

HeadSTRONG

The Brain Injury Alliance of Colorado is the go-to resource for help and services for survivors of an injury to the brain, their families, and providers.

The History of Pikes Peak Challenge

By Kenny Hosack, M.A., Craig Hospital, *Hiker 28 of 32 years!*

The Pikes Peak Challenge Fundraising Event was founded on July 4, 1986 as “Walk Through the Clouds” by Dave and Joyce Meurer of Colorado Springs. Dave and Joyce were co-founders of the Colorado Head Injury Foundation (CHIF) which is now the Brain Injury Alliance of Colorado (BIAC). Dave and Joyce were on the CHIF Board of Directors and facilitated the Colorado Springs Support Group for many years.

Dave was also on the National Head Injury Foundation (NHIF) Board of Directors, and the “Walk Through the Clouds” actually began as a national fundraiser. The first year in 1986 was a “pilot” year, with six of us making the summit. The second year expanded to 15 hikers, including some from other states; and by the third year, the number of hikers grew to around 25. By 1991 the event grew to 126 hikers from 26 states. Hiker fundraising proceeds were split between the hikers’ home state, CHIF, and NHIF.



Last year the PPC had
400 hikers and raised
\$210,000 for BIAC.



First hike 1986, L to R: Mr. Johnson, Kenny Hosack, unknown, Dave Meurer, Eddie Johnson, Sue Kirton

In 1994, the name was changed from “Walk Through the Clouds” to “Pikes Peak Challenge”, the date was changed from July 4th to the second Saturday in September, and it became a solely Colorado event again. The event has grown over the years, in terms of different hikes offered, numbers of hikers, and in the amount of funds raised. It is an extremely well-run and successful event. Last year the PPC had 400 hikers and raised \$210,000 for BIAC.

Thank you to Bill Slaughter who was our “trail boss” for most of the past 30 years, and to all the volunteers who help keep us safe on the mountain each year- El Paso Search and Rescue, Air Force Academy, Ft. Carson, Colorado Springs Utilities, and others. Over the years we have endured extreme heat and sun, rain, snow, wind, and lightning- sometimes all on the same day!

(continued on page 5)

Who We Are

The Brain Injury Alliance of Colorado is the go-to resource for help and services for survivors of an injury to the brain, their families, and providers.

Our vision is that all persons with a brain injury thrive in their community.

What We Do

Client Programs

Case Management

With a team approach and local presence, Case Managers provide creative and collaborative statewide services to give our clients support, guidance, and hope. In-person, phone, and email based support regarding medical providers, state benefits, and other resource related needs.

Recreation Programs

Single and multi-day educational, social, recreational, and creative programs for adults and youth with brain injury.

Therapeutic Music and Art Classes

Music and art therapy classes led by a board certified therapist.

Emergency Utility Bill Assistance

Financial assistance with heating and electricity bills for individuals and families facing life changes after brain injury.

Seminars, Classes, and Workshops

Educational events for individuals with brain injuries, families, and caregivers.

Support Groups

Statewide meetings to provide education, recreation, and emotional support to individuals with brain injury, family members, and friends.



Online Resource Directory

Database of brain injury related providers available for public access on our website.

Professional Programs

Brain Injury Professional Networks

Groups of providers who work together to enhance the system of supports for survivors across the state.

Professional Conference October 26-27, 2017

A two-day professional conference in Denver featuring presentations from nationally known BI experts.

Community Outreach and Education

Presentations, exhibits, and seminars to increase public awareness of brain injury.

Other Programs & Fundraisers

Pikes Peak Challenge Fundraising Event September 9, 2017

All proceeds benefit Brain Injury Alliance of Colorado.

Public Policy

State and federal legislative advocacy to allow for greater access to services.

Quarterly Newsletters

Regular communication including brain injury related articles, news, and information on statewide events and meetings.

*With funding from the
Colorado Brain Injury Program*



www.tbicolorado.org

The History of Pikes Peak Challenge (continued from cover)

Since 1986 there have been thousands of proud souls who will never forget the experience of braving the 13-mile hike 7,510 ft elevation gain to the Pikes Peak Summit of 14,115 ft! The opportunity for persons with brain injuries, their families, professionals, providers, and sponsors to all hike all together for a common cause makes the PPC especially rewarding experience.

