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### **Message from the Executive Director**

As the Brain Injury Resource Center of Wisconsin continues to serve the brain injury community, our focus is always on the issues that arise when living life after brain injury. One that is becoming increasingly asked for is the official Brain Injury Resource Center of Wisconsin, **Brain Injury Identification Wallet Card**. Do you have a **Brain Injury Identification Wallet Card**? If not you may want to think again.

As we near the second half of the year and the weather takes a more slippery turn it is reassuring to know that if you are in a situation that requires contact with First Responders you can show them your official card. Emergency responders are trained to look for a medical ID, and your card alerts medical professionals of your TBI.

The holiday season is nearing, after-school activities are gearing up, and everyday situations are just a part of life. How about that social contact situation that gets misinterpreted? Brain injury symptoms such as confusion, poor coordination, or slurred speech are often mistaken as the influence of alcohol or drugs. Your ID card prevents an error in judgment by others from causing you emotional distress or harm.

I'll ask you one more time. **Do you have a Brain Injury Identification Wallet Card?** If not you may want to think again.

Later in the magazine, you will read more about this important component of our Resource Facilitation Program.

**Lois York-Lewis**Lois York-Lewis

#### **Our Mission:**

To offer assistance, provide resources, and create a better future through brain injury prevention, education, and advocacy.

#### **Our Vision:**

A world where all preventable brain injuries are prevented, all unpreventable brain injuries are minimized and all individuals who have experienced brain injury maximize their quality of life

#### Who we are:

We are a 501C3, Registered Charity 27-4483622, Tax Exempt Organization. We are 100% funded through the generosity of people like you.

#### **BI-INSIDE Magazine Team:**

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# Your Donation will go a Long Way! THANK YOU!!

\*Indicates additional recognition

## In Honor of ...

**Castellion, Kyle** 

Dudzik, Mark

Erickson, Reneé

Franke, Rick

Fromader, Tony

Koenig, Robert

Kraemer, Noelle

Lee, Grace

Marshall, Katie

Rieth, Bari\*\*

Rieth, Gary\*\*

Scherwinski, Micki

Schmitt, Mark\*

In Memory of...

**Eckholdt**, Vickie

Foster, Donna

Franke, Rick \*\*\*

Gebert, Elliot

Kasprzak, Loraine

Koehler, Loie (Lois Ann)

Lozak, Margaret (Peggy)

Malueg, Mark

Rieth, Bethany\*

Robinson, Derek\*

In memory of Mom, Vicki Eckoldt, who died of a TBI

In memory of Rick Franke Forever in



## Participation in Thrivent Choice® Makes a Difference

As eligible Thrivent Financial members direct Choice Dollars® to Brain Injury Resource Center of Wisconsin, Inc. the momentum continues to build. The funds we receive from Thrivent are used to help support our efforts to assist brain injury survivors and families locate needed resources, obtain information, and to further our education awareness and prevention efforts. Thank you to Thrivent and its members who helped make this possible!

Together, we can strengthen communities and changes lives.



Lois M. York-Lewis: Co-Founder, Executive Director and President of the Boad of Directors

### What is a Caregiver?

Merriam-Webster dictionary defines the term as "a person who provides direct care (as for children, elderly people, disabled, or the chronically ill). "What it doesn't define is the amount of emotions, blood, sweat, tears, and unimaginable situations that go into being a caregiver for a loved one.

This article will focus on the caregivers who never saw it coming but brain injury changed all that. The ones who didn't choose it as their career and whose aspirations were heading them in a different direction.

This article looks at an aspect of being a caregiver to a family member which came as a total unexpected revelation, but accepted the responsibility and faced the challenge head-on.

Thankfully there are many organizations, books, websites, blogs, social media pages, and more that provide advice, suggestions, programs and services, information and resources, and ideas.

However, at the end of the day, it is just you. It is in that moment that all the literature and advice in the world can't prepare you for feeling exhausted, stressed, and left wondering will you be able to

## Resource Facilitation Spotlight Topic The Day in the Life of a Family Caregiver: pt. 1

continue to face it and do what needs to be done the next day.

Being a caregiver for family comes with a bigger cost for those who live with the individual(s) who are trusted with their care. You don't get to leave at the end of the day.

