



headline

BRITISH COLUMBIA'S VOICE FOR THE BRAIN INJURY COMMUNITY

SUMMER 2009

Mike's Story **His Family and Friend's Perspective** **Pages 5 - 7**



Losses Follow Brain Injury for the Entire Family

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Message from the Editor

Janelle Breese Biagioni

Greetings!

By the time this issue of *Headline* reaches your mailbox, the provincial election will be over and the MLA for your area will be announced. I want to encourage each of you to not let the pressure up just because the election is over. In fact, the work is just beginning. Make a commitment to visit your MLA. Take them a copy of *Headline*. Tell them your story. Be an advocate for the thousands of British Columbians in need of receiving brain injury services. Your voice is important – make it count!

In this issue, we celebrate June as Brain Injury Awareness Month. It's the perfect time for you to get out and educate your neighbours, local politicians, service groups and the general public about the impact of brain

injury. Promote prevention. Be a role model; wear all the gear when participating in outdoor activities. Take a few minutes and write a letter to the editor of your local paper and let them know that June is Brain Injury Awareness Month. Foremost, contact your local Brain Injury Association. Sign up as a volunteer, or make a donation to their programs, or simply thank them for a job "well done." Without the services of local associations, many survivors and families living with the outcome of a brain injury would be without support.

In closing, we wish you all a safe, enjoyable, and refreshing summer! Have fun, laugh lots, and stay safe!

Helmet Safety Standards

The Brain Injury Association of Canada (BIAC) congratulates the Canadian Standards Association for the setting of standards for alpine skiing and snowboarding helmets. These standards, while being announced following many deaths on the slopes during the winter season, are a result of collaboration over the past several years. BIAC is pleased to have been a participant in this collaboration.



Anthony Toderian of the CSA recently stated, "If manufacturers submit helmets to us now, we can begin testing and they can have the products on the market for the next ski season." Unfortunately, at this time helmet manufacturers have no obligation to meet the standards or submit their helmets for testing.

Dr. Hedy Fry, MP for Vancouver-Centre, has presented a Private Members Bill C-289 in the House of Commons that would include alpine skiing and snowboard helmets under the Hazardous Materials Act. That would mean

that no helmet that did not meet the CSA standards could be imported, advertised or sold in Canada. All that is required to make this Bill a reality is a Governor-In-Council Order! We urge you to write your MP and ask them to ensure that Bill C-289 gets passed quickly. To learn more about this visit our website www.biac-aclc.ca.

While it is true that no helmet can offer 100 % protection from death or injury, wearing a helmet that meets CSA standards can offer protection and reduce the risk of head injury by as much as 60%.

The Brain Injury Association of Canada commends Vail, Colorado, for their new ruling that all resort staff will be required to wear helmets beginning in 2010. Instructors on the ski slopes are role models for youth learning to ski or snowboard and it is incumbent on everyone to model safety. With the Olympics coming in 2010 to Whistler we need to be setting an example for the rest of the world!

The bottom line is that there have been far too many lives lost this past winter while participating in outdoor winter sports. Canadians deserve the ability to know that the helmets they wear will adequately protect them and our youth deserves our utmost efforts in protecting and setting an example for safe sports.

Please contact BIAC to learn more about how you can help – info@biac-aclc.ca.

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.

•

Mike Rossiter and HEADLINE editors take no responsibility for, nor do they necessarily agree with, the opinions contained in articles, letters or advertising.
Contact Janelle Breese Biagioni at 250-592-4460 for information.



CHANGE OF ADDRESS?

We would like to keep our mailing list up-to-date!
If you have moved or would like to be on the mailing list, please contact Mary Lou at: 604-274-1251 or email her at: mlr@telus.net
(Please put **HEADLINE** in subject line of email)



Therapeutic Riding Program

Howe Sound is now offering horseback riding to adults with disabilities.

Individuals have the choice to participate in four sessions – 30 min each week

Sessions starting in May

Where: Mission, BC

When: Wednesdays (May – August)

Meeting place: Coquitlam Headway Centre-
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Cost: \$140.00 (subsidy may be available)

Horseback riding is led by an equestrian riding instructor, who is certified by the Canadian Therapeutic Riding Association (CanTRA).

Register today as there is limited space!

This is a wonderful opportunity for individuals to experience an invigorating form of exercise.

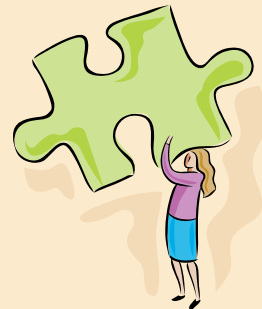
Registration Deadline April 15, 2009

For questions please call Loretta at 778.373.1243

Puzzle Pieces

by Linda McLarty

One by one the pieces fell
Life seemed like a bit of hell
One by one I put them back
Piece by piece in a stack
First the heart, so very blue
Then my head, it hurt too
Now a body, limb by limb
Pretty bad, pretty grim
Puzzle pieces, puzzle pieces of my life
Friends and enemies too
Pain then Laughter somehow broke through
Work, then play night and day
Year after year, Lonely
Puzzle pieces of my life.



My Story

Michael Coss

My name is Michael Coss. I am married, and the proud father of twins, a son named Nathan and a daughter named Danielle. They are now 3 years old.

On May 18, 2006, I was traveling from Vancouver to Kelowna with my wife Ann and then seven-month twins, when catastrophe struck on the Coquihalla and lost control of the van, which rolled over at least one and half times.

Miraculously, my wife Ann and daughter Danielle escaped with only minor injuries, but Nathan and I were not as fortunate. Nathan spent several weeks at BC children's Hospital with head injuries.

When the medical services arrived at the scene of the accident, I was unresponsive, with evidence that the airbags had deployed and I was restrained by my seatbelt. Glasgow Coma Scale (GCS) rating at the scene was 8 out of a possible 15, indicating a comatose state.

I was subsequently transported by air to the Royal Inland Hospital in Kamloops, where I was assessed by neurosurgery, and bilateral ventricular shunts were inserted.



