



Brain Injury Association of Canada
Association canadienne des lésés cérébraux

THE BRAIN TRAIN

Get on board with BIAC

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World premiere of documentary film, “Wipe-Out”

VANCOUVER, British Columbia – The Brain Injury Association of Canada (BIAC), in collaboration with the British Columbia Brain Injury Association and ThinkFirst Canada, is very excited to premiere the new, one hour documentary, *Wipe-out*, May 30th, at Vancouver’s Van-City Theatre, as part of the Vancouver International Documentary Film Festival. The film—produced by Lionel Goddard, one of Canada’s top documentary film makers, and featuring Canadian Olympic gold snow-boarder Ross Rebagliati and neurosurgeon Dr. Brian Hunt—highlights the dangers and consequences of head injuries through the eyes of accident victims.

What: World premiere of documentary film, “Wipe-Out”

Where: Vancouver International Documentary Film Festival
Vancouver International Film Centre
Van-City Theatre
1181 Seymour (corner Davie)
Vancouver, British Columbia

When: Friday, May 30th, 2008 @ 1:00 pm



Immediately following the premiere, a panel of experts will take questions. The documentary will also be aired on British Columbia’s Knowledge Network, June 11, 2008.



Word from the President

On behalf of the Board of Directors of the Brain Injury Association of Canada, I would like to encourage you to attend our 5th Annual Conference at Villa St. Martin. It is our hope that you will be provided with a time to learn, relax, make new friendships and renew old acquaintances.

As a person whose family has been tremendously affected by acquired brain injury for the past twenty years, I have found myself having to advocate on a continual basis for those things that many of us take for granted. By increasing knowledge, by creating bigger networks and by working together we can make a difference. This is an event to share, to exchange, to learn, but – more than anything – it is a Conference to listen, to reflect, and to question. This Conference will allow you to meet and to network with excellent people who can turn into valuable resources for each of us. What we discuss and reflect upon there will have implications for us as we continue to move towards improving the lives of all Canadians affected by acquired brain injury in Canada. Let’s work together to ensure every person living in Canada understands the effects of brain injury and how to prevent it.

Shirley Johnson
President

Synapse

- The Annual General Meeting of BIANs will take place on Saturday, 10 May. The meeting will be followed by the Survivor's Forum and workshops. Workshop topics will include a future vision for BIANs plus a 20th Birthday Celebration!
- BIANs Golf Classic 2008 will be held at historic Brightwood Golf and Country Club overlooking Halifax Harbour on 16 June.
- Jane Warren, president of BIANs will be presenting at BIANs' annual conference in Montreal in July.

Call for abstracts

This is our **2nd CALL FOR ABSTRACTS** for the 2008 BC Injury Prevention Conference to be held in Vancouver, BC Nov. 19-20th, 2008!

On-line registration

We have on-line abstract submission and on-line registration.

- If you have any questions, comments, or concerns, e-mail us at: conference2008@cw.bc.ca
- The poster has been attached; however, please visit the [website](#) for comprehensive information.
- Please forward this e-mail to anyone else who may be interested in the conference.

Gatineau/Ottawa Hawaiian Oyster odyssey

L'association des neurotraumatisés de l'Outaouais (ANO) (Outaouais Brain Injury Association) and the Brain Injury Association of the Ottawa Valley (BIAOV) joined BIAN in supporting its second Hawaiian Oyster Odyssey fund raiser on February 20th. The event was held in a cosy atmosphere at the French Quarter restaurant in old Hull. Special guest included Marcel Proulx, MP (Hull-Aylmer), Penny Collenette, community leader and representatives for Hon. Hedy Fry, MP (Vancouver Centre), Roch Cholette, MNA (Hull) and Hon. Benoit Pelletier, MNA, Intergovernmental

Affairs Minister. Manon Johnson, President of ANO and Wendy Charbonneau, President of BIAOV honored us by their presence. Representatives from national

sponsors namely, TD Bank Financial Group, Insurance Bureau of Canada and Air Canada attended the event. The winner who became eligible to win two tickets for Honolulu, Hawaii is Timothy Downing. One finalist is picked from each HOO and the final draw will take place at the July conference in Pierrefonds, Quebec.

Many family members, friends and supporters were on hand and interacted in Hawaiian style to make this evening a success. Many thanks go out to the

organizing committee, Mike Worden, Chair, our survivors Isabelle Champagne and Denis Teasdale, Réjeanne Lalonde, Project Manager, Francine Provost, MC, Stéphanie Routier, Graphiste, Mireille Provost, Yvan Teasdale, Jacqueline Teasdale, Serge Lafrenière, DJ, Guy Séguin, Carole Eldridge, Photographer, Joeann Lawrence, Trang Phan and the Algonquin College crew of Marissa Lord, Nycole Macham and Alia Mohamed.



