

BIRTMCofWI Bulletin

Vol 7 Issue 1 | Quarterly Newsletter

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Brain Injury Resource Center of Wisconsin, Inc. Home Office (as of 9/15/2016)

511 N. Grand Waukesha, WI 53186

Our Story

Our story briefly explains why our non-profit was founded and what we intend to do with this organization.

Brain Injury Resource Center of Wisconsin, Inc. is a 501(c)3 non-profit organization which was co-founded by a mother-daughter team (Lois York-Lewis and Bari L. York). They saw first hand that they needed to help survivors of brain injury in Wisconsin lead a fulfilling life after brain injury.

Tragedy Brings to light a Need in Wisconsin

This need was first realized in 2005 after Bari sustained a severe traumatic brain injury resulting from a crash

involving the car she was a passenger in and a semi-truck. When Bari was released from the hospital and tried to re-enter daily life it was near impossible, as this is not an easy task.

Our main goal is to help with this transition back to daily life once a brain injury is sustained. With the help of Bari's family and their unconditional love, they pressed forward.

This gave Lois and Bari the drive to move forward and develop this organization.

Doctors and nurses are there to help a person when they are in the hospital and a lot of times shortly thereafter, but what can they do after the brain injury survivor has recovered to the point where they can re-enter daily life?

This is where the *Brain Injury Resource Center of Wisconsin, Inc., BIRCoWI*, steps in to help.

There can be a lot of confusion during the "what now" phase of brain injury recovery. Let us help, we are a resource center and we care. Help us to help others live and lead meaningful lives after brain injury!

All it takes is a donation, see page 8 for more information.

Remember a little can go a long way! Ensure that the Brain Injury Resource Center of Wisconsin, Inc. is here today and in the future to provide resources to brain injury survivors.



Dear Friends:

March is here and that means Brain Injury Awareness Month is here as well. So what does that exactly mean?

In short, it means to be educated about the consequences of brain injury and how to prevent one from happening. While not all acquired brain injuries can be prevented, traumatic brain injuries can.

During this month, take a moment to assess your surroundings. Look at where you work, live, and play and really examine the risk. Simple fixes, behavior changes, and life style changes can mean the difference between living a long fruitful life or months and potentially years of recovery.

One of the strategies we promote is "Don't learn the meaning of prevention by accident." Take it seriously now to prevent living the consequences later.

Lois York-Lewis

Executive Director, Mother, Wife and Daughter to
TBI Survivor's

Photo above submitted by Sherri Jibson of Milwaukee, WI

Brain Injury:

I can *explain* it to you, but I can't *understand* it for you™

BIRCOFWI Bulletin Editorial Staff:

Lois M. York-Lewis Executive Director, Mother, Wife & Daughter to TBI Survivor's (Editor & Writer)

Bari L. Rieth Director of PR and Marketing, TBI Survivor & a Wife, Daughter & Grand-daughter to TBI Survivors (Editor & Writer)

Lucille J. Krebs TBI Survivor (Editor)

Kathy Richardson Resource Facilitator & TBI Survivor (Writer)

Rolf Gainer Ph.D. NRI Brookhaven Hospital (Writer)

Brain Injury Resource Center of Wisconsin, Inc.TM in the Community

COMING IN 2017
(Stay tuned for more details!)

>> Walk-Roll-and-Run

>> BIRC BBQ

>> Feature Artist Day

>> Mark Schmitt's Creative Edge Debut

**>> Bethany Rieth Memorial Garden
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- WOOD CREATIONS**
- EDUCATIONAL MATERIAL**

Resource Facilitation: Giving Our Adult Children with TBI a “Loving Push”

Written by: Kathy Richardson / BIRCoFWI Bulletin Staff



I have worked with families of TBI survivors and other neurological disorders for many years.

I recently read Dr. Temple Grandin's book "The Loving Push" (2016), about how parents can help autistic teens become successful adults. I was instantly struck by how many of the ideas in her book could be applied to how we treat our adult children with TBI after they have physically healed from the traumatic event of a brain injury.