On May 30, 2006, I was transferred to Royal Columbian Hospital to be closer to my family. There, I was admitted to the critical care unit and subsequently transferred to the neurology unit where I remained comatose for several months and was unable to follow commands.

Upon hearing of the accident, my parents flew from Quebec City where they were living, to be by my side.

My injuries were nearly fatal and despite comprehensive treatment at two hospitals, I remained in a coma for six and half months.

Doctors told my family that my chances for recovery were remote. My wife Ann was devastated, facing the challenge of raising our two babies without a father.

Recommendations were made to my family to look for a long term facility to take care of me for the rest of my life. But they did not know Michael Coss.

My family had researched Hyperbaric Oxygen Therapy (HBOT) the medical use of oxygen at a level higher than atmospheric pressure. The treatments are used in Can-



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ada, more commonly used in Asia and Europe, but they are not approved by Health Canada and therefore are not covered by medical insurance. The more they learned, the more they came to believe that these treatments may work for me though they were prohibitively expensive and came with no guarantee.

My friends and coworkers saw a chance to mobilize and make a difference in my life. Within a few weeks, funds were raised by donations from friends, family and my former colleagues at Molson Breweries.

My mother accompanied me from RCH to the Richmond Hyperbaric Health Center, 5 days a week via ambulance, and for a few months, put a sponge with some water on it while I was in the chamber which would make me swallow and equalize the pressure within my ears. It worked and on Christmas Eve 2006, the Coss family received the greatest gift they could hope for. After three HBOT treatments and half a year in a coma, I awoke and uttered my first words.

Only three months out of my coma, I learned about Rick Hansen Wheels In Motion, an annual event held in communities across Canada to raise funds for research and to improve the quality of life for people with spinal cord injury. I was truly inspired by Rick Hansen even before I was injured and I wanted to be part of it. In the midst of my rehabilitation, I canvassed my network and once again they rallied in support. Friends, families, and Molson coworkers and other corporations helped me raise over \$22,000. My team (Team Cosco) not only won the award for the Top Fundraiser in Canada for Wheels in Motion 2007, we also set a fundraising record for the entire six-year history of the program.

From that moment on, I was on the road to recovery. Through a long, intensive and gruelling rehabilitation, I re-learned how to talk, eat again, and I am currently re-learning how to walk. The old Mike Coss has died and is now gone away, the new Mike Coss is re-born and he has a renewed focus.

I currently reside in a group home near my wife and children whom I see several times a week. My long term goal is to be an able and active participant of my family's lives. I am very THANKFUL of my support network, including my family, my friends, coworkers, all of the support members, including OT/RN/Dietician and Speech and Language Pathologist and my residential care workers who provide the Activities of Daily Living support.

My family is the reason why I work so hard on my rehab each day. My wife and children, my parents and brothers and their families, my friends and my co-workers are the reason that I get up each day and work so hard.

I have begun to write a book about my experiences and have plans to speak publicly to share my inspirational story. Ultimately, like my hero Rick Hansen, I plan on raising money to provide funds to other brain injured individuals who face similar challenges and who could benefit from HBOT but are unable to pay for it.

I am not ready yet to run the Boston Marathon but at least I am training for it.

Michael Coss, Cosco30@hotmail.com



Thank You from Michael Coss

I would like to acknowledge and THANK several people who have impacted and made a difference in my life. The first person that I would like to commend and THANK is my wife, Ann Coss.

Not only has she found the time to come and visit me several times a week with our children, she has been very busy raising our children, paying all the bills, running a household, taking our children to pre-school twice a week, taking our dog "Murphy" for a walk, entertaining our neighbours and maintaining a smile on her face, considering the circumstances; she is an amazing woman.

Next, I would like to THANK my parents who re-located to Vancouver from Quebec City the day after my injury leaving family, friends, and co-workers behind. They have been a huge support for my family and see me daily and have searched for various therapies that I should undertake to further improve my rehabilitation. THANK YOU for deciding to take the route of HBOT for me as this enabled me to awaken from my 6 ½ month COMA.

My in-laws, Mark and Jenifer Bartlett are the next people that I would like to commend and acknowledge. They have helped us out by babysitting our children, helped prepare meals, assisted Ann with household chores like take our big baby "Murphy" for a walk, and even take out the garbage and mow our lawn.

There are numerous others that I would like to THANK like Ken Endo, Rachel Dumas, Joe and Vanessa Lozinski for coming to see me while I was in the hospital and also at the group home that I reside in. I would like to mention my former boss at Molson, the person who hired and trained me, Ronnie Paterson. He was my mentor and I would go to bat for him. He organized and held numerous fundraisers for me to raise some money so that I could undergo HBOT which enabled me to awaken from my 6 ½ month COMA. The staff and manager of the Cheshire Homes Society of B.C., Larkin House, the group home that I reside in, for teaching me the skills to become independent again and all the various people that have worked with me the last 2 years, Janis Duvenstein, Francine Miller, Sue Mckrimmon, Mary-lynn Corpuz, Bonnie Ritchie, Dan Carlson, Martha Rodriguez and all the doctor's and nurses who looked after me at Eagle Ridge and Royal Columbian Hospital. Many thanks to all of you; I'm sure that I am going to run The Boston Marathon in the near future.

Michael Coss

Mike Coss: His Family & Friends Perspective

The care, support, and rehabilitation for a survivor of brain injury is often complex. Determining the services needed by the individual to assist them in rebuilding their life is generally the focus of the professionals and of course, the piece that is funded... if there is funding. What may be acknowledged, but not necessarily dealt with, is the impact the individual's injury has on family and friends. For some survivors, the change within them is so significant that their relationships suffer greatly; sometimes the relationships end. For others, they and their loved ones come to a new understanding and appreciation for who they have all become as a result of the experience. This is certainly true for the family and friends of Mike Coss.

In 2006, Mike was traveling to Kelowna with his wife and their seven-month old twins. The family was in a car crash. Ann and their daughter received minor injuries; however, both Mike and their son, Nathan sustained brain injuries. Nathan required a lot of care, but has recovered well. Mike was in a coma for six months and has undergone extensive rehabilitation since being injured. He has come a long way, but still has a long way to go.

