

Brain Injury

September 2022

HOPE

supporting the
brain injury
community

MAGAZINE

SERVING ALL AFFECTED BY BRAIN INJURY

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Welcome

Publisher's Introduction

HOPE MAGAZINE

*Serving the Brain
Injury Community*

Fall 2022

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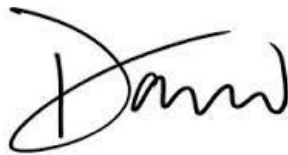
Welcome to the Fall 2022 Issue of HOPE Magazine

Fall is in full swing here in New England. It is perhaps the most magical of all our seasons here in the northeast United States. As we trend toward brisk autumn nights, trees explode in veritable rainbows of fall color. Apple orchards draw large crowds and carved pumpkins adorn doorsteps across the region.

It was on a late fall day that my life forever changed when I was struck by a teenage driver while I was cycling here in New England. Despite this, I still love all that fall has to offer.

Our fall issue is as diverse as colors on a New England hillside. Contributors new to the brain injury life, as well as decades-long survivors grace this month's issue.

If you are new to our publication and online family, welcome. As we have been since the beginning, we are an inclusive community – supporting all affected by brain injury.



David A. Grant
Publisher



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*"Hope is important because it can make
the present moment less difficult to bear."*

—Thich Nhat Hanh



Fall 2022



Advocacy

Education

Inspiration



Living Two Lives

By Nicole Ward



I've been living two lives for nearly thirty years, and I am exhausted.

Prior to October 23, 1994, I only lived one life. The second is an alter ego I created, kind of like when the mind splits as a form of protection. This isn't psychologically induced though. Over the years, I've needed a way to convince people that I'm fine and that two months in a coma following a car accident when I was 17, I didn't have any long-term implications.

Upon regaining consciousness and being relocated to a rehab hospital, I relearned life's basics including how to walk, properly chew and swallow food, and use a writing instrument. Time became a tricky concept. My long-term memory was jumbled, and I asked my mother about someone I had been friends with in sixth grade, thinking I knew her in high school. My short term memory was basically nonexistent.

“Upon regaining consciousness and being relocated to a rehab hospital, I relearned life's basics including how to walk, properly chew and swallow food, and use a writing instrument.”

I was fortunate that I would go home to live with my family who was able to walk the line of giving me independence and protecting me from myself. When I returned to high school, roughly four-and-a-half months after the car accident, it was seen as a victorious end to a traumatic event. I didn't know at the time that I was at the beginning of a different path.

That I would have deficits and not be exactly the same was expected, but no-one could tell me exactly what those blind spots would be. There wasn't a cohesive narrative around residual effects of brain injury, and the trajectory of the disability over a lifespan. Twenty-eight years later there's still not. Between figuring out workarounds for my cognitive and physical deficits, to anticipating new situations that may present challenges, I have felt like a science experiment for this entire “second life.”

Despite scoring a three on the Glasgow Coma Scale, where the best you can get is 15, and the initial prognosis of probable death, or a permanent vegetative state, I made a remarkable recovery. And I believed that time was all I needed to get back to “normal.”

In some respects, I did. I graduated on-time, with my peers, and started Boston College in the fall. When I was a sophomore, NOVA came for a day to get footage for its story about the release of guidelines for the treatment of severe head injury. It’s funny to watch it again, hearing my innate belief that the biggest problems were behind me. I speak slower in the recording than I do now - my brain working to select the right words to explain my new identity. I want to give younger me some advice. To somehow prepare her for what’s to come — the two steps forward, one back choreography that she’ll dance. I also want to shape her eyebrows.

When I graduated a couple years later, I began a career in broadcast journalism. For roughly a decade, I moved from job-to-job, city-to-city, at once being a reporter and knowing I couldn’t pull it off. I had trouble remembering and processing things, especially if information was given quickly. I conflated things. I felt like one of the Flying Wallendas only I wasn’t doing stunts on the high wire. I was balancing process, procedure, and work priorities, in addition to basic functions like maintaining my equilibrium on the ground.

As a reporter I sometimes scored successes, but often with an underlying feeling of mediocrity and frustration. Eventually I segued into corporate communications, the result of a stunning ‘right place right time’ confluence of events. But working in corporate exposed new blind spots, and I always felt like I was on borrowed time.

Over the years I’ve heard:

- “You are smart — it just seems like you don’t care.”
- “We knew you had a brain injury, I guess we didn’t know what that meant.”
- “I mean, we’re trying to run a business here.”

Disclosing my TBI is usually met with surprise. I guess the assumption is that such an injury would necessarily manifest

“For roughly a decade, I moved from job-to-job, city-to-city, at once being a reporter and knowing I couldn’t pull it off.”

itself in obvious ways, and for some survivors it does. Perhaps that's why for decades, I've lived alternately in a state of denial, that I don't have neurological differences, and periods of radical self-awareness that I'm starring in my own mystery where I play both roles: subject and detective.

Rather than a lack of answers, I've found too many, any of which could affect my cognition: a vestibular disorder, depression, anxiety, chronic migraine, and now a neurocognitive disorder due to TBI, which I read as an umbrella term. It's like I've been watching the same movie on a loop and hoping for a different ending each time.

In my recent attempt to get at the root of my ebbing cognition, a neurologist specializing in cognitive decline and movement disorders referred me for bloodwork, an MRI, and four hours of testing where a neuropsychologist evaluated my memory, attention/concentration, and processing speed.

That doctor, a neuropsychologist, concluded that my results, my brain functioning, were not back to a premorbid (before injury) level. The official diagnosis: *Neurocognitive disorder due to traumatic brain injury; symptoms are similar to ADHD*. A couple that I experienced in the workplace include feeling overwhelmed by checking emails (or the myriad other forms of communication we use) and forgetting important details from conversations, despite listening intently. Taking notes wasn't a reliable way to capture a conversation — people seldom talk in a straight line, and I would be left with a page or two to decipher.

Receiving yet another diagnosis was both annoying and validating. I now have data that speaks to the thing I've been grappling with for my whole adult life. And I have someone who can advise on my unique needs.



I just don't know where that leaves me. Neurodiversity is the ultimate invisible disability, with the potential to create inconsistency in performance as well as a gulf between aspirations or ideas, and the ability to execute them. Open communication is key. According to the U.S. Department of Health & Human Services website, an employer can ask you for health information if they need it to render a decision or evaluate a situation. Everyone should understand that answers may not come readily, despite best efforts to find a solution and move on.

My hope personally is that the information I now have from specialists will help me navigate opportunities in the future. In a broader sense I would love to have an impact on how invisible disabilities are handled in the workplace.

