



# headline

BRITISH COLUMBIA'S VOICE FOR THE BRAIN INJURY COMMUNITY

Summer 2010

**June is Brain Injury  
Awareness Month**  
*Spread the word!*

**MARY BENSON'S**  
*2010 Paralympics ~  
Dream Of A Lifetime*  
*Story Page 21*

**Val Reynolds**  
*A Story of Courage  
and Inspiration*  
*Story Page 16*



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# Message from the Editor

Janelle Breese Biagioni

*Greetings!*

The season is about to change again and with it comes loads of sunshine (we hope) and plenty of opportunity to engage in outdoor activities. From camping, to running, cycling and walking, to fishing in the nearest lake, there is always a need to put safety first. June is Brain Injury Awareness month and the support groups and associations will be doing their best to bring Brain Injury Awareness to your community. Many of their efforts rely on a host of volunteers to help run the campaign... do what you can to get involved and support the cause! The more we talk about brain injury and the more we can show people how to prevent one AND the more we can show people that there is hope following a brain injury, the better off we will all be.

It is important for each of us to do our part in reducing the number of brain injuries that occur in our province each year. We need to be diligent in educating politicians, professionals and the public on the impact a brain injury can have for the survivors and their families. Even if people have only minimal time to help, you can contribute by writing a letter to the Editor of your local newspaper or distributing information to your doctor's office or local hospital, or making sure your children's school is well informed on the Return to Play Guidelines following a concussion in sports. All contributions (big or small) to the cause of reducing brain injury will make a difference!

In this issue of Headline, you will enjoy an update on Mary Benson's participation in the 2010 Paralympics and hear of her plans for the future. As well, you will be inspired by the indomitable spirit of Val Reynolds – a brain injury survivor, advocate, and gifted artist!

In closing, I encourage readers to visit their local association and see how you can help out to increase awareness in your neighbourhood. Consider mak-

ing a donation to your local group to assist them in maintaining and/or developing programs for your community. Enjoy the summer and stay safe!

## Sudoku

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

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

*Solution on page 22*



**Headline is also available in PDF format.**

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**contact Mary Lou by email at: mlr@telus.net**

**Please add Headline to the subject line**

# headline

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•

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

•

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



## CHANGE OF ADDRESS?

**We would like to keep our mailing list up-to-date!**

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## Book Review:

# The Diving-Bell & The Butterfly

~Jean-Dominique Bauby

In 1997, Great Britain first published this small, sensational paperback. With only 139 pages, one would never imagine that this quick read could be so filled with emotion, heartbreak, passion and joy. But it is. So much so, that the Financial Times declared it "One of the Great Books of the Century."

Jean-Dominique Bauby suffered a massive stroke and was paralyzed from head to toe, imprisoned in his own body unable to speak or move. Aptly called 'locked-in syndrome', Bauby equates the experience of his motionless body as being housed by a "giant diving-bell." Bauby's only means of communication was blinking his left eyelid. In fact, he 'dictated' this entire book by blinking his left eye.

Bauby poignantly describes what happened to him, what took place at the hospital, the indignity of it all, and heaviness of the future he faced in a wheelchair. He explains that 'locked-in syndrome' is rare and compares the chances of being trapped in 'this hell' to winning the lottery. Although the disease was not well understood at the time, Bauby learned that if his nervous system decided to start working again, it would do so at an extremely slow pace. This could mean years before he had any movement.

This tiny book gives incredible insight into the day-to-day life of Bauby and what it means to face such heartbreak with spirit, hope, and determination. In an effort to help others, Bauby started Association du Locked-in Syndrome (ALIS). Bauby's motive was to show the world that this neurological state, which impedes speech and movement, does not prevent a person from living.

The Diving-Bell & The Butterfly became a best-seller only weeks after Bauby's death on March 9, 1997. He left behind a wife and two children.



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**Mary Lou  
mlr@telus.net**

# The Northern Brain Injury Association Takes on a Large Chunk of the BC.

The Northern Brain Injury Association has been working diligently behind the scenes getting supports in place for survivors and their families who live in the rural and remote communities of Northern BC and we are proud to say that we now have programs in place in Kitimat, Terrace, Ft. St. James/Vanderhoof, Quesnel, McBride/Valemount, Ft. St. John and Ft. Nelson. In March, Community champions from each community met in Prince George, BC to learn about brain injury, community prevention programs and facilitation of support groups.

Upon returning home these community champions have begun to share these programs, set up support groups for survivors and organize community events to promote injury prevention and brain injury awareness. It is our goal to have community events throughout the north all summer long from helmet fitting clinics and give-aways, informational booths and bike rodeos. With the continued support of the Rick Hansen Foundation, we are confident that all northerners will have access to supports, education and prevention programs so we can reduce the incidence of brain injury and support those already affected. For more information, please visit us at [www.nbia.ca](http://www.nbia.ca) or phone 1-866-979-4673.



## NBIA Facilitators

From left:

Melanie Chesnutt – Ft. St. James/Vanderhoof

Carmen Jose – Coordinator

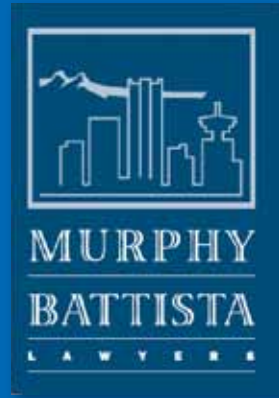
Guy Mills – Ft. St. John

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Elizabeth MacDonald – Kitimat

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*Angela Price-Stephens*

# Fuel Tax Refund Program Available for Persons with Disabilities

Did you know that if you have a disability you may qualify for both the BC Fuel Tax Program for Persons with Disabilities and the Federal Excise Gasoline Tax Refund Program?

*Note: The provincial refund program applies to the motor fuel tax and not the carbon tax.*

If you have a disability and qualify as per the criteria, you may be eligible to apply for a fuel tax rebate. A refund is based on the provincial tax you pay on gasoline, diesel or propane used in your personal vehicle. Provincially, the maximum refund is \$500 for each calendar year. The refund is based on the fuel tax paid during the year and may be less than the \$500 maximum.