After the crash, family and friends stepped in to help out. Not only was Mike's wife, Ann caring for infant twins, one twin required extra care and constant supervision as a result of his injuries. Ann's mom, Jenifer Bartlett, left her job to move in with her daughter. Jenifer recounts her feelings and the life-changing decision she made after learning what had happened, "I was in shock and disbelief. This could not happen in our family. After receiving the news of the accident, I acted in an automation mode. It was necessary to take leave from my job, give up my home and move in with my daughter, Ann to help the family. Other members of the family were injured as well in the accident." Jenifer had a good relationship with her son-in-law before he was injured and although their relationship has changed, Jenifer reports the change hasn't hurt their relationship. "I have a good relationship with the new Mike. He calls me his favourite mother-in-law and I enjoy his company."

Mike's parents, Bob & Suzie Coss, also made a life-altering decision. They permanently relocated from Quebec City to Vancouver to be near their son, daughter-in-law and grandchildren. There was no question for them that they needed to do this. When asked about how his life has changed since his son was injured, Mike's dad replied, "This 'tragedy' made us realize that there is a reason for everything in life. Our values have remained the same, but our priorities have changed. We no longer take things for granted and we cherish every moment spent with our loved ones and especially our grandchildren which we now see on a regular basis and treasure each moment spent with them."

Naturally, the ones who have suffered the most have been Mike's wife and children. Mike lives in a group home, but spends quality time with his family often. The young couple's relationship has changed but they share many blessings and work together to create a positive life with their children. Ann, who appreciated Mike before he was injured, appreciates him even more now. "I have great admiration and deep love both for the Mike that I married and the Mike who is here now. It has been a painful journey and I so hope no one will ever have to go through it." She states further, "For those with the misfortune of this experience I hope that there is more support for the brain injured in the sense of respect and knowledge. We have had to research and fight for much of what Mike receives and I wish it wasn't so difficult, as the loss of the person is so great, you need any hope to hold on to and you need belief."

Mike's family and friends described him before his injury as a warm, loving, caring individual who was dynamic, electric and determined. They commented on his great sense of humour and the dedication he had for his family and his job. Mike was independent and was an engaging "hands on" dad. Today they describe him with those same virtues; however, it is Mike's spirit and commitment to regain his life and to make a difference in the lives of others now that inspires them and makes them so very proud.

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The Grand Opening of Connect Lake Country...My Home

Mary Lou Rossiter



Their smiles would have lit the dark corners of any room if there were any. "They" are the people with a brain injury who now live in Lake Country's Connect Community in British Columbia's Okanagan.

On Wednesday, April 29th, Connect Lake Country was officially opened, the red ribbon cut together by Mayor James Baker and Connects first resident, Randy Toples. Patti Flaherty, Executive Director of Connect has been living and breathing this 10 million dollar project from its groundbreaking over a year ago, to its beautiful completion. The opening was attended by several hundred... family members, friends, partners, professionals, neighbours and local people, taking tours of this one of a kind, 42 bed, 6 home, centre. That it's beautiful is not lost on those who live there. One of the first residents to walk into his room turned and asked the staff, "Is this my room?" Assured that it was, tears fell.

Interior Health Authority has partnered with Connect to provide 16 Transitional Rehab spaces and 12 Residential Units. Fourteen rooms are available for private contracts for people throughout the province. There is a full clinical

team on board including Physio, OT, Speech Therapy, Nursing, and Recreation. Eighty employees will fill out the complement of staff.

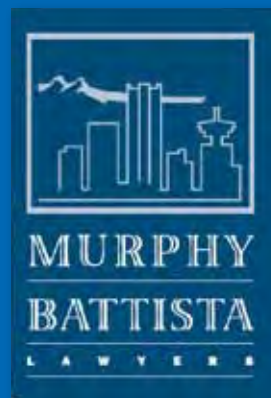
Patti welcomed us warmly and thanked a team of people who were instrumental in the outcome of such a unique project. Connect's Co-founder, John Sherwood followed with the story of his vision that was but a seed more than 3 years ago and left us all knowing how proud he is of the space he's created. Deb Preston from Interior Health also spoke about her part in the beautiful unfolding of this dream 4 years ago, soon after, connecting with John. She acknowledged as well, the many who grew this idea from a seed. Al Condeluci, a leader in the field of disability studies, wrapped it up with a nudge, a reminder that the next step for all who live and work at Connect is to become part of the Lake Country community they live in. The sweetest word to spring forth was from resident, Dwight Glogowski who opened his speech with a loud "YAHOO!" That power filled word summed up the feelings of all those who have worked so hard to see this dream realized, but especially the people who are now in a family setting in a place they lovingly call "my home".



*Joe Murphy, Q.C.
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ADVERTISER'S PROFILE

Webster & Associates *Neurolawyers*

Many people are surprised to learn that Webster & Associates is the only law firm in Western Canada that deals exclusively with traumatic brain injury cases.

Through his involvement in complex brain injury cases, Brian Webster has developed a well-earned reputation as a leader within this highly specialized area of law. Representing brain injury survivors in British Columbia and around the globe, Webster & Associates have achieved many precedent setting and high awards. They are recognized and respected within the court system for their advocacy, knowledge and experience. The firm is also well known for going the extra mile to seek compensation from all available funding sources, further ensuring the promise of a secure future for clients and their families.

Brian Webster, Barbara Webster-Evans, Daniel Corrin and Dee Rogers understand through experience that brain injuries affect the whole family, and are passionate in their work on behalf of their clients. This tight-knit, carefully chosen team of experienced legal professionals shares a deep commitment to helping brain injury survivors and their families. Their dedication extends beyond the workday, including involvement and support of community brain injury causes. They are also active in implementing programs to increase awareness and provide further assistance to TBI survivors and their families.