The ebb and flow of responsibilities at work and home are going to have an unpredictable impact on everyone, and particularly people who are already living with a unique challenge. No-one should hear from their manager that he or she knew of their injury but didn't know what it meant. That reveals an emotional distance that borders on incompetence and creates more work for the person who is likely worn out from a lifetime of tap dancing around people who cannot see their struggle. It's not a good look. Let's do better.

Meet Nicole Ward



Nicole Ward is a writer living in Dallas, Texas, with her dog, Margaret Thatcher. She worked in broadcast journalism and corporate communications and now advises startups on strategic storytelling. Her TBI was a shearing injury — the result of a car accident during her senior year in high school. Recovery included relearning basic functions like walking and critical thinking, which she did while earning her bachelor's degree at Boston College. She likes the Rolling Stones, psychological thrillers, and a good whiskey.

RESEARCH PARTICIPATION OPPORTUNITY

What is the goal of the study?

To understand the daily challenges that older adults experience due to a cognitive impairment. We also hope to learn what strategies work, identify needed areas of support, and characterize current use of technology.

What does participation involve?

The study is completed remotely over Zoom and involves an interview and completing questionnaires and tasks.

Who is eligible?

- ✓ 60 years or older
- ✓ History of brain injury with persistent cognitive difficulties
- ✓ Live in Illinois, Indiana, Iowa, Kentucky, Missouri, or Wisconsin

More states coming soon!



Interested in participating? Please contact us:

Phone 217-265-0885
Email kch-hfa-enact@illinois.edu

OR sign up here:

<https://redcap.link/enhance>

There is financial compensation for participation



ENHANCE is a Rehabilitation Engineering Research Center (RERC) funded by the [National Institute on Disability, Independent Living, and Rehabilitation Research](#) (NIDILRR; grant number #90REG0012-01-00)

Embracing the Cards I've Been Dealt

By Amy Blasingame



I chose to attend my first bible study with a group of girlfriends earlier this year. We met weekly for about eight weeks. I grew up Catholic, so I went to church every week but didn't really 'read' or understand the bible growing up. I shared the following with the group a few weeks into our time together.

Most of you already know, but for those of you who do not, I suffered a mild traumatic brain injury five years ago. I will save the details for another night when we have a group counseling session, but the short of the story is that I continue to adjust to my life with multiple cognitive issues, visual disturbances, and severe depression. I stopped working almost two years ago and am still on a medical leave of absence today.

I have seen many doctors and therapists over the last five years and continue to be under the care of brain injury and rehab specialists today. My reason for sharing some of this with you tonight is to give you an insight into me, an understanding of the quiet one who often sits and listens but does not always contribute to our discussions.

I want you each to know that I want to contribute to the group discussions each week, but I am honestly focused on survival in my world, and I am just getting through each day, almost moment to moment, hour by hour. I want to scream that out to everyone because so much of what is discussed is beyond my comprehension and trivial to the depths of my spirit right now, but I also understand and respect that this is not what our bible study is about, so I choose to continue to attend and to listen for little nuggets that might stick.

These bible study sessions are difficult for me, as some of you have recognized. It is hard for me to describe or for me to even comprehend why I feel so much less than everyone, in such a safe, nonjudgmental environment

“It is hard for me to describe or for me to even comprehend why I feel so much less than everyone, in such a safe, nonjudgmental environment with some of my best girlfriends.”

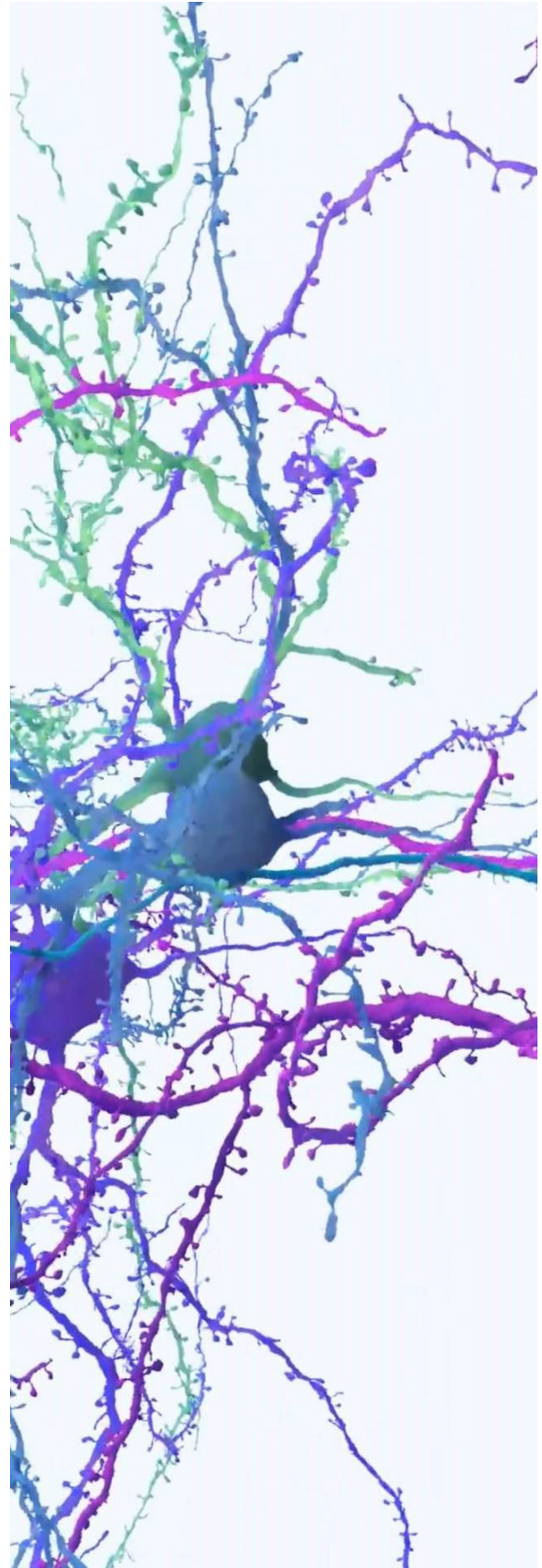
with some of my best girlfriends. But what I can tell you is that all of your insights, stories, thoughts, revelations, prayers - so much of it is beyond where my brain can process, or my heart can feel at this time. It is a painful reminder of where I am not...cognitively, socially, emotionally, and spiritually.

The content alone is difficult for many of us to comprehend and understand but it has been especially difficult for me to face and acknowledge my cognitive struggles amongst all of you. Attention, working memory, retention, slowed processing, comprehension as well as other scattered pieces of cognitive brain functioning are continuously brought to the forefront, and I am slowly learning to admit that I have shielded many of you from these struggles for a long time. I have told myself that they don't affect me, but they do.

