he was. So many of us adopted his 'never give up - never surrender' attitude. He was dealt a bad hand and he still played it as though it was a winner. Moreover, Rick was a winner in the way it really matters: He made our world a better place than it was before he got here, and he did it without a complaint.

Rick always had kind words of advice for his peers. He could sense if someone was having a bad day and he made it his mission to help them through it. Mission accomplished! He loved the garden that we built and spent many hours digging and planting... and reaping the rewards of his work. He could be found in the strawberry patch at any given time, or picking peas off the vines and feasting right there in the garden. He would come in to the Centre and headline 9 honk the horn on his chair, signaling that his coffee should be ready! It was yet another source of laughter and I will miss the sound of that horn. Beep Beep Beep.

Rick had a full and interesting life. We did not know before his memorial service that he spent a good portion of his life battling depression. It was not until after the first diagnosis of brain cancer that the depression finally lifted. He decided, I guess, that whatever was bothering him before didn't really matter. Living life to the fullest, and family, that is what matters. His son, Stephen gave a heartfelt speech at Rick's service and told us about the special bond they had. The whole family shares in their love of the Lord and their church family was also very special to them.

Rick worked as a loan officer for the Scotia Bank, he worked in construction installing vinyl siding and gutters, and he then bought the company and ran it for 5 years. He then worked in another area of construction, road curbing, and went on to work in a glass shop installing windows. After that, he started working in the receiving department of Wal-Mart. He will be most fondly remembered as "that guy from Wal-Mart." You see, after his surgery he couldn't go back to work and he was offered the position as



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OT CONSULTING/TREATMENT SERVICES LTD. 210 - 3438 Lougheed Highway, Vancouver, BC V5M 2A4 T: 604.215.3660 F: 604.215.3669 E: consult@otconsulting.bc.ca our Wal-Mart greeter. He made himself a T-shirt that said, "Yes, I am that guy from Wal-Mart." His sense of humor was razor sharp! I will miss his infectious laugh!

This past summer we held a giant garage sale in partnership with our local Canada Safeway, the Rotary Club, and Wal-Mart. The parking lot at Safeway was full of donated items and the community rallied around our cause. We raised \$9,500!! The funds raised were used to build a sidewalk along the mobile home and install a wheelchair lift. Rick had been able to come in the house under his own steam until recently and increasingly it was getting more and more difficult to make it up the few stairs. The Rotary donated time and labour, other contractors donated concrete and lumber. We got the entire project done for a little over \$5000; the remaining funds went to our Society and the Gration family.

At the memorial service for Rick, the Brain Injury Society was asked to say a few words. We recruited the members to share a story of Rick. What followed was a plethora of heartfelt stories that we are going to turn into a storybook for the family.

In the end, his brain started to shut his body down. The official cause of death is listed as heart attack. That great big loving heart stayed true to the end and in the end his Lord allowed him to go without lingering. We take solace in the fact that he believed so strongly in heaven. We trust that he is now with his Lord, and we do hope that he lets Him win a crib game occasionally.

From Richard Langlois:

Rick and I played a lot of crib! We are very competitive players and would taunt each other when we won, especially if we skunked each other...which we did many times. I remember one time very clearly down at the Centre on Marine Ave. Rick double skunked me...and believe me, he never let me forget that...he was so funny, he would see me coming and hold his nose....eeeewwww....I smell a double skunk! I will miss Rick...he was a good friend.

From Vanessa Kift:

I first became aware of Rick many years ago, via my parents, as a caring man my parents knew who was praying for me on a regular basis, though I had yet to meet him. Without knowing it I saw him many times at Wal-Mart when I moved back to the Powell River area and then finally met him and realized just who he was at the brain injury society.

Rick touched my life in the short time I knew him in a significant way and I will miss his smiling face. I feel blessed to have had him touch my life.

From Dewar Boutilier:

The day I was talking about a small venue concert that I went to in Marpole and I could not think of the name of the singer or the group and it was driving me nuts. That was when Rick surprised me and said it was Frank Zappa and the Mothers of Invention. I hadn't known Rick very long but that day we spent a couple hours talking about rock and roll music. That day was the beginning of a treasured friendship that will last forever.

From Ajay:

I had gone to the garage sale to raise funds for Rick's chair lift. While walking around, I noticed a stuffed toy on a table. I could not figure out what I would do with it. I even walked around with it for a short time before I put it back. I continued to look and found a tray I wanted and I went to pay but looked over at the toy table and saw that toy still sitting there. I gave in and bought it. Later that night, I realized the blue bunny was the inspiration for a children's story I wanted to write for years. I told Rick about it and he told me I was meant to find it....

From Sandra:

Rick played a crucial part in my learning to open up to people. When we talked about depression and suicide he listened deeply and without judging. In recent months he reminded me of the parts of my father and on the morning Rick died I had a major insight to my relationship with my father: That even when people have hurt you there can still be good stuff to remember about them and appreciate. Even though we didn't spend much time together he had an important positive impact on me and I am grateful to have had him in my life.