The following information on criteria and qualifying disabilities and an application for registration can be retrieved at [www.sbr.gov.bc.ca/documents\\_library/bulletins/mft\\_004.pdf](http://www.sbr.gov.bc.ca/documents_library/bulletins/mft_004.pdf):

BC Fuel Tax Rebate Criteria:

- You have a qualifying disability
- You are 16 years old or older
- You are the registered owner or leasee of a motor vehicle (you also qualify if you have joint ownership or an ownership interest in a vehicle)

Qualifying Disabilities:

- You have lost a limb.
- You are permanently dependent on a wheelchair.
- You have complete and permanent functional loss of the lower limbs.
- Your doctor certifies that you have permanent impairment of movement to the extent that it would be hazardous for you to use public transportation (whether or not public transportation is available).
- Your doctor certifies that you have permanent sight impairment to the extent that you are not eligible to hold a British Columbia driver's license.
- Your doctor certifies that you have a permanent mental disability to the extent that it would be hazardous for you to use public transportation (whether or not public transportation is available).

You may also qualify if you are registered under one of the following programs:

- You receive a 100% disability pension through active service in any war while in Her Majesty's forces.
- You receive disability assistance or a supplement from the Ministry of Housing and Social Development, or you would receive assistance or a supplement but do not qualify because you are 65 years old or older. Note: If you no longer qualify to receive disability assistance or a supplement from the Ministry of Housing and Social Development, this may affect your eligibility for the fuel tax refund program.

To learn about the Federal Excise Gasoline Tax Refund Program and whether you qualify, visit [www.servicecanada.gc.ca/eng/goc/gasoline\\_tax\\_refund.shtml](http://www.servicecanada.gc.ca/eng/goc/gasoline_tax_refund.shtml)



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# Summer Picnics and Barbecues

Who doesn't love to gather with good food and friends during the summer? A picnic at the beach or a celebratory barbecue can turn disastrous if proper precautions are not taken with the food. To ensure that your food is safe and healthy follow these pointers:

1. Scrub-a-dub-dub! Soap and water are powerful safety agents ~ always wash your hands before preparing food and wash the work area too!

2. Chill out! Ensure you have plenty of time for cooking food in advance and for those items to adequately chill in the refrigerator.

3. Life is good at 40! Perishable foods including meat, poultry, fish, eggs and salads need to be kept chilled at 40 degrees F. Tip: Your cooler will stay colder longer if it is packed full.

4. Hanging out may be good for you ~ it's not for food! Don't leave food sitting on the counter to pack in a cooler later... it should go straight from the refrigerator to the cooler.

5. Raw! Raw! Raw! Pack raw meats, poultry or seafood on the bottom of a cooler so that it minimizes the risk of drippings on other foods. Be sure to use good Ziploc bags or sealed containers.

6. Time is of the essence! Take out food (e.g. fried

chicken) should be eaten within one hour of picking it up and perishable food should be used within two hours if un-refrigerated.

7. Don't mix your drinks! Beverages should be kept in a separate cooler.

8. Bigger isn't always better! Condiments like ketchup, mustard and mayo should be stored in smaller containers.

9. To discard or not to discard? It is important to discard picnic leftovers, especially if they have been unrefrigerated for more than two hours and it is a MUST to discard marinades that have touched raw meat.

10. Be prepared! Have a checklist and take the following with you: garbage bags, disinfecting wipes, paper towels, tin foil, fresh bags to store cooked meat in (discard meat if un-refrigerated for more than two hours), and extra plates or platters to serve cooked meat on (don't use the same dish that was used for the raw meat).

For current recommendations on food safety, including tips on proper storage, barbecuing and preparation of foods, visit Canada Food Inspection Agency's website at [www.inspection.gc.ca](http://www.inspection.gc.ca).



*Kirsten Madsen*

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# *A Lawyer's Responsibility in Acting for the BI Client*

## What to Look for in Retaining a BI Lawyer

by David J. Marr, Q.C.

I would like to address the role of the lawyer in the context of brain injury litigation which, over the last 20 years, has become a highly specialized area of law. Critically, the survivor of a brain injury must be represented by a lawyer well grounded in all of the issues arising out of a brain injury, across the spectrum of classification from mild to severe. It is convenient to refer to such a practitioner as a neurolawyer. A neurolawyer must be focused on identifying the long-term consequences faced by the client resulting from his/her particular brain injury. Such a lawyer, recognizing that neither his client nor his client's family will have any real appreciation of the short/long term consequences facing the survivor of a brain injury, must be unquestionably prepared to be the advocate for the survivor-client throughout the course of the litigation, which can be expected to last anywhere from 4-6 years. During that time, committed family members will acquire the necessary advocacy skills that the specialized neurolawyer brings to the equation.

An important characteristic, when one is choosing a neurolawyer, is his/her ability to demonstrate a good working knowledge of not only the legal/insurance systems, but also the medical/rehabilitation services available to address both the short and long term needs of the survivor. Successful case development for the survivor-client occurs concurrently with the effective delivery of medical, rehabilitative, educational and vocational services. The logical choice for an advocate/neurolawyer is one who is knowledgeable about these services and able to access them. I can't emphasize enough that a lawyer without these credentials is a very poor choice for an advocate.

The neurolawyer must have the ability to finance the litigation costs that, in most cases, will approach \$50,000 and, in some cases, multiples of that amount. It will be necessary, in many cases, for the neurolawyer to investigate the accident circumstances in a thorough manner, in order to prove that a brain injury resulted from the accident and, to do that, he/she must have ready access to the appropriate experts. The neurolawyer will be responsible for overseeing the ongoing medical, legal and rehabilitation needs of the survivor-client. An appropriate team of clinicians, all experienced in brain injury issues, must be assembled early on by the neurolawyer, who must also become actively involved in overseeing case management of the rehabilitation program. An OT (occupational therapist), qualified to deal with the practical realities of the needs of the survivor-client, should be utilized to direct a significant amount of the post acute care rehabilitation services available through the legal/insurance systems. Think of the OT as the community 'field commander' and you will understand the importance of this role. The OT must be very familiar with available community resources necessary to assist the survivor-client in coming to grips with his/her deficits, resulting from a traumatic brain injury. Physical impairments, cognitive impairments, psycho-social/behavioural/emotional impairments are all common problems faced by the survivor-client and require a spectrum of community resources, in order to be effectively dealt with. A good OT can access these resources. A good neurolawyer will have access to properly qualified OTs.



