



The Monarch

September 2009

**BRAIN INJURY
ASSOCIATION
OF LONDON
AND REGION**

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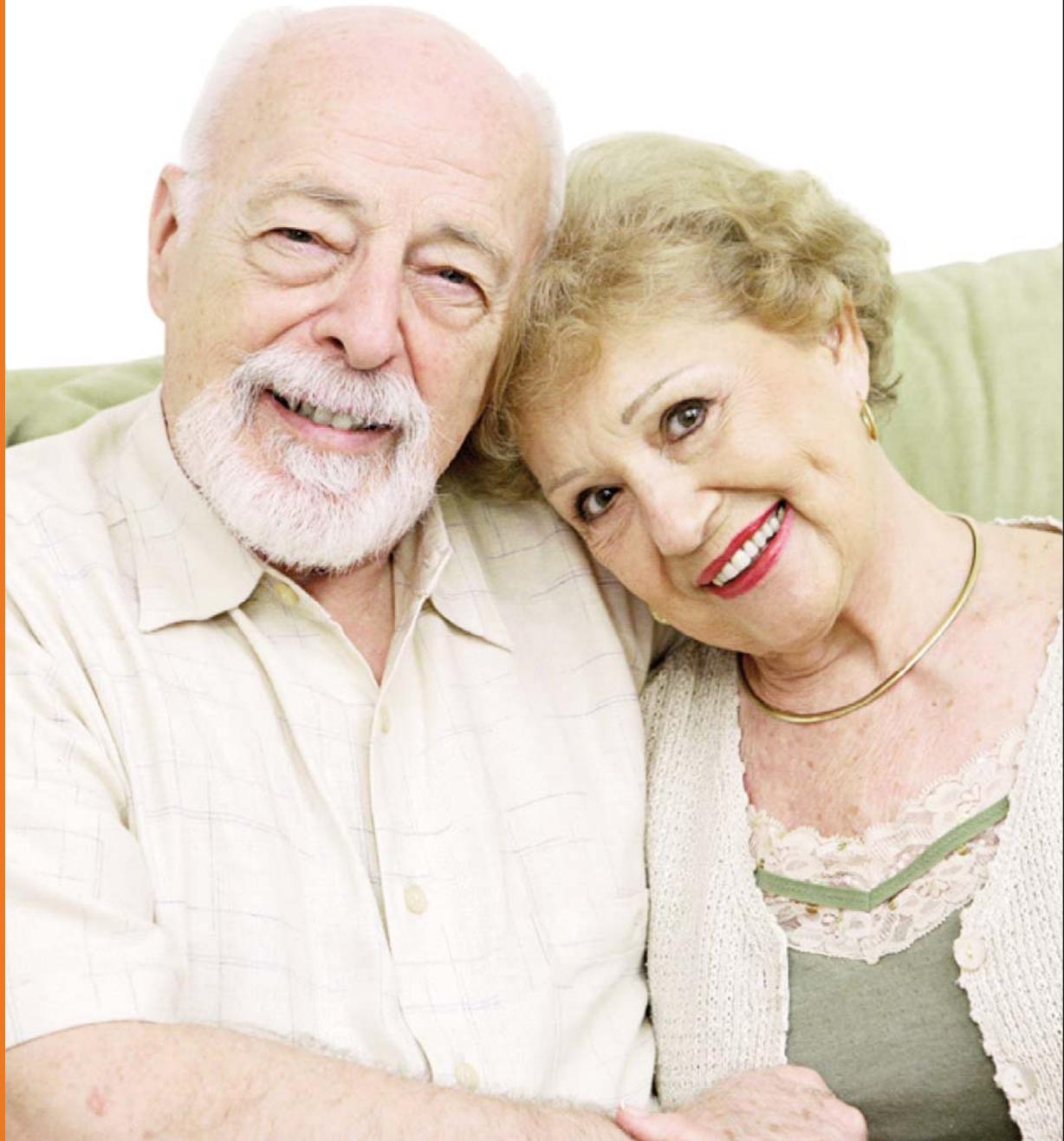
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The Brain Injury Association of London and Region acknowledges the generosity of Legate & Associates as sponsors of this publication.

The “B-B-Q King”

“No doubt about it. A permanent spinal cord injury will depress you... but you have to work through it and realize that life goes on and still has a lot of wonderful surprises for you.”

Frank Nunnaro



Frank Nunnaro is a regular guy with a real talent for barbeque cooking. He was a produce manager at an Orillia IGA when he had a terrible car accident that damaged his spinal cord and left him a paraplegic.

After intensive rehabilitation at Lyndhurst Hospital, and with the loving help from his wife Vicky, Frank has gone on to become one of the great BBQ hosts of the century. Every year in the middle of the summer, Frank and Vicky host an amazing barbeque party at their Wasaga Beach home. Frank likes to think of it as a real celebration of life. We like to think of it as a testimony to the human spirit.

We are honoured to have represented Frank Nunnaro in his lawsuit and to count Frank as a friend and one of the many everyday heroes we have been able to help.

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Reminder:

Membership Renewals are now due!

Dual Memberships now available
with Ontario Brain Injury Association
and the Brain Injury Association
of London and Region.

See OBIA.BIALR Dual Membership
Application Inside

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The **Monarch** is published by the *Brain Injury Association of London and Region*. Opinions expressed are those of the authors and do not necessarily reflect the opinion of the Board of Directors. Submissions to the Monarch are welcome at any time, but should consist of no more than 325 words. When you send in an article from a paper/magazine, please include the date and name of publication. Please include a cover letter with your name and telephone number. Published letters can be anonymous, but the editors must verify the information and obtain permission to reprint the letters, as well as have a contact for questions and responses. Advertising rates are available on request. The publication of an advertisement does not imply support of the advertiser by the Association. All submissions must be received by the first Wednesday of the month prior to publication, at the office located at: 560 Wellington Street, Lower Level, London, ON, N6A 3R4

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EXECUTIVE DIRECTOR'S REPORT

I would like to congratulate the members of the Perth County Acquired Brain Injury Support Group for a job well done! This past June, the group invited Perth -Wellington MPP John Wilkinson and Nigel Gilby from Lerner's to discuss various issues that the government need to consider for ABI survivors including drug benefits for those on CPP, housing, access to specialized care, to name a few. It was evident that a great deal of thought and planning was put into the meeting by the members of the Perth Group. The powerful messages in each personal story shared by individual group members demonstrated the diverse needs of the brain injured population.