You are witness to everything that happens from the good, the bad, the highs, the lows, the achievements, the setback, and the internal struggles of a once independent person who now needs help. You experience sleepless nights, interrupted sleep, feelings of being tired during the day, feeling stressed, and always looking towards the next quiet moment that takes so long to come.

You wake up early and contemplate if you will have time for yourself before you need to begin the routine and prep for the day ahead. And yes, it does become a routine.

Much like raising children, a routine is needed. It is important to not forget all the little things that make a difference. Everything must be planned, scripted, and hopefully nothing "upsets the apple cart".

The phrase "children learn what they live" speaks to parents and reminds them that actions and words matter. The same holds true if you are the

person caring for your family member.

When brain injury robs them of their independence, it is almost like starting over. Disabled parents (for example) also learn what they are now living and it takes a huge emotional toll.

Once vital and thriving individuals with so much life ahead and memories of the past, they now must come to terms with the fact that they are no longer who they used to be. Brain injury caused it and it didn't change them slowly or over time, brain injury made it happen in an instant.

Eventually, they begin to struggle with coming to terms with their independence turning into dependence and their ability to be self-sufficient becoming reliance. These once strong, independent, thriving individuals are now faced with depression, anxiety, insecurity, and feelings of helplessness.

The story doesn't end here. Look for the continuation in our Sept 2022 Edition of the BI-Inside Magazine

# 2021 Brain Injury Resource Center of WI Annual Holiday Party Recap

On December 18th of 2021 the group met at The Lodge apartment building for our Annual Christmas Party. A fabulous holiday buffet was served to our guests that.

The main course included traditional lasagna, a Greek lasagna - called Pastitsio, turkey sliders, ham sliders and Greek chicken legs. As a side, Greek potatoes with lemon, Greek green beans and tomatoes called Fasolakia, veggies and dip, fresh fruit and dip and last but not least our homemade desserts, which included HoHo Cake, Cheesecake and Seven Layer bars.

It was a treat to try some different types of food. The great thing with having such a large selection of offerings is that everyone found

something they could eat.

A shout out to Angie and Katie Marshall for their generous donation for the main entrees. Thank You!

Along with the great food we enjoyed a few fun activities which included a decorate your own "Ugly Sweater", however NONE of the sweaters turned out "Ugly!" Most of them were covered with pretty Christmas decorations!

There were some very creative sweaters. Everyone could take home the sweater that they had created for themselves.

The group voted on the best sweaters in both the women's and men's categories.

Scott won in the men's category and Jamie won the women's category.

Congratulations to both of our winners!

As you entered the festivities there was a LARGE jar filled with Holiday candy. Each participant was asked to guess how many pieces of candy were in the jar.

Congratulations to Harriet (Scott's mom) for coming closest to the correct number of candies! She won the jar filled with candy.

There was a "Photo Booth" set up with many festive items to enhance a holiday photo. We had some group photos along with a few individuals as well.

These miniature pictures made a great memorable photo to take home with them as a token from our party.

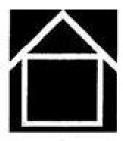
We ended the day with the White Elephant gift exchange. Angie had a very clever way of playing pass the gift, which resulted in everyone getting an unusual or unique white elephant gift to take home.

It was a crazy pass back and forth kind of exchange! It was a fun time.

We hope everyone had a good time at the BIRC Christmas party. We look forward to seeing you all at our next gathering!



Linda Scherwinski:
Office Manager at
Craft Masonry



Craft Masonry, Inc.

Concrete • Masonry Excavating

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## You are invited to join us for a season of fun, friendship, and excitement during our 2022 Social and Skills Event Sessions REMEMBER REGISTRATION IS REQUIRED

Social skills is a broad term that includes understanding what is expected of you in different social interactions — how you conduct yourself and what you say in social settings. If you've experienced a brain injury, you may find that it has affected your ability to interact with other people. In some cases, you may not realize there is any change until a family member, friend, teacher, or caregiver notices changes in your behavior and shares that with you. Re-building Social Skills can be very challenging. Not being able to connect with other people because of your brain injury or response to trauma can be painful. Isolation is one of the most devastating impacts of ABI/TBI and PTSD for many people, so improving social skills is incredibly important. Social skills problems can also put a strain on personal relationships, can make it difficult to get or keep a job and can lead to increased emotional symptoms like depression/anxiety which can lead to overall reduced quality of life. This hard work creates better opportunities for communication and deeper bonds with friends and family.So join us this year and start your journey on making new friendship and new beginnings!