To find out more about Webster & Associates, please visit their website at: www.braininjurylaw.ca, or contact them at the address below:

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Campbell River Head Injury Support Society

www.crhead.ca

Lower Mainland Brain Injury Association

www.lmbia.org

Fraser Valley Brain Injury Association

www.fvbja.org

Central Okanagan Brain Injury Society

www.cobis.org

www.protectyourhead.com/

Comox Valley Head Injury Society

www.cvheadinjury.com

Nanaimo Brain Injury Society

www.nbis.ca

Prince George Brain Injured Group Society

www.pgbig.ca

Brain Injury Resources

www.braininjuryresources.org

Ontario Brain Injury Association

www.obia.on.ca

Brain Injury Association USA

www.biausa.org

South Okanagan Similkameen BI Society

www.sosbis.com

Victoria Brain Injury Society

www.vbis.ca

The Perspective Network

www.tbi.org

The TBI Chat Room

www.tbichat.org

G.F. Strong Rehab

www.gfstrong.com

BC Epilepsy Society

www.bcepilepsy.com

Headway Centre

Howe Sound Rehabilitation Services Society

www.howesound.net

NEWS FROM LMBIA

On April 27, 2009 the Lower Mainland Brain Injury Association (LMBIA) held a Welcome Back afternoon tea event to celebrate the re-opening of its education and drop-in centre activities at a new location in Burnaby – 7393 16th Ave. at Kingsway after a five month closure of the old centre. It was a happy occasion for the large turnout of old and new friends and supporters who dropped by to visit together and with staff.



The new facility has been generously offered to LMBIA for part-time use by the Burnaby Loughheed Lions Club. To start, the new location will operate two days per week. Mondays' programming focuses on health and wellness and life-skills workshops, and Thursdays continue to be for drop-in social/leisure activities. For enquires regarding Monday class registration or for a calendar of monthly activities, call 604 521-0833 or visit www.lmbia.org.

Our Karate Club has also recently found a new home at Centennial Community Centre – 65 East 6th Avenue, New Westminster. For information on class enrolment, call 604 521-0833. John Millard, executive director of Cheshire Homes Society, continues as volunteer instructor of this popular program.

In addition, we are excited to announce the expansion of LMBIA's support group network into areas that have been underserved. To date, four new groups

have opened – two in Surrey, one in North Vancouver and one in Burnaby. And, once facilitators are confirmed, both a Richmond and Vancouver Westside group will open in June 2009. For a full listing of Lower Mainland support groups, see page 23.



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Abbotsford, BC



Topic: The Lower Mainland Integrated Community Crisis Intervention Team

Constable Lara Davidsen, RCMP
Camie Weaver – Justice Coordinator for the Canadian
Mental Health Association BC Division
Topic: The BC Neuropsychiatry Program
Peter Dawson, RN, MSN, Program Coordinator
BC Neuropsychiatry Program – UBC Hospital

Topic: Case Management

John Higgenbottom, PhD – Department of Psychology
Douglas College and Professor at the Department of
Psychiatry – UBC

Topic: Homelessness

Reverend David Ophein, BA MDiv, M.A.D.R.(c) – Rector
of Saint Saviour's Anglican Church and Chief of the Par-
ish Rainbow Kitchen;
Geoff Sing, Manager, Cridge Centre for the Family Brain
Injury Program

Topic: Substance Abuse Program Adapted for People with Acquired Brain Injury

Jodie Millward, Case Manager – Fraser Valley Brain
Injury Association

Topic: Acquired Brain/Mental Health

James Schmidt, PhD – Neuropsychologist

Topic: ABI Homelessness Outreach Project Brain Trust Canada

Details to follow. Other speakers and panel members to
be confirmed.

Please contact Fraser Valley Brain Injury Association for
more information:

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rake	cantaloupe	salads
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weeds	community	grass
fence	fresh	bugs
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BRAIN DAMAGE

John Simpson

I have been involved with Acquired Brain Injury for just about thirty years. Whilst awareness has risen, it is nowhere close to where it should be and the services for those who have an Acquired Brain Injury, is not where it should be. Traumatic brain injury is caused in a car crash, at work, or an assault and non traumatic, which far out numbers traumatic, caused by near drowning, aneurysms, tumours, substance abuse. There was an extremely interesting paper published in Scientific America in March 2002 by Martin H. Teicher entitled, Scars That Won't Heal, The Neurobiology of Child Abuse. Maltreatment at an early age can have enduring negative effects on a child's brain development and function. Then there are those children who are physically and sexually abused by parents or others, of course, those children born to a mother who drank during her pregnancy and ended up with Fetal Alcohol Syndrome on top of which many times they had a brain damage from a risk lifestyle. Far too many children suffer concussions playing sports or falls that go undiagnosed. They end up dropping out of school, getting in with the wrong crowd, drugs, alcohol and crime.

Now turning to recent news in the media, in the Province on Friday, April 10th, in particular where they refer to Marcellus Jacob, a serious, violent sex offender who walked away from a halfway house, the paper makes following

comments: "Jacob was born to an alcoholic mother and father, who seven months later abandoned him in the care of his maternal grandparents. As a child he was neglected by the grandparents and physically and sexually abused by his uncles." In that same edition of the Province there were comments made about Dennis Karbovanec. He came from a broken family, lost contact with this natural father and never close to his mother and stepfather. As an apprentice he was in a car crash which injured his back. One would wonder if he also had some brain damage, not necessarily in a car crash but from fights, sports etc. Then there is the case of Linda Howe who had problems with her living situation in Gibson, who shot and seriously injured the manager and she in turn was shot by the police. Apparently she may or may not have served in the military, but there is a statement to the effect that she had a brain injury when hit by a car while trying to rescue an injured owl. Studies done by the Centre for Disease Control and Prevention suggest that between 78% and 88% of prisoners had a traumatic brain injury. In no way am I condoning what has happened, but rather offering a possible explanation, which also says clearly that we need to focus on secondary prevention and that is if an individual has FASD and/or brain injury on top of that, they need support in the early stages and perhaps in some cases even lifetime support. A good example of two cases I am very aware of are: a boy of nine started showing very serious sexual tendencies but got immediate help, not just for himself but for the whole family and the issue was dealt with properly. In another case, also a boy with a brain injury, who had some sexual issues, did not get the right treatment in a timely fashion and reoffended a number of times. Obviously prevention in the first place is the key but most importantly after that are recognition, rehabilitation and support. The Regional Treatment Centre in Abbotsford has excellent programs for those with a brain injury and/or FASD but there needs to be more support in the community. Whenever a former inmate leaves the prison, there needs to be, at least initially, some well qualified support particularly for those who are living with a brain injury or other mental illnesses.