**If you've never done it, I would highly recommend it.
It will change your life!**



Dave Meurer being interviewed by KETV Channel 3, Colorado Springs, 1987

Research News & Recent Publications

A UCLA-led international consortium of academic research institutions has been awarded a \$21 million grant from the National Institutes of Health to develop better ways to prevent epilepsy following traumatic brain injuries.

For more information please visit:
<http://bit.ly/2ksVGva>

New research has shown how normally helpful brain cells can turn rogue and kill off other brain cells following injury or disease.

For more information please visit:
<http://bit.ly/2q3x9j2>

Interested in Advertising in HeadSTRONG?

Contact Gavin Attwood, CEO at
303-562-3199 or Gavin@BIAColorado.org

Resource Highlight

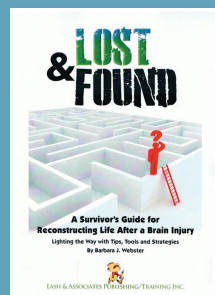
Learn about resources that BIA Case Managers and other staff find valuable while helping survivors and families.



BIA Resource Directory

Discover a number of services and providers across the state of Colorado

BIAColorado.org/Resource-Directory



Lost & Found

A Survivor's Guide for Reconstructing Life After a Brain Injury. Lighting the Way with Tips, Tools and Strategies

By Barbara J. Webster

Caregiver Column

Put on Your Own Oxygen Mask First

By Marci Drimmer, *Caregiver of Adult Survivor*

I recently returned from a six day trip with my 18 year old son who is about to attend college. We drove over 2000 miles and hiked into the Grand Canyon's Havasu Falls. We stayed in five different hotels and visited seven different cities. We laughed and sang with the music blasting. I enjoyed every second of it.

For six days I got a break from living with TBI. This may sound mean or insensitive to many people, but it is the most loving thing I can do for myself. TBI affects the entire family on a daily basis. Caregivers often find themselves in the position of holding it all together. We become the rock for our families and forget that we have been injured as well. You may believe that it is absurd to stand next to the TBI and claim you have been injured. Our life has been forever changed and we are working hard to adapt to all the changes. Standing in the face of TBI with an open heart means having to dig deep. There are days you may feel sad about the things your partner can no longer do. You may feel anger that they even got a TBI. You probably have some level of fear and anxiety as well. It takes tremendous energy to manage our own feelings while providing care for others. You may find yourself saying, "How can I be upset when they have a TBI." We often put our needs at the bottom of the bucket. We deplete our physical and emotional energy "for the sake of the family." We feel compelled to give away everything we have.

We all have cars that are a necessary part of daily life. We accept the fact that our car requires gas and maintenance. We can wait until the tank is empty to refill, but that causes actual damage to the vehicle. You wouldn't expect your car to run without gas, yet we expect ourselves to run on fumes. When you board an airplane with children they always say, "put on your own oxygen mask first." We desperately need time to refuel and replenish ourselves physically, emotionally and spiritually. You may feel angry that I even suggest you should take time for yourself. You may not even know what it means to replenish. I would even be so bold as to say that it helps the TBI heal. Our



partners and families rely on us. When we leave ourselves empty it makes it impossible to relate to our partners with love and compassion. We may find ourselves getting irritable and withdrawn. When was the last time you took time for yourself?

My husband and I have learned that TBI is an injury of energy. Everything begins and ends with managing his energy. It has taken him a year to really understand this idea. If he depletes his energy it leads to head pain. Head pain leads to emotional outbursts. Emotional outbursts lead to disconnection in our marriage. He has learned to plan his days while being cognizant of his energy consumption. This often means he cannot do many things in the same day. This has allowed him to play more with our 8 year old daughter and connect more with me. Connection and bonding create healing opportunities for everyone. Increasing the moments of connection helps the TBI survivor and the entire family.

When I tell most people that I left my 8 year old daughter home with her father they are shocked. That would be a big responsibility for even the father of the year. When I tell people who live with TBI, they think it is impossible.

I have learned that nothing is impossible if your partner manages their energy level. This sometimes requires help from us and reminders about their energy expectations. We have learned to plan ahead for times when he will need a lot of energy. When my daughter gets home from school she needs and wants her dad's attention. He makes sure to take a nap during the day and protect his energy. We have a date every week on Saturday afternoon. That is our time to connect. I have asked him to refrain from doing any activities that morning that would deplete his energy level. We have learned all of this from trial and error.