Imagine you have stacks of paper organized all over your desk that contain the thoughts and words you have queued up to share. After listening to others or thinking about your response to a question, you quickly and unknowingly filter through those pages and grab the thoughts and words you plan to share as you quickly and easily respond. Sometimes, that is exactly how my brain processes, but other times, and I am learning when I bring in visual, cognitive, or emotional strain into the picture. It is like opening the window and all those pages just scatter and blow away. I can't catch my thoughts, my words, my emotions or make sense of what I am reading or what others are saying. My brain does not fire like it is supposed to. I get behind. I get frustrated. I get embarrassed. I disengage and retreat within myself because all I know to do is to keep myself safe. I have learned how to protect myself over the last five years.

The thing that is so frustrating about the world of brain injury is that each doctor, each brain injury specialist will tell you that every brain injury is different, and that the recovery is also unique. It might seem beautiful and hopeful, yet it is a lonely and somber reality because there is no cure. There is no magic pill. And really nobody knows how far your recovery will take you. But I know I am different. I am changed. Things have rewired in ways that only another brain injury survivor can understand.

What is so messed up about my brain injury is that I live in both worlds. Obviously, I am thankful to be considered 'high functioning.' I can show up, carry on a normal conversation, laugh, and keep up with others and then everyone, including myself, believe that I am fine. But then, I am not really fine because showing up, being in



my life comes at a cost with consequences that only I have to pay. That is the part that is so difficult to describe, comprehend and accept. I see me. Jim sees me. My family and friends see me. I feel like me but then it is gone in an instant. My brain has been depleted of its limited resources and something has to give. It is gut wrenching and sometimes takes my breath away.

What I have learned is that my different systems (visual, neurological, physical, emotional, cognitive) can easily become over stimulated and out of whack when I push myself too far. My body begins to ache, I get chilled, and my eyes struggle to stay open. My head aches, my ears are ringing, and I sometimes tremor or shake. I am often very sensitive to touch and sound. I stutter my words and my thoughts are scattered. I do know that when I feel safe, when I allow myself to be vulnerable, it will show up in physical, cognitive and emotional ways such as these. But I also know how to zip it up, hold my head up and carry on a 20-minute conversation about the weather without skipping a beat. And such is my life.

I am ever so slowly learning to appreciate that there are fundamental pieces of my brain wiring, how I think, how I respond, how I interpret and how I feel, that have changed. And over the last five years I have tried not to acknowledge or accept these changes. I even tried so hard to hide them from myself and others that I ended up so sick I had to fight every day just to get out of bed and function as a shell of the Amy I once was to the people I love most. Looking back, it was like holding a deck of cards in each hand, one with old Amy cards and the other with the new Amy cards. I was constantly playing 52-card pickup with the old Amy cards because that's all I knew to do to survive, to keep my head above water and I was too scared to even look at the new Amy hand I was dealt. Someday I hope to look at it as an opportunity to try a new hand, in some ways a reset and a forced opportunity to change perspective.

I am thankful that I have had the opportunity to simplify and slow things down in my life by not working the past few years. I finally have the physical, emotional, and cognitive endurance to be more present again in my life. But I also know that as those cards are played out of my hand each day that I also have to respect the other deck, which includes a slower pace, simplicity, self-awareness, self-care, and self-compassion. All of which, for now are a requirement and not just a choice.

Today I am still sitting with both decks of cards in each hand, and I know I have to figure out a way to shuffle them both together...to embrace all cards I have been dealt in life. I am not there just yet, I am holding them both, acknowledging them both and learning to accept them both. I am ever so slowly learning to accept and love who I am today. I am getting more accustomed at pulling cards from both decks to be the Amy you see me as today.

Meet Amy Blasingame



Amy sustained a TBI after a fall at home in 2017. She lives in Plano, TX with her husband and four children. Prior to her injury, she worked as a project manager for 23 years. Amy passionately believes that the description 'mild' TBI is a medical anomaly because traumatic brain injury of any kind can be life-changing and have a significant impact on the lives of survivors. Amy began writing after her TBI when she had difficulty expressing herself verbally. Writing became an outlet and a way to arrange, process and share all that was swirling around in her rewired brain with providers, family and friends. Amy hopes that through sharing her journey and her struggles, other survivors might find their lost voices too.

No Such Thing as Impossible

By Michelle Bart



I am proud to say, I have come a long way since my brain injury. The medical professionals told my family that I was clinically brain dead with no hope of survival.

My family recalls more of my survival during the initial days of my recovery. I recall that they never left. Countless nights and days were spent at the hospital by my bedside. Countless meals they helped feed me. Countless tears were shed. I always saw them being strong, patient and loving with me. All of them were my strength, my protectors, and my rocks. I knew they were there when I needed them the most.

“I struggled with daily tasks and wanted to be the “normal Michelle” I thought I should be. Accepting the “new Michelle” was still years

Slowly I began re-learning how to live again. Learning how to live again is a long, slow process and not easy. It is not easy for the survivor, and especially hard for the family to watch the survivor struggle to adjust and accept this new normal.

I struggled with daily tasks and wanted to be the “normal Michelle” I thought I should be. Accepting the “new Michelle” was still years away.

I fought my “permanently disabled, never to return to work again” label. It felt like I had been written off, just to be put in a corner of society. My identity was my work. I enjoyed it. I enjoyed my independence. The first blow to my self-confidence was when I tried to go back to work a few times, only to fail. It took a few more years before I realized and accepted my new life. I was looking forward to getting married. In the blink of an eye everything changed.

When I first became aware of my surroundings and started to recognize people, places and things, it felt like a struggle just to live each day. I saw what was difficult for me, but I didn’t understand why it was difficult.

I'm not proud to admit this now, but it took me many more years to realize how much my brain injury impacted my family and friends. I could not comprehend the impact it had on my family and friends. I had fallen into the trap that many survivors fall in - a lack of insight.

I first had to become aware and accept the new Michelle. I took baby steps. Some things I failed at, most I succeeded. My confidence grew leaps and bounds as I gradually regained my self-confidence and self-esteem. I grew up in a large, close-knit family. My Aunt and Sister-in-Law sent me emails to practice my writing skills. Mom and I were close, and we did everything together. My Mother-in-Law and I were close, and we spoke every day.

So many people did so many kind and generous things for both my family and me. All of my family and friends were always there, gently nudging me along the way. If I forgot a word, they would wait and let me find it on my own. We all got frustrated. There were many days that it seemed like there was no end, no peace, and no final chapter. Somehow, we found it. My circle of people is much smaller than it was fourteen years ago. As much as I miss the friendships, love and support, it's okay - I understand. They needed to have a meaningful life too. Some people I miss more than I should.