The months of July and August are typically a bit quieter at the Association, with many of the regular activities taking a holiday. The break has allowed Becky and me to regroup and organize many of the tasks we normally don't get an opportunity to do. The recent purchase of a new software database has kept us busy with updating all of our contacts and searching for correct addresses. The new program will help us to merge all of our databases into one and will help us with improving communication among our many supporters. Many thanks to volunteer Kathy Hysen for the countless hours of time she has spent on sorting out the databases and researching the contact information.

The summer months seem to pass so quickly and September marks the beginning of a new year for us. We are eager to resume work on all the committees and the support groups are scheduled to start up again. Plans for fundraising events are underway for the Brain Injury Golf Classic, co-hosted with H.A.B.I.T.

The 2nd Annual Charity Dinner & Casino Night hosted by M.D.M. Reporting Services will be held in November promises to be a fun evening with Nick Paparella as Master of Ceremonies and entertainment by comedian David Tsonos from Yuk Yuks. We look forward to wel-



coming new students participating in internships from the SSW program at Fanshawe College and a Pro Bono Law Project by UWO Law students. Our Board of Directors recently participated in a strategic planning session for the Association. With the help of facilitator, Michele Meehan from OBIA, we looked at several areas including our goals, vision of the association, strengths, weaknesses and opportunities. We are planning on hosting several stakeholder focus groups in the next year to help us determine areas of support, education and advocacy that are needed.

Congratulations to the Cornerstone Clubhouse on their 10th Anniversary! The participants, facilitators and management all play a large role in the success of the Clubhouse and I am proud to be involved in the role of Chair of the Clubhouse Advisory Board.

Both Jamie Fairles and I are excited to have the opportunity to serve on the Ontario Brain Injury Association Board of Directors as representatives of the OBIA Advisory Council. Our continued involvement in the OAC gives us a greater understanding of the needs of persons living with brain injury, not only in our own community, but also on a provincial level.

All in all, it is looking like the Association has another great year to look forward to!

Donna Thomson

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Report from OAC, June 27, 2009

The OAC met on June 27. As the Council concluded its business for the year, members elected leaders for the upcoming year. We are proud to announce the following council leaders and representatives to the OBIA Board;

Chair - Melanie Gardin, Chair of the board of BIA Windsor Essex

Vice Chair - Donna Thomson, Executive Director of BIA London and Region

Survivor Representatives to the OBIA Board - Jamie Fairles, board member of BIA and Loreigh Mitges of the Hamilton BIA will continue in this role.

The OAC also reviewed its terms of reference this year, and made a change to specifically name family members along with survivors as necessary and valued voices at the table.

OAC representatives discussed their interest in educational sessions that will help them run their associations more effectively. Among the topics that will be explored are creative approaches to raising money, developing support groups, and how to work in collaboration with other organizations to stay sustainable. These topics will be addressed at meetings in the next season, starting in September.

The OAC meeting was followed by OBIA's Annual General Meeting. At the AGM, OBIA recognized the outstanding contributions of the many people who support efforts to improve the quality of life for people living with ABI. We are pleased to honour the following individuals;

Hedy Chandler of CHIRS, who received award for Professional of the Year

Dawn Kuhlenbaumer of Sault Ste Marie received the Volunteer of the Year Award

Wendy Cook was presented with the Fellowship Award, honouring her outstanding contribution to the quality of life

for people with ABI.

Brain Injury Services Hamilton Haldimand-Norfolk & Niagara was presented with the award for Corporate Fellowship

The Legal Fellowship Award was presented to: Girones Lawyers

The recipient of the Media Award was presented to Robert Stevens and Rachel Sa, of PR Post

OBIA greatly appreciates the time, dedication and talents of these individuals and organizations toward improving the quality of life of people with ABI in Ontario.

The OAC will meet again on September 12, 2009.



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A Community Partnership

We would like to express our gratitude for those who contributed to the success of our 8th Annual Helmets on Kids Campaign

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London Police



Wortley Road Public School students presenting money they raised for the Helmets on Kids Campaign.



What a Night to Remember!

Cornerstone Clubhouse's 10th Anniversary Celebration.

By Joel Rowe



Cornerstone Clubhouse's 10th Anniversary will certainly be remembered long after June 25, 2009. The enjoyable evening was filled with good food, friends, and family. This combination in itself is a guaranteed formula for success. Now when you add an important ingredient such as excellent live entertainment (a live band known as the "TrebleMakers"), it makes a wonderful evening. I might add that our very own Deb Wilson McLeod was displaying her talent as the drummer.

Now I know what readers may be thinking "holy moly" I am near the exhaustion level; could this anniversary possibly have even have more to offer? Well, I say fasten your seatbelts and enjoy the rest of this article.

The food was carefully prepared and barbecued by professionals (Gary Emeny and John Ferriero) The aroma of food could not be tolerated anymore, and we all agreed that it was time to enjoy the lovely feast. There were shish kabobs, large assortments of salads, and other side dishes. Believe me when I say nobody left hungry. While our stomachs were resting, we were treated to some of the best coffee.

John Ferriero and myself as co-emcees were about to begin a small assortment of interesting speeches, beginning with the first Director of Cornerstone Jill Bowen and finishing with a speech from our present Director Mary Catherine Ann. One of the privileges I enjoyed as co-emcee was reading a proclamation from Premier Dalton McGuinty. Our Premier of Ontario certainly

has an excellent approach to Cornerstone Clubhouse. Deb Matthews, MPP also sent a letter I read to the 120 people in attendance, which of course was very positive, congratulating all of us and stating that this is a major milestone and one we should be proud of.