From Donna:

My fondest memories of Rick, which I will hold dearly, is when he would come in his scooter and beep the horn, which was my signal to get him his coffee. He was always grateful and when he would need another coffee he would beep again...and even though I might be busy I would always get him his coffee. It became part of a ritual that I will miss so much.

From Melissa:

He was an awesome man. I was lucky to have him in both my church family and with the Brainiac family. He taught me to never give up. Thank you Rick for everything. You were a great friend to my family and me.

From Tommy:

I have known Rick for roughly 9 years or so. He always had kind advice for me as I struggled. One time he overheard me say I was having money trouble. I hardly knew him at this point. He quietly slipped me 20 dollars and refused payback. I knew Rick as being a kind and thoughtful person. He grew to be my friend. I will miss him at the Brain Injury Centre as well as Wal-Mart where he would greet people with open arms. Most of all, I will just miss him, as many will. Good-bye Rick, be at peace my friend.

From Catherine:

Thank you dear friend for your life of conviction and faith. You lived by action not advice. A gift to us, generously shared with laughter and kind words. A living example of love in action. Joy of living in the gift every day. A friend in my heart forever. Inspiring. A golden thread in life's tapestry.

From Savanna Dee:

I did not know Rick that well; however, whenever he was at the brain injury Centre when I was there he was always friendly and engaging. He treated all people equally, with wit, love, and understanding. I will miss his presence here.

Fly Free Rick....



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Do the Holidays Your Way

The #1 thing you need to do in planning for the holidays is to give yourself permission to do it your way. Every year the pressure begins to build as the holidays approach and it creates tremendous anxiety.

Our expectations of the holidays can often be somewhat skewed. We think all the decorations have to match, the baking and the meals need to be gourmet-like, people should get what they ask Santa for, and everyone should get along... perfectly! The truth is the 'picture perfect' holiday doesn't exist.

In the real world, decorations made from macaroni are as precious as glittering gold baubles, the budget for the shopping rarely matches what we want to have or to be able to give, the meal looks barely touched after everyone has feasted, and arguments often ensue among family or friends.

This year, aim for fun and comfort instead of 'perfect' with these tips:

• If loud and noisy is not your style, then go for quiet and small.

- Pace yourself. The to-do list in prepping for the holidays is usually longer than Santa's gift list. If you insist on doing it yourself, then break the tasks down into smaller steps and do a little every day.
- Go easy on the "moose milk." Alcohol is often the main contributor to an argument. If you do drink, do it in moderation and take a taxi.
- Spend some time with seniors, those who are hospitalized or in a shelter... being aware of how little others have (no family, no money, poor health) can help you to appreciate what you do have.
- Be silly and have fun. Play in the snow. Watch comedies. Enjoy carolling or playing board games.
- Express your gratitude for all that you have and for all who continue to be your cheerleader.
- Love yourself... there is no one like you!

Remember...the holidays don't have to be perfect, just memorable!

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The rules of Sudoku are simple. Place a digit from 1 to 9 in each empty cell so every row, every column, and every 3 x 3 box contains the digits 1 to 9.

_									
	9	4			3	6			
	2			4					
		6		2	9			3	
		5	2	9	6		3		
	8		9	3		2	7		6
			4		1	8	9	5	
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				1	4			7	8

Solution on page 19

The University of Toronto/Brain Injury Association of Canada Employer Award

The Cridge Centre for the Family (Victoria, BC) is the 2015 recipient of The University of Toronto/Brain Injury Association of Canada Employer Award.

In 1998, Greg Goldberg sustained a brain injury in a horrific accident. Subsequently, he lost his job and his marriage ended. Greg worked hard at redesigning his life with a focus of one day returning to work. He has been a contractor with the Cridge for several years now and he put forward the nomination to recognize the Cridge for assisting brain injury survivors in returning to work after suffering a brain injury.

"It was The Cridge Centre for the Family Brain Injury Services Program where I found a renewed enthusiasm for life and an emotional recovery from my sustained head injury. After diligent persistence, my dream of returning to work and giving back to other head injury survivors in a creative way was accepted (for an initial trial run by The Cridge Centre for the Family), and years later my effort has now benefitted numerous past and present residents of the Brain Injury Program in helping them to reach their goals of employment and living independently." ~ Greg Goldberg.

This award is jointly supported by the Brain Injury Association of Canada and the Acquired Brain Injury Research Lab through a research program funded by the Canadian Institutes of Health Research Chair in Gender, Work and Health. Shirley Johnson, past BIAC President and volunteer with The Cridge Centre for the Family accepted the award on the Cridge's behalf in September at the Montreal conference.



From left to right: Dr. Richard Riopelle, co-President of BIC (also Chief Research Officer at Ontario Neurotrauma Foundation), Shirley Johnson (Past President, BIAC) and Dr. Angela Colantonio, Research, University of Toronto. photo credit – BIAC

Letter from BrainTrust Canada

On behalf of the staff and Board of BrainTrust Canada Association, we would like to say a special thank you to Janelle Breese Biagioni and Mike Rossiter for their commitment to the field of brain injury through the publication of Headline magazine. Their passion for Headline has shone through in each issue over the years, and there is no doubt that many lives have been touched in a very meaningful way as a result.