·At the Let's Chalk Luncheon and Painting and Pizza, lunch will be served at the beginning of class.

·On Game days there will be light snacks served.

·At the Book Club light snacks and coffee will be served.

#### \*Additional Information can be found on our website www.bircofwi.org

Date, Time, Location	Type of Event	Event Description # of Participants		
March 9, 1-4 p.m. BIRC Office	Arts and Crafts	Let's Chalk – Chalk and Tal	<u> </u>	
March 23, 1-4 p.m. BIRC	Game Day	Scrabble Game	8 maximum	
April 6, 1-4 p.m. BIRC Office	Game Day	You Might Be A Redneck If		
April 27, 1-4 p.m. BIRC Office	Arts and Crafts	Meditative Stone Art	6 maximum	
· ·		Tribal Pot		
May 11, 1-4 p.m. BIRC Office	Arts and Crafts		6 maximum	
May 25, 1-4 p.m. BIRC Office	Game Day	Fact or Crap Game	8 maximum	
June 8, 1-4 p.m. BIRC Office	Game Day	Jenga	8 maximum	
June 15, 1-4 p.m. BIRC Office	Arts and Crafts	Painting and Pizza	6 maximum	
June 22, 1-4 p.m. BIRC Office	Book Club	Meditations on Brain Injui	<b>y</b> 8 maximum	
July 6, 1-4 p.m. BIRC Office	Game Day	Pictionary Game	8 maximum	
July 13, 1-4 p.m. BIRC Office	Arts and Crafts	Mosaic Tile Pot	6 maximum	
July 20, 1-4 p.m. BIRC Office	Book Club	Meditations on Brain Injui	<b>y</b> 8 maximum	
August 2, 1-4 p.m. BIRC Office	Game Day	Apples to Apples	8 maximum	
August 17, 1-4 p.m. BIRC	Arts and Crafts	Mason Jar Lanterns	6 maximum	
August 31, 1-4 p.m. BIRC	Book Club	*Final Session* Meditation	ns 8 maximum	
September 7, 1-4 p.m. BIRC	Game Day	l Spy Game	8 maximum	
September 21, 1-4 p.m. BIRC	Arts and Crafts	Origami Treasure Box	6 maximum	
October 5, 1-4 p.m. BIRC	Game Day	Bingo	8 maximum	
October 19, 1-4 p.m. BIRC	Arts and Crafts	Twig and Cone Pot	6 maximum	
November 9, 1-4 p.m. BIRC	Game Day	Pictionary	8 maximum	
November 16, 1-4 p.m. BIRC	Arts and Crafts	Tree Ornament	8 maximum	

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\* These activities are not only good to use as a means of social interaction, they also help with the following:

Attention and concentration / Self-monitoring / Ur Organization / Speaking (recepted language) / Self-monitoring and Help-monitoring and	Temporal Lobe Functions Memory Understanding language Freceptive language) Sequencing Hearing Organization	Occipital Lobe Functions Vision Vision Processing	Parietal Lobe Functions Sense of touch Spatial perception Differentiation (identification) of size, shapes, and colors Visual perception
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Thank you to the Soto Family who held a fundraiser last year in memory of Myeisha and donated the proceeds to the Brain Injury Resource Center of Wisconsin, which enables us to offer the Art and Craft day events to Brain Injury Survivors at no cost.





Bari L. Rieth:

Co-Founder, Public
Relations, Marketing
Specialist and Board
Secretary

If you are at all like me you lose your keys more often than not. I wish I could use the excuse "oh my kids misplaced my keys" or "my husband was driving the car last and forgot to give them back."

Nope, can't use either, both of my children are very responsible about giving me the keys back, be it my children are five and two so for them to be able to remember to give me the keys back its like come on Mum! My husband even remembers to give them back to me or place them on the key hook and he has a brain injury too!

What is it? I have tools that I need to utilize. My mother-in-law bought me one of those apple devices that you can place on commonly misplaced items and then all I have to do is push a button on my watch and presto it bings!