Unfortunately, good evenings do come to an end. I do believe strongly that wherever there is an end there is a new beginning, and by this I mean people living with the effects of an acquired brain injury will continue to learn or regain important skills and lead productive active lives, thanks to Cornerstone Clubhouse's continuing success.

Let me please give my extended and sincere thanks to Cornerstone Clubhouse's Facilitators for their ongoing support, patience, knowledge and compassion. Their names are as follows.

Director: Mary Catherine Ann

Facilitators: Gary Emeny, Vicky Eaton, Jennifer Davis, Caraleen Baker, Deb Wilson Macleod, John Ferriero, Summer Relief: Tara McElroy.



Cornerstone Clubhouse

"A day and evening program for adults living with the effects of an acquired brain injury."

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Peer Support Mentoring Program for People Living with ABI

By Jamie Fairles
Peer Support Coordinator

This past June I was reminded how support is so very important when dealing with a brain injury.



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I underwent my 7th brain operation to remove a tumour that had grown back from over 10 years ago. The support of my family has been great as always as well as the support I've received from the Brain Injury Association of London & Region. Not only did Donna Thomson visit me in the hospital, but she communicated with various other Peer Support Coordinators to orchestrate a few partnerships because they don't allow phones in hospitals and since I've been back, there are at least 3 new matches and a couple more on the horizon!

When somebody supports you, amazing things happen. If you think your experience with ABI can be helpful to somebody new to ABI, or if you want to talk to somebody who has walked a similar path that you are navigating, give the office a call. And either I or Donna will do an intake.



M.D.M. Reporting services
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2nd Annual Charity Casino & Dinner

Saturday November 21, 2009 > 09 > 01
at West Haven Golf Club

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and Yuk Yuks comedian
David Tsonos

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&
Brain Injury Association of London & Region

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Program Highlights

Membership in both the Ontario Brain Injury Association (OBIA) and the Brain Injury Association of London and Region (BIALR). Individual members shall be entitled to one vote at both BIALR and OBIA's Annual General Meeting. Family members shall be entitled to no more than two at both BIALR and OBIA's Annual General Meeting.

Membership in Community Support Network/Reseau De Soutien Communautaire (CSN/RSC) is available to individuals and families who support the aims and objectives of participating community associations and OBIA. Corporations, associations, partnerships, or other types of organizations are welcome to support participating community associations and OBIA by listing or advertising in the online ABI Directory of Services, but may not hold CSN/RSC membership.

Members will receive a one-year subscription to OBIA Review and The Monarch newsletter.

Members may participate in the Peer Support Mentoring Program for People Living with ABI.

Members will have free access to OBIA's resource library and be eligible for a \$25.00 discount on most of OBIA's training programs.

All membership fees are equally divided between OBIA and BIALR

OBIA & BIALR Dual Membership Application Form

Name: _____

Address 1 _____

Address 2 _____

City: _____ Postal Code _____

Home Phone: _____

Work Phone: _____

Email: _____

Yes! I wish to purchase a Dual Membership and I understand that I will hold membership to both Ontario Brain Injury Association and the Brain Injury Association of London & Region.

Annual Membership Fees:

Individual \$30

Family \$50

Subsidized \$5

Please make cheque payable to Ontario Brain Injury Association or pay using:

Visa

MasterCard

American Express

Card Number: _____ Expiry _____ / _____

Ontario Brain Injury Association
PO Box 2338
St. Catharines, ON L2R 7R9
obia@obia.on.ca
Registered as a Canadian Charitable Organization, Registration #10779
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Monthly Acquired Brain Injury Support Groups

London/Middlesex

BIA of London & Region
560 Wellington Street, Lower Level
London, Ontario
Last Thursday of Each Month
Sept. 24, Oct. 29, Nov. 26

18-30 Social Support Group

Location Varies
www.braininjurylondon.on.ca
Last Monday of each month
Sept. 28, Oct. 26, Nov. 30

Paediatric Support Group

Thames Valley Children's Centre
Baseline Rd, London, ON
Currently on Hold

Perth County

Zehrs Markets
2nd Floor Community Room
865 Ontario Street, Stratford, ON
Last Tuesday of Each Month
Sept. 29, Oct. 27, Nov. 24,

Oxford County

CCAC
1147 Dundas Street
Last Tuesday Each Month
Sept. 29, Oct. 27, Nov. 24

Woodstock Public Library
445 Hunter St, Woodstock, ON
Third Thursday of Each Month
Sept. 17, Oct. 15, Nov. 19

Huron County

Huron County Health Unit,
77722B London Road, South,
Clinton, On
(located behind Huronview)
Last Thursday of Each Month
Sept. 24, Oct. 29, Nov. 26

Elgin County

St Thomas Senior's Centre
225 Chestnut St, St Thomas ON
Third Monday of Each Month
Sept. 21, Oct. 19, Nov. 16

Unless noted otherwise all groups meet from 7-9PM and all locations are wheelchair accessible
Information available at www.braininjurylondon.on.ca or e-mail support@braininjurylondon.on.ca
Becky LeCouteur (519) 642-4539





Ask a Lawyer

Karen Hulan

The Impact of Injury on an Elderly Person's Quality of Life

After sustaining an injury, there are many types of compensation potentially available to you. In order to maximize the amount of compensation, it is important to demonstrate the full impact that the injury has had on all aspects of your life. The aftermath of an injury can be obvious such as your inability to continue in your employment, perform childrearing responsibilities or engage in the same extracurricular activities. For the elderly, the same considerations may not apply. The full impact of the injury may not be apparent at first glance because you have likely retired and have raised your family. However, the impact of the injury upon your life can be significant and so careful comparison of your life before and after sustaining

the injury is crucial to achieving appropriate compensation.