We realize that despite many individual and collective efforts to the contrary, brain injury continues to be on the increase - especially as our population ages. Through Headline magazine, we have heard stories, learned about key medical advancements and become much more aware of the impact of brain injury on a personal, local and national level. As organizations working with individuals affected by brain injury, we can all share in the fact that we make a profound difference in the lives of the people we serve, and that the work we do remains critically important to outcomes such as health. safety and quality of life. Headline magazine has played an important part in keeping us all connected and in giving voice to these important stories. Again from all of us at BrainTrust, we wish Janelle, Mike and their contributors every success in the future and we thank them sincerely for the gift of Headline magazine over the years.

Maribeth Friesen, CEO BrainTrust Canada

Note from Campbell River Head Injury

We wish everyone one from Headline all the best in their new adventures and thank you for many years of sharing a quality magazine.



BCBIA was saddened to learn about the closure of Headline magazine. It has been a pillar of information and connection in the brain injury community for years. BCBIA will continue to provide access to archived copies of Headline on our website: Brainstreams.ca. We would like to continue to provide a provincial voice for information and resources through our own website and newsletter and will work alongside Headline staff to move this forward. If you would like to sign up for our quarterly newsletter please email: info@brainstreams.ca. We would like to take this opportunity to acknowledge and thank all of the staff from Headline for their many contributions to the brain injury community over the years.

SHAKEN BABY SYNDROME

Dr. Norman Guthkelch, pediatric neurosurgeon, wrote the ground-breaking paper "Infantile Hematoma and its relation to Whiplash Injuries," which British Medical Journal published in 1971. We now know this as Shaken Baby Syndrome (SBS). It is estimated that 1,000 – 1,500 babies suffer from SBS each year. One in four shaken babies die, while the other three require lifelong medical treatment. The babies range in age from a few days old to a few months old. The average age is approximately six months.

Shaken Baby Syndrome is:

- A brain injury any brain injury is serious and forever!
- SBS occurs when a baby is violently shaken
- SBS occurs when a baby is thrust against a hard object
- Often, shaking a baby is a result of the adult feeling anger or frustration.
- Shaking a baby differs from the gentle type play like tossing a baby in the air or bouncing him or her on your knee. Shaking a baby must be of such force that an independent observer would recognize the act as dangerous.



• SBS occurs when a child receives numerous shakes in rapid succession. The baby's head does not necessarily have to 'hit' an object. However, this frequently happens.

The following is a list of some of the symptoms of Shaken Baby Syndrome:

- Head turned to one side.
- Unable to lift or turn head.
- Pinpointed, dilated, or unequal size pupils.
- Blood pooling in the eyes.
- Pupils unresponsive to light.
- Bulging or spongy forehead.
- No smiling or vocalization.
- Poor sucking or swallowing.
- Rigidity.
- Semi-consciousness, lethargy, or decreased muscle tone.
- Difficulty breathing.
- Seizures or spasms.
- Swollen head, which may appear later.

For more information on Shaken Baby Syndrome visit: http:// www.emedicinehealth.com/shaken_baby_syndrome/article_ em.htm#shaken_baby_syndrome_facts

Whatever It Takes

Dr. Barry Willer's WIT Model (Whatever It Takes) These guiding principles address the complex needs and fragmented services that people who are living with the outcome of a brain injury often experience.

The WIT principles are:

- 1. No two individuals with acquired brain injury are alike
- 2. Skills are more likely to generalize when taught in the environment where they will be used
- 3. Environments are easier to change than people
- 4. Community integration should be holistic
- 5. Life is a "place and train" venture
- 6. Natural supports last longer than professionals
- 7. Interventions must not do more harm than good
- 8. Service delivery systems present many of the barriers to community integration
- 9. Respect for the individual is paramount
- 10. Needs of individuals with brain injuries last a lifetime; so should their resources

To learn more about Dr. Willer, please vist: http://medicine.buffalo.edu/content/medicine/faculty/profile.html?ubit=bswiller



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Take a Break

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baubles candy cane Christmas cold December decorations eggnog elf family friends Hanukkah Holidays memories new year presents reindeer

Rudolph sleigh snow snowflake snowmobile stockinas tree turkey

riendshi

You will be forever in our hearts and we could not think of a better recipe to share. Please continue to spread kindness and love far and wide in your communities.

You will need:

a pinch of happiness 1 handful of kindness 2 spoonfuls of gentleness 1 litre of sharing a teaspoonful of helpfulness 3 heaped tablespoons of laughter 50g of smiles a sprinkling of cheerfulness 100g of love

Method:

Mix all these together. Then you will have the perfect friend. Thank you for being our friend all these years.

BIKE HELMET LAWS DON'T SAVE LIVES – BUT HELMETS DO!

By Shirley Johnson

I know people say that Bike Helmet Laws don't save lives. That is true. The law doesn't; however, helmets do!