In my experience with TBI survivors I have run across three types of parents.

First, there are parents who lovingly nurse their adult child through a traumatic event that involves a brain injury and then when they are discharged from the hospital or rehab center, believes that their adult child should just be able to jump right back into their old life as if nothing had happened.

They are convinced that their adult child can resume college, relationships, working

and living independently immediately. They cannot comprehend that their adult child now has challenges that will affect them for the rest of their lives.

Next, there are parents of a traumatic brain injury survivor that cannot, and will not, help their child become as independent as possible for fear of something terrible happening to them again.

These parents unknowingly create an environment of "learned helplessness" for their adult child.

Learned helplessness is a condition in which a TBI survivor suffers from a sense of powerlessness, arising from their traumatic event and persistent failure to succeed. Helping a TBI survivor when it's generally not needed creates a sense of incompetency and a loss of hope.

It is one of the underlying causes of depression and suicide in TBI survivors.

Finally there are parents who are aware that their adult child with a traumatic brain injury is indeed an adult and entitled to live their life as independently as possible.

After being discharged, they bring their adult child home and immediately start finding out what support and resources are available to help their adult

child relearn skills and become independent. They learn everything they can about their adult child's injury and how best to help them.

They push their adult child to re-learn daily living skills, social skills, work/volunteer skills so that they can become independent. They help them regain confidence and pride in their accomplishments.

Without repeated and vigorous loving pushes from parents, the adult child may continue to live the life of a child, frozen forever in time. "Your adult child needs you to have faith in them, even when they have none" (Grandin, 2016). Your adult child needs "...you to transform your role of protector into that of encouraging advocate, champion and loving pusher" (Grandin, 2016).

Depriving your adult child of the opportunity to struggle or even fail, and then recover, robs them of learning hope.

Please either give the Brain Injury Resource Center of Wisconsin, Inc. a call at 262-770-4882 and ask for

Kathy or email her at Kathy@bircofwi.org if you are affected by brain injury directly, indirectly or in some way.



Maybe it's not just a "Bump to Your Head"

Written By: Rolf Gainer, Ph.D. / NRI at Brookhaven Hospital

In a recent poll conducted by National Public Radio (NPR) one in four people have experienced a concussion. Almost 80% sought medical treatment and a significant number of people experienced lasting effects, with headaches being the most common, followed by problems with concentration, memory, balance and coordination.

About a third of the respondents to the poll reported experiencing the concussion in sports.

Concussions are not something which you can simply shrug off and go on with your life. If you or a loved one experience a concussion get medical help right away and know what to watch for in terms of symptoms and possible complications.

Once you've had a concussion be extra cautious as you are at risk for a second, and possibly more damaging, event. We hear of the effects of multiple concussions on athletes like football, hockey and soccer players, boxers, cheerleaders and almost all sports where physical contact is possible.

Concussions occur in the home, at work and the community. Even a car accident in which you don't actually hit your head can cause a concussion.

While most concussions fall into the category of "Mild Brain Injury" or mTBI, that term can be misleading. There is nothing "Mild" about a "Mild Brain Injury".

The term "mild brain injury" can be misleading. The term "mild" is used in reference to the severity of the initial physical trauma that caused the injury.

It does not indicate the severity of the consequences of the injury.

<http://www.biausa.org/mild-brain-injury.htm>

<http://www.traumaticbraininjury.net/maybe-its-not-just-a-bump-to-your-head/>

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Why Should You DONATE Today?

It's Simple - We are not a membership based organization, government grants and foundation funds are in short supply, and brain injury survivors in Wisconsin are counting on you!

Need a Tax Deduction?

Out of respect for privacy, donor names will not be published on our website or listed in our annual report unless otherwise authorized

We are a 501(c)(3) organization

Donating as little as \$1.00 per family member goes a long way!

If your personal budget is feeling the pinch, why not ask your employer to host a green and purple day, chili cook-off, bake sale, or any easy to run event that does not interfere with the work day.