Judges are recognizing that an injury can have a more profound effect on an elderly person than the same injury would have upon a younger person. Judges have recognized that as we age, there are generally fewer activities that we can engage in. The inability to participate in the activities you previously enjoyed means that an injury has significantly affected your quality of life. For example, a retiree who previously enjoyed cooking and spending time with family but cannot, as a result of injury, play with or hold her grandchildren, has been deprived of much of what she enjoyed.

continued on page 11

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Supporting people to gain healthy functioning



This increases the amount of compensation available for that person's pain and suffering and loss of enjoyment of life.

Judges have also recognized that an injury to an elderly person may increase the need for assistance (such as, medical or nursing care or housekeeping and home maintenance assistance) because of prolonged recovery time with the elderly. This increases the amount of care costs that you can recover.

As we age it becomes more likely that we will experience some medical condition or illness such as osteoarthritis or deficits in memory. If the injury causes a deterioration in a condition or illness you already had, then you are able to recover compensation to the extent that the condition has worsened. The difference in your level of functioning before and after the injury is what you are able to claim in a lawsuit.

Here are some things you can do to assist your lawyer in demonstrating the impact that the injury has had on your life:

1. Contact a lawyer early so that she can help you document the ways in which your life has changed since you have been injured.

2. Create a list of activities that you did before you were injured. This can include activities you did individually or with others.

3. Document from the onset of injury the type of things that you cannot do as a result of the injury.

4. Consider the impact that the injury has had upon your relationship with others including your spouse, children, grandchildren and friends.

5. Consider asking a close family member or friend who knew you before and after you sustained the injury to attend appointments with you so that your doctors, treatment providers and your lawyer may better understand the differences in your life as a result of the injury.

You are entitled to fair compensation for the injury you sustain. Some of the changes in your life will be subtle but the combined effect of them means that your life with an injury is much different than you previously enjoyed. Careful consideration of the differences will assist a great deal to ensure that you receive fair compensation.

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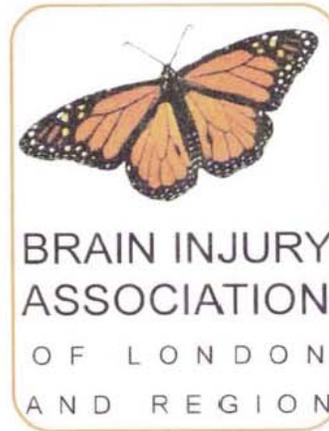


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ANNUAL REPORT



Year Ending March 31, 2009

MISSION STATEMENT

To maximize the quality of life of individuals with brain injury
their families and friends through:

- Peer and Community Support
- Information about services, resources and programs
- Public awareness of the causes, impact and prevention of brain injury
- Advocacy on behalf of those affected

Brain Injury Association of London & Region

560 Wellington Street, Lower Level, London ON N6A 3R4
Phone (519) 642-4539 Toll Free 1-888-642-4539 Fax (519) 642-4124
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Talaal Bond Yvonne Pollard

Program Assistant: Becky LeCouter

The Brain Injury Association of London & Region is a non profit registered charity and a recognized affiliate of the Ontario Brain Injury Association. Our mission is to improve the quality of life of people with brain injury through support, information, public awareness and advocacy.

Our association supports the counties of Oxford, Elgin, Huron, Perth and Middlesex with services such as support groups, respite care, peer support mentoring program and a quarterly journal. (The Monarch). In addition, we hold an annual conference, provide public awareness presentations and publish a brain injury services directory. Well over 80 volunteers fill important roles in the provision of our services and we serve as a teaching agency for several professional programs at the University of Western Ontario and Fanshawe College. We are active members of the Acquired Brain Injury Network of Southwestern Ontario.

Presidents Report

Well it is hard to believe that another year has come and gone. As I reflect on the accomplishments that the Brain Injury Association of London and Region has made over the past year, I am very proud to have been a part of this great organization. First I want to acknowledge the hard work of the amazing board members; they give freely of their time to help make this organization what it is today. And a special thanks to our dedicated supporters, we rely on your help through out the year for programs and events that we hold, and you are always there for us. And our Executive Director, Donna Thomson, for always leading us down the right path.

The Brain Injury Association of London and Region has come a long way this year, with another very successful gala under our belt, we are already planning for next year's bigger and better event, so stay tuned.

We are very proud to have expanded our support groups, enabling us to reach more communities, families and clients living with the affects of a brain injury. Our respite care program is now up and running, enabling families to leave their loved ones in the care of a professional, while they take a much needed break. It has been my pleasure and honor to serve on this board filled with such enthusiastic and goal orientated members. I know that this board and the in-coming board are certainly focused on guiding the Brain Injury Association of London and Region to higher levels of success and exposure.

As we stand on the threshold of a new year this will be an exciting and prosperous year for the Brain Injury Association of London and Region. I look forward to many more great things this coming year.

Mary Carter, President

Treasurers Report

On April 1, 2009, The Brain Injury Association of London and Region began a new fiscal year. I am confident this new beginning will bring about continued growth in our organization and the services we provide. This past fiscal year marked our first full year in our new downtown location which has welcomed many new members and volunteers. We have seen the benefits to be gained by hiring an Assistant to our Executive Director, providing a much needed resource to continue to develop our programs and reach out to the regions we serve. Again, we have continued to maintain our financial health and our committees continue their diligent efforts.

We benefited greatly from the efforts of our fundraising committee in the planning of our annual Gala, the efforts of those involved in planning the annual golf tournament we share the with HABIT, the generosity of our sponsors

and donors and the efforts of our many volunteers through their involvement on our committees and our Board.

Once you are reading this, our Board will have completed its Annual August Strategic Planning Day and will have begun its efforts to assist in directing our organization to reach and help more individuals and their families dealing with brain injury.

We hope you will continue to support us by attending our annual golf tournament on September 24, 2009 and our annual Gala – mark your calendars – Saturday February 27, 2010.