After spending twenty plus years on the Boards of Directors of brain injury organizations, I have spent

many, many hours sitting around a table talking about bicycle and skateboard safety with others – professionals and lay people alike. Some of those hours were spent with a man who had lost his son as a result of a minor fall on his skateboard. The young guy was riding without a helmet and wiped out, got up and went home to nurse his bruises. A few hours later he died as a result of a brain injury. Yes, it is that easy!

Our children are our most valuable 'possessions' (for lack of a better term) and we need to protect them as best we can. It is really quite easy to teach them responsible use of their bike or skateboard. The first thing is that they must have a properly fitting helmet and they must have it done up properly! I see so many people riding their bikes and skateboards, yes – with their helmets on, and their chin straps are undone. What do you think will be the first thing to hit the road – you got it! The helmet, followed closely by the head! A respected physician made a statement that should never be forgotten – "I can fix a broken bone in an arm or leg; I can't fix a broken brain!"

It is also important that, when we are talking to our families about safety on bikes and skateboards, that we remind them that they need to be aware of the vehicles around them. It is much easier for a person on a bike or board to see a car than it is for the car driver to see the smaller 'vehicle'. This is especially true in the fall and winter months when the days are shorter, the weather is not so nice and people are rushing to get someplace dry and warm. Teach them to wear light coloured clothing and, if you can convince them, something reflective. It's amazing how just a small piece of reflective material shows up in a car's headlights. Teach them to follow the rules of the road, obey the traffic signals, ride in single file, let vehicles have the right of way – better to be alive than 'dead right'.

According to the National SAFE KIDS Campaign in the USA, next to motor-vehicle injuries, bicycles

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injure more children than any other consumer product. Head injuries are the most common and often most serious injury sustained on a bike, in-line skates, scooters or skateboards.

A young man who sustained a brain injury while riding a dirt bike without a proper helmet stated it clearly – "you can spend a little time wearing a helmet or you can spend the rest of your life wearing a diaper." A blunt message, for sure...but a true one.

Controversy in Saskatchewan

As I write this in advance of publication, there is a controversy in the news out of Saskatoon, Saskatchewan, where a politician is not supporting helmet legislation. I will restrain myself from saying what I really think of his opinion, as it is based on lack of knowledge and his own ignorance. We, in B.C., have seen the progression to generally accepted wearing of helmets while riding bikes and skateboards, partly as a result of helmet legislation. Yes, not everyone complies still, but it is certainly the majority that do. This took a lot of time, effort and energy on the part of individuals, organizations and government agencies. It wasn't done to flex muscles and see who could be made to comply because of a power issue; it was done because we saw, and some of us lived daily, with the consequences of brain injury. We wanted to protect our citizens, particularly our young people. For the most part it works. Please do your part to educate your family on the safe use of their alternative transportation. Yes, our young people think they are indestructible - it is up to us to make sure they recognize that they aren't. Let them have fun, but let them stay safe!

Many bicycle crashes and injuries can be prevented by simply following road safety rules:

- Stop before riding into traffic from a driveway, sidewalk, parking lot or other street.
- Look left, right and left again to check for cars.
- If the road is clear, enter.
- Ride on the far right of the road, with traffic.
- Ride so cars can see you, wearing brightly colored clothes especially at night.
- Obey all traffic signals and stop signs.
- Look back and yield to traffic coming from behind before turning left.
- Ride bicycles in single file.
- Look for uneven pavement or other surface problems.
- Use hand signals to signal turns and stops.

Skateboard Safety

Even experienced skateboarders can fall, so learning how to fall safely can help reduce the risk of severe injuries. The following are recommendations from the National Safety Council about how to fall correctly:

- When losing your balance, crouch down on the skateboard so your fall is short.
- Try to land on fleshy parts of your body.
- Try to roll as you fall, which prevents your arms from absorbing all the force.
- Try to relax rather than remaining stiff.

When riding a skateboard, be sure to obey all traffic rules, do not hitch rides from bicycles, cars or other vehicles, and only practice tricks in designated skateboarding areas.

Take Control of Winter by Planning Ahead

The weather is no longer predictable. We could have a mild winter, and then again, it could be one of the worst yet. Don't wait for the blizzard of 2015 (if there is one) to catch you off guard. Prepare now!

Transport Canada has identified these top ten tips for driving in the winter:

- 1. Get your vehicle ready for winter in the fall.
- 2. Install four matching winter tires.
- 3. Pack an emergency kit.
- 4. Learn and practice winter driving techniques before you need them.
- 5. Plan your trip, check road and weather conditions.
- 6. Remove all snow from your vehicle before each trip.
- 7. Give yourself extra travel time in bad weather.
- 8. Avoid using overdrive and cruise control on slippery roads.
- 9. Travel with a fully charged cell phone.
- 10. SLOW DOWN and wear your seatbelt.

In case of an emergency, the Canadian Automobile Association (CAA) recommends keeping a shovel, sand or kitty litter, chains, compass, reflective vest, extra clothing and footwear, booster cables and flares in the vehicle. Blankets, flashlights, an icescraper, non-perishable food (protein bars), juice boxes, water and extra batteries are also useful items to include.