Saskatoon HOO Event a Success

Who knew that you could find a tropical paradise in Saskatoon in March?

That was the scene that greeted people who attended the Third Annual Brain Food Dinner at the Hilton Garden Inn in Saskatoon on Friday, March 14. As part of the Hawaiian Oyster Odyssey series, a ballroom was decorated with thousands of tropical flowers and plants. Guests arrived to the strains of Doll Talk, a local band, and received complimentary leis as they mingled over a beautiful buffet of appetizers.



The winner of the Air Canada draw was Todd Marcoux, a Saskatoon survivor who won the same draw two years previously! His name, along with one name from every other HOO event will be entered in a draw for air fare to Hawaii. That draw will occur at the BIAC Conference in Montreal in July.



Ryan Jeffery, Conference Committee Chair, was emcee for the evening. Barb Butler, President of the Saskatchewan Brain Injury Association and Communications Chair of BIAC, spoke about her personal experience with acquired brain injury and Dr. Terry Levitt, SBIA Board Member, spoke on Traumatic Brain Injury: the Impact on Family Members.

In addition to enjoying fabulous food with a tropical flair prepared by an award-winning chef and his staff, ninety-two people had the opportunity to bid on silent auction items including a print by Yvonne Kidd, well-known Saskatchewan artist. Greetings were extended by Joceline Schreimer, Legislative Secretary and Minister of Health for Addictions, Government of Saskatchewan.

His Honour, Dr. Gordon Barnhart, Lieutenant Governor of Saskatchewan and SBIA Patron, was unable to attend, but sent greetings on behalf of the Queen. He has become a special friend of SBIA through other fund-raising events. His message spoke of "extraordinary courage and commitment" of brain injury survivors and family members he has come to know.

The entire evening was a great success. We are looking forward to an even better event as we prepare for the fourth annual HOO Brain Food Dinner



Simple Tips to Remember When Advocating for Yourself or a Loved One

— By Janelle Breese-Biagioni (www.soulwriter.com)

An advocate is a person who pleads the case of another or argues for a cause. The same definition applies if you take on the role of self-advocate to plead your own case. BC Association for Community Living (www.bcacl.org) simplifies the definition of self-advocacy as speaking up and speaking out for your rights. Regardless of whether you are speaking up for a family member or for yourself, the process can seem overwhelming. Here are a few tips to help you with your course of action:

Get Organized!

For many people, getting organized in life is one of the most difficult tasks. When it comes to advocating for yourself or a loved, it is ultra-important. The process can last a long time, so keep this step as simple as possible. *(continued on page 4)*



(Tips – continued from page 3)

Dedicate a few minutes each day or every other day to keep what you need in order.

- Purchase an accordion file folder or ask friends if they are recycling one to pass it your way.
- Mark the sections with categories: legal papers, medical papers, record of telephone calls, letters written, letters received, and appointments.
- Be sure to keep an accurate log of all your contacts. When recording your telephone calls, write the date and time of your call, the agency you called, and the name of the person you talked with, and what the outcome or action step was (Are they sending you info? Do you need to send them info? Did they refer you somewhere else?).

Activate Support!

You don't have to do this alone! Talk to the Brain Injury Association or Support Group in your area to see if they can help you with preparations and/or getting organized. They have been very successful in helping clients evoke change in their lives. As well, these groups may be able to connect you with other families and individuals who have successfully advocated for themselves. There is a plethora of information on the internet about self-advocacy. In particular, well-known groups like Planned Lifetime Advocacy Network (www.plan.ca), BC Coalition of People with Disabilities (www.bccpd.bc.ca), and BC Association for Community Living (www.bcaccl.org) have valuable information.

Focus and Be Clear!

This is an extremely important point. You need to be clear on what your problem is and what is it that you want to see changed. Spend time thinking about possible solutions for your situation, and determine what would be the best outcome for you. Finally, take inventory – where are you and where do you want to go and what is it going to take to get you there. Develop goals and objectives.

Take Action!

Once you have determined the problem and developed a plan, it is time to take action! Your plan could include telephone calls, letter writing campaigns or face-to-face meetings.