Note - to self remember to put in my phone a reminder

## Where are my keys?

to place this device on my keys. I have written it here so I know I will not forget and if I do it's on you! Lol just kidding.

Forgetfulness and TBI, surely other people forget; just probably not as often as I do. A step towards an ongoing recovery is the fact that I am now able to formulate the thought that I need to set a reminder so I don't forget.

There was a time where this formulative process was not there and my keys would either be lost forever or I would often use my wonderful mother who speaks Bari and crazy enough sometimes thinks like me too to find them and most times she does!

According to some bullet points that are listed the Model
Systems Knowledge Translation
Center makes on their website:

- · Memory problems are very common in people with moderate to severe TBI.
- · TBI can damage parts of the brain that handle learning and remembering.



- · TBI affects short-term memory more than long-term memory.
- · People with TBI may have a tough time "remembering to remember. "This means remembering to do things in the future, such as keeping appointments or calling someone back when you've promised to do so.
- · People with moderate to severe TBI may not remember the incident surrounding the injury.
- · With the help of certain strategies, people with TBI can learn to work around memory problems and get things done every day.

#### Reference List:

Memory and Traumatic Brain Injurywas developed by Tessa Hart, Ph.D., and Angelle Sander, Ph.D., in collaboration with the Model Systems Knowledge Translation Center. Portions of the material were adapted from educational materials developed by Angelle Sander, Laura Van Veldhoven, and Tessa Hart for the Rehabilitation Research and Training Center on Developing Strategies to Foster Community Integration and Participation for Individuals With TBI (National Institute on Disability, Independent Living, and Rehabilitation Research [NIDILRR] grant no. 90DP0028).

## **Neuropsychological Assessment after a TBI Glassman Neuropsychology**

When an individual sustains a TBI, they may experience problems in virtually all brain - behavior relationships, areas of their life. Often, they have the relationship between the problems with thinking skills (cognition), such as paying attention, remembering, problem solving, speaking and understanding, moving or using their muscles, or finding their way around.

They may also have difficulty understanding what happened to them, and managing their behavior. If a hospital stay is involved, treatment will include a number of specialists, such as nurses and doctors, therapists, and psychologists. Often the team includes medical, therapy (PT, OT, Speech), psychiatric, recreation, vocational specialists, and a psychologist. The psychologist is often a specialist, and may be a neuropsychologist or rehabilitation psychologist.

The neuropsychologist will often do one or more assessments of a TBI survivor to document their status and progress in thinking skills and behavior, to make recommendations for treatment, coping with the injury, and plan for resuming activities and responsibilities as the survivor recovers. These recommendations may help the survivor, her family, and the treatment team.

#### WHAT IS NEUROPSYCHOLOGY?

**Psychology** is the study of human behavior and emotions.

**Neuropsychology** is a

specialty area within psychology: it is the study of health and function of the brain and behavior.

"Behavior" in neuropsychology is broadly defined to include many cognitive functions (attention, memory, language, visuospatial skills, math and academic skills, problem solving, processing speed), as well as sensory perception, motor abilities, emotions and behaviors.

## **WHY IS NEUROPSYCHOLOGICAL ASSESSMENT SO COMMONLY USED IN TBI?**

Neuropsychological Assessment is used to help document the nature and extent of the effects of brain injury on the survivor's daily functioning. That is, it can help identify the effects of brain injury on the survivor's thinking skills, emotions, and behavior, defined in a broad way.

Assessment can help identify WHAT cognitive or emotional problems exist, HOW SEVERE they are, WHY the survivor is having problems, HOW TO TREAT behavior or emotional



Written by: Dr. Nathan Glassman

Dr. Glassman has been a psychologist for 30 years in the Milwaukee area. He is board certified in Neuropsychology and Clinical Psychology. He has a private practice in West Allis, WI, and also works with the Cedarburg Brain Injury residential program, and the Day Treatment Program at Sacred Heart in Milwaukee. He sees children and adults with psychiatric and neurological conditions. He also does forensic psychology, including Guardianship evaluations, personal injury, and criminal cases involving brain injured individuals. His clinic is a training site for students at the Wisconsin School of Professional Psychology, as well as a postdoctoral training site for The Academy of the American Board of Professional Neuropsychology.

problems, and ESTIMATE RECOVERY.