Be sure your vehicle is roadworthy and get it winterized. Make sure the battery is fully charged, and that your lights and brakes are all working before heading out on a road trip. Invest in good (matching) snow tires.

Most importantly, check the weather reports and give yourself plenty of time to travel.

effections

By Janelle Breese Biagioni



"The only thing holding us back is ourselves."

~ Brad Henry, politician

I snapped this photo because I was in complete awe of the size of the links in these chains. Almost instantly I could feel the heaviness and my thoughts went to how people live life bound by "chains" they have wrapped themselves in.

I Can't... I Am Not____.. I Don't Deserve It...

The limited beliefs we put on ourselves are some of the weightiest chains we have. My friend and colleague, Pamela Sylvan (http://pamelasylvan.com) has taught me a lot about "the stories we make up" as a way of stopping ourselves from being "bold and daring". I am so guilty of this. I don't need anyone to sabotage me or talk me out of doing something that I have never done before because I am more than

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capable of doing it myself using sentences that begin with the words listed above. Not anymore. Now I tell myself... "You are just making up a story to stop yourself so change the plot and get going."

The Dreaded Shoulda/Coulda/Woulda

How many times in your life have you lived with guilt and/or regret because you bound yourself in this chain? It's a big one and certainly one that I came across after the deaths of my father, brother, and husband. There is always so much left unsaid when a person dies. This is true regardless of the death being sudden or anticipated because of a terminal illness. We all could find something that we wished had been done differently when that person was alive. We should always take time to say what we feel in our hearts before it's too late. We would all love to have one more day with those who have passed. But this is life and sometimes, perhaps all the time, we learn the most about love and living AFTER someone significant to us dies.

Forgive yourself and let it go. When you know better, you do better. Commit to doing it differently now and live with joy and purpose.

I am cheering you on to bust those chains and to start living your life freely!

STROKES

The British Columbia Centre for Stroke & Cerebrovascular Diseases reports strokes as the third leading cause of death in North America. The impact a stroke has on an individual's life and society as a whole is immense. Strokes are deemed to be the leading cause of unemployable disability and are the most common reason why individuals are admitted to extended care facilities.

The two main types of strokes are lschemic and Hemorrhagic.

An Ischemic stroke is a result of a lack of oxygen due to reduced blood flow. This is generally the result of a blood clot lodging in a blood vessel, which carries blood to the brain. Or it can result from a blockage of blood flow in a blood vessel within the brain itself.

A transient ischemic attack (TIA) is a result of a similar blockage of blood flow, but TIA symptoms are less persistent, lasting less than 24 hours. Ischemic strokes have longer lasting symptoms (longer than 24 hours). An estimated 85% of all strokes are ischemic.

A hemorrhagic stroke is caused by a rupture of a blood vessel in the brain, which results in a bleed into the brain or a brain hemorrhage. An estimated 15% of all strokes are due to hemorrhage.

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A CT brain scan (x-ray of the brain) is a reliable way to tell the difference between a brain hemorrhage or an ischemic stroke.

Symptoms and Signs of Stroke

1.Weakness of one limb or one side of the body.

2.Numbness or pins and needles on one side of the body.

3.Loss of or difficulty with speech. Slurred speech.

4.Sudden loss of vision in one or both eyes. Sudden onset of double vision.

5.Sudden change in balance and difficulty with walking.

6.Sudden and severe headache.

If you or someone you are with experiences any one of these symptoms, do not hesitate to call an ambulance! Inform the dispatcher that you think a stroke has occurred. For more information on strokes and symptoms of strokes, visit: http://strokerecoverybc. ca or www.heartandstroke.com .

Source: British Columbia Centre for Stroke & Cerebrovascular Diseases.

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#1-505 Fisgard Street Victoria, BC V8W 1R3 For more information, contact: Barri Marlatt or Lorenzo Oss-Cech

Alcohol and Drug Use after a Brain Injury

The question as to whether it's okay for a person with a brain injury to drink alcohol or use drugs is common. It's important to consult with your doctor in making any decision, but it is wise to also consider the following points:

People who begin or continue using alcohol or other drugs after a brain injury don't recover as quickly or as completely

If people who have had a brain injury begin using alcohol or other drugs, they may lose much of the progress they have made. Because they lost brain cells in the injury, the remaining cells must work harder for the person to do some of the same activities they did before the injury. If the remaining cells are affected by alcohol or drugs, they will not be able to take over the duties of the dead cells. That means skills a person could have regained are now lost.

Brain injuries can cause problems in balance, walking or talking that worsen when a person uses alcohol or drugs

For people whose brain injury has caused difficulties with balance, movements and speech, alcohol and other drugs further reduce ability in these areas.

People who have had a brain injury often say or do things without thinking first

This problem is worsened by using alcohol and other drugs. Acting before thinking can be a common problem for people with brain injury. It is also a problem for people who abuse alcohol and drugs. Not being able to control what they say or do can lead to increased risk-taking, arguments, or other socially inappropriate behaviour. People with brain injuries may learn ways to control their behaviour. However, they are unable to use these skills well when drinking or using drugs.