Brain injuries are invisible injuries. To see me or talk to me on the street, you would never know I have had a brain injury. Most people do not know unless I tell them, but the compound effect on family and friends are astronomical and overwhelming. They are our unsung heroes and deserve more credit than they get.

I was lucky I had a good family and support system of friends. That made a huge difference in my recovery. Thank you to all my caregivers, friends and supporters – both past and present. I am living proof that with lots of work, patience, and support, there is no such thing as impossible.

Meet Michelle Bartlett



Michelle is a community advocate as well as a facilitator for brain injury survivors and their families and supporters. She suffered a severe anoxic brain injury in 2004 and has become very interested in brain injuries and psychology. She wants to learn and understand and give back to the community that helped both her and her family during a very difficult time in their lives. She has come a long way from the early days being unable to care for herself and still has a long journey ahead of her. Now as an advocate for Brain Injury Canada, she feels strongly that she has a voice for the people that sometimes feel that their voices cannot be heard.

From Injury to Enlightenment

By Lisa Yee



I don't remember anything about the 2008 car crash we now call "The Accident." Only much later did my husband realize why a medic, calling for him to meet us at Loyola University Medical Center in Chicago as I was being loaded into a helicopter, urged him to hurry. It was to give him a chance to say goodbye.

When I awoke in the hospital a week later, with a broken body and a traumatic brain injury, no one knew if I'd ever be the same. After a month, I still couldn't retain short-term memories. I'd recognized my husband and daughter right away, but how had she gotten older? No problem recalling Dad or my many siblings either, but I kept asking if Mom was still alive. She had died of cancer in 2007.

Such is the sometimes amusing, sometimes emotionally wrenching and always baffling world of the brain injury patient. According to Brainline.org, a TBI is "a blow or jolt to the head or a penetrating head injury that disrupts the function of the brain." Brain injuries affect 1.7 million people a year and cause 52,000 deaths in the United States alone.

"After a month, I still couldn't retain short-term memories. I'd recognized my husband and daughter right away, but how had she gotten older?"

In my case, the diagnosis was "moderate" TBI. Among other scary things I've found in trying to review the data my husband has summarized into a 3-inch-thick binder over the years, this diagnosis had to do with my rating on the Glasgow Coma Scale (not so good, apparently), my "initial decerebrate posture" (a rigid body position with legs straight, toes down and neck arched) and seizures. I also read about my "months of physical and cognitive therapy" and my "residual neuro-cognitive problems," depression, hampered mobility and trouble with "activities of daily living." As much as I resisted it, we arranged for a home-care assistant.



Finally, I looked through my husband’s transcription of my “seizure diary,” a combination of my thoughts and his descriptions of my seizures, some of which he’d captured on video so the doctors could witness them. This trip down “no-memory lane” was my attempt to figure out the year I started yoga (was it 2011 or 2012? I’m not so good with numbers anymore), but I couldn’t stop reading about my now-extremely rare episodes. This one, from March 2012, was from a night Ted was working late:

“I get ready for bed early, multitasking brushing my teeth on the john, when I hear my phone. Feel a seizure coming on and lean forward. Next thing I remember, Ted’s home and he’s coming to bed. It’s hours later. I’d gotten myself cleaned up, into bed, lights out. (Discover a sore on outside of lip the next day, another inside—from my teeth. Also blood and toothpaste in my hair.)”

Today, as we approach our nine-year “Acci-versary,” it’s hard to identify with that version of myself, a newspaper editor forced to face a new reality. So much has changed — my physical recovery and return to fitness, new neurologists, the right medications, a deeper relationship with my husband ... and yoga.

Ted (who’s become so knowledgeable that people think he’s a doctor) had urged me to try tai chi for its intense focus. I wanted something more athletic, so the instructor directed me to a yoga class taught by his wife, Lynda.

I now understand why Ted was drawn to focusing techniques like tai chi as a therapy for me.

In Dr. Norman Doige's 2007 bestseller, *"The Brain That Changes Itself,"* the author discusses why people tend to become forgetful as they age. He explains that the nucleus basalis, a group of neurons in the brain, is designed to secrete acetylcholine, which helps form clear memories. Those neurons get neglected from a lack of mental stimulation, or from being "set in our ways."

I began attending classes three times a week, jogging the mile to the community center since I no longer drove. It felt good to work my muscles in new ways and to see myself in the big mirror holding (what I considered) perfect poses. But soon something inside me began to change. I'd catch a glimpse of my face in that mirror, and I'd be grinning, not grimacing. I'd see a classmate's pose and think, "You can do it!" instead of feeling self-conscious or competitive (my default modes). And after class, I'd feel calm.

Numerous other studies have pointed to the benefits of yoga and meditation for brain injury patients. One study that I found especially interesting was the yoga program for soldiers returning from Afghanistan and Iraq at Eisenhower Army Medical Center in Fort Gordon, Georgia. Dr. John Rigg, director of the TBI Clinic at the base, describes on NPR's All Things Considered, how a blast in combat can affect a soldier.

"What happens is that primitive animal instinct, which is located in the subcortical brain, becomes hyper-aroused. ... The subcortical brain doesn't understand geography and stays hyper-aroused. Their muscles are tightened up." But after a short time in yoga, he says, participants report better sleep, relaxed muscles and a better outlook. "It's an enlightening factor, even for people who don't continue in yoga, to see that they can use breath and

Numerous other studies have pointed to the benefits of yoga and meditation for brain injury patients.

physical movement to actually change the way they feel.” It’s hard to describe, but I feel a new sense of connectedness now. Things happen because they’re supposed to happen; everything works out. If The Accident made me who I am today, I’m glad. I like myself better now. I think this awareness came several years later, when I was no longer in “survival” mode, going from seizure to seizure, so maybe my brain had a chance to heal somewhat.

The feeling grew when I started yoga — and exploded when I learned to meditate. In fact, shortly after a three-day meditation seminar at Prairie by visiting teacher Nicolai Bachman — that, honestly, did not hold my interest — I became aware of a strange phenomenon. When I closed my eyes, I could “see” what looked like an open eye at about the bridge of my nose. Being an idiot, I mentioned this to a classmate, figuring it was some bizarre “neurological thingy” from my old TBI. She said something like, “Whoa, that’s really advanced.” So, I did some reading (in my own Teacher Training Manual, for gosh sakes) and concluded that I was seeing that famed “Third Eye” that lets you “see from a deeper place” and “trust your own intuition.”

Whoa, indeed. Or, maybe I’m just nuts.

But my doctor assures me I’m not. “Your participation in yoga helped you to shift to a level of being more peaceful inside,” says psychologist Joseph Keegan of Naperville, with whom I’ve worked for I-forget-how-many years now. “Prior to that, you were at more of a frenetic pace—anxious, pensive. Yoga provided you with a sense of equanimity and altered your sense of interconnection with the world.”