- Telephone calls can be nerve-wracking so have a written list of points you need to discuss or questions you want to ask or have someone assist you in writing a 'script' prior to the call taking place.
- Keep letters short, simple and to the point. Stick to the facts and have a friend or family member read it for you and give you feedback.
- When attending meetings, be sure to have with you any documents (medical reports, legal reports, birth certificate, social insurance number, WCB number etc.) that the person may need to see.
- Stay calm – and never be abusive or insulting. If you need a break because you are getting upset, then ask for one. Take a friend or family member with you for moral support and to help calm your nerves.
- Finally, never give up! If you are told that nothing can be done for your situation, write another letter, make another telephone call, or request another appointment with someone different.

De-stress!

Advocating for yourself or a family member takes you out of your comfort zone. It is stressful and at times, frustrating. Be sure to care of yourself during the process. Here are some simple reminders:

- Rome wasn't built in a day – don't try to do everything at once!
- After a meeting, go for coffee with a confidante and talk about what happened. If it was a good meeting, celebrate. If it wasn't, vent and let it go.
- Look for gains – even if they seem small, give yourself a well-deserved pat on the back.

Thanks to our sponsors



Improving quality of life for brain tumour patients

A new neuroimaging study at the Montreal Neurological Institute and Hospital at McGill University aims to ensure the highest quality of life for patients by assessing their cognitive skills before, during, and after brain tumour surgery. This is done by mapping the important functional brain areas surrounding the tumour in order to decrease the risks during surgery.

Brain tumour surgery requires a delicate balance between removing as much of a tumour as possible in order to ensure a patients' survival and extend life expectancy, while striving to preserve motor, sensory, and cognitive abilities (functional areas of the brain), and thus quality of life. This new study by researchers at the Montreal Neurological Institute and Hospital, published recently in the *Journal of Neurosurgery*, looks at functional neuroimaging in patients undergoing surgery for the removal of brain tumours. This is done in order to localize important functional areas of the brain so that these can be preserved during the surgical procedure. Functional magnetic resonance imaging (fMRI) has been used extensively to map sensory and motor functions, as well as to define brain regions involved in language processes but, until now, has not been applied to higher-order cognitive functions such as memory. Patients with brain tumours can lead active lives for extended periods following surgery and it is therefore important to consider the preservation of cognitive functions that depend on brain regions close to the tumour in order to maintain the patients' autonomy, and a good postoperative quality of life.

"To the best of our knowledge, this is the first published report applying fMRI to higher cortical processing for the pre-operative evaluation of patients with brain tumours," says Dr. Rolando Del Maestro, Director of the Montreal Neurological Institute's Brain Tumour Research Centre and a lead investigator in the study. Cognitive functions are essential for daily life. For instance, a correct response at a traffic light depends on the selection of possible actions based on previously acquired information and rules. In this situation, for example, green means go and red means stop. Damage to brain areas responsible for this cognitive ability can have a profound affect on the ability of the patient to lead a normal life. Other higher-order cognitive functions include keeping track of information in working memory, or selectively retrieving information from memory – these abilities are associated with the frontal cortex, and are incredibly important for normal functioning in many activities in basic life.

While in the fMRI scanner, pre-operative brain tumour patients are asked to complete a task which assesses the function of the dorsal premotor cortex by requiring them to select between competing actions based on conditional rules. This preoperative fMRI data is then integrated into an image-guided neuronavigation system, which guides neurosurgeons during surgery optimizing the approach for tumour removal in patients and preserving relevant functional regions in the premotor cortical region of the brain.

Patients then undergo post-operative structural MR imaging to show that the resection of the tumour was optimal and that the functional region within the brain's premotor cortex that was involved in the performance of the cognitive task was preserved. Patients in this study showed no deficits in their performance of the task postoperatively, further demonstrating that this specific cognitive function was not altered.

"These preliminary results are promising and suggest that preoperative fMRI is an important tool to assist neurosurgeons in preserving cognitive function in patients who are undergoing brain tumour surgery", stated Dr. Del Maestro. Dr. Del Maestro and his colleagues have also begun intraoperative testing in certain patients, allowing the surgical team to continually monitor and preserve cognitive function at risk during the operation

This study introduces a new fMRI paradigm to reliably localize and evaluate the cognitive selection of actions in patients with tumours near the dorsal premotor cortex. These techniques are now being applied to assess a broader range of cognitive functions in order to benefit patients with tumours in other brain regions.

In A Nutshell

– by Barb Butler

Throughout this newsletter you will find references to our annual conference. I encourage you to visit www.biac-aclc.ca and follow the steps to register. Meeting people is what this conference is all about and as you attend the various sessions with them you will be encouraged by what you learn.

Once again as you read this newsletter remember that if you have any comments please do not hesitate to contact the editor at barbbutler@biac-aclc.ca. This is your newsletter and I look forward to hearing from you.