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Grants Available for Community Organizations for Traumatic Brain Injury Services

The 2009 Grant Guidelines and application materials for Brain Injury Community Projects funded by the Rick Hansen Foundation's British Columbia Neurotrauma Fund are now available. The initiatives funded through this program will provide increased support either for people with brain injuries and / or their families, or for prevention programs to decrease the incidence and severity of brain injuries.

The Advisory Committee has selected the following priorities to focus the available funding:

- Quality of life
- Caregivers and individuals living with traumatic brain injury
- Provincial voice
- Education

If you are a registered charitable organization located within British Columbia and an institution or association that can demonstrate sound planning, administration and fiscal practices, and have the necessary resources to carry out the project you could be eligible to apply for funding to begin a valuable new project in your community.

If you would like an application package, or more information about this BC community funding or any other initiatives of the Rick Hansen Foundation, please visit our website, www.rickhansen.com. All project applications to be considered in the current funding cycle must be submitted by June 15, 2009.



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Treatment aimed at community reintegration

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.

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

Solution on page 19



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Gardening

Ganon Bender



Gardening can be the love of a lifetime and an herb garden can be a scintillating and rewarding addition to one's life. Think of the feeling of well-being the scent of lavender provides. An herb's aroma and/or bright color bespeak its healing properties.

We will find we are drawn to certain plants more than others: we intuitively know what is most beneficial for us. It is no coincidence that the plants we have chosen for herb gardens down through the ages are aromatic. They are aromatherapeutic and beneficial generally.

There are three groupings of herbs: culinary, medicinal and aromatic, though all herbs belong to all three groups to varying degrees. Technically all plants are herbs and have intrinsic properties that can be beneficial or otherwise. This includes the foods we eat. Study can enable one to benefit from nutritional healing.

Herb garden herbs do not like too much nitrogen; using fertilizer on your garden will result in less flavorful herbs. The best way to amend your soil is with kitchen scraps.

The soil should be kept damp, almost dry. (except in the case of spearmint and peppermint, which commonly grow on the banks of creeks). The plants become dull when too dry and rot with too much water. Little, if any, watering will be necessary in addition to rainfall, which is ionized and more

beneficial than water from a hose. Hose water doesn't have the chance to build up a charge in transit.

There are also three basic families that all herbs belong to:

- the lily family includes onions, garlic, chives, shallots and leeks. Generally the bulbs and leafy stalks are used and boost overall vitality. Lily family flowers are ball shaped and are comprised of many small flowers. Egyptian walking onions spread by growing a set on top that becomes too heavy, falls over, and becomes a new plant. In this way they "walk".
- the mint family includes peppermint, spearmint, bergamot, which makes a calming tea commonly used as

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a sleep aid. Mediterranean herbs like thyme, oregano, sage, marjoram, tarragon, savory and mint are perennials (they come back every year) and are commonly used in Middle Eastern cooking. Catnip is also in the mint family, is a beautiful bush with little lavender flowers arranged on a spike. Mints are perennials, meaning they come back year after year with the exception of sweet basil, which is an annual; it only lasts one year. Mint tea is good for stomach upset.

- the carrot family includes cilantro (which promotes the circulation of one's vital energy), parsley, and a biennial (it makes seed the second year, and then dies). Chervil, dill, fennel, anise and caraway are also in the carrot family. Plants in the carrot family commonly have umbrella-shaped flowers; Queen Anne's lace is in the carrot family.

Most herbs prefer well-drained, sandy soil, though the non-Mediterranean herbs in the mint family (spearmint, peppermint) like more damp soil. The mint family doesn't spread by seed, it either drops a branch which takes root (thyme will wander a little, given 2-3 years) or spreads by rhizomes (wandering roots, as in the case of peppermint and spearmint. These mints spread more readily and should be given a little elbow room to spread.

All herbs should be cut back frequently as they become bitter once they've "bolted" or gone to seed. Once you've harvested your herbs they should be dried on a cookie sheet at 200 degrees (15-20 min) or until crispy. Drying them too fast with high heat denatures them, makes them less potent. They should be stored out of the light, in a cool place is best.

~ Ganon Bender sustained a traumatic brain injury in 1996 and lives in Floyd, Virginia. He is involved in a telehealth Cognitive Rehabilitation Pilot Study called Community Living Connection (CLiC) with Brain Injury Services of Southwest Virginia in Roanoke, Virginia.



Brain Injury Association of Canada
6th Annual Conference
*Strategies for Education,
Prevention and Support*

Brain Injury Association of Canada
Association canadienne des lésés cérébraux

The Brain Injury Association of Canada (BIAC) is pleased to announce their 6th Annual Conference will take place on July 10, 11, 12, 2009, at Villa Saint Martin, Pierrefonds, Quebec. Special guests include: Kent Bassett-Spiers, Ontario Neurotrauma Foundation and Marilyn Spivak, Founder/Past President of the Brain Injury Association of America. To register on-line visit, www.biac-aclc.ca.

Government Resources

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

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

Epilepsy BC

Lower Mainland 604-875 6704

Outside Lower Mainland 1-866-374-5377

Victoria 250-475-6677

Information Services Vancouver

604-875-6381

Summer Weather Beckons Motorcyclists

Warm sunshine, a gentle breeze blowing and a purring bike is a recipe for happiness when you love motorcycles. Any motorcyclist will tell you that there is a feeling of being “free” when you are riding a bike. It’s not only an economic consideration for some, but it’s a definite passion! Taking a motorcycle on the road may be liberating, but riders need to take caution too.