If you wish to obtain a copy of our Audited March 31, 2009 Financial Statements, please contact the office.

Balance Sheet

	March 31, 2009	March 31, 2008
Assets		
Cash	\$ 61,403	\$ 77,116
Other Asset	<u>15,677</u>	<u>15,725</u>
	\$ 77,080	\$ 92,841
Liabilities		
Accounts payable	\$ 2,001	\$ 2,001
Deferred income	30,264	52,230
Unrestricted net assets	<u>48,815</u>	<u>38,610</u>
	\$ 77,080	\$ 92,841
Operating Statement		
Net Revenue	\$163,349	\$163,821
Net Expenses	<u>157,144</u>	<u>158,263</u>
Surplus	\$ 6,205	\$ 5,558

Executive Director Report

The Brain Injury Association of London & Region continues to strive to fulfill our mission of providing support, education, advocacy and increase awareness of needs of the brain injured community.

Each month we receive several calls from survivors and family members seeking help in dealing with a brain injury. Many have gone undiagnosed, or under serviced and feel they have nowhere to turn. In many cases, we are able to direct them to appropriate services and advocate on their behalf.

Our support groups have continued to be available in each of the five counties, as well as specialized groups. During this past year, we said goodbye to our Support & Volunteer Coordinator Joe Zablocki and welcomed new staff Becky LeCouteur in the role of Program Assistant.

The Respite Care Program is currently assisting several families who are providing 24 hour care of their brain injured loved one to take a much needed rest. The program provides 4 hours per month of respite care.

Many members of our Association have taken advantage of the opportunity of belonging to both our Association and OBIA for one low cost. This initiative is an important step to increase

both awareness of brain injury issues across the province and to further enhance lobbying efforts for those we serve. The Peer Support Mentoring Program is now into its third year, with several successful matches.

In addition to providing an informative workshop, annual conference, and the Brain Basics course, we have developed several brain injury presentations. We have presented to the general public, staff in long term care facilities, teachers, students, community groups. Each presentation is customized to meet the needs of the audience.

I have the honour of working with an amazing group of people that make up our Board of Directors and all of our volunteers. The backbone of our organization is through the hard work provided by the committees and student interns. Many thanks go to the Fanshawe & UWO students, Fundraising, Conference, Community Awareness, Editorial and Governance Committees for their efforts.

I would also like to take this opportunity to thank all of the financial contributors that provide the means for us to continue to provide the services we offer.

*Donna Thomson,
Executive Director*



Organization Overview

About Us:

- ◆ Registered charity
- ◆ Incorporated 1986
- ◆ In its 23rd year of providing services to Middlesex, Oxford, Elgin, Perth & Huron
- ◆ Provides support, education, advocacy & public awareness of brain injury

Services Provided:

- ◆ Respite Care Program
- ◆ Peer Support Mentoring Program
- ◆ Publication of *Brain Injury Services Directory*
- ◆ Publication of quarterly journal *The Monarch*
- ◆ Public Awareness Presentations
- ◆ Annual Brain Injury Conference

Monthly Support Groups

Middlesex
Oxford
Huron
Perth
Elgin

Specialty Groups

Sibling Support Group
Parent Support Group
Ages 18-30 Social Group
Teen Social Group

Partnerships

Helmets on Kids

Raise funds to purchase & distribute helmets to needy children

Partners include:

- Ontario Trial Lawyers Association
- London Health Sciences Centre
- Thames Valley School Board
- London District Catholic School Board
- Brain Injury Association of London & Region

Camp Dawn

An annual weekend retreat for survivors of brain injury. The Association was a founding partner of Camp Dawn, which is now a registered charity. The Association continues to provide much support to the Camp initiative and our Executive Director serves on the Camp Dawn Board.

OBIA Advisory Council

Conduct advocacy on a provincial level and to set province wide standards.

Partners include

- Ontario Brain Injury Association (OBIA)
- All 19 Community Brain Injury Associations

London Brain Injury Golf Classic

Co-Host charity fundraising golf tournament

Partner:

Helping Acquired Brain Injury Treatment (H.A.B.I.T.)

In addition to the partnerships listed, our Executive Director represents the Association within several organizations including:

- Cornerstone Clubhouse Advisory Board
- Acquired Brain Injury Network of Southwestern Ontario
- London & Area Association for Volunteer Administration (LAVA)
- Pillar Nonprofit Network

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Practical Strategies

Sue LaBrash

My name is Sue LaBrash and I happen to have a brain injury. My car and I were T-boned by a transport truck in October of 2002. Since then, I have very little memory of my first couple of years of recovery. I have come to think of the accident as bittersweet. EACH and EVERY day has become a new challenge for me. I've had to eagerly look upon each task as an OPPORTUNITY to re-learn.

I am eager to share with you some of the practical strategies for everyday living that I have implemented out of necessity. So that my recovery wasn't too confining I've had to think outside of the box, so to speak.

There's a poem by Veronica A. Shoffstall that speaks to change and acceptance.

Comes the Dawn

*After a while you learn the subtle difference
between holding a hand and chaining a soul,
and you learn that love doesn't mean leaning
and company doesn't mean security,
and you begin to understand that kisses aren't
contracts
and presents aren't promises.
and you begin to accept your defeats
with your head held high and your eyes
open,
with the grace of a woman, not the grief
of a child.
You learn to build your roads
on today because tomorrow's ground
is too uncertain for plans, and futures
have
a way of falling down in midflight.
After a while you learn that even sunshine
burns if you get too much.
So you plant your own garden and
decorate
your own soul, instead of waiting
for someone to bring you flowers.
And you learn that you can really endure,
that you really are strong
and you really do have worth
and you learn and learn ... and you learn
with every goodbye you learn.*

I had to re-learn who I was now. I knew that I didn't want only to be identified as a person with an ABI. I had to re-define ALL of my roles...Wife, Mother, Boss, daughter, sister, friend. Now I had to look at things differently but DEFINITELY with a FUN positive spin on things. The key to my future success was to believe what I'd always believed THE KEY TO SUCCESS IS HOW WELL YOU DEAL WITH PLAN B.