Brain injuries can cause problems with thinking, such as concentration and memory

Using alcohol and other drugs make these problems worse. Many people have to learn new skills, or relearn old ones, after a brain injury. People may have trouble with concentration, memory, problemsolving and other thinking skills. Alcohol and other drugs can also interfere with learning new information.

After a brain injury, alcohol and other drugs have a more powerful effect

Brain injury results in a loss of brain cells. Those cells that remain must do their own work plus the

work of the dead cells. Because there are fewer cells after a brain injury, more alcohol or drugs go to fewer cells, increasing the impact of the alcohol or drugs on that person's ability to function. The person becomes intoxicated more quickly, and the effect of the alcohol or other drugs is much greater. In addition, alcohol and other drugs interfere with the effectiveness of prescribed medications.

People with brain injury are more likely to feel low or depressed at times

Drinking alcohol (a depressant), or getting high on other drugs, makes this problem worse. Depression is fairly common after a brain injury. Some people may try to cope by drinking alcohol or using other drugs. While people may "forget" their problems for awhile, these problems are still there when they are sober. An endless cycle can be established at this point, with depression leading to substance use, which leads to increased depression. This behaviour decreases overall ability, increasing depression even more.

After a brain injury, drinking alcohol or using other drugs can cause a seizure

Some people with a brain injury have an increased risk of seizures. Those who are at a very high risk are given medication to prevent them. Alcohol and other drugs increase the chance that even those at the lower levels of risk will have a seizure. Alcohol and non-prescription drugs prevent seizure medications from working, further increasing the risk of seizures.

People who drink alcohol or use other drugs after a brain injury are more likely to have another brain injury

A person who has difficulty thinking clearly, walking smoothly, or reacting quickly due to brain injury is three times more likely to have another injury. People who further cloud their abilities with alcohol or drugs will have an even higher risk of another injury. Second and subsequent injuries will cause more harm than the first one. The destruction of more cells as the result of a second injury will leave even fewer cells to do the same jobs. Some abilities will be lost because of fewer cells to make these functions possible.

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http://www.saskatchewan.ca/residents/health/accessing-healthcare-services/health-services-for-people-with-disabilities/ acquired-brain-injury-services#step-4



BRAIN RESOURCE, ADVOCACY & INFORMATION NETWORK

B.R.A.I.N. offers facilitated support groups for Survivors, Family Members, Friends and/or Caregivers in New Westminster, Surrey, Richmond and Burnaby. B.R.A.I.N. also offers monthly educational seminars, Psychosocial & Recreation Programs, Peer Support, Advocacy & Resources. For more information contact: Tina Suter at 604-540-9234 or brain@telus.net

BRAINTRUST CANADA

For more information on programs offered by BrainTrust Canada, please call (250) 762-3233 or visit www.braintrustcanada.com.

BULKLEY VALLEY BRAIN INJURY ASSOCIATION

The Bulkley Valley Brain Injury Association provides one on one support, referrals and advocacy. We also provide case management and work with other service providers. We are open Tuesday through Thursday, in Smithers, from 9 am to 4 am. Our phone number is 250 877 7723, fax is 250 877 2397. We are located at Unit 101 – 3827 Broadway Avenue, and our mailing address is Box 634, Smithers BC, VOJ 2NO.

CAMPBELL RIVER HEAD INJURY SUPPORT SOCIETY

The Campbell River Head Injury Support Society is 4 years into their new Building with several new programs and a supportive transitional housing program. We have also recently purchased 2 small apartments for our clients who have brain injuries. With 2016 on its way we are very excited to see what the new year is going to bring our society and our members. Please check out our website www.crhead.ca to see what is going on monthly at our office or stop by at 591-9th Ave, Campbell River, BC where the coffee is always on!! Our phone number is 250-287-4323.

COMOX VALLEY HEAD INJURY SOCIETY

CVHIS welcomes Cathy Stotts as the new Executive Director. CVHIS hosts a weekly drop in luncheon for a nominal cost to survivors and their families. For more information, call 250-334-9225 or visit, www. cvheadinjury.com.

EAST KOOTENAY BRAIN INJURY SOCIETY

EKBIA IS LOCATED AT #202-20 23rd Ave. S., Cranbrook, BC, V1C 5V1. Lorraine Sweeney is the Program Manager.

FRASER VALLEY BRAIN INJURY ASSOCIATION

FVBIA is located to #201 – 2890 Garden St., Abbotsford, BC V2T 4W7. For more information call 604-557-1913 or (toll free) 1-866-557-1913 or email info@fvbia.org

KAMLOOPS BRAIN INJURY ASSOCIATION

KBIA offers many services and programs, including case coordination and life skills support. For more information, call at 250-372-1799.