ICBC reports that the majority of motorcycle crashes involve a vehicle making a left turn in front of the oncoming motorcyclist. They also report that single-vehicle motorcycle crashes can be attributed to high speeds and tend to happen on curves, and occur on weekends during daylight hours.

ICBC offers the following tips on their website at www.icbc.com.

10 safety tips for motorcycle riders

1. Make eye contact – never assume others see you. Always try to make eye contact with drivers who may be about to pull into your path.
2. Read “vehicle language” – even when drivers, cyclists and pedestrians do see you approaching, they often misjudge your distance and speed. Don’t rely on them.
3. Watch out for left-turning vehicles at intersections – getting hit by an oncoming vehicle that’s turning left is the most common type of motorcycle crash.



4. Check behind when turning left from a highway – watch your mirrors and make sure you have plenty of space behind. The drivers behind might not slow down for you.

5. Look out for hazardous road conditions – wet roads, fluid spills, sand, gravel, highway sealant, railroad tracks, potholes and other road-surface hazards reduce your traction. They cause many falls.

6. Take it easy on the curves – many crashes happen there. You might overshoot the road or cross the centre line and get hit by oncoming traffic. Watch the road ahead, slow down and choose the correct lane position before entering a curve.

7. Wear a good helmet – Helmets prevent head injuries in 67 per cent of crashes and deaths in 29 per cent. They’re also mandatory in B.C. Make sure your helmet has a sticker showing that it meets current safety standards. Avoid buying a used helmet. It may have been in a crash, and the damage may not be obvious.

8. Wear protective clothing designed for motorcycle riders – it can provide some protection during a crash, as well as shield you from the weather and flying debris. Keeping warm and dry will help you stay alert and maintain coordination. Wear your riding gear in layers so you can adjust to changing conditions. Jeans give little protection. Never ride in lightweight pants or shorts.

9. Protect your eyes and face – constant wind can make your eyes water, preventing you from spotting hazards. Flying insects, dust and debris can hurt your eyes and face. The best protection is a full-face helmet with a built-in face shield.

10. Be visible – Wear bright, reflective clothing. Add extra reflective material to it or wear a reflective vest. Likewise, buy a bright-coloured helmet and stick reflective tape to the back and sides. Always keep your headlight on. Ride in the lane position where other drivers can easily see you and you’ve got room to move. Avoid all other vehicles’ blind spots.

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Libraries of the North Project

The Northern Brain Injury Association (NBIA) is making sure all northern residents have access to information about acquired brain injury. The Libraries of the North project purchased 99 books that will be distributed to 23 public libraries throughout northern British Columbia.

The information in the books ranges from topics including personal injury accounts, to information for family members, including children’s books and factual books with reference material for health care providers. The focus of this project is to provide access to relevant information on acquired brain injury for communities and individuals. NBIA determined that the best way to make this information available is through each community’s public library.

Cindy Phair, project coordinator for the Northern Brain Injury Association, has been working with Janet Marren, community outreach librarian for the Prince George Public Library, to develop a distribution model for the material and to communicate with the northern BC Public Libraries. The books will be distributed through three BC Library Federations: The North East Library Federation, the North Coast Library Federation and the North Central Library Federations. These three Federations include libraries from Prince Rupert to Valemount to Fort Nelson



Perusing 99 brain injury books prior to distribution to 23 libraries in northern B.C. are, from left, librarian Janet Marren, brain injury survivors Rob Guest, Sherri Colebank and John Ormiston and Northern Brain Injured Association co-ordinator Cindy Phair. (Citizen photo by David Mah)

and Quesnel. The books will be distributed to the libraries by March 31, 2009 and be on library shelves by the end of April, 2009. A provincial interlibrary loan system will also make these books accessible to all British Columbia library users.

The Northern Brain Injury Association, with the support of the Rick Hanson Foundation, has been involved in communities throughout the north since 2005. The primary goal of NBIA is to ensure that northerners whose lives have been impacted by acquired brain injury are supported in their recovery. The NBIA recognizes the isolation and remoteness of northern living and connects northerners to education and support.

For information on the project, books being donated, or any other questions, contact Cindy Phair at 1-866-979-HOPE (4673) or email phairc@pgbig.ca or Janet Marren at (250) 563-9251 ext.123 or email jmarren@lib.pg.bc.ca



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Reflections

By Janelle Breese Biagioni

“Call it a clan, call it a network, call it a tribe, call it a family. Whatever you call it, whoever you are, you need one”

Jane Howard (1935-1996) US journalist; writer

Jane Howard’s quote underscores our inherent human need to have healthy, loving, and respectful relationships. This basic need belongs to everyone regardless of economic status, education, spiritual or religious beliefs, or gender.

A basic desire for everyone, including survivors of brain injury, is to either strengthen existing relationships or to create new relationships with people that we care about and want to have in our life – people who are not paid to be there! This isn’t to say that the contribution of service providers, legal advisors and medical professionals is not valued. On the contrary! Helping survivors establish genuine and meaningful relationships is a process that professionals support and attempt to incorporate into their work everyday. But the truth is that survivors of brain injury, their loved ones (including spouses), and their friends often struggle with the significant changes to the individual and the reality of how those changes affect their relationship.

Maintaining and/or establishing genuine and meaningful relationships can be difficult and beyond the control of

individuals living with a brain injury. The breakdown of a friendship or relationship can result from changes in the person’s personality and/or their inability to return to the lifestyle they had before. In some instances, when the recovery process is long and complex, the individual loses touch with their friends and extended family. Marriages become strained and often fracture under the pressure. The roles in the family change significantly; therefore, the relationships change.

From personal experience, I can tell you that one of the most challenging aspects of this is what I call the “false perception and expectation” of those on the outside looking in. After my first husband Gerry, healed from the physical injuries of his bike crash, the professionals and those who didn’t really know us perceived us to be the same family so they expected us to behave as the same family. That was impossible. My husband was no longer the equal partner in our marriage, he was unable to parent as he had before, and he behaved more childlike than our children. None of us could relate to one another in the capacity that we had prior to him being injured because all aspects of our relationship had changed. Our experience was not unique; it mirrors thousands.