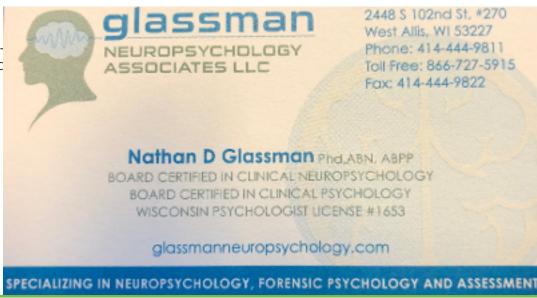
Initial assessment is often done informally or by observation, to determine whether the survivor is aware of, or oriented to, time, place, environment, and situation. Why is this done? ...

## Neuropsychological Assessment after a TBI Glassman Neuropsychology

Awareness is a general indicator of how well the survivor's brain is functioning. In early stages of recovery, survivors at first may not recall being asked about this by virtually all members of the treatment team.

When the Neurops-ychologist does this assessment, often a brief, standardized test of orientation and awareness is used, the Galveston Orientation and Amnesia Test (GOAT). In addition, the Neuropsychologist will interview the survivor to assess the survivor's general thinking skills, understanding of their situation, emotional state and behavior.

When the survivor is consistently oriented, that is, consistently aware of time, place, and situation for at least several days, they are ready for more comprehensive neuropsychological testing.



## **S.P.O.T.S.**

"Survivor People On The Streets"

Written by: Bari L. Rieth

I graduated from Carroll University in May of 2011 and while I attended Carroll, I wrote for the student newspaper, The New Perspective. A column that I regularly contributed to and wrote for was entitled "P.O.T.S" or People On The Street. I would have a question that I would pose to random students.

Having had experience with this column while I attended Carroll, made me think what if I create a similar column for the BI-INSIDE Magazine called SPOTS, which stands for Survivor People on the Streets. "Survivor" is intended to represent the numerous brain injury survivors that have come into contact with

our organization and their families.

## The question I posed to parents of brain injury survivors was:

If you are a caregiver to a brain injury survivor, how has this impacted your life and how has that changed you as a person?

A parent wrote to us and said that in her son's case, "A big lack of help from medical personnel, and a big lack of trust from caregiver employers that tend to be more interested in money than supplying good in care that could/should be available."

This is a common complaint that needs to be addressed. Sometimes the best people out there to take care of a brain injury survivor are their parents. Parents can play a vital role in a brain injury survivors life as well as people in general.

Do you want your voice heard? I am sending these questions out monthly and to make sure your voice is heard email me at: bi-inside-magazine@bircofwi.org

Please indicate in your email if you would like your name posted with your comment.

## How to Talk to a Person With a Brain Injury: Tips for Navigating Conversations After TBI

Written by: Flint Rehab and Last updated on March 26, 2020

Persons living with brain injury face a variety of challenges. But for many survivors, one of the most frustrating things they deal with is a lack of understanding from family and friends.

Because brain injury is a hidden disability that most people misunderstand, TBI survivors often face well-meaning comments from strangers and even loved ones that sometimes only makes things worse.

To remedy this problem, today's article will offer helpful tips on how to talk to a person with a brain injury. We'll start with what **not** to say.



## How not to Talk to a Person with a Brain Injury



The most important thing to remember when talking to a person with a brain injury is that they are still people. Even if they seem different from before their injury, even if they talk a little slower or have trouble following a conversation, they are still the same person.

One of the most frequent complaints TBI patients have is how differently people treat them after their accident. Too many people will talk to them as if they were fragile creatures and address them as if they were children.

Therefore, speak to them the way you did before their injury. If you are meeting them for the first time, then address them as you would any other person. You might need to

adjust some things, but if they are an adult, treat them like an adult.

This is just some general advice on how to talk to a person with a brain injury. The following are a few examples of things you might accidentally say that are probably not helpful:

### 1. Let me do that for you

As tempting as it is to want to help your loved one, doing everything for them can set back their recovery.

In addition, brain injury patients have already lost most of their independence, which can contribute to depression.
Encouraging them to do some things on their own can increase their self-esteem and possibly speed up their recovery.

#### 2. You need to be more active

Apathy and lack of motivation are common side effects of brain injury. Therefore, even if your loved one seems like they are just being lazy, they really aren't.