Official kick off of Brain Injury Awareness Month (BIAM)

Brain Injury Association of Canada (BIAC), in partnership with other organizations, will announce the launching of Brain Injury Awareness Month for a second year in a row on June 11th by promoting an initiative to increase and advance awareness of brain injuries in Canada. Please watch our website www.biac-aclc.ca for a press release detailing the pro-active initiative.



Reflections Through a Nurse's Eye

— By Ash Azarnia, RN Student 4th yr, B.Sc. Biology, RCA D.

Do you understand me? This is a question that a person living with a brain injury may be confronted with in society. The average individual may not be aware that a person living with an acquired brain injury may have decreased cognitive and/or behavioral capabilities. Moreover, the capacity of an individual living with an acquired brain injury may fluctuate due to the combination of environmental and social stressors that he/she may need to cope with on a daily basis.

It is gratifying to provide direction for a person and see him/her transition into becoming more autonomous. It is a privilege to see an individual ultimately take more control over his/her health. Health promotion is a concept that may have different definitions based on the discipline involved. A nurse once wrote that health promotion may be considered gaining life skills through teaching/learning and self empowerment. The definition of health promotion may change based on the discipline of the healthcare profession however the role of the nurse will always stay the same.

The role of a nurse may be a facilitator and a resource for all clients regardless of race, ethnicity, age, gender or socioeconomic status. This vision of client empowerment may be realized through compassion, education and advocacy. Compassion may be considered to embrace genuineness, empathetic understanding and an unconditional positive regard for all. Education is a tool that may be used to empower clients, families and staff so that people can make objective decisions based on facts and past experiences. Finally, I believe that advocacy is a driving force behind all nursing actions because it empowers clients to take control of their own lives.

I am a 4th year registered nursing student at the University of Victoria. I would like to share my experience of helping a client living with a brain injury in overcoming barriers to achieve independence. When I first started working with my client I had doubts as to how much learning may be established. However, I was confident that by using a nursing perspective I would be able to empower my client to achieve more independence. I wanted to take on the challenge of helping my client find autonomy once again.

For confidentiality purposes I will use the name "John" to refer to my client. John is a male in his early 40s with a life long history of abuse, neglect and homelessness. His father was an alcoholic and there may be evidence that he was physically abused as a child. John has battled substance abuse issues including alcohol abuse and drug abuse for most of his life. John sustained his brain injury due to a fight resulting in permanent brain damage to the frontal brain lobe and temporal brain lobe. The permanent brain damage left John with issues such as irritability, impulsivity, disinhibition, memory loss and impaired judgment.

For my last practicum I worked exclusively with John to help him overcome barriers and facilitate new learning. Through routine, consistency, repetition and encouragement new learning was established. John was able to overcome barriers such as time management and transportation integrating back into the community. He started to attend the local recreation center on a regular basis. This was a great achievement for John. Depression, anger and frustration may be common secondary to brain injury and thus community integration was very therapeutic for his state. By attending the recreation center and exercising he was at a decreased risk of becoming depressed. Exercise allowed him the opportunity to release his anger and frustration in a positive manner. In assessing his mood before and after exercise I could see a significant positive change.

Through encouragement and advocacy John registered for a course at Camosun College guaranteeing him employment upon completion. By attaining a job he will become more independent and have an opportunity to integrate back into the community. Integration into the local community may be a very important aspect of rehabilitation and achieving independence. In taking a step backwards a person notices that marginalization is an issue that individuals living with a brain injury contend with on a daily basis. Marginalization may be defined as the peripheralization of individuals who are not considered part of the dominant population. Therefore, by integrating back into the community through recreation centers or work place communities are homogenized and the incidence of marginalization decreased.

In our journey the goal for my client was autonomy. By establishing new learning more independence was achieved. My challenge was to find a balance between being a resource and being a facilitator so that new learning may be established. An effective way for new learning to take place may be to seek out opportunities where the client may practice critical thinking and problem solving skills. On one occasion John asked me if I knew which bus stop we should get off at to get to the recreation center. I knew the exact bus stop but I realized that this would be a great learning opportunity for him. I asked him, "how do you think we can find out our correct stop?" He paused for some time and walked over to the bus driver. He showed the bus driver the recreation pass and the bus driver acknowledged that he would let John know when the bus gets to the correct destination. As a facilitator and a resource I found that it was extremely important to recognize social situations where my client could practice critical think skills in solving everyday challenges.

The last I heard of John he was going to the recreation center on his own and attending school. It was a great experience to see how overcoming seemingly simple barriers such as transportation can make such a huge impact on an individual's life. Autonomy was achieved through empowerment and learning new life skills. This experience has thought me that health is not an end result but a process. It is what we know to be true. It is living.