He says yoga “opened up a door to a sense of spirituality” and even points out that my habit of picking up litter and recycling as I walk home “reflects that you feel you have a place in the universe.” I guess the point of all this is that yoga and meditation — plus music, nature, friends, family (especially a devoted, selfless spouse) and faith — are the keys to coping with brain injury.

Meet Lisa Yee



Lisa Yee of suburban Chicago suffered a traumatic brain injury/epilepsy in a 2008 car accident. Before her injury, she had been a newspaper editor for two decades after graduating from the Indiana University School of Journalism. It was there she met her husband, Ted. They have a daughter, Megan, of Chicago.

Post TBI, Lisa became certified as a yoga instructor and now volunteers teaching yoga at a women’s shelter and a veteran’s center.

Meet the Nowinator!

By Mike Jennings



I recently discovered a new personality trait: I've become a Nowinator! What I mean is that I now do things right away, if I can. Let me explain!

Deciding to do something later requires you to remember to do so. You may say, I'll write it down, so I have a record of it. The problem is that if you write everything down, you can find yourself overwhelmed by notes. By just going ahead and doing it now, you don't have to worry about remembering it. Also, although something may seem simple at first to remember, later you may find that you forgot to do it. I know I have! I used to be the exact opposite. I would wait until the last minute to do things. I was a classic procrastinator. Maybe it was a game to see how late I could start something and still get it done on time. Now, after my brain injury, I need to be really efficient doing everything.

Here's what I do now - Even if something can wait and I can do it later, I'll just do it now. This way, I don't have to remember later. I think less energy is required just to do it now, than remembering to do so later. An example is when I'm running low on medication, and I need to have it refilled in about a week. Rather than wait until the last minute, I get it refilled right away. So I made up a new term for myself. Now, I'm a Nowinator!

Meet Mike Jennings



Mike Jennings is a TBI survivor and has been a Support Group Facilitator for BIAC since 2005. Previous to his injury he served as a project engineer for Hamilton Sundstrand. Mr. Jennings currently serves on the Aging & Disability Commission for the Town of Simsbury and on the Board of Directors for New Horizons Village, an assisted living complex in Unionville, CT.

All concussions are serious.
If you think you have a

CONCUSSION:

- * Don't hide it.
- * Report it.
- * Take time to recover.

HEADACHE

PRESSURE IN HEAD

NAUSEA OR VOMITING

BALANCE PROBLEMS
OR DIZZINESS

DOUBLE OR
BLURRY VISION

SENSITIVITY TO
LIGHT OR NOISE

FEELING SLUGGISH, HAZY,
FOGGY, OR GROGGY

CONCENTRATION OR
MEMORY PROBLEMS

CONFUSION

JUST NOT "FEELING RIGHT"
OR "FEELING DOWN"



It's better to miss one game than the whole season.

For more information and to order additional materials *free-of-charge*, visit: www.cdc.gov/Concussion.

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR DISEASE CONTROL AND PREVENTION



Second Chance

By Randy Davis



If you had a second chance at life, what would you do with it?

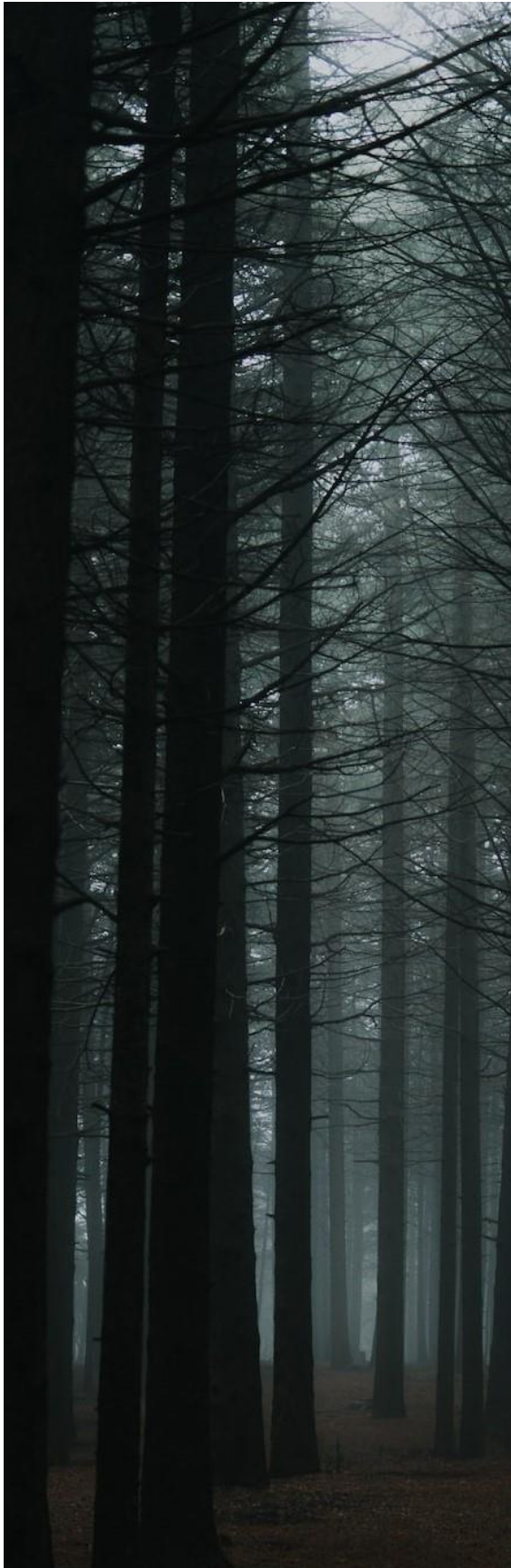
Randy Davis, an Honorably Discharged Soldier of the US Army Reserves, is living proof of triumphing over tragedy. Davis is a Survivor of a Traumatic Brain Injury that almost claimed his life. He survived being shot in the head.

Randy recently completed an 8 year term of service in the US Army Reserves. He enlisted at 37 years old, going through Basic Training at Ft. Leonard Wood, Missouri. Davis's journey of being a Survivor doesn't begin here however. Prior to enlisting as a US Soldier, Davis was in and out of Law Enforcement and Private Security since the early 1990's.

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Davis has served as a Deputy Sheriff in Richmond, Virginia, as a Police Officer in Norfolk, VA, and then served as a Federal Police Officer in Colorado shortly after 9/11. The unusual thing about this career is that it unfolded after Randy cheated Death.