NANAIMO BRAIN INJURY SOCIETY

NBIS offers rehabilitation and case management services, disability benefits assistance, and workshops focusing on issues ranging from trauma recovery to life skills strategies and anger management. For more information, call 250-753-5600 or visit their website at www.nbid.ca.

NORTH OKANAGAN-SHUSWAP BRAIN INJURY SOCIETY

NOSBIS provides many programs for ABI survivors and their families, including support groups, life skills, advocacy, and recreation programs. For more information, please call 250-833-1140 or email us at nosbis@shaw.ca. Check us out at www.nosbis.ca. Please note: Our email addresses have changed to: robyn.nosbis@shaw.ca and nosbis@ shaw.ca.

NORTH SHORE BRAIN INJURY SUPPORT GROUP (NSBI)

This support group provides advocacy and support to brain injury survivors in a time of need. The group meets monthly. For more information, visit www.nsavocacy.ca or call 604-779-2472. Richard Wagar is the contact person.

MAPLE RIDGE BRAIN INJURY SUPPORT GROUP

The support group welcomes Nora Chambers as the new facilitator. You may contact Nora at 604-462-9392 or by email at norachambers@ shaw.ca.

POWELL RIVER BRAIN INJURY SOCIETY

Powell River Brain Injury Society has relocated to #101 – 7020 Duncan St. Be sure to stop in and check out the new digs! PRBIS www.braininjurysociety.ca provides support and services for persons with acquired brain injury, spouses, family members and caregivers included. For more information, call 604-485-6065 or toll free 1-866-499-6065.

SOUTH OKANAGAN SIMILKAMEEN BRAIN INJURY SOCIETY

SOSBIS provides the following services: Case Management, Psychosocial Recreation, Peer Support – Cognitive Enhancement, Family Support, Stroke Recovery Support, Education, Personal Support, Women's Support and Prevention and Education. For more information, visit www.sosbis.com.

STRIVE LIVING SOCIETY

The Howe Sound Rehabilitation Services Society has changed its name to Strive Living Society and will be opening the new Strive Centre this summer. To receive more information on updates regarding details about programs and services call 604-936-9944 or email heather@ striveliving.ca or visit www.striveliving.ca. The contact person is Heather Hogenes.

THE SUNSHINE COAST ABI SUPPORTS PROGRAM is funded through the Ministry of Health and Vancouver Coastal Health. This program provides 1-1 services to assist individuals in setting and achieving personal goals including referrals to alternate community services. The Acquired Brain Injury Peer Support Group. This friendly group meets 9 times per year. Meetings provide a warm environment to meet and share with other survivors or hear from a local presenter. For more information contact: Acquired Brain Injury Supports VCH Home Care Services

Box 2420, 5630 Inlet Avenue Sechelt, BC VON 3A0 Ph: 604-885-8524 FAX: 604-741-0728

TRI-CITIES BRAIN INJURY SUPPORT GROUP

Tri-Cities Brain Injury Support Group continues to meet on a monthly basis. Meetings are typically held every 1st Thursday of the each month from 2:00-4:00 p.m. at Coquitlam Public Library - Poirier Branch on 575 Poirier Street. Group meetings have included guest speakers, curling, bowling, sailing and social activities for survivors, family members, support personnel and friends. As meeting dates can change, please contact Sandi Caverly at 604-916-5027, or by email at S.Caverly@shaw.ca or Martin Granger at martin_granger2007@ hotmail.com for more information.

VICTORIA BRAIN INJURY SOCIETY (VBIS)

VBIS offers individual and group programming to survivors and their family members. Programs include: Peer Support Drop-In (Mon-Thurs), ABI 101, Coping Strategies, Family Support Group (Mon, 6:30 PM), Youth Support Group (Thursdays, 6:00 PM), Music Program, Creative Arts Program and Walk & Run Program. VBIS also offers Awareness Seminars and training to community groups. For more information call 250-598-9339 or visit www.vbis.ca.

SUBSTANCE ABUSE, BRAIN INJURY, AND CRIMINAL BEHAVIOUR

By Shirley Johnson

We have long recognized the correlation between substance abuse and criminal behaviour, however, I would like to take this one step further and speak to the issues of substance abuse, acquired brain injury and criminal behaviour.

Ruth Wilcock, Executive Director of Ontario Brain Injury Association, stated that "approximately one-third of traumatic brain injury survivors have a history of substance abuse prior to their injury. Furthermore, twenty percent of people who do not have a substance abuse problem become vulnerable to substance abuse after a brain injury. So, for some survivors of brain injury, substance abuse or addiction is an old problem carried forward and for others, it becomes a new challenge".

Acquired brain injury has been well documented within prison systems around the world. Less is known, however, about the interaction of substance abuse, brain injury and criminal behaviour. The coexistence of brain injury and substance abuse in a



After brain injury, trouble with speaking, listening, reading, writing or with social communication is common. We are here to help.

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- Communication devices and alternative communication methods



Columbia Speech & Language Services Inc.