They have just lost the ability to start an activity. Staying remember more in the future." active is crucial to promote a good recovery from brain injury.

However, because their lack of motivation is a cognitive deficit, it won't do any good to simply tell the person to get off the couch. As an alternative, try to gently encourage them to practice their therapy exercises.

a concrete reward in return can give them the external motivation they need to get started. With practice, the person can regain the ability to begin activities on their own.

Until then, stay patient.

### 3. Don't worry, I forget things all the time too

While you naturally will want to comfort your loved one when they experience memory loss, it is not usually helpful to draw a comparison to your own problems. The differences between normal forgetfulness and memory problems after brain injury are night

and day. Even with good intentions, comparing the two can come across as patronizing to the person with a brain injury.

Instead, try to say something like, "I can't imagine what

that must be like. Let's see if we can come up with ways to help you

This can help you seem more understanding and less dismissive of their difficulties.

## 4. You look fine, why aren't you back to normal yet?

Many people with brain injuries can look and seem normal, Sometimes offering them yet still deal with the cognitive, emotional, and behavioral effects of brain injury. That is why TBI is often known as an invisible disability.

> In fact, most brain injury patients struggle to accept that their problems are valid because there is no physical proof of their injury. They might worry that their problems are "all in their head."

Therefore, when talking to someone with brain injury, try not to make the person feel bad if they still struggle to remember things or if they talk or think a little slower. Instead, be as compassionate and patient as possible.

That can often make all the

(Continued) difference in the world.

#### 5. You're so brave!

Once again, this compliment is often well-intentioned, but it can come across as demeaning to many people with brain injury. Most TBI survivors would tell you they don't feel brave for having a brain injury, and that most of the time they are in fact scared of what the future might hold.

Rather than giving them vague or generic praise, try complimenting them for something specific they have done. For example, you could say "I really admire the way you always try to cheer someone else up."

This is more personal and helps them know you view them as an individual and not a stereotypical "TBI survivor."

## How to Talk to Someone With a **Brain Injury**

Now that we've looked at some things you should not say to a person with a brain injury, let's discuss some positive things you can do.



## How to Talk to a Person with a Brain Injury

(continued)

The following are a few ways to ensure that you have a great conversation with people who struggle with the effects of brain injury:

- Get their attention. Don't start talking until you are sure that they hear you. Many TBI patients struggle withhearing loss, so if they are not looking directly at you, they likely will not realize you are speaking.
- Make sure they are comfortable. If you want to have an extended conversation, make sure they are sitting down so they can pay attention without spending too much energy. Also, ask them where they prefer you to sit. Some don't mind if you are close enough to touch, but some do. Respect their boundaries.

- **Stay on one topic at a time.** A first. You may be worried about brain injury can make it more difficult to follow conversations. Therefore it's best not to jump back and forth between topics. If you want to change the subject, let them know beforehand so they have time to prepare.
- Give them time to respond. It can take a person with brain injury longer to respond or find their point than it does for other people. Be patient and avoid putting words into their mouth.
- **Include them.** TBI survivors are often hesitant to add to a conversation on their own. Take the initiative. If there is a group conversation happening, invite them to join in.

These are just a few ways to help you make talking to someone with brain injury a success.

### **Talking to People With Brain Injury:** Conclusion

Talking to someone with a brain injury can feel intimidating at what to say or about accidentally offending them.

While there are a few things you should try to avoid saying, for the most part, talking to someone with a brain injury is the same as talking to any other person.

Just be respectful and treat them as an individual with their own point of view and feelings. If you can do that, having meaningful conversations will become much easier again.

This article can also be found at: https://www.flintrehab.com/ how-to-talk-to-a-person-withbrain-injury/



## Telling of the Tale: Myeshia Soto Story by: Regina Soto Edited by: Denise Meagher

Myeshia Soto loved Jesus. She loved her family.

She loved life and lived it to the fullest. Myeshia, with her free-spiritedness, her loving, giving ways; made friends wherever she went.

As often as she could, Myeshia enjoyed riding her motorcycle, especially with her family. She was deeply loved and will be forever missed.



On May 27, 2021, while driving a side by side (ATV), with her sister in tow, and in route to go swimming in Timmonsville, South Carolina, Myeshia and her sister were struck by an SUV. Being thrown from the vehicle, Myeshia suffered a skull fracture and a brain bleed.