Going back to 1984, Randy was a high school junior living in San Diego, CA. He had recently left his native Virginia to live with his father and stepmother. Growing up in rural Virginia, Randy spent his time hunting and target shooting and planned on a Military career after High School. But, fate stepped in to redirect him. November 3rd, 1984 began as many warm autumn Southern California days do: beautiful. Randy had been roaming the forests, thickets, and woods of his native Virginia for years. Randy had already been in California for a few months and this was an opportunity for him to go target shooting with some schoolmates and have fun. What he didn't know was that his new schoolmates were novices when it came to firearms.



Randy and several schoolmates went to a canyon area in northern San Diego, set up some targets and plinked until sundown. After firing several rounds into targets, the lads called it a night. Randy wanted to enjoy the wooded night air for a few more moments, separating from the group briefly. The other teens had returned to the pickup truck that had ferried them out to the desert. About 100 yards away, Randy was climbing out of the canyon when one of the lads pulled the trigger on his .22 rifle, several times.

Randy describes what happened next, "I heard the gunshot and a fraction of a second later my head snapped back. The pain was excruciating and I tumbled over an embankment. I was howling in pain as I cradled my broken face, feeling blood pouring between my fingers."

Randy remembers looking up in the moonlight and seeing blood spurt from a hole somewhere on the right side of his face. It turns out the first bullet entered 1/4" from the right corner of his right eye, burrowing through bone, tissue, and brain matter. It came to rest in the right temporal lobe of his brain. A second bullet grazed the left side of Randy's head, just taking a chunk of flesh with it as it sped by at 1,300 feet per second.

He remained conscious and crawled his way up the embankment, as he describes the scene like something out of an old western. He staggered toward the headlights and found four other scared teenagers who rushed him to the local trauma center in Escondido, CA. The battle to survive continued on that mad dash to the emergency room.

"I had been reading survival manuals and military history, planning on a Military career. I had a moment of clarity going through First Aid stuff I'd learned over my short 16 years. I realized I needed a bandage to control the external bleeding and pulled an old handkerchief from my back pocket. Then I remember thinking, 'OK I'm going into shock, what do I do for that? Oh yeah, elevate feet, head, and stay warm.' I staggered into the Trauma center at Palomar Memorial Hospital, fully conscious, covered in mud and blood, with a bullet in my brain, but ALIVE."

The survival ordeals of Traumatic Brain Injury, TBI, are not just limited to what happens at the scene of the injury but also continues once the patient is in medical care. Randy had stopped the external bleeding but was still bleeding inside the skull, intracranial, which puts pressure on the brain with nowhere for fluids to go. Emergency brain surgery was performed to remove the bullet and damaged brain matter. No one knew what the outcome would be and at 16 years old, Randy had to go into oblivion, not knowing if he would survive the surgery or not. However several hours later, God allowed Randy to return and begin starting a second chance at life.

He had a depressed skull fracture from the impact of the bullet, and now has a large dent and a question mark shaped scar on the right side of his head from surgery. The psychological and emotional aftermath of this incident was off the scales. As for the rate of the severity of Randy's injuries, one doctor described his injury as "catastrophic." At 16 years old, Randy was dealing with PTSD that was ranked off the charts as well. It would consume many years of his post-injury existence.

According to Randy, "I did my own research years later and came across a published study by the Centers for Disease Control (CDC), on TBI. The study said 'Firearm related Traumatic Brain Injuries (TBI), result in a 9:10 death ratio.' So I'm 1:10 that survived, pretty slim odds of survival."

When he turned 18, Randy went to Army recruiters, still wishing to serve his country. After telling the recruiters about his shooting, he was told, "YOU CAN'T EVEN BE DRAFTED!" So Randy wandered, lost for years, not being able to do what he wanted to do since he was a child: serve his country.

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Randy worked many dead end jobs over the years, still dealing with PTSD and at a loss for resources. Then, he found the National Head Injury Foundation, now the Brain Injury Association of America (www.BIAUSA.ORG), and found people who understood TBI. With proper therapy and resources, Randy moved forward in life, going back to college, earning an Associate's Degree in Administration of Justice, magna cum laude. Randy took a job doing Security at a Nabisco factory in Richmond, VA.

Randy pursued a career in Law Enforcement seeing it as a way to still serve his Country. For several years after the shooting and his relentless pursuit of normalcy, Randy had to teach his brain to work harder and had to fail in some things in life as well in his recovery from an almost fatal shooting. He spent almost 10 years actively wearing a law enforcement uniform of some kind, both in Virginia and Colorado. But it wasn't enough, and Randy wouldn't stop until he finished something he'd started years before.

In 2005, Randy enlisted, and was accepted into the US Army Reserves. "I was 16 years old when I got shot, then 20 years later I'm shipping off for Basic Training!" He went through the Army Engineer Heavy Equipment Operator School at Ft. Leonard Wood, Missouri to do something other than Security/Police work. Randy drove trucks and heavy equipment and managed to complete 8 years of service in the Army without being shot again.

November of 2013 marked the 29th Anniversary of his surviving being shot in the head. He spent the day at his Army Unit in Denver, CO, being grateful. "I have to look at each day as a grace from God. Every day I'm still here, I've been given a second chance at life."

Now Randy works in Industrial Security in Northern Colorado. "I read a story in a local paper in the early 1990's about another TBI survivor. That led me to find the support and resources I needed to move forward in life. I want to return the favor," Davis says. "The incidents and statistics of TBI are staggering, yet public awareness is virtually nil. I want to be a face for Traumatic Brain Injury. For other TBI Survivors, don't let anyone tell you that you can't do something. It just takes time and hard work, NEVER QUIT!"

Meet Randy Davis



Randy is a traumatic brain injury survivor, and honorably discharged member of the Army reserves. When he's not out climbing mountains, Randy can be found helping others within the brain injury community.

The Beauty of Self-Forgiveness

By Jeff Sebell



It's now over forty years since the night of my crash. Strangely, the idea of forgiveness for that other driver, for the person who did this to me, never crossed my mind until I started thinking about writing this.

I was so busy trying to regain and recapture those things I had lost that I never looked back to the event that caused it all. I just couldn't bother with it. In fact, I was disconnected from the events of that night, in much the same way my Traumatic Brain Injury removed me from my own life.