I realize that not everyone has the luxury of leaving for six days. However, we all have the ability to plan some time for ourselves. It can be as small as leaving to have a cup of coffee or as large as taking a trip to the Grand Canyon. I beg you to carve out one small space for yourself this week. It is the most loving thing you can do for your family. ■



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Domestic Violence and Brain Injury

One of the ways BIAC strives to meet our vision (that all persons with a brain injury thrive in their community) is to raise awareness and increase knowledge among professionals. We do this by providing educational trainings throughout the state to groups such as police, mental health providers, homeless shelters, and other social service agencies. These presentations consist of an overview of brain injury, information about identification/screening, suggested accommodations/strategies, and connecting clients to resources. Recently we have been providing these trainings at a number of domestic violence shelters.

Intimate partner violence is a common cause of brain injury in women. The head and face are often targets of intimate partner assaults, with victims suffering head or neck injuries. One research study of women in a shelter found the following:

75% had sustained **at least one** partner-related brain injury

50% had sustained **multiple** partner-related brain injury

The more times they had been hit in the head or shaken, the more severe and frequent their symptoms.

By providing education to staff at these agencies, we hope to build their capacity to better serve clients with brain injury.

For more information, visit
BIAColorado.org/Education-for-Professionals

A Wildflower
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A Wildflower Assisted Living and Care Homes offers three locations that provide a life wonderful experience for those with traumatic brain injuries. We have 24 hour on-site staff and are RN owned and operated. We accept private pay, workman's, Medicaid, and long-term care insurance.

AWildflowerAssistedLiving.com | 720-628-9092

A Survivor's Story

Barb Wagenfuhr

My “new normal” actually begins in 1999, when I was working at a camp and I used marine spray varnish to coat the 120 campers’ birdhouses that they had made during the week. It being a cold, drizzly day in the mountains, I worked inside a large garage. Originally, I had the three big garage doors open to get good ventilation, not realizing that there was no cross-ventilation. At some point, I closed the doors and continued spraying. Already my brain was confused and I wasn’t thinking right. After using 12 or so cans of varnish, I fell unconscious. I was discovered about three hours later and was taken to the hospital where I remained for several days. Toxic encephalitis was the diagnosis and left me with a number of challenges. So, my journey into the world of brain injury began.

I returned to work after a few months doing my best to hide the new challenges I was aware of. Thought to be a one-time event, no-one suspected that this would leave me extremely hypersensitive to petroleum based products, organic solvents, fumes, and vapors. But it did. After a series of “real-life” exposures to a variety of products and chemicals—some sending me unconscious back to the ER and others leaving me confused and to sleep for hours and hours—the neurologist began to put the pieces together. I was reacting to all forms of petroleum based/organic solvent products. And each one left its mark on my brain. I was told that the damage was permanent and I just needed to learn to cope and compensate. That was a challenge when I wasn’t aware of all the changes.



Like many people who have had an injury to their brain, doctors labeled me as “crazy,” a middle-aged woman with a psychological problem. Some thought I was simply smelling something and reacting to get attention, or that I was faking it. It’s funny that I have no sense of smell now, so I wouldn’t know if I was in a dangerous situation. In 2008 an exposure finally broke my brain and left me with a lot of damage. Like multiple concussions where each one builds on another, I now have Chronic Toxic Encephalopathy. I lost my career in Christian ministry and most of my friends. Each exposure continues to add to the others.

In 2010, both my attorney and cognitive therapist told me about BIAC and the Pikes Peak Challenge (PPC). They encourage me to get involved and challenged me to do the PPC. I accepted their challenge and registered and began my fund raising and getting in shape. By the time of the PPC that year, I had raised about \$6,000-\$7,000. And made it to the top! A huge accomplishment for me. It gave me some confidence back and I wanted to do it again.

My last major exposure in 2011 really left its mark. I had a stress cardiomyopathy (type of heart attack) and significant breathing problems, and another addition to my brain injury, another challenge to accept my “new normal.” Since then, my neurologist has only allowed me to go up as far as Barr Camp, which is 13 miles round trip.

The PPC has helped give me confidence. All the years of doing the PPC have encouraged me to continue to challenge myself physically and to try new things daily (cognitively, physically, and mentally). And I have met so many wonderful people in a world that I really didn’t know before.