I have had the privilege to work and speak with hundreds of individuals and families over the years who most often share that they are lonely and/or are struggling with their personal relationships. I met some who are on their own. Their marriages have ended, their friendships dissolved, and they are alone.

Al Condeluci, author of Cultural Shifting, has dedicated a great deal of his career in educating us on social capital (friendship). In an article on the importance of social capital he writes, “Research is now convincing that the more social capital people have in their lives, the better their lives become. In fact, in his book, Bowling Alone, Robert Putnam reports that the more social capital people have in their lives the healthier they are, the happier they are and – listen to this – the longer they live. That is right – social capital, or friendship is linked to the 3 highest quality of life indicators know to humankind!”

Yes, for many, our relationships changed drastically following a loved one’s brain injury. Our needs as individuals and as a family changed too. Nonetheless, the very basic need of yearning for intimate relationships, nurturing family relations, and healthy friendships, didn’t. It is critical in planning services and supports for individuals living with the outcome of a brain injury, that we consider the impact their injury has had on their relationships, particularly their family.

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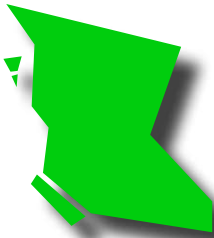
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NBIS offers rehabilitation and case management services, disability benefits assistance, and workshops focusing on issues ranging from trauma recovery to life skills strategies and anger management. For more information, call 250-753-5600 or visit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

BULKLEY VALLEY BRAIN INJURY ASSOCIATION (BVBIA)

BVBIA 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.

VICTORIA BRAIN INJURY SOCIETY (VBIS)

VBIS is offering Acquired Brain Injury 101, a new informative program on the brain. For more information, email admin@vbis.ca or call 250-598-9339.

CARIBOU BRAIN INJURY SOCIETY (CBIS)

The Caribou Brain Injury Society has a new phone number effective immediately. Please update your contact list to this number: 250-392-7772.

COMOX VALLEY HEAD INJURY SOCIETY (CVHIS)

Mark your calendars for the 16th Annual G & B Johnson Brain Injury Conference to be held on June, 18th & 19th, 2009. To register, please email info@cvheadinjury.com or call us at 250 334 9225. For more information, visit CVHIS' website at www.cvheadinjury.com.

FRASER VALLEY BRAIN INJURY ASSOCIATION

FVBIA is also hosting its Annual Golf Tournament on June 17, 2009, at the Newlands Golf and Country Club. For more information call 604-557-1913 or toll free at 1-866-557-1913 or visit www.fvbia.org.

LMBIA is hosting its 10th Annual Lower Mainland Brain Injury Charity Golf Tournament on Thursday, June 25th at the University Golf Club in Vancouver. For more information and/or registration call 604 521-0833 or toll free 1 800 510-3221 or visit www.lmbia.org

KAMLOOPS BRAIN INJURY ASSOCIATION (KBIA)

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CAMPBELL RIVER HEAD INJURY SUPPORT SOCIETY (CHRISS)

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You are invited to join us in Maple Ridge from July 22 – 26, 2009.

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Registration \$25.00

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Disc Golf Sitting Volleyball Table Tennis

BC Disability Games Society

Sudoku Solution
Page 13

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



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Janette Jackman
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In Lake Country call
Jill Howell
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Please visit our website at www.connectcommunities.ca



COMOX VALLEY HEAD INJURY SOCIETY CONFERENCE

Making the Invisible Visible

June 18-19 2009,

Best Western, Courtenay, BC.

As part of the June 2009 Brain Injury Awareness Month, the Comox Valley Head Injury Society is presenting the 16th Annual G & B Johnson Brain Injury Conference *Making the Invisible Visible*.

Addressing the 'invisible' social and economic aspects of head injury and disability in his Keynote Speech scheduled for the evening of June 18th is renowned Lansdowne Professor of Social Policy, **Dr. Michael J. Prince** from the University of Victoria. Dr. Prince will discuss strategies for making these issues 'visible' through public policy initiatives and community changes.

Guest speaker **Dr. Wayne Matheson**, Ph.D., C. Psych., O.A.C.C.P.P., Clinical and Rehabilitation Psychologist, Inpatient Rehabilitation Unit at Laurentian Hospital in Sudbury, Ontario, will address the 'invisible' physical and psychological consequences of brain injury. His research on how brain injury survivors are often disassociated from their past concept of themselves even when those concepts still exist is an innovative approach in the recovery process. He provides an explanatory model for this phenomenon that he describes as the 'Emergent Self' which is responsible for brain injury survivors' impaired awareness. He proposes some direct approaches to make this Emergent Self visible.

Theresa McKenzie witnessed her mother's car accident in the spring of 2000. She joins her mother, **Connie Cownden McKenzie** to share the story of their "Lived Experience." Stories like theirs inspires this conference to bring survivors together with their family members,

community advocates and health care professionals to create opportunities for learning and to build strategies and awareness around the personal and social issues connected with head injuries.

Please visit the conference web site <http://www.cvheadinjury.com/CONFERENCE.html> for information on the full conference agenda, how to register, accommodations in our community, and our other distinguished speakers such as **Dr. Diane Russell** and dynamic workshops on Neuroplasticity with **Annie Hopper**, brain injury prevention with **Team Terrific**, and Creating Solutions to bullying and brain injury.

About the Comox Valley Head Injury Society (CVHIS): We are a registered non-profit society established in 1991, and committed to providing support for survivors & their family/caregivers. CVHIS is funded by the Vancouver Island Regional Health Authority Brain Injury Program and by the Central & North Vancouver Island United Way.