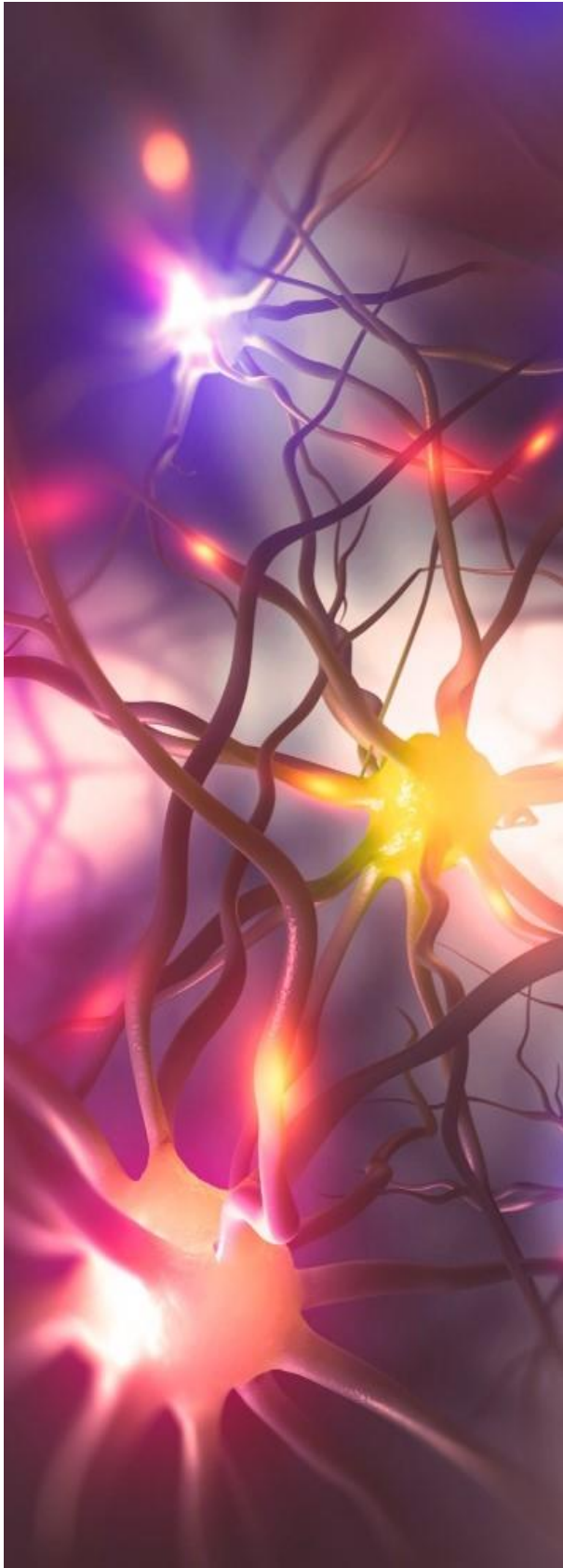
I did become angry - but it wasn't about the crash itself. It was about how people treated me after my coma, when I was struggling to get my life back. Quite a while passed before I could get over the slights that I attributed to my friends in college.

I felt they weren't there for me when I finally returned to school. I couldn't understand why people were acting towards me the way they did, and as a result I got really down on myself. I felt worthless.

Sometimes ignored, often misunderstood, I would beat myself up because I didn't understand what was going on and felt it must be my fault. This caused a great deal of pain and resentment as I tried to make my way through a world that had become very confusing and alien to me. Often nothing made any sense, and I felt like I was going crazy.

At one point, nearly 25 years after the car accident, I had a revelation of sorts. Although, in my mind I had forgiven those who I felt had wronged me, I decided that wasn't enough. To make it mean something more I needed to take the next step. I needed to look my old friends up and talk to them.

“In fact, I was disconnected from the events of that night, in much the same way my Traumatic Brain Injury removed me from my own life.”



I found out one lived in the very next town and tried to contact him. Eventually, I was able to connect with each of my friends, and found a wonderful weight lifted, as well as a return to a bit of normalcy.

I learned that my friends weren't the demons I had made them out to be. Forgiveness freed me from the angry chatter in my head, and in the process, I also learned we had all become different people. I didn't feel the need or desire to resume a relationship with them, and I was at peace with that.

What I did finally see was that each of us carried regrets and hurts around from that time period, and that I needed to take responsibility for some things, and not go looking for ways to place blame.

By getting to a place where I could forgive, I began to see that I was being unrealistic in my expectations, and that I had, in one way or another, played a role in the way things happened. I also saw that blaming other people reduced my personal power by saying, in effect, that my life was not in my control. By blaming others, I was giving them control over me.

Forgiving my old friends wasn't about "giving in" or "giving up" or "compromising", it was about me growing and taking responsibility for my own life. I was making a statement that I was powerful enough to live on my own, without using blame as a crutch when things didn't go right.

About a year afterward, I began seeing a neurologist for the first time since shortly after my coma. My coma was in 1975, and they didn't have MRI's or CAT scans then, so my doctor suggested I have an MRI done. Even though we all knew I had a brain injury, I had never actually "seen" the damage.

The results came back showing areas of damage as well as areas of dried, twenty-five year old blood products in my brain. Although I expected this news, I was not prepared for my reaction. Years of rehabilitation, anger, confusion and resentment were

brought back, but it also provided me with a conclusion, an ending, of sorts, for my journey. On the drive home from the doctor I was overcome by the strength of the truth and had to pull over.

For the first time, I grieved the events of that night and forgave the other driver. At that moment, I not only understood how hard I had been on myself all these years, I saw what I had done to myself by not giving myself a break. The MRI was clear; my brain had real damage, and I shouldn't blame myself for the way I was.

Sitting in my car, pulled off to the side of the road, sobbing, I knew I had to finally let myself off the hook. First, I first forgave myself for the unrelentingly negative way I had treated myself, and then I acknowledged myself for all the battles I had fought and the good things I had accomplished.

I was not allowing myself to get in the way anymore, and finally, I was free to grow and explore my life.

Meet Jeff Sebell

A long-time survivor, Jeff is the author of "Learning to Live with Yourself after Brain Injury." You can read more about Jeff and his journey on his blog at www.TBISurvivor.com



Living With Hope

By Patrick Brigham



What's needed to decrease stroke deaths?

RISK FACTORS FOR STROKE

Knowing and managing your risks for stroke are key.



HIGH BLOOD PRESSURE
a leading cause of
STROKE



TOBACCO USE



DIABETES



HIGH CHOLESTEROL



**OBESITY & PHYSICAL
INACTIVITY**

Recognize the signs of stroke **F.A.S.T.**



FACE

Ask the person to **smile**. Does one side droop?



ARMS

Ask the person to **raise both arms**. Does one arm drift downwards?



SPEECH

Ask the person to **repeat a simple sentence**. Are the words slurred?



TIME

If the person shows any of these symptoms, call **911** immediately.

Learning the signs of a stroke can HELP SAVE LIVES

SOURCE: Adapted from the Cincinnati Pre-hospital Stroke Scale, University of Cincinnati, 1997.