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Finally, a good neurolawyer will tell you, at the outset, that a proper rehabilitation program will augment and support the case development. The better the rehabilitation program in place, the better the result in the litigation. Why? A good rehabilitation program, properly carried out and documented, will describe the pre and post accident function of the survivor-client, thereby highlighting and measuring any lasting sequelae of a traumatic brain injury. Everyone is unique and therefore recovery will depend on the integrity/vulnerability of the survivor-client's neurological makeup, personality, family and vocational systems. It is the role of the neurolawyer/advocate to actively pursue collection of all necessary evidence to assist in establishing the survivor-client's before and after injury profile. Once this is established and no further recovery is anticipated, the neurolawyer will be able to categorically identify the permanent and residual losses of the survivor-client and the future needs of that individual can be reasonably predicted and quantified.

*Horne Marr Zak employs a team of five lawyers and an extensive, experienced staff. Although based in Kamloops, BC, they have clients throughout British Columbia and Western Canada. For more information on David Marr and Horne Marr Zak, visit [www.hmzlaw.com](http://www.hmzlaw.com). To contact David Marr, call 1-800-558-1933 or e-mail [hmz@hmzlaw.com](mailto:hmz@hmzlaw.com).*



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- **Greg Goldberg**, Brain Injury Survivor, Inspirational Speaker and Author of "The Organ of Intelligence"
- **Dr. Jeffrey Kreutzer**, Director of Neuropsychology and Rehabilitation Psychology at Virginia Commonwealth University
- **Christopher Nowinski**, Author of "Head Games: Football's Concussion Crisis"
- **Dr. Cheryl Wellington**, Professor in the Department of Pathology & Laboratory Medicine at the University of British Columbia

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## NEWS RELEASE

# B.C. INTRODUCES CANADA'S TOUGHEST IMPAIRED DRIVING LAWS

VICTORIA – The Province is introducing Canada's most immediate and severe impaired driving penalties to save lives, curb repeat offenders and give police more enforcement tools, Solicitor General Michael de Jong, QC, announced today.

"Despite increased enforcement and significant efforts to promote awareness, we've begun to see a rise in impaired driving across British Columbia," said de Jong. "That trend is unacceptable and that's why we're bringing in these new laws: to get impaired drivers off the road with clear, swift and severe penalties."

In memory of Alexa Middelaer, de Jong also announced a provincial goal: to reduce alcohol-impaired driving fatalities by 35 per cent by the end of 2013. Middelaer was four when she was killed by an alleged drunk driver in Delta two years ago.

Under changes to the Motor Vehicle Act (MVA), drivers who provide a failing breath sample above 0.08 per cent BAC or refuse to provide a breath sample at the roadside will face an immediate, 90-day driving ban and a \$500 fine. As well, they will have their vehicle impounded for 30 days. They may also face criminal charges.

Drivers caught once in the "warn" range (between 0.05 and 0.08 per cent BAC) in a five-year period will face an immediate, three-day driving ban and a \$200 fine; a second time, a seven-day ban and a \$300 fine; and a third, a 30-day ban and a \$400 fine. Research shows that driving with a BAC in that range means a driver is seven times more likely to be in a fatal crash than if they have no alcohol in their body.

In addition, drivers who blow once in the "fail" range, or three times within five years in the "warn" range, will be required to participate in the rehabilitative Responsible Driver Program. They must also use an ignition interlock device, which tests a driver's breath for alcohol every time they operate their vehicle, for one year.

"B.C.'s measures target impaired drivers more effectively than any Canadian jurisdiction has to date," said Andrew Murie, CEO of Mothers Against Drunk Driving Canada. "We believe these major, escalating penalties will better support both deterrence and enforcement, save lives and prevent hundreds of injuries each year on B.C.'s roads. We encourage other provinces to study what B.C. is doing and follow its example."

The new, roadside-issued, 90-day bans mean officers will no longer need to take drivers to the station for a full breath analysis in order to impose a driving ban longer than 24 hours.

"We believe that this new initiative will help all law enforcement officers to apprehend and reduce the number of impaired drivers in our province," said Insp. Mike Diack of the RCMP's B.C. Traffic Services. "There are people killed on B.C. highways each year as a direct result of impaired drivers. With additional enforcement powers, our police officers will be better equipped to reduce those casualties. Harm reduction is our number-one priority."

The changes to B.C.'s impaired driving laws are expected to come into effect in fall 2010. More information on the changes is available at [www.pssg.gov.bc.ca/osmv/](http://www.pssg.gov.bc.ca/osmv/) online.

Details of other changes to the MVA introduced today that relate to motorcycle safety, driver fitness and driver's licences for agricultural workers are highlighted in an information bulletin at [http://www2.news.gov.bc.ca/news\\_releases\\_2009-2013/2010PSSG0025-000470.htm](http://www2.news.gov.bc.ca/news_releases_2009-2013/2010PSSG0025-000470.htm),

To view this press release and for the full back-grounder visit, [http://www2.news.gov.bc.ca/news\\_releases\\_2009-2013/2010PSSG0026-000472.htm](http://www2.news.gov.bc.ca/news_releases_2009-2013/2010PSSG0026-000472.htm).

## Personal Injury



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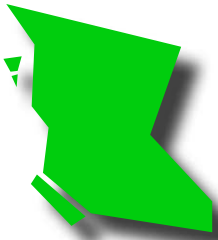
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# Heads Up

## WHAT'S HAPPENING AROUND THE PROVINCE

### BULKLEY VALLEY BRAIN INJURY ASSOCIATION (BVVIA)

BVVIA offers case management services and assistance with accessing rehabilitation programs, one-on-one emotional support, family support and social and recreational activities. For more information, call 250-877-7723.

### CAMPBELL RIVER HEAD INJURY SUPPORT SOCIETY (CHRISS)

CHRISS provides education, advocacy, support, and fellowship. For more information, call 250-287-4323.

### COMOX VALLEY HEAD INJURY SOCIETY (CVHIS)

CVHIS hosts a weekly drop in luncheon for a nominal cost to survivors and their families. For more information, call 250-334-9225 or visit, [www.cvheadinjury.com](http://www.cvheadinjury.com).

### FRASER VALLEY BRAIN INJURY ASSOCIATION (FVBIA)

FVBIA Brain Injury Golf Classic will be held on June 17, 2010 at Newlands Golf and Country in Langley, BC. Registration includes golf and dinner. For more information on FVBIA, call 604-557-1913 or (toll free) 1-866-557-1913 or email [info@fvbia.org](mailto:info@fvbia.org).