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Studies in the American correctional systems suggest that as high as 87% of those incarcerated report having sustained a brain injury. Twenty-three per cent of admissions to a forensic treatment program in Ontario had a well-documented history of acquired brain injury, while eighty-two percent of Australian prison inmates indicated a history of acquired brain injury. The challenges often presented with a brain injury, lack of impulse control and aggressive tendencies can result in difficulties with the law and involvement in the criminal justice system. In some cases, this population is also vulnerable to influence from less desirable persons resulting in involvement as well.

The need for prevalence studies within the Canadian correctional systems is recognized. In addition further study around substance abuse, acquired brain injury and criminal behaviour is needed to identify the rehabilitative needs for this population and the best way to reduce recidivism.

Prison is a challenging environment at the best of times and for those with acquired brain injury it can be even more so. Attention deficits and short term memory loss can make it difficult for an inmate to focus on directions or to retain rules and regulations. Prison staff unfamiliar with the effects of acquired brain injury may mistake this as defiance or deliberate behaviour, which can result in disciplinary action. Inappropriate social interaction can also lead to disciplinary action by prison staff or consequences from other prisoners.

There are those who manage well within the prison environment and with adequate and appropriate support on release can return to productive life in the community. And, there are those who don't have these supports.

This article touches on only the very smallest tip of the iceberg. It is my belief that we are on the correct path to appropriate treatment for those who have sustained an acquired brain injury and find themselves incarcerated. Only time will tell if this will be the case.

*This list updated Winter Issue, 2015

Abbotsford	Carol Paetkau	604-557-1913	TF 1-866-557-1913
Abbotsford Brain Injury Drop In	Shelly Steele	604-850-6608	
Acquired Brain Injury Society of the Yukon	Anne-Marie Yahn	867-668-5283	
Barriere/Merritt	Terry-Lynne Stone	250-372-1799	
British Columbia Brain Injury Association	Sea to Sky	604-984-6439	
Brain Trust Canada	Laurie Denton	250-762-3233	
Brain Trust Canada - Vernon Contact	Marcie McLeod	250-307-6064	
B.R.A.I.N. (Brain Resource, Advocacy & Information Network) (New Westminster, Surrey, Richmond, Burnaby)	Tina Suter	604-540-9234	
Bulkley Valley Brain Injury Association	Tanya Davidson	250-877-7723	
Burnaby Chinese Brain Injury Support Group	Angela Kan	604-877-8606	
Campbell River Head Injury Support Society	Shelley Howard	250-287-4323	
Caribou Brain Injury Society	Courtney Mailhot	250-392-7772	
Chilliwack	FVBIA	604-557-1913	TF 1-866-557-1913
Comox Valley Head Injury Society	Cathy Stotts	250-334-9225	
East Kootenay Brain Injury Association	Lorraine Sweeney	250-417-6220	
Fraser Valley Brain Injury Association	Carol Paetkau	604-557-1913	TF 1-866-557-1913
Golden East Kootenay Brain Injury Association	Debbie Gudjonson	250-344-5674	
Interior BC Brain Injury Services, South Okanagan Division	Lois Hansen	250-487-0236	or 250-493-8866
Kamloops Brain Injury Association	Terry-Lynn Stone	250-372-1799	
KBIA - Barriere/Merrit Contact	Terry-Lynn Stone	250-372-1799	
Langley/Aldergrove Brain Injury Support Group	FVBIA	604-557-1913	TF 1-866-557-1913
Maple Ridge Support Group	Nora Chambers	604-462-9392	
Mission	FVBIA	604-557-1913	TF 1-866-557-1913
Nanaimo Brain Injury Society	Mark Busby	250-753-5600	
New Westminster Headway	Heather Hogenes	604.520.0130	
North Okanagan Shuswap Brain Injury Society (Salmon Arm/Shuswap)	Robyn Coatta	250-833-1140	
North Shore Brain Injury Support Group	Richard Wagar	778-317-3290	
Northern Brain Injury Association	Will Lewis	1-866-979-4673	
Powell River Brain Injury Society	Deborah Dee	1-866-499-6065	
Prince George Brain Injured Group Society	Alison Hagreen	250-564-2447	TF 1-866-564-2447
Sechelt/Sunshine Coast Brain Injury Support Group	Susan Goddard	604-885-8524	
Semiahmoo House Society Acquired Brain Injury Services	Office	604-592-1006	Local 230
South Okanagan Similkameen Brain Injury Society	Linda Sankey	250-490-0613	
Strive Living Society	Heather Hogenes	778-370-0499	
Terrace Brain Injury Support Group	Margaret Peill	250-641-4673	Margaret.peill@nbia.c
TriCities Support Group	Sandy Caverly	604-916-5027	
Vancouver Survivors Support Group	Lillian Wong	604-873-2385	
Victoria Brain Injury Society	Krissi Spinoza	250-598-9339	
West Coast Support Network	Wanda McAvoy	250-726-7459	
West Kootenay Brain Injury Association	, Robyn Bogue	250-304-1212	
*Please email name and nhone number changes to headlinenews@sha			siblo

*Please email name and phone number changes to headlinenews@shaw.ca to ensure this list is kept as up-to-date as possible.

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