Stroke Systems of Care

 Community	 Pre-Hospital	 Hospital	 Post-Hospital
Detection Everyone knows the signs of stroke and the need to call 911 immediately.	Delivery Fast emergency medical services (EMS) transport to the hospital with pre-hospital notification that they are on the way.	Decision Identify stroke, quickly decide on and provide appropriate treatment.	Discharge Coordination Patient rehabilitates, recovers, and returns home.

SOURCES: Paul Coverdell National Acute Stroke Program, CDC; Guidelines for the Early Management of Adults with Ischemic Stroke, Circulation, May 22, 2007.



The **STROKE SYSTEMS OF CARE** depends on coordinated partnerships among health systems and professionals, smooth transitions from one care setting to the next, data-driven quality improvement programs that provide the best care to every patient every time, consistent hospital discharge processes with all of the patient's healthcare professionals, and continued actions that improve patient care and save lives.

Our First Lunch

By Lora Reynolds



After several years and changes to life's circumstances, I moved back to my hometown. It was then that I met my friend for lunch.

Thanks to the modern wonders of technology and an article in the local paper, I was able to reach out and find him again. Several online chats and a couple of rescheduled lunches later, we finally made it out to lunch.

We were friends in college. Though it was some years ago, I still had memories and moments attached to him and things I had planned to bring up and reminisce about.

We had been friends on Facebook for years and I had heard through the online discussions (ok, let's be real-- the gossip and grapevine) about an accident and him getting hurt. I was working with secondhand information and was not brave or perhaps foolish enough to bring the subject up that day to get the real and firsthand story.

“We had chatted online like old friends, because after all we were. We had plenty of other things we could talk about. I had been looking forward to seeing my long lost pal all week.”

We had chatted online like old friends, because after all we were. We had plenty of other things we could talk about. I had been looking forward to seeing my long lost pal all week.

I arrived at the restaurant a bit late but seeing him was amazing! He looked great and was just as handsome as I had remembered. That smile was unforgettable, and there it was-- just for me! I apologized for being late and was quite embarrassed. “No worries, I haven't been here long, only about forty- five minutes” he says to me.

We laughed and I sat down. We got comfortable and re-acquainted before the waitress arrived. More apologies and the usual “How was your drive? Look at this weather. How have you been?” pleasantries were exchanged. It was so good to finally see one another after so many years and it was nice to have a friendly face in front of me. We placed our orders and caught up with each other over our meals when they arrived. Everything was going so well.

As we finished up, I was a little sad. Here I was at lunch with an old crush of mine and things were going swimmingly. I didn’t want it to end, but knew it had to. The check came and our lunch was winding down. I was looking across at him and he had this strange look on his face. I asked if something was wrong.

I saw that internal struggle for words on his face and immediately panicked inside. “Oh no, did I say something stupid, do I have food in my teeth, oh God?” So many thoughts ran through my head. He stared at me a moment, looked down- then back up. “I don’t remember you. I have been struggling with trying to tell you that, I hope it doesn’t hurt your feelings, it’s not your fault.

I was hoping that seeing you would trigger something, but it hasn’t. I am sorry, I don’t remember anything, but please know that I have enjoyed our lunch and know that I am quite comfortable, and this has been fun, but I don’t remember you from before at all.”

How was I supposed to take that? I was awesome, I was fun, I was amazing (and I still am). How could anyone forget that? I was offended for about ten seconds and then my understanding and compassion kicked in. I laughed and said “It’s ok, now we get to become friends all over again. No worries!” I meant it.

Here this person was in front of me, struggling with a very real problem and exposing a very vulnerable and complicated truth. He had suffered a brain injury that affected him in ways I could never imagine. I knew this about him going in, it wasn’t a secret, and it didn’t matter to me. However--How many times had he said this before? How many other people may have gotten angry or too hurt by a similar conversation to bother with him again?

That look on his face from earlier—there was a touch of fear in it. It could have been the fear of rejection—the fear of looking stupid—the fear of those ten seconds of my offense turning into “what’s wrong with you?” I had the choice to say “what the heck?” or really and truly admit that it was ok. There was a lot of stuff from college I couldn’t remember, and I didn’t have an excuse. I chose to say it’s okay and mean it.

“I saw that internal struggle for words on his face and immediately panicked inside. “Oh no, did I say something stupid, do I have food in my teeth, oh God?”

It was strange, I won't lie, but I really did like the fact that we could have a fresh start, we could and would get to know one another again. I looked forward to it. I believe my comments garnered a look of "whew!" and "thank goodness!" I was glad to have given him that relief.

We planned to talk to one another in the near future and make a plan for another lunch or a similar activity. I knew that I had some reading and research to do if we were to have friendship, for I knew nothing about brain injuries. That smile from earlier would make it all worth it. I knew after that first day, that first lunch, that there was something special about this man.

What I could remember of him was that he was cute—a gentleman—and had made me smile and laugh on several occasions. What he could remember of me mattered not. All I knew was that conversation was easy and fun with him and I couldn't wait to see him again. That lunch was the beginning of what has been an interesting (and wonderful, and rewarding yet sometimes challenging) relationship thus far, but has been an amazing journey that I am looking forward to continuing.

If I had just blown him off that day, never given him the chance to tell me his stories and come to understand where he is now from where he had been, what would that have made me? The short answer is a jerk. Make sure that you never give anyone that "look" or ever make them feel less than. If I had, I would never know the person I love today or be the person that I have become. Everyone deserves compassion and understanding.

Meet Lora Reynolds



Lora Reynolds is an aspiring writer from West Virginia. She is currently employed as a grant writer for a small non-profit in Lewisburg, WV. Her interests include writing, the outdoors, being with family and friends and her cat Mika. Her experience with the brain injury community comes from volunteer work with the Brain Injury Group of Southern West Virginia.

“If you have one true friend you have more than your share.”

-Thomas Fuller

News & Views

By David & Sarah Grant



It's our hope that you found this month's issue of HOPE Magazine to be a source of true hope and meaningful inspiration. It's been a great joy to bring you stories of triumph of the human spirit for many years now.

We are only a few weeks away from the day that our lives changed forever. November 11, 2010 was "the day." So many of us have a date that brings with it powerful memories, not all of them good. But as time passes, the pain of that day has faded, only to be replaced by a deep sense of gratitude.

For as tough as the journey has been over the last twelve years, the rewards have outweighed the pain. Our lives are now interwoven with others who share our fate. Some of the most amazing people we never knew existed are part of the fabric of our lives.



Our social community now numbers over 35,000 followers and magazine readers come from over sixty countries. There remains such an unmet need for post-acute care within the brain injury community. It's been a privilege to offer, at least in some small way, a bright light in the sometimes dark world of brain injury.

We wish you well along your journey.

David & Sarah