### KAMLOOPS BRAIN INJURY ASSOCIATION (KBIA)

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

### NANAIMO BRAIN INJURY SOCIETY (NBIS)

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

### POWELL RIVER BRAIN INJURY SOCIETY (PRBIS)

PRBIS [www.braininjurysociety.ca](http://www.braininjurysociety.ca) provides support and services for persons with acquired brain injury, spouses, family members and caregivers included. For more information, call 604-485-6065 or toll free 1-866-499-6065.

### SOUTH OKANAGAN SIMILKAMEEN BRAIN INJURY SOCIETY (SOSBIS)

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

### TRI-CITIES BRAIN INJURY SUPPORT GROUP

The Tri-cities Brain Injury Support group meets the 1st Thursday of the month at the Coquitlam Public Library. For more information, contact Sandi Caverly at [stcaverly@shaw.ca](mailto:stcaverly@shaw.ca) or 604-916-5027 or Martin Granger at [martin\\_granger2006@yahoo.ca](mailto:martin_granger2006@yahoo.ca)


## Take a Break

S T W F F B C U C F P R E V E N T I O N  
 R Y R I P R Y S S C I T S I T A T S L A  
 K L I S U A D O A I L Y V R U N N I N G  
 Y I Q H I I E M Z U V E H A P D T I Z U  
 T M D I R N P R X J F S S E N E R A W A  
 P A G N K I N O I T A C A V G F N R V E  
 S F J G N N T G Y V G G N I L I A S V L  
 B M T G H J W O O X L V V B V N E B H K  
 L M A D P U O R G T R O P P U S O H B R  
 N X M G I R C A S S O C I A T I O N S T  
 E U G H S Y K Z T D Z W L D S L L U C J  
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 T A L J C P I S U R V I V O R Z Z B O Z  
 B O O R U W T D Y L C O N C U S S I O N

Find the following hidden words:

- |              |             |               |
|--------------|-------------|---------------|
| Associations | Fun         | Statistics    |
| Awareness    | Fundraising | Summer        |
| Brain Injury | June        | Sunshine      |
| Camping      | Learning    | Support Group |
| Concussion   | Outdoors    | Survivor      |
| Conferences  | Prevention  | Swimming      |
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| Fishing      | Sailing     | Walking       |

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 A Clinician's Guide"  
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[www.otconsulting.ca](http://www.otconsulting.ca)

# Fraser Valley Brain Injury Association's Second Annual Pathway to Hope Celebration

~ Carol Paetkau



Presented by Vancouver Coastal Health Authority, FVBIA's Second Annual Pathway to Hope Celebration was held on March 27, 2010 at the picturesque Northview Golf and Country Club in Surrey, BC. Over seventy-five people joined us for a lavish meal in this elegant setting with a beautiful mountain view. They were entertained throughout the evening by the impeccable strings of the Accelerandi Quartet and the talented dancers from Images Dance Studio. Delighted fans got their pictures taken with BC Lions Receiver, Brett Anderson and a lively auction for a team-autographed BC Lions football took place later in the evening. A raffle was held for a Robert Bateman signed print and golf for four at Northview. A balloon draw included a package for ten at an Abbotsford Heat game as well as many other prizes. Everyone was guaranteed to win something and there was a lot of excitement when the balloons were being popped!

A pioneer in the field of acquired brain injury, John Simpson, presented the Simpson Family award to Christine Foell, mother of child with an acquired brain injury for her dedication and advocacy work. Christine is also a board member of the Fraser Valley Brain Injury Association.

Art Verlieb, Q.C. was the guest speaker for the event. Art was named a Queen's Council member in 2001, a designation granted by the provincial Attorney General to recognize lawyers for exceptional achievement and contribution. In 2008, Art was named Commission Council of the Braidwood Commission, an organization formed by the Government of BC to investigate the future role of conducted energy weapons in the province, as well as the death of Robert Dziekanski at Vancouver International Airport.

To cap off the evening, Sherrie Wilson shared her son Mattie's poignant story, which helped us to remember why services for people with acquired brain injuries and their families are so essential and why it is important to support fundraising efforts by local brain injury associations.

Approximately \$16,000 was raised for services and programs provided by Fraser Valley Brain Injury Association. Thank you to everyone who supported this event. Plans are already underway for the third annual Pathway to Hope dinner in 2011, so please keep an eye out for details.

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# RETURNING TO DRIVING FOLLOWING INJURY

~ Linda Hirsekorn

Frequently driver's licenses are revoked at the time of injury or at a later date if there are concerns about driving ability. Physicians, psychologists and other concerned individuals may report a medical condition to the Driver Fitness Program - Office of the Superintendent of Motor Vehicles (OSMV) resulting in the person's license being cancelled. But what if the person recovers from the injury and is successful in rehabilitation and achieving a return to previous or near previous functional ability? Getting the license back will be difficult, especially if there are conflicting opinions by various medical personnel. In this situation, a Functional Driving Evaluation (FDE) may be required. The FDE is a battery of tests that identify skill deficits and evaluate the person's ability to compensate for identified skill deficits during on-road testing. The OSMV recognizes the FDE as an adjunct to medical review. Following an FDE, if the candidate makes errors related to the deficits but demonstrates potential to learn compensatory strategies, they will benefit from driver rehabilitation.

Individualized On-Road Retraining or driver rehabilitation programs are designed by occupational therapists that have specialized expertise in driver rehabilitation. Based on the findings of the FDE, a program is developed by the occupational therapist

to target the identified skill deficits. Instruction in the compensatory strategies is provided by the occupational therapist during on-road driving sessions. The candidate is then offered the opportunity to learn and rehearse the strategies in a driving lesson format with a qualified driving instructor. The occupational therapist conducts a final on-road test to determine if the strategies have been habituated and whether or not driving errors have been extinguished.

Driver Rehabilitation Programs are undertaken in active partnership with the candidate, their primary care physician, a certified driving instructor and the Office of the Superintendent of Motor Vehicles (for those without a valid license). Services are available in Vancouver, Surrey, Victoria and Nanaimo. For more information, please contact our Service Coordinator at 604 681 9293 ext 153.

### About the Author

Linda Hirsekorn is the Director of Quality Assurance for Community Therapists and co-developer of the Functional Driving Evaluation methodology used by Community Therapists. Her agency has conducted over 1500 evaluations since 1994.



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# Powell River Brain Injury Society

## *Physical Fitness Initiative*



People who have sustained brain injuries often find themselves in a routine that doesn't incorporate much physical exertion. This can cause health to deteriorate and can complicate post-traumatic depression. After observing this among clients (and discovering for herself the amazing renewing and energizing powers a fitness routine can bring), Powell River Brain Injury Society Executive Director Deborah Dee has incorporated a physical fitness program at the Brain Injury Society.