Contact us today and we will send information about our organization to share at any work-place fundraiser event.

Brain Injury Resource Center of Wisconsin, Inc.

Mailing Address: 511 N. Grand Ave. Waukesha, WI 53150

Phone: (262) 770-4882 / Fax: (262) 436-1747

Thank you to the following corporations, businesses, foundations, funds, individuals, and all those generous donors who have embraced how difficult life after brain injury can be and are willing to make a difference!

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Sharing Stories in the Cozy Corner: Bari L. Rieth

And Life Goes On...

Written by: Bari L. Rieth / BIRCOFWI Bulletin Staff

Having a brain injury can be quite the challenge, but I have always been up for a challenge. I have defied the odds many times before and so has my husband Gary Rieth. After we were married on October 10, 2015 we decided to start a family.

Some people thought we could never live a successful life as a married couple, but we have. Most successful marriages include children and we wanted nothing more than to add children to our marriage.

I was overjoyed in late November 2015 when I found out I was pregnant! I began making plans right away; thinking about our baby and what would happen after the baby arrived.

On December 27th I started bleeding heavily and that is not supposed to happen when you are pregnant. I knew something was not right, Gary and I decided to go to the hospital to see what was going on.

A lot of blood was taken, an ultrasound and waiting for an eternity in the emergency room (or so it felt). We were given the gut wrenching news that I was having a miscarriage.

After receiving the news Gary tried to reassure me that I did nothing wrong and even though I knew I hadn't, somewhere some place deep inside I felt this awful sense that I had and that it was my

fault this baby that Gary and I had wanted so badly was no longer a reality.

The next few weeks were extremely hard and filled with very raw emotions. To compound what just happened; on February 6, 2016 we lost Gary's sister Bethany tragically in a skiing accident.

I couldn't wrap my head around why all of these terrible events were taking place and not only to me, but to Gary too.

Next I prayed to God that he would not only help Gary and I through this, but to help us conceive a child. Those two events may draw people apart and resentment may have set in, but not for Gary and I.

If anything it pulled us closer as a married couple and closer to God for a great marriage takes three, a man, a wife and God.

Keeping this in mind helped us to move forward.

It was the middle of March 2016 and I had this feeling that I might be pregnant. The next day I took a pregnancy test and my suspicions were confirmed!

We were filled with so much excitement, but it was a cautious excitement.

Telling our families right away did not happen, because we had before and everything went so horribly wrong. Not that it was

going to happen again, but we did not want to jinx anything.

I felt truly blessed with my pregnancy, I had very little morning sickness and felt great!

When I gave birth to mine and Gary's son on December 6, 2016 the labor was, like the pregnancy, very easy. In fact when I went into labor I did not realize it!

Gary and I were at a local restaurant having dinner. After dinner we went to our car, Gary opened my door (as he usually does) and I lifted my left leg and as I did I felt this rush of water.

After I was in the car I said to Gary, "I think I just wet my pants." Gary had a very level head and told me to call my doctor's office.

Being pregnant for the first time I had no idea of what was happening, I had read about water breaking and that this would be the start of everything else, but can you be going into labor with no contractions?

Once I was on the phone with a nurse at my doctor's office she had thought that it would be best if I came in to see what was going on. Next, we drove the 20 minutes to the doctor's office and once we arrived the doctor, who was on call, informed us that I was 3 centimeters dilated and that I was going to have a baby!

Sharing Stories in the Cozy Corner: Bari L. Rieth

And Life Goes On...

Written by: Bari L. Rieth / BIRCOFWI Bulletin Staff

It was 7:30 p.m. when we arrived at the doctor's office, fortunately the office was attached to the hospital I would deliver our baby at.

Next, we walked over to the "labor and delivery" floor I was in active labor for a little over 3 hours. After my doctor arrived I gave four pushes and on the fourth push, Garrett Gary Rieth was brought into the world at 3:44 a.m.