While my brain injury journey is not a common one, it has taught a lot of people that what is written as warning label on products is very real and to pay attention to them. It has taken me into the medical world and to have a great team of doctors who have probably learned a lot about the effects of toxic substances that aren’t very common. I have tried to be an encourager to others to challenge themselves to try new things and to persevere. I have gotten to a place where, most of the time, my brain injury and the effects of toxins



don't define me anymore. And I want to encourage others with disabilities to keep going. I'm 60 now, have had many "new normals" to accept and keep going on. I don't let my hypersensitivity keep me from living life. Every place I go might bring another exposure: new carpet in a building, unknown construction areas, perfumes/after shave, air fresheners, car and truck exhaust, someone smoking, etc. With no sense of smell all I can do is react. But my family and some friends know how to protect me, I wear a med alert bracelet and have a charcoal filtered mask and inhaler to help me get out of a place when I start to react.

So, I would encourage people to take the challenge and do the Pikes Peak Challenge, help BIAC, and especially cheer on the survivors. Each one of us has a story of brain injury through personal experience whether it is a friend, relative, client or patient. We all know someone who has had a stroke, been in some type of accident, has had a concussion, or near-drowning, toxic exposure, etc. To those who don't have a brain injury, be an encourager to a survivor, a supporter, a listener, and don't let their injury define them in your eyes. And to survivors, keep trying, be courageous, celebrate your achievements and don't give up. ■

Support Group Spotlight

Headway Neuro/Stroke Support Group



How and why was Headway created?

Headway was created by Val Gardner, a speech therapist who recognized the need for a support group in Colorado Springs. The Headway group was started to reach out to the brain injury and stroke clients that Val worked with in order to encourage them to socialize with other survivors and to provide activities to inspire them to not isolate. The group has been meeting for approximately twenty years.

When and where does Headway meet?

Fargo's Pizza (2910 E. Platte Ave., Colorado Springs, CO 80909)
11am - 1pm Every Wednesday (The 1st and 3rd Wednesday's are for activities and the 2nd, 4th and 5th are for social gatherings.)

What is the main goal for its members?

The Headway group provides support, fellowship and thought stimulating activities for individuals with brain injuries and stroke related issues.

Can you share one resource that is highly recommended in this support group?

The Brain Injury Directory that is published every two years is a great resource we get from BIPN to share with the group.

How can people get involved with Headway?

Contact Deborah Carnes (Facilitator) at 719-459-0901 or Liz Cameron (Co-Facilitator) at 719-200-4034.

Follow Headway on Facebook for upcoming events:
Headway Neuro/Stroke Support Group

Upcoming events and classes

Recreation Programs & Social Activities

Challenge by Choice Multi-Day Recreation Programs

River rafting, ropes course, hand cycling, wall climbing, theme dance. Program staffed by volunteers, RN, and Breckenridge Outdoor Education Center (BOEC) experienced staff/instructors and interns. Cost \$1,890

Challenge by Choice #1
June 11 - June 16, 2017

Challenge by Choice #2
July 9 - July 14, 2017

Challenge by Choice #3
July 30 - August 4, 2017

Challenge by Choice #4
August 13 - August 18, 2017

Ruby & Horse Thief Canyons Multi-Day Canoe Excursion

August 28 - September 1, 2017

Join us for a gentle float downstream and enjoy scenery you only thought existed. You will experience team building, rafting, camping, on shore cooking, fishing, swimming splashing and star gazing. Journey begins and ends at the Breckenridge Outdoor Education Center (BOEC).

Creative Minds Multi-Day Program

September 8 - September 11, 2017

Cooking, hiking, field trips, poetry, painting, movement, karaoke, laughter, dancing and socializing. Program staffed by volunteers, RN, and Breckenridge Outdoor Education Center (BOEC) experienced staff/instructors and interns.

Paddle Sports Day Program

September 5, 2017
4:00 - 6:00 pm

Meet at 3:15 pm at Sports Authority Field at Mile High (Lot J). Transportation provided to and from Bear Creek Park (near Morrison).

You will safely experience fully accessible outrigger canoeing, kayaking or both through the direction of the capable staff from the National Sports Center for the Disabled (NSCD). Together we will working on our balance, fitness, laugh a lot, maybe get a little wet and enjoy a tasty meal.