My next challenge was to manage my time differently and more effectively. I found this overwhelming. I liken that feeling to the following analogy. Imagine entering a HUGE walk-in closet...and you have before you a THOUSAND DIFFERENT outfits to choose from. Talk about overwhelming! NOW imagine you walk into the same closet and your only choices are Red..White..or Blue. That's simpler and my time is more organized now because it HAS to be.

I've had to learn to pare things down into manageable chunks of time. And in each of those chunks, the only task ahead of me was the one right in front of me.

One problem that I have is over-estimating my



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ability to remember. For instance, one day my husband told me there was an important meeting on Wednesday. The day came and since I only relied on my memory and didn't write information down I wasn't prepared for the meeting. I NEED to write things down in a place where I'll find it. That's where my daytimer is necessary.

There are many different daytimers on the market. Find the one that works well for you. I like a day at a time format where I can mark my appointments on the left side, and instructions for my appointments on the right. I also type up my whole schedule for the week so I can see my week at a glance. Appointments are booked for the same time each week. Any additional appointments I highlight in colour so that they stick out for me.

Initiation was difficult for me so planning a schedule of daily tasks for me was necessary. At first my rehabilitation therapist

would suggest hourly tasks. Since I needed those tasks to be more manageable for me I had to apply those chunks of time to my schedule. So as I said, I need to work with a daily journal for my day to day tasks and my week at a glance schedule so that I can VISUALIZE my week. Make sure that you put the phone number of the person you are about to see right on your schedule so that if you have to re-book the number is at hand. Also blank spaces can be seen so that is where I can see holes in my week which affords me the opportunity of initiating a task or

a leisure activity. For instance I noticed that I had three mornings free so I got a Y membership and signed up for group exercise classes. I also noted that I wasn't really tapping into my creative side so I signed up for pottery classes one night a week. This is also important for socialization. I get to meet new



continued on page 20

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continued from page 19

fun people. The most important point I want to make is to be sure to schedule in BREAKS.

With laundry I found that I needed to assign a day of the week for everyone. I do everyone's laundry separately so I can keep track of who's laundry is done.

Another challenge for me was CONVERSATION. I tend(ed) to go off on tangents and interrupt others so that I could "get it out before I forgot it". I am fortunate enough that I have a captive audience daily in that I have to Taxi everywhere. It is necessary for me to practice ACTIVE LISTENING skills The acronym is LISTEN: LOOK at the person, show INTEREST in the conversation, SPEAK less than half the time, TRY not to interrupt or change the topic, EVALUATE what is being said and finally NOTICE body language. (mine and theirs) You really will remember better. I also had to learn how to remember all of their names so the acronym NAME is to NOTICE the person (eye contact), ASK the person to repeat their name, MENTION their name in conversation three times and EXAGGERATE some special feature. Everybody, no matter who they are when asked to repeat a conversation will remember something from

the beginning, something from the end and fragments from the middle. I practice mirroring or repeating through repetition during the middle of conversations, so that I can maximize what I will retain.

Those were some examples on a larger scale. I have some simpler examples of strategies that continue to work for me.

For instance, I still have a compromised sense of time and what day of the week it is.

What I did was to take my dossette and mark on the bottom of each one what day of the week it is and place it on my nightstand so that in the morning I can look and I know what day it is and this generally cues me for what activities are on for that particular day.

Another prompt that I use is a Datalink watch. I use this for reminders to help me make daily tasks routine, such as meds, feed the pets, cue for meal prep and the one I dread, EXERCISE TIME. One great tip about the watch is to set your watch for appointments at the house for 15 minutes ahead of the scheduled time so that you aren't taken by surprise and you can have all materials together that you will need for the appointment. If possible, try to have all appointments at the same location in your home so you can stack what may be needed. The motto "be prepared" has become 2nd nature for me. (or should I say is becoming)

My fridge is COMMAND CENTRAL. I always keep my weekly schedule on the fridge door. That way everybody in the household has access to knowing what's on your plate. They can also pencil in anything they want you to know about. I also keep a list of frequently called phone numbers on the door. Again, it makes it easier for others in the household to find the numbers when needed. I also keep a shopping list right on the fridge and as things run out I put it down right away. Write them down in their sections of the store such as produce, meat, health and beauty aids.

I wonder sometimes, if our families have noticed how organized THEY'VE become.

My favorite part of command central is the memory section. At the dollar store you can buy magnetic picture frames and pictures are memories. That way I can always remember special times shared.

On top of the fridge I keep my timer. Whenever I have to multi-task in two different rooms, I set the



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timer and take it with me. For instance, if I have to let the dog out while I'm in my office, I set the timer for 10 minutes and go back to typing. Or if something is simmering on the stove and I'm busy elsewhere, I take my timer with me rather than counting on hearing the kitchen timer.

Post-it notes are very handy. The first time I got to use them was when I reorganized my kitchen cupboards so that everything had a home. I put these on the cupboard doors to prompt me as to what was inside until I got used to where things go. On the funny side, one day I was looking for my can opener and I was getting so frustrated because when does a can opener leave the kitchen?

I found it, guess where, IN WITH THE CANS! It must have made sense at the time. I've used post-it notes around the house to remind me to turn things like the iron OFF. They are handy as well to jot things down as they come up and put them into my day-timer.

Whenever I feel overwhelmed I play a game like Tetris. It takes my mind off of whatever is overwhelming me and I HAVE to FOCUS on the game.

It's also good for hand-eye coordination and good exercises for FOCUS.

My husband and I own a retail store. I have returned on a flexible work schedule. At Christmas I needed to be there almost daily so to keep me from feeling drained I would take out my knitting and just focus on that for a short while so I could "defrag" so to speak. It was also fun, because I knit many Christmas gifts.