The ambulance arrived and while Myeshia came to at the scene of the accident, she was disoriented and combative. When she arrived at the hospital, the attending medical personnel placed her into an induced coma.

Tests were run and completed. Two days later, Myeshia's was brought out of

that coma.

She was talking. She recognized her mother, Regina Soto, and her boyfriend.

She could move all her extremities. While Myeshia complained of head and ear pain and her voice seemed to change slightly, she was up walking; however, eating and drinking were troublesome as these were accompanied by nausea and vomiting.

Even so, Myeshia was improving daily and was sent home on June 1, 2021 after her CT came back with no changes. It seemed miraculous.

Sadly, the miracle was short-lived.

Within twenty-four hours 911 was called. Myeshia was experiencing head pain and extreme disorientation.

Accompanied by her mother, Myeshia arrived at the ER. They determined her sodium level was low and placed Myeshia back into a medically induced coma to perform another CT scan.

Once again, the CT scan depicted no changes. Within a couple of hours afterwards, Regina was told that Myeshia had no pupil reaction, her brain had swelled and there was nothing they could do.

Myeshia was transferred back to the ICU where other tests were conducted. The

tragic conclusion, there was no longer any brain activity.

Regina contacted family and awaited their arrival. On June 5, 2021 at 3:33 a.m.; surrounded by those dear to her, Myeshia, only thirty-three years old, went Home to be with the Lord.



Her mask, a part of the Unmasking Brain Injury display, is symbolic. The darkness of the ocean shows the family's deep hurt and emptiness they feel in losing this beautiful woman.

The bright colors of the sunset express the anger and pain of losing Myeshia. The butterfly below the ocean is how she shows herself to them and the Harley symbol represents what she loved, her passion.

The Puerto Rican flag is included because she loved the culture. The family plans to spread Myeshia's ashes there on her birthday.

Her motto, "Live Free," is

## Telling of the Tale: Myeshia Soto Story by: Regina Soto Edited by: Denise Meagher

how they will strive to live every day to keep Myeshia's spirit and name alive.

On Saturday, August 28, 2021, to commemorate and in conjunction with the family's plans for Myeshia Soto's birthday, a fundraiser was held in her memory. Although the weather did not cooperate, after the downpour, just like Myeshia's beautiful spirit, the day emerged lovely in spite of the rain.

While Myeshia's family forever misses her, her legacy of love, kindness and free-spiritedness will be honored and remembered always!

#### \*NEW in 2022:

Unmasking Brain Injury Fashion Show at St. Paul's Lutheran School in Muskego on:

**Date: Saturday September 8, 2022** 

Time: 11:00 - 4:00 p.m.

Ticket information can be found on our website, www.bircofwi.org, along with additional details.

See you there!



Watch your mail/email for more information on upcoming events! If you are not on our mailing list, complete the information below to get started!

list, complete the information be			
Contacts First Name:	Contacts Last Na	me:	
Mailing Address:			
City:	State:	Zip Cod	e:
Cell # (including area code):		<b>I</b>	
Home # (including area code):			
(Choose One) Call me on this pho	ne in case of cancellation:	CELL	НОМЕ
Email:			
We want to thank the Mark Schmitt We would also like to thank the fan Ride for Myeshia" event. Donations	t Family for making these Progran mily of Myeshia Soto whose family s from this event are funding vario	MAIL-IN R Only O ns possible. organized the "F ous Programs and	
Contacts First Name:	Contacts Last Na	me:	
Mailing Address:			
City:	State:	Zip Cod	e:
Cell # (including area code):	Email:	Email:	
Luncheon	o.m.) - Art and Craft Day: Let's	s Chalk - Chalk	and Talk
·	p.m.) - Game Day: Scrabble, p	•	
Injury written by accomplished by	p.m.) - Kick off for the Book C rain injury survivor writer, M		ons on Brain
*For a complete list of events	s visit: https://www.birco	fwi.org/upc	oming-events/
<b>Total Number of Sessions Attendi</b> Mail completed forms to Brain Inj		onsin, Inc. (BIR	CofWI)

Attn: Craft Session Coordinator 511 N. Grand Ave. Waukesha, WI 53186-4916