Three days a week, Brain Injury Society members have been gathering to improve their physical fitness and overall well-being under the direction of personal trainer Lt. Zee Salehian. Lt. Salehian, British Royal Navy Special Boat Service Trained, provides a personalized fitness regimen for the participants, which is accessible and beneficial to all. His encouragement and humor have everyone active and enjoying the activity with low impact and resistance routines every Thursday morning. Two days a week members walk, which sounds far simpler than it is. Lt. Salehian likes to complicate the routine by compelling people to walk backwards, use stairs on the route, lunging and pushups on railings, fast and slow walking, and any number of other activities he can devise using the pedestrian walks through town.

One morning a week, a group of dedicated members gather in a room of the complex and are put through a challenging routine, usually involving resistance bands and repetition routines. The morning is filled with sweating, muttering, and laughter which all help to promote cognitive enhancement and encourage positive social interaction through activity and create a sense of community. Other effects of this physical exercise include increased stamina, strength and confidence, decreased blood

pressure, increase in oxygen and a general increase in self worth for all participants. Zee also provides support for diet change and healthy living in general. For more information on Zee and his programs, visit [www.fightingfitbc.com](http://www.fightingfitbc.com)

The walking portion of Dee's physical fitness initiative has been in place since February 2010 and is made possible by a generous grant from Parks and Recreation BC. The weekly morning workout at the recreation complex has been in place since November 2009. So far clients have reported improved strength, stamina, and overall wellbeing. In addition, Brain Injury Society employees have observed a renewed sense of community and increased participation in many of the other initiatives of the Society. There are many programs in place ranging from the fitness program to an art program, a peer support group and a psychosocial support group that incorporates workshops in memory improvement and pain management to name a few.

Funding is in place for the Walking Program until the middle of July and the Workout program is funded directly through The Powell River and District United Way and the BC Gaming Direct Access Program. The future of both programs depends on fundraising efforts of the Society and the generosity of the community. We would like to take this opportunity to thank all the generous donors, past, present and future.

Watch for information on our annual 55 Kilometer Marathon event! It takes place every second Saturday in June. This year, the date is June 12, 2010. Walk – Ride – Run – 101 – Marathon. Follow us on Facebook or visit our website [www.braininjurysociety.ca](http://www.braininjurysociety.ca).

## Government Resources

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Regional Health Authority's ABI Coordinators:  
Fraser Health - Acquired Brain Injury Program-604-520-4175  
Interior Health Authority-250-870-4664,  
Contact Name: Deborah Preston  
Northern Health-250-565-2640,  
Contact Name: Jana Pirsell  
Vancouver Coastal Health Authority-604-714-4159  
Vancouver Island Health Authority- 250- 370-8699,  
Contact Name: Judith Armstrong  
Enquiry BC-to locate Provincial Government Departments

- Lower Mainland 604-660-2421
- Outside Lower Mainland 1-800-663-7867
- Victoria 250-387-6121

Ministry of Advanced Education, Training and Technology:  
Open Learning Information:  
• In and Outside Lower Mainland 1-800-663-1633  
Student Loan Information:  
• Lower Mainland 604-660-2610  
• Outside Lower Mainland 1-800-561-1818- select 1 then 5  
Public Guardian & Trustee of British Columbia:  
• 700-808 West Hastings St. Vancouver, BC V6B 3L3  
Victim's Info Line:  
• 1-800-563-0808  
Adult and Youth Addiction Services:  
• Lower Mainland 604-660-9382  
• Outside Lower Mainland 1-800-663-1441

## Community Resources

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

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

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

Community Brain Injury Program for Children & Youth in BC  
Toll Free 1-877-451-5511  
[www.cbip.bc.ca](http://www.cbip.bc.ca)

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

Information Services Vancouver  
604-875-6381

# I N T E R N E T Resources

**If you would like your Web Page  
listed call 604-274-1251**

*Pacific Coast Brain Injury Conference*  
[www.pcbic.org](http://www.pcbic.org)

*BC Brain Injury Association*  
[www.bcbraininjuryassociation.com](http://www.bcbraininjuryassociation.com)

*Campbell River Head Injury Support Society*  
[www.crhead.ca](http://www.crhead.ca)

*Fraser Valley Brain Injury Association*  
[www.fvbic.org](http://www.fvbic.org)

*Central Okanagan Brain Injury Society*  
[www.cobis.org](http://www.cobis.org)  
[www.protectyourhead.com](http://www.protectyourhead.com)

*Comox Valley Head Injury Society*  
[www.cvheadinjury.com](http://www.cvheadinjury.com)

*Nanaimo Brain Injury Society*  
[www.nbis.ca](http://www.nbis.ca)

*Powell River Brain Injury Society*  
<http://braininjurysociety.ca>

*Prince George Brain Injured Group Society*  
[www.pgbig.ca](http://www.pgbig.ca)

*Brain Injury Resources*  
[www.braininjuryresources.org](http://www.braininjuryresources.org)

*Ontario Brain Injury Association*  
[www.obia.on.ca](http://www.obia.on.ca)

*Brain Injury Association USA*  
[www.biausa.org](http://www.biausa.org)

*South Okanagan Similkameen BI Society*  
[www.sosbis.com](http://www.sosbis.com)

*Victoria Brain Injury Society*  
[www.vbis.ca](http://www.vbis.ca)

*The Perspective Network*  
[www.tbi.org](http://www.tbi.org)

*The TBI Chat Room*  
[www.tbichat.org](http://www.tbichat.org)

*G.F. Strong Rehab*  
[www.gfstrong.com](http://www.gfstrong.com)

*BC Epilepsy Society*  
[www.bcepilepsy.com](http://www.bcepilepsy.com)

*Headway Centre*

*Howe Sound Rehabilitation Services Society*  
[www.howesound.net](http://www.howesound.net)

*Northern Brain Injury Association*  
[www.nbia.ca](http://www.nbia.ca)

# Val Reynolds

## *A Story of Courage and Inspiration*

June is Brain Injury Awareness month in British Columbia. Over the course of 30 days, hours and hours will be invested in educating the public, politicians and professionals about the impact that brain injury has on an individual and their family. For Val Reynolds, Brain Injury Awareness is a reality she lives with daily and has done so for nearly 30 years. Val Reynolds is a dedicated mother, artist, and Educational Speaker of Learning to live Well with Brain Injury. She also co-facilitates Together Towards Wellness Therapeutic Groups for adult survivors of brain trauma with lead facilitator and program creator, J. Ellen Connell, RCC, CCRC, MA. Val also devotes time to working as a volunteer and she is a survivor of a catastrophic injury to her brain.