We decided to leave the gender of our baby a secret, even to ourselves, until the baby was born. I will never forget the excitement I felt when I said to Gary "Is our baby a boy or a girl?"

Stay tuned for even more about our continuing story in the next bulletin!

He gave me the biggest smile and proclaimed, "our baby is a boy!"

introducing our baby boy
GARRETT
GARY RIETH

9 | 6 | 21
pounds | ounces | inches

DECEMBER 6, 2016

A T 3:44 AM

♥ *With Love* ♥
Gary and Bari



Waukesha Metro: Another Transportation Option

Written by: Bari L. Rieth / BIRCOFWI Bulletin Staff

Waukesha Metro Transit was founded in 1983 and is a public transit agency that operates in the city of Waukesha, throughout Waukesha County and extends into a very limited portion of Milwaukee County, *Waukesha Metro. 2016*. This form of transportation sounds wonderful,



especially with its wide area of reach.

This form of transportation also sounds wonderful to a person without any need for accessible services, but what you may not know is how much Waukesha Metro Transit offers their riders. If wheelchair transportation is a reality for you or you need assistance with getting on the bus, no worries at all! Waukesha Metro's fixed route fleet is wheelchair accessible!

In continuing with this thought Kevin Jay General Manager/ Director of Operations shared with me, in an interview, that "each one of the vehicles in the fleet has a ramp or some sort of lift" to help those who are in need.

View the photos below to get a better look at this ramp.



If you require assistance with a wheelchair, are a person who has other disabilities that should be taken into consideration to make your riding experience a pleasurable one, using a stroller, walker or cane; all you have to do

is give Waukesha Metro a call at (262) 524-3636 Monday-Friday between the hours of 8 a.m. – 5 p.m. and let them know that you will need assistance before boarding the bus.

If cost is a concern for you the fares are reasonable, costing a person \$2.00 or if you have a disability the cost of your ticket goes down to \$1.00 per ride. Those who need the lower fee and are disabled are required to carry a Medicare Card or their Metro ID like the one seen below:



This Metro ID card belongs to Delany Czernisz, who used to volunteer for the BIRCOFWI Community Store.

This Metro ID card costs Delany \$35.00 for 31 days. Delany's tie with our organization is she volunteered with us on various days and worked on different projects through out the store as well as on puzzles these activities were used to enhance her cognitive skills.

Kristin Elliott who works as a Customer Service Specialist shared with me a possible downside of these passes, which is "they are transferable if you lose it and someone else picks it up they can use it."

On the other hand Delany shared with me just how easy it can be to ride Waukesha Metro when she said "I do it all the time... it is very easy."

In order to verify this statement, I took the bus with Delany to record my own personal experience, which follows. The bus pulls right up to the curb and as I previously explained a ramp sometimes is unfolded for the passengers if needed.

Once you board the bus you either showed the driver your Metro ID card, insert your voucher if you are transferring or purchase a ride from the driver. You need to have exact change due to the driver not carrying any cash and your money being inserted directly into the machine next to the driver.

When you are on the bus and if you come to a stop where you want to get off you simply pull the cord as shown below:



Shortly after entering the bus we departed from our location. Everything seemed to be going well at first, but I would soon start not to feel well during the ride.

When I sustained my brain injury the vestibular system in my brain was greatly affected and according to P. Howard. *The Owner's Manual For The Brain. (2009) pg. 431*, the vestibular system controls our sense of balance and a person's posture, M. Sweeny. *Complete Guide to Brain Health. (2013). pg. 337*.

Waukesha Metro: Another Transportation Option (cont.)

Written by: Bari L. Rieth / BIRCOFWI Bulletin Staff

By this area being greatly affected causes me to feel lightheaded and downright sick. This feeling that I get does not go away until I am in a dark room and can rest for a while.

For people such as others and myself who have this same issue with their brain the bus is not the best option, because of the jostling and motion of the bus with the frequent and sudden stops. Delaney fortunately does not have this same problem and is able to ride the bus without problem.