We all have different perspectives on different situations and how we have to be able to adapt to change and seeing things with a different picture, understanding someone else's point of view. I use a kaleidoscope and look at it. There's a pretty puzzle put together. NOW, what I have to do is turn it slightly and guess what, it's still a pretty puzzle, different but it still makes sense.

It's a step-by-step operation, use manageable chunks of time and pace yourself in order to SET YOURSELF UP FOR SUCCESS. I hope some of these strategies make living with brain injury a little more manageable for you too.

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Making Decisions after Acquired Brain Injury

Dr. Nancy Reeves

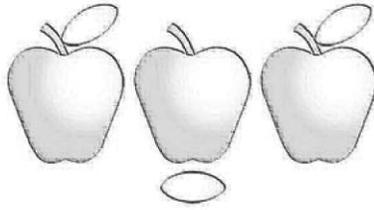
Frances asks, "We were planning to move out of the house, but then I had the car accident. Should I put my place up for sale now, or wait a while?" Bert says, "The kids are encouraging me to go to Florida with them, for a holiday. Is that a good idea?" Heidi tells me, "Since Kaz had his stroke, I have been so exhausted, yet my friends tell me to volunteer at the church, because it will get my mind off my stress. What do you think?" My response to all of these people is the same. Let me teach you a model for decision-making during times of healing. Then, you will feel empowered to make your own decision, rather than needing your counsellor, or doctor, or pastor, or family member, or friend, to take control of your choice.

First, a few definitions. Loss is any experience that restricts us, from the concrete - bereavement or

chronic condition, to the more nebulous - shattering of a dream or expectation. Grief is the process of healing loss. It has physical, mental, emotional, and spiritual dimensions. The Energy Management Model I developed in 1982 is based on the fact that our energy needs change significantly during our grieving process. "Energy" is just the force that allows us to be and think and do. Viewed as a circle, some folks normally have bigger circles than others, but for everyone, energy is finite. People with Acquired Brain Injury often find their energy circle has shrunk. We can't just "grab" more energy out of the "ether." Exceeding energy limits means needing more rest later. When we are adjusting to a loss in our lives, our energy is strongly impacted.

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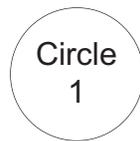
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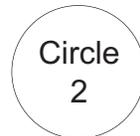
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When a loss is first experienced, most of our energy is used for grieving. We eat, breathe, sleep, our loss. A much smaller slice is used for survival activities - ranging from breathing to caring for ourselves and others. Initially, we usually need help with some survival activities. For example, if food is put in front of us, we may eat, but we have no energy or interest in meal preparation.



As time and grief move on, we reach a point where all energy needed for survival is available. I have arbitrarily shown survival as taking up half our energy 'pie.' Some people find survival needs take more or less of their available energy. Very frequently, people with ABI's or family members, find their survival "slice" takes up much more than half their available energy, at least in the first months of adjustment. In this circle, we still have a lot of energy taken up with grieving. People often feel discouraged at this time because they think they are stuck or regressing, "I feel worse now than I did weeks (or months) ago." During the first months after a loss, it is common to experience waves of numbness, difficulty concentrating, and poor memory. These symptoms make it difficult or impossible to monitor our progress. Now, in this circle, we can think more clearly, and so our grief may appear stronger.



Circle
3

Many grieverers tell me energy for life enhancement starts almost overnight. Bob wakes feeling lighter in spirit and instead of looking out the window and thinking, "it's a beautiful day and I have a brain injury", his statement is, "It's a beautiful day." His brain injury no longer colours Bob's whole world. It is not possible to look at another, though, to determine if they are now in this circle. For example, in the days after my mother's death, I ignored my personal appearance, while my adolescent daughter was always impeccably groomed. At her age, looking good is a psychological survival need.

Circle
4

The process continues until there is only a small slice of grieving energy. This slice never leaves, yet it is not restrictive. In fact, tapping into it can bring warm memories and feelings of connection.

We usually do not move, in order, from one circle to another. We grieve for the meanings and implications of a loss, and not just the fact of it. For example, we need to adjust to how an ABI affects our self esteem, our relationships to others, our roles in our family, and in the outside world, our financial situation and so on.

Everyone has some implications that are unique to themselves. As a new meaning comes to our awareness, we will need more energy to deal with it. The slice of grieving energy will temporarily expand.

So, during grief, we will frequently move back and forth
continued on page 24

through the circles. Grieving couples and families may find members in differing places in their use of energy. We all have unique responses to the same experience. At significant times or situations, such as a birthday or upon reaching a certain age, we may experience strong surges of grief called anniversary reactions, which may take a great deal of our energy for a short period of time.

continued on page 24



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Using the Model

Deciding when to make a major change during adjustment to ABI can be difficult. Moving, entering a new relationship, participating in a course, travelling - all take tremendous physical, mental, emotional, and spiritual energy. Where do we get this energy? If we are in the first two circles, when we make a major change, the energy for the new activity, will be taken from grieving or survival, slowing our healing and usually having a negative impact on our self-esteem.

When some folks feel the first freedom of life enhancement, in circle 3, they assume the grieving is coming to an end. They may jump into a major change and soon find that their life enhancement energy has been all used up. Then, they feel trapped and resent that all their energy is now going to grieving, survival and the new activity.

Waiting until sometime between the third and



fourth circles allows some life enhancement energy to remain, while still meeting survival and grieving needs. Miriam may find she reaches the third circle in three months, Tony might take a year, due to more difficult or complex implications that need to be grieved.

During grief, it is not possible to “fast-forward” to circle three, nor are we able to go into “hibernation” until we have life enhancement energy. By understanding the grieving process, we become “informed consumers” of grief. Then we can manage our energy to promote healing. Some folks draw the energy “pie” periodically, during their adjustment process, so that they can monitor their needs and know when it is the right time to take on more activities or to make another type of decision.