On September 12, 1980, Val was traveling with her husband, Don through the Central Interior of British Columbia. They were headed to the family getaway for a weekend of relaxation and celebration of their recent pregnancy. At the time, the heavy evening rains were making the trip treacherous for their small Datsun car. As Don drove down the highway, Val slept peacefully in the passenger seat while their two large dogs rested in the back. From the opposite direction, a semi-trailer truck advanced towards them going too fast for the road conditions causing the truck to jack-knife into their lane, colliding full force with their vehicle. Val's husband attempted to divert the crash by turning the car away, which resulted in him taking full impact of the crash on the driver's side. Don was killed as was one of their family pets. Val and their unborn child survived; however, she was in critical condition.

Val's injuries were significant. In her own words, Val says of that time, "...even though I suffered critical multiple injuries, it was the severe damage to my



brain that would prove to be the most life-threatening and as I was to learn, the most life-altering. For 2 ½ months the medical profession addressed what they believed to be 'medically necessary.' Once I had reached the most basic of abilities; walking very unsteadily and talking with little comprehension. I was released from the hospital into my family's care."

While in the hospital Val had been unable to attend her husband's funeral. A close friend taped the ceremony with the hope that it could someday help her to come to terms with

his death when and if she was able to comprehend what had happened.

Val's parents, who were approaching retirement, did the best they could. She recalls, "My parents were given no applicable information pertaining to the complexity of supporting me with a significant brain injury. I had healing complications, a diagnosis of cancer and while in their home I miscarried." Val goes on to say; "Sustainable personal growth & wellness was kept out of my reach because of the unavailability of knowledgeable support together with my lack of awareness of my needs. I presented, for the most part, non-brain injured. Along with previously having been a part of Adult Children of Alcoholics (ACOA), I had learned survival skills that kicked right in. Unfortunately, the trauma I was experiencing was so devastating for me I protected myself with denial of my reality, both to myself and others." Hiding Val's challenges did not make them go away. Instead, it led her to making unhealthy and unsafe choices. For a number of months Val reports she turned to combining prescription narcotics, street drugs and alcohol to self-medicate and to escape both her emotional and physical pain. Fortunately for Val, some special people came into her life and helped her, "to learn about living well."

Val's lawyer introduced her to John Simpson, a long-time advocate in the Brain Injury Community. John introduced to Val to psychologist, J. Lynne Mann, who was offering one-on-one sessions along with a Guided Mutual-Aid Therapeutic Group. Joining the group was Val's first experience with positive brain injury peer support and she found it to be very beneficial. "In the sharing of their stories, these participants were telling aspects of my story. It was so amazing. It was so normalizing! Being guided by a professional, who specialized in brain trauma, offered us the opportunity to share safely from a place of vulnerability."

Val also worked with Mahmud Nestman M.Ed., RCC, HT a Counsellor/Hypnotherapist and Group facilitator to support her numerous losses. "Retrograde hypnosis allowed me to claim the experience of the crash and my husband's death," explains Val. "It was an intense, emotional process that legitimized an experience I had no recollection of."

Life soon took another turn for Val... this time for the positive. She reconnected with long time friend, Lex Reynolds. Lex and Val eventually married, lived short-term in Thailand while Lex attended Law School, met and welcomed through adoption, their beautiful son and then settled in Victoria, BC. Lex, a strong and successful legal advocate for children, was not only Val's best friend, but he also was her

greatest supporter. "Lex was very understanding and allowed me to be me," says Val. "For example, on occasions when we would be having company over for dinner and after spending the day preparing for the visit, I would be exhausted. Guests would arrive and before the evening was finished I would be off to bed, leaving Lex to do the entertaining on his own. Lex simply accepted the adaptations needed when living with a partner who has a brain injury."

Although Lex and Val had built a tremendous life together with a host of plans for the future, it wasn't to be. In May 2009, Lex died suddenly and unexpectedly of a heart attack while returning home from watching his son compete in a local golf tournament. Once again, Val was left with a huge void in her life. While nothing can fill that void or replace Lex for her, she finds comfort with her son, family and many friends. Val is clear when she shares; "Life has taught me that while loss is painful it will not stay unchanged forever."

Val continues to find ways to honor her experiences and to use those experiences to help others. She moves forward, grounded in the guidance of these words; "Do the best you can, where you are, with what you have."



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## Comox Valley Head Injury Society Presents The 17th Annual G & B Johnson Brain Injury Conference

# Brain Injury: It's In Your Community

As part of the Brain Injury Awareness Month, the Comox Valley Head Injury Society (CVHIS) is proud to present their 17th Annual G & B Johnson Brain Injury Conference entitled Brain Injury: It's In Your Community, at the Best Western Hotel in Courtenay on June 17th & 18th 2010, featuring Ron Skelton, Ph.D., Associate Professor, Department of Psychology, University of Victoria and Michael Joschko, Ph.D., Registered Psychologist.

The goal of CVHIS is to create awareness in the community and invite everyone to attend. An agenda, speaker information, and registration form is available at [www.cvhis.org](http://www.cvhis.org). The community can benefit from being better informed of brain injury as it is a problematic result of our continued need to increase the speed of life. Many are not aware that even a concussion can be classified as a head injury and is, in fact, the most common. Be a part of the solution by better educating yourself and those you love.

With any type of brain injury, a life is changed in an instant forever. With medical advances, many people who would have died in previous years are now surviving severe brain injuries. Survivors and

their families can be significantly affected financially, socially and emotionally. The estimated costs to Canadians associated with TBI are upwards of \$3 million annually. Some survivors recover quite functionally, while others require a lifetime of support. This year approximately 6,000 Canadians will become permanently disabled from TBI and over 160,000 will suffer a brain injury. Broken down, that is 456 people per day or one person every 3 minutes.

Traumatic brain injury (TBI) is a result of an impact to the head or forces causing damaging brain movement. Lead causes of TBI include car accidents, sports injuries, and even simple falls but differ by age group. TBI is the leading cause of death and disability among children which can be caused by violence. Non-traumatic brain injury (called acquired brain injury) can be caused by illnesses such as encephalitis, epilepsy, and brain tumors. An anoxic episode is where oxygen flow to the brain is compromised. This can be caused by events such as a stroke, cardiac arrest, or a near-drowning experience.