Music Classes

Every Thursday
10:00-11:30am

Brain Injury Alliance of Colorado
1325 S Colorado Blvd, B-300
Denver, CO 80222

Art Classes

Every 2nd and 4th Tuesday of the month, starting on February 14th
10:00-11:30am

Brain Injury Alliance of Colorado
1325 S Colorado Blvd, B-300
Denver, CO 80222

Brain Injury Professional Networking (BIPN)

BIPN groups seek to "improve the availability of services and supports for individuals with brain injury, promote the ongoing sustainability of community support systems, and share resources."

Each BIPN group is unique to its geographic region and strives to serve its community/region based upon identified needs.

Denver

June 2, August 4, September 1, 2017
11:45 - 1:00 pm

Brain Injury Alliance of Colorado
1325 S Colorado Blvd, B-300
Denver, CO 80222

Contact Liz Gerdeman at
303-562-3298 or Liz@BIAColorado.org

Colorado Springs

June 20, August 15, Sept. 19, 2017
11:30 am - 2:00 pm

Health South Rehab Hospital
325 Parkside Drive
Colorado Springs, CO 80910

Contact Carol Roche at 719-330-3624 or
carol.supportforsuccess@gmail.com or
Carol Cochran at carol@BIAColorado.org

Northern Colorado

August 28, 2017
2:30 - 4:30 pm

Northern Colorado Rehab Hospital
4401 Union St., Johnstown, CO 80534

Contact Sarah Beetch at 970-491-3733
or Sarah.S.Beetch@colostate.edu

Western Slope

Contact Jeny Knight at jenyk@htop.org

Pediatric

Contact Liz Gerdeman at
liz@biacolorado.org or 303-562-3298

ARE you UP FOR THE challenge?



Brain Injury Alliance of Colorado
proudly presents the 32ND annual
Pikes Peak Challenge
September 9, 2017

REGISTER TODAY!

PikesPeakChallenge.com



Summit Hike
13 mile hike to the 14,115 ft
summit of Pikes Peak



Barr Camp Hike
Hike Summit Trail to Barr Camp &
back down (13 miles round trip)



Manitou Walk
Family friendly 3 mile walk
through Manitou Springs



Virtual Challenge
Can't be at the event?
Raise funds wherever you are!

33RD ANNUAL

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Treatment of Brain Injury

More information to come at
BIACOLORADO.ORG

For additional information, contact
Tina Ziwak at 303-355-9969
or Tina@BIAColorado.org

OCTOBER 26-27, 2017

University of Denver Driscoll Center | Denver, Colorado

Continuing education
credits will be available.

Support Group Leader Retreat

These support group leaders gathered on March 9, 2017 in Denver for a retreat where they shared success stories and learned how to better serve survivors of brain injury.



Staff in the Spotlight



Tina Ziwak, *Special Events Coordinator*

How did you first get involved with BIAC?

In 2007, my youngest son, Jackson, sustained a traumatic brain injury at the age of 2 years old. As you can imagine, this was a very difficult time for our family and we were referred to BIAC. We knew while in the hospital that the Pikes Peak Challenge (PPC) was something we had to get involved in. My sisters and I volunteered for the PPC in 2008 and have been involved ever since. It was such a wonderful experience! I joined the Steering Committee in 2009 and was eventually hired on as an employee in 2010.

Describe your role at BIAC.

I'm currently the Special Events Coordinator for BIAC and absolutely love my job. I handle the logistics and marketing for all of our fundraising events including our conferences, Brews With the Board, and of course Pikes Peak Challenge. Given that I also am the caregiver for my son who is now 12 years old, BIAC provides me a flexible and rewarding career. They understand what we go through on a day-to-day basis and allow me to still pursue my passion in brain injury work but also take care of my little guy.

What excites you about Pikes Peak Challenge?

There are so many things that excite me about the Pikes Peak Challenge, where do I begin?! First off, it is one of the most inspiring days of the year! Where else can you find brain injury supporters, survivors, and community members in one place, all working towards the same mission? We have participants and volunteers who have sustained a brain injury and they are ALL absolutely amazing people. I couldn't ask for a better way to spend one day out of the year than with these individuals. We also have community members that volunteer and have done so for 10+ years; what dedication and commitment they bring to such a worthy cause! Our Steering Committee is consisted of 8 of the hardest working, most passionate and caring individuals; I couldn't ask for a better group to be a part of. On the day of the Challenge, you get to witness people accomplishing goals that they never thought possible. To see that is inspiring in itself!