CONTACT:

Telka Duxbury, Conference Coordinator

COMOX VALLEY HEAD INJURY SOCIETY

#99 -1742 Cliffe Avenue * Courtenay, BC V9N 2K8

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Multiple Losses Follow Brain Injury for the Entire Family

Janelle Breese Biagioni

A survivor of brain injury has a long road of recovery before them. They may have physical injuries to heal from along with a host of cognitive issues including: short-term memory loss, aphasia, impulsivity, poor judgement, sleep disturbances, difficulty in sequencing and planning, behavioural challenges and more. The physical injuries may have healed long before the survivor regains their cognitive abilities. And it's even further down the road before the layers are peeled away to reveal the multiple losses that the survivor must grieve as a result of sustaining a brain injury.

I refer to the brain injury as the primary loss; it's the event that has occurred and caused the life-altering change in an individual's life. From this primary loss spins the "secondary losses." Secondary losses for the individual can be the loss of a part of oneself (e.g. personality or physical mobility) loss of employment, loss of lifestyle, loss of relationship, and loss of independence, to name a few.

Each member of the family will experience their own secondary losses. Some of those losses will be the same as the survivor, but will impact the family member in a different way. An example would be the loss of employment – this overlaps with the loss in lifestyle and will affect each person in the family differently. Or, a significant change

in personality alters the individual's ability to function in the family as they had prior to their injury. For instance, a husband, after sustaining a brain injury, may not have the capacity to be an equal partner and decision-maker with his wife. The wife becomes responsible for all aspects of caring and providing for her family. She must be given the opportunity to grieve the loss of her partnership as it had existed before.

When change takes place in the family due to a death, divorce, separation, or brain injury, it has a profound effect on all members in a family. Grieving is a natural process and if not facilitated at the appropriate time, it may be repressed, or become chronic, and potentially destructive. Grief is an expression of love and a normal human reaction to a significant loss. Unresolved grief will surface and have a negative impact on behaviours, and an individual's physical and/or emotional well-being. The losses following a brain injury cannot be minimized, nor can they be grieved en masse. Each person in the family needs the opportunity to resolve their grief in their own time and in their own way.

There are significant direct and indirect costs to society associated with brain injury. Of great concern is the human cost in terms of the burden placed on the family. The added stress and emotional struggle for the survivor, their spouse or partner and their children is often devastating. Divorce rates are estimated to be as high as 98% following a brain injury. For the survivor, the wound of losing your family is a difficult one to heal. For the husband or wife, making the painful decision to leave a spouse/partner who is a survivor of a brain injury is not one that is made hastily or without tremendous emotional struggle. And, likely it is the children who suffer the most.

Grieving children and teens may not be able to express their feelings in words. Often their parents are suffering as well, and therefore; they may be unable to provide adequate support. Consequently, those who appear to be coping are often struggling inside with the churning, conflicting emotions of grief. Bereaved children and teens need and deserve someone they can talk to and trust – someone who will listen to their story while guiding them through the grief process.

It's extremely important when planning services and supports for the survivor that the entire family be considered. Having said that, the funding (IF there is any) is attached to the survivor and while supports can be created to assist the survivor in improving relationships etc. the main focus is on the survivor. But if we look at the bigger picture, it isn't difficult to understand that we can pay now and provide proper supports and services (and ones that embrace the entire family) or we can pay later – in a way that is much more significant than dollars and cents.

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BC BRAIN INJURY ASSOCIATIONS & *Support Groups*

*This list updated Summer Issue, 2009.

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	Dona Salwach	250-372-1799	
British Columbia Brain Injury Association	Jan Siwinski	1-877-858-1788	
Bulkley Valley Brain Injury Association	Eileen Klassen	250-877-7723	
Burnaby Survivors Support Group	Candice Andres	604-521-0833	TF 1-800-510-3221
Burnaby Chinese Brain Injury Support Group	Angela Kan	604-877-8606	or LMBIA 604-521-0833
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	
Downtown Eastside Youth Support Group	LMBIA	604-521-0833	TF 1-800-510-3221
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	Helen MacKenzie	250-372-1799	
KBIA - Salmon Arm/Shuswap Contact	Teresa Wolfe	250-833-0369	
Langley/Aldergrove Brain Injury Support Group	FVBIA	604-557-1913	TF 1-866-557-1913
Lower Mainland Brain Injury Association	Gabrielle Martin	604-521-0833	TF 1-800-510-3221
Maple Ridge Support Group	Ian Moore	604-944-9030	or LMBIA 604-521-0833
Mission	FVBIA	604-557-1913	TF 1-866-557-1913
Nanaimo Brain Injury Society	June Herrington	250-753-5600	
New Westminster B.R.A.I.N.	Tina Suter	604-540-9234	or LMBIA 604-521-0833
New Westminster Womens Peer Support Group	Sandie Yahnke	604-521-0833	TF 1-800-510-3221
North Okanagan Shuswap Brain Injury Society (Salmon Arm/Shuswap)	Lori Watchel	250-833-1140	
North Shore Family Support Group	Helen Sterling	604-521-0833	TF 1-800-510-3221
Peace Country Society for Acquired Brain Injury	Linda Proctor	250-782-7519	
Powell River	Deborah Dee	604-485-6065	
Prince George Brain Injured Group Society	Alison Hagreen	250-564-2447	TF 1-866-564-2447
Richmond Family Brain Injury Support Group	Helen Sterling	604-521-0833	TF 1-800-510-3221
Sea To Sky Brain Injury Program	LMBIA	604-521-0833	TF 1-800-510-3221
Sechelt/Sunshine Coast Brain Injury Support Group	Rita Grenville	604-885-8524	
South Okanagan Similkameen Brain Injury Society	Dave Head	250-490-0613	
Surrey / Delta Family Support Group	Shawna Galley	604-521-0833	TF 1-800-510-3221
Surrey Youth Adult Support Group	LMBIA	604-521-0833	TF 1-800-510-3221
Terrace Support Group	Mark Barnes	250-638-1818	
TriCities Support Group	LMBIA	604-521-0833	TF 1-800-510-3221
Vancouver Survivors Support Group	Lillian Wong	604-873-2385	or LMBIA 604-521-0833
Vancouver Westside Family Support Group	LMBIA	604-521-0833	TF 1-800-510-3221
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	
West Vancouver	LMBIA	604-521-0833	TF 1-800-510-3221

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

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