This just proves that while the bus may be a great option for some it may not be possible for all. For the majority of individuals I would say this is a great option for transportation.

C. (2016, January 01). Waukesha Metro. Retrieved July 12, 2016, from <http://www.waukeshametro.org>

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Levels of Brain Injury

Written By Lois York-Lewis / BIRCoFWI Bulletin Staff

Mild Traumatic Brain Injury (Glasgow Coma Scale score 13-15)

Mild traumatic brain injury occurs when:

- Loss of consciousness is very brief, usually a few seconds or minutes
- Loss of consciousness does not have to occur—the person may be dazed or confused
- Testing or scans of the brain may appear normal
- A mild traumatic brain injury is diagnosed only when there is a change in the mental status at the time of injury—the person is dazed, confused, or loses consciousness. The change in mental status indicates that the person's brain functioning has been altered, this is called a concussion

Moderate Traumatic Brain Injury (Glasgow Coma Scale score 9-12)

Moderate traumatic brain injury occurs when:

- A loss of consciousness lasts from a few minutes to a few hours
- Confusion lasts from days to weeks
- Physical, cognitive, and/or behavioral impairments last for months or are permanent.

Most brain injuries result from moderate and minor head injuries. Such injuries usually result from a non-penetrating blow to the head, and/or a violent shaking of the head. As luck would have it many individuals sustain such head injuries without any apparent consequences. However, for many others, such injuries result in lifelong disabling impairments.

Persons with moderate traumatic brain injury generally can make a good recovery with treatment or successfully learn to compensate for their deficits.

Severe Brain Injury (Glasgow Coma Scale score 3-8)

Severe Brain Injury occurs when:

Severe head injuries usually result from crushing blows or penetrating wounds to the head. Such injuries crush, rip and shear delicate brain tissue. This is the most life threatening, and the most intractable type of brain injury.

Typically, heroic measures are required in treatment of such injuries. Frequently, severe head trauma results in an open head injury, one in which the skull has been crushed or seriously fractured. Treatment of open head injuries usually requires prolonged hospitalization and extensive rehabilitation. Typically, rehabilitation is incomplete and for most part there is no return to pre-injury status. Closed head injuries can also result in severe brain injury.

TBI can cause a wide range of functional short- or long-term changes affecting thinking, sensation, language, or emotions.

TBI can also cause epilepsy and increase the risk for conditions such as Alzheimer's disease, Parkinson's disease, and other brain disorders that become more prevalent with age.¹

Repeated mild TBIs occurring over an extended period of time (i.e., months, years) can result in cumulative neurological and cognitive deficits. Repeated mild TBIs occurring within a short period of time (i.e., hours, days, or weeks) can be catastrophic or fatal.

Resources:
National Institute of Neurological Disorders and Stroke. Traumatic brain injury: hope through research. Bethesda (MD): National Institutes of Health; 2002 Feb. NIH Publication No.: 02-158.

Centers for Disease Control and Prevention (CDC), National Center for Injury Prevention and Control. Report to Congress on mild traumatic brain injury in the United States: steps to prevent a serious public health problem. Atlanta (GA): Centers for Disease Control and Prevention; 2003.

Brain Injury Association of America, Causes of Brain Injury. www.biausa.org

Brain Injury Resource Center of Wisconsin, Inc.
511 N. Grand Ave.
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There is no better way to advertise your product or service than through the BIRCOFWITM Bulletin. This Bulletin reaches over 700 families and businesses throughout the state of Wisconsin! For rates and information, please contact our Director of Public Relations and Marketing,

Mrs. Bari L. Rieth

by calling 262-232-8887 or by email at bari@bircofwi.org

Want More Information?

Be sure to visit our website today! Archived copies of the BIRCOFWI Bulletin can be viewed from our website:

<http://www.bircofwi.org/bircofwi-quarterly-bulletins.html>

Thank you for reading and make sure to look for the next bulletin!

**Look for our next issue
coming out June 2017!**

Brain Injury:
I can *explain* it to you, but I can't *understand* it for youTM