What is your favorite thing to do outside of the office?

Outside of work I love to spend time with my family. We have two wonderful children who keep me and my husband on our toes. We enjoy watching them play sports, camping, and spending time with family and friends.

“They understand what we go through on a day-to-day basis...”

Brain Injury and Exercise

People with a brain injury are often physically inactive, leading to reduced fitness levels and secondary health conditions. A safe and effective exercise program can play an important role in improving a poor health and fitness profile following a brain injury. Additionally, regular physical activity can enhance balance and coordination, decrease reliance on assistive devices, and improve ability to perform activities of daily life and, therefore, foster independence. Studies also suggest that exercisers with a brain injury were less depressed and reported a better quality of life than those who did not exercise (Gordon et al., 1998). The key is to find which exercises the person with a brain injury enjoys and develop an individualized exercise prescription that accommodates each person's needs and abilities.



Aerobic (Cardio) Training

Improving cardiovascular fitness can be accomplished in many ways. If new to exercise, choose low-impact activities, such as walking or swimming, that still involve large muscle groups that are moving continuously. If balance is an issue, the recumbent bike, row ergometer, and water exercises are great modes of training that reduce the risk of falling.

FREQUENCY	3 to 5 days per week with the goal being to work up to most days of the week.
INTENSITY	Moderate to high intensity, or 60 to 90 percent of heart rate max. Start at the lower end of this range. Slowly & gradually increase the intensity over time.
TIME	20 to 60 minutes total. This can be broken into 10-minute bouts and done throughout the day to accumulate 20 to 60 minutes.
TYPE	Walking, running, bicycling (indoor or outdoor; upright or recumbent), swimming, rowing, aerobic classes, etc.



Strength Training

If new to resistance training, begin with circuit machines, resistance bands and body weight exercises until form and coordination have improved enough for free weight and kettle bell exercises. Regardless of the type of exercise, make sure to start each exercise from a stable position to reduce the risk of falls or further injury.

FREQUENCY	2 to 3 days per week. Each major muscle group (chest, back, shoulders, biceps, triceps, abdominals, quadriceps, and hamstrings) should be targeted. A minimum of 48 hours rest should separate the training sessions for the same muscle group.
VOLUME	3 sets of 8 to 12 repetitions per exercise. Start with 1 set of 8 to 12 repetitions and gradually build up to 3 sets.
TYPE	Body weight, TRX, free weights, circuit machines, kettle bells, resistance bands, etc.



Flexibility (Stretching) Training

Effects of a brain injury include reduced range of motion, stiffness, spasticity, ataxia, and reduced tone, which can initially cause flexibility exercises to be difficult to perform. A regular stretching routine can improve tightness and spasticity.

FREQUENCY	As often as possible throughout the day. The goal should be to stretch in the morning after waking up, after a workout, and at night before going to bed.
INTENSITY	Perform the stretch until a point of tightness, but never to a point of pain.
TIME	Hold the stretch for 10 to 30 seconds, but try for a full 30 seconds.
TYPE	Slow, static stretches for each muscle group. Static stretches involves slowly stretching a muscle or muscle group and holding that position.



Balance Training

Benefits of balance training for individuals with a brain injury include improvements in coordination, agility, and muscular strength, which can reduce the risk of falls and fear of falling.

FREQUENCY	A minimum of 2 to 3 days per week.
INTENSITY	An intensity level for balance exercises has not been established.
TIME	60 minutes total that can be broken into 20 to 30 minute bouts.
TYPE	Yoga, Pilates, Tai Chi, standing on 1 leg, heel-to-toe walk, standing on an unstable surface (i.e. BOSU ball, wobble board, etc.).

References: Gordon, WA., Sliwinski, M., Echo, J., McLoughlin, M., Sheerer, M., & Meili, TE. (1998). The benefits of exercise in individuals with TBI: a retrospective study. *Journal of Head Trauma Rehabilitation*, 13(4) 58-67.





Brain Injury Alliance

C O L O R A D O

1325 South Colorado Boulevard
Suite B-300
Denver, CO 80222

info@BIAColorado.org

BIAColorado.org

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