Dr. Nancy Reeves is a clinical psychologist in Victoria BC who has specialized in trauma, grief, and loss for over 30 years. She has worked extensively with people with ABI's and those who love them since 1985. The information for this article was taken from her book “A Path Through Loss: A guide to writing your healing and growth.” Northstone 2001.



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Senior Citizens, Falls, and Brain Injury

Falls are the leading cause of TBI for senior citizens. People 75 years of age and older have the highest rates of TBI-related hospitalizations and death. Studies have shown that the incidence of brain injury greatly increases after age 70. Family members and other caregivers of older adults can help protect their loved ones' health and independence by:

- ❖ Reducing their risk for falls
- ❖ Recognizing the signs of TBI after a fall occurs
- ❖ Taking the appropriate steps when signs of TBI are observed

Here are some things you can do to prevent falls:

- ❖ Exercise. Start a regular exercise program, if your doctor agrees. Exercise is one of the best ways to reduce your chance of falling. It helps you become stronger and feel better. Exercises that improve balance and coordination, like Tai Chi, are most helpful.
- ❖ Make your home or surroundings safer. Nearly half of all falls happen at home. Some things you can do to make your home or surroundings safer include: removing clutter from stairs and floors; removing small throw rugs or using double-sided tape to keep the rugs from slipping; having grab bars put in your bathroom; improving your lighting; and more.
- ❖ Ask your doctor or local pharmacist to review all the medicines you take. These might include some that don't need prescriptions, like cold medicines and various supplements. As we age, the way some medicines work in our bodies can change. Those changes could make us drowsy or light-headed and lead to a fall.
- ❖ Have your vision checked. The eye doctor should be sure you have the correct eyeglasses and that you have no conditions limiting your vision, like glaucoma or cataracts. Poor vision can increase the chance of falling

Millions of people in this country provide care for an older adult—a parent, grandparent, other family member, professional caregiver, or a close friend. For most caregivers, the older adult's health is the overriding concern. One way to help older adults live better, longer and stay independent is by learning about traumatic brain injury, or TBI and how to prevent it.

Not surprisingly, the rate at which people are hospitalized for fall-related TBIs increases with age.

Some leading factors that contribute to the danger of falls to older individuals include:

- ❖ Weakness due to lack of mobility/exercise
- ❖ Some elderly people take medication that may affect perception and/or balance by making them drowsy.
- ❖ Many individuals over the age of 65 also may have other medical conditions that make falls likely (i.e. visual limitations, orthopaedic problems, Parkinson's disease, and sleep disturbances etc).
- ❖ Improper footwear
- ❖ Hazards in the home

Remember: Almost one third of people over the age of 65 fall each year!

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Successful Steps: Strategies for Education, Prevention, and Support

The Brain Injury Association of Canada's 6th Annual Conference

Jamie Fairles

Despite being in Parkwood Hospital for rehabilitation from my seventh brain surgery, I was granted an extended leave of absence to travel to Montreal to attend the nation's brain injury conference from July 10-12. My travel companions were, Donna Thomson and Mary Carter, the Executive Director and the president of the board respectively. My stepfather, Allan came with us as my "attendant" because I was in a wheelchair due to my fatigue and lack of balance.

This year's conference had the title of *Successful Steps: Strategies for Education, Prevention and Support*. I didn't have a very successful step as I entered the building because there was a mat that was overhanging by about 5 inches and my foot caught it and down I went, scraping both my elbow and knee.



The conference was held at a Jesuit monastery called Villa Saint Martin, located in Pierrefonds, Quebec and it was beautiful! The building is made of stone and situated on the banks of a tributary of The St. Lawrence River. There were many informational and inspiring sessions by both professionals and survivors. Last year at the BIAC conference, Ian Young, a survivor from Alberta won a cross-Canada train trip from VIA rail and he used that prize to raise awareness of brain injury by contacting the local government at every stop along the way! We met many survivors and professionals from across Canada and were inspired by every survivor's story we heard and it truly pleased us to see the steps that the rest of Canada is taking to accomplish brain injury awareness and prevention despite having a hazardous door mat at the front door!



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Left: Members of the OBIA Advisory Council John Kumpf, OBIA Jorun Rucels, (Peel Halton), Mary Carter, Jamie Fairles, (London), Wendy Charbonneau, (Ottawa Valley), Allan Sydorko and Donna Thomson, (London)



Above: Jamie Fairles flanked by Donna Thomson and Mary Carter.



Left: Brain injury survivors Jamie Fairles and Ian Young at the Hawaiian Oyster Odyssey



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Upcoming Conferences and Events

What: Camp Dawn Reunion & Annual General Meeting

When: September 19, 2009 1:00 - 4:00 p.m.

Where: Cornerstone Clubhouse
781 Richmond Street, London, Ontario
Please RSVP by September 4

Phone: 519 642-4539

Email: info@braininjurylondon.on

What: London Brain Injury Charity Golf Classic

When: September 24, 2009

Where: Greenhills Golf Club

Phone: 519 672-4942

Email: habit@rogers.com

What: Harnessing the Power after Brain Injury Provincial Acquired Brain Injury Conference

When: October 28-30, 2009

Where: Sheraton on the Falls Hotel Niagara Falls, Ontario

Website: www.obia.on.ca

M.D.M. Reporting Services will be holding their 2nd Annual Charity Dinner & Casino Night in November.

watch www.braininjurylondon.on.ca for further details

For more international events please visit:

http://www.northeastcenter.com/brain_injury_conference_event.



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WE CAN HELP

If you or a family member are suffering the effects of a brain injury or other serious injury, contact Andrew King or Talaal Bond for advice as you may be entitled to benefits and compensation.



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A group of five diverse professionals in business attire standing together. From left to right: a Black man in a light-colored shirt and tie, a woman with dark hair in a white blouse, a woman with long brown hair in a black blazer over a white shirt, a man with dark hair in a light blue shirt and striped tie, and a woman with blonde hair in a light-colored blazer.

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