The results of a brain injury are unique to each survivor. Some similarities between survivors often include; memory loss, headaches, impaired reasoning skills, reduced emotional control abilities, and sensory impairment. Although recovery is dependent on a number of factors facing each individual, it is important to recognize that the survivor has changed and cannot be "fixed".

The community of survivors, family members, and caregivers we support show remarkable initiative in their progress of recovery. It takes significant courage and hard work for everyone involved in order to achieve successful rehabilitation. CVHIS is primarily operational thanks to the involvement and dedication by survivors and volunteers. Because of this organizational structure, CVHIS provides increasing services for members.

Presenting this upcoming conference enables CVHIS to provide information that will assist in support and prevention of head injuries. The community at large will benefit from this event and are encouraged to seek further information through our services.

If you would like more information on this event, or the organization in general, please contact Heather Wade or Andr ea Grigg at 250-334-9225 or at [info@cvheadinjury.com](mailto:info@cvheadinjury.com).

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# SOCCER SAFETY



Safety is important for any sport; however, it is especially important when considering a sport for your child. Here is a tip for moms and dads: Your child's safety increases when he or she takes lessons and/or works with a coach to develop the necessary skills and when wearing the recommended safety equipment for the sport of their choice.

Soccer is a perfect example of a game that is action-packed and demands skill. Like any sport it also has the risk of injury... some more serious than others, head injuries being one of them. Several studies and reports are available on soccer related head injuries (e.g. Jordan, et. al., 1996, Master, J. T., et. al., 1998; Muellar & Cantu, 1990). Statistics show that causes of head injuries in soccer arise from players colliding with goal posts, blows to the head (from illegal high kicking or low heading) and head butting between two or more players. In addition, the game strategy of heading the ball is constantly under scrutiny.

While the American Academy of Pediatrics (AAP) encourages soccer for youth, the report Injuries in Youth Soccer: A Subject Review on their website contains the following recommendation:

Currently, there seems to be insufficient published data to support recommendation that young soccer players completely refrain from heading the ball. However, adults who supervise participants in youth soccer should minimize the use of the technique of heading the ball until the potential or

permanent cognitive impairment is further delineated.

The recommended equipment for playing soccer includes:

- Shin guards
- Soccer shoes – molded cleats or ribbed soles
- Soccer ball – it is very important to choose a ball that is appropriate for the size of your child. It is recommended to avoid using leather balls as these can become water-logged, making them very dangerous for play.
- Mouth guards and eye protectors
- Water bottles, insect repellent, and sun-screen

Additional ways to protect your child include:

- Ensure the soccer goal is securely anchored to avoid it tipping over
- Check the field and make certain it does not have holes and that it's debris-free
- Teach your child the importance of warming up and stretching before they begin to play or practice
- Make sure your child stays hydrated when practicing or playing

Should parents or coaches suspect a player has sustained a concussion, immediately seek medical attention and adhere to the Graduated Return to Play Protocol issued in the

*Consensus Statement on Concussion in Sport at the 3rd International Conference on Concussion in Sport held in Zurich, November 2008.*

## Graduated Return to Play Protocol

<i>Rehabilitation stage</i>	<i>Functional exercise at each stage of rehabilitation</i>	<i>Objective of each stage</i>
<b>1. No activity</b>	<b>Complete physical and cognitive rest</b>	<b>Recovery</b>
<b>2. Light aerobic exercise</b>	<b>Walking, swimming or stationary cycling keeping intensity 70% maximum predicted heart rate (No resistance training)</b>	<b>Increase heart rate</b>
<b>3. Sport-specific exercise</b>	<b>Skating drills in ice hockey, running drills in soccer. No head impact activities</b>	<b>Add movement</b>
<b>4. Non-contact training drills</b>	<b>Progression to more complex training drills, e.g. passing drills in football and ice hockey (May start progressive resistance training)</b>	<b>Exercise, coordination, and cognitive load</b>
<b>5. Full contact practice</b>	<b>Following medical clearance participate in normal training activities</b>	<b>Restore confidence and assess functional skills by coaching staff</b>
<b>6. Return to play</b>	<b>Normal game play</b>	



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janettej@connectcommunities.ca

In Lake Country call  
Christy McKeating  
250-469-9358

christym@connectcommunities.ca

Please visit our website at [www.connectcommunities.ca](http://www.connectcommunities.ca)

# MARY BENSON

## 2010 PARALYMPICS ~ DREAM OF A LIFETIME

Mary Benson worked extremely hard to make it to the 2010 Paralympics, which hosted 64 events in five sports: alpine skiing, biathlon, cross-country skiing, wheelchair curling and ice sledge hockey. Mary, who competed in the cross-country skiing, was one of the estimated 1,350 athletes, coaches and officials from 44 countries to participate. She was one of the best among the best!



Leading up to her arrival at the Paralympics, Mary and her partner, Kathy were excited and expecting that Mary would perform quite well in the competition. However, as life would have it, Mary became quite ill with a sinus infection on the first day. She was in bed for five days so sick that nobody thought she should go to the opening ceremonies. However, Mary was determined to be there no matter how poorly she felt. "Walking into the opening ceremonies to see 66,000 people was an accomplishment of a dream for me," states Mary. "It was so moving to be there that I couldn't help but cry."

Still sick, Mary competed and placed 11th and 12th. Although she had hoped to place in the sprint, it was the best she could do given her health at the time. For Mary, even though she did not feel her best, the experience was exhilarating! "It was just amazing to be a part of it. All the people, the fans, the organization... it was incredible."

Heading into the 2010 Paralympics, Mary made the decision that when it was over, she would "call it a day." However, now that some time has past, Mary realizes that she is not ready to retire. "My goal has always been to have one year where I do my very best. Placing, of course, is still the hope and would

be a mark of doing my best, but even in the absence of placing, I will know when I have done my best," explains Mary. The plan now is to focus on training for the 2011 Russian World Championships. Mary is already taking the necessary steps to prepare for this event. "I have changed up my training to keep it fresh and I am looking

for sponsorship."

One of Mary's fondest memories of the 2010 Paralympics was an exchange that occurred between her and Oleksandra Kononova. Kononova, representing the Ukraine, won two gold medals and a silver medal in cross-country skiing. When riding the bus together, Mary humorously suggested Oleksandra trade one of her medals in exchange for one of Mary's pins. Mary teased, "C'mon... you have 3 medals. Just trade me one." As one would expect, Oleksandra clung to her prized medals and emphatically told Mary, "No!" To Mary's surprise however, Oleksandra quickly turned the joke into a gracious gesture by offering the bouquet of flowers she received on the podium to Mary as a gift.

The Paralympics was deemed a "celebration of sport and spirit." For Mary, the celebration not only gave her the experience of a lifetime but she cultivated new friendships too. "I made lots of friends through the 2010 Paralympics. We may have started out as competitors, but we ended as friends."

**Mary and Kathy will be presenting at the Pacific Coast Brain Injury Conference, Nov. 17 – 19, 2010 in Vancouver, BC. For more information on the conference, visit [www.pcbic.org](http://www.pcbic.org)**

# Reflections

By Janelle Breese Biagioni

*“Behold the turtle. He only makes progress when he sticks his neck out.”*

~James Bryant Conanti (chemist, educational administrator, government official)

Taking a risk is a huge part of creating a successful life. Nobody ever made it “big” or made a significant difference in this world without taking a risk or sticking their neck out or diving into uncharted waters! It goes hand in hand with politely rejecting all precautions or warnings given passionately by family and friends. I am not talking about endangering yourself. I am talking about listening and responding to that small voice inside that nags and nags for you to do more, reach for more and be more! You may be thinking, “Easy for you to say, but you have not been through what I have been through. I have \_\_\_\_\_ and because of that I \_\_\_\_\_ (you fill in the blanks.)

It’s easy to let go of our dreams when something happens in life. Granted in those moments, we feel as though we have no choice. But we do. We do not have to give up on anything that is in our heart to do. It may be delayed or we may have to do it

differently or we may need assistance to get there... but we don’t have to give up. No matter what the circumstance! That may sound like a bold statement. It is a bold statement and I stand behind it.

I have had my own blanks to fill in throughout my life. Sometimes the filled blanks were similar to what others experienced, sometimes they were trivial compared to others, and at times...what had happened to me was off the charts. And yes, at times I wanted to give up. I thought it was too hard. I thought it would never get better. I even thought life was so different, I couldn’t possibly make any sense out of it or that I could possibly be happy again. I could have allowed myself to be stuck in that place of sadness and sorrow or I could fight to survive. I chose to fight. And in choosing to fight for myself, I have learned to fight for others. I have learned to stick my neck out and take a risk so that I could make a better life for myself and those I care about. And, I believe my actions have made a difference.


Ask yourself these questions:

- What do you want to accomplish in life?
- Where are you right now in your journey?
- What would it take for you to accomplish your goal?
- What risks would you have to take to make it happen?
- How will you feel if you don’t try?

Don’t be afraid to try. Don’t be afraid to push yourself. Don’t be afraid of the hard work. The rewards are worth it!

Go ahead...stick your neck out and make a better life for you and those you love.

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# BC BRAIN INJURY ASSOCIATIONS & *Support Groups*

*\*This list updated Summer Issue, 2010.*

Abbotsford	Carol Paetkau	604-557-1913	TF 1-866-557-1913
Acquired Brain Injury Society of the Yukon	Anne-Marie Yahn	867-668-5283	
Alberni Valley Head Injury Society/Port Alberni	Linda Kenny	250-724-6772	
Barriere/Merritt	Terry-Lynne Stone	250-372-1799	
British Columbia Brain Injury Association	Jan Siwinski	1-877-858-1788	
Bulkley Valley Brain Injury Association	Katherine Metz	250-877-7723	
Burnaby Chinese Brain Injury Support Group	Angela Kan	604-877-8606	
Campbell River Head Injury Support Society	Shelley Howard	250-287-4323	
Caribou Brain Injury Society	Shilo Toews	250-392-7772	
Central Okanagan Brain Injury Association	Laurie Denton	250-762-3233	
Chilliwack	FVBIA	604-557-1913	TF 1-866-557-1913
COBIS - Vernon Contact	Stacie Gadsby	250-306-2064	
Comox Valley Brain Injury Society	Dixon Hiscock	250-897-1255	
Comox Valley Head Injury Society	Winna Mitchell	250-334-9225	
Cowichan Valley Head Injury Support Group	Barb Grantham	250-748-9338	
East Kootenay Brain Injury Association	Dawn Widdifield	250-417-6220	
Fraser Valley Brain Injury Association	Carol Paetkau	604-557-1913	TF 1-866-557-1913
Golden Brain Injury Support Group	Donna Madden	250-344-5688	
Kamloops Brain Injury Association	Terry-Lynn Stone	250-372-1799	
KBIA - Salmon Arm/Shuswap Contact	Teresa Wolfe	250-833-0369	
KBIA - Barriere/Merrit Contact	Terry-Lynn Stone	250-372-1799	
Langley/Aldergrove Brain Injury Support Group	FVBIA	604-557-1913	TF 1-866-557-1913
Maple Ridge Support Group	Ian Moore	604-944-9030	
Mission	FVBIA	604-557-1913	TF 1-866-557-1913
Nanaimo Brain Injury Society	TBA	250-753-5600	
B.R.A.I.N. (Brain Resource, Advocacy & Information Network)	Tina Suter	604-540-9234	
North Okanagan Shuswap Brain Injury Society (Salmon Arm/Shuswap)	Lori Wootten	250-833-1140	
Northern Brain Injury Association	Carmen Jose	1-866-979-4673	
Peace Country Society for Acquired Brain Injury	Linda Proctor	250-782-7519	
Powell River	Deborah Dee	1-866-499-6065	
Prince George Brain Injured Group Society	Alison Hagreen	250-564-2447	TF 1-866-564-2447
Sechelt/Sunshine Coast Brain Injury Support Group	Rita Grenville	604-885-8524	
South Okanagan Similkameen Brain Injury Society	Dave Head	250-490-0613	
Terrace Brain Injury Support Group	NBIA	1-866-979-4673	
TriCities Support Group	Sandy Caverly	604-916-5027	
Vancouver Survivors Support Group	Lillian Wong	604-873-2385	
Victoria Brain Injury Society	Barbara Erickson	250-598-9339	
West Coast Support Network	Wanda McAvoy	250-726-7459	
West Kootenay Brain Injury Association	Jackie Kellock	250-304-1259	

\*Please email name and phone number changes to [headlinenews@shaw.ca](mailto:headlinenews@shaw.ca) to ensure this list is kept as up-to-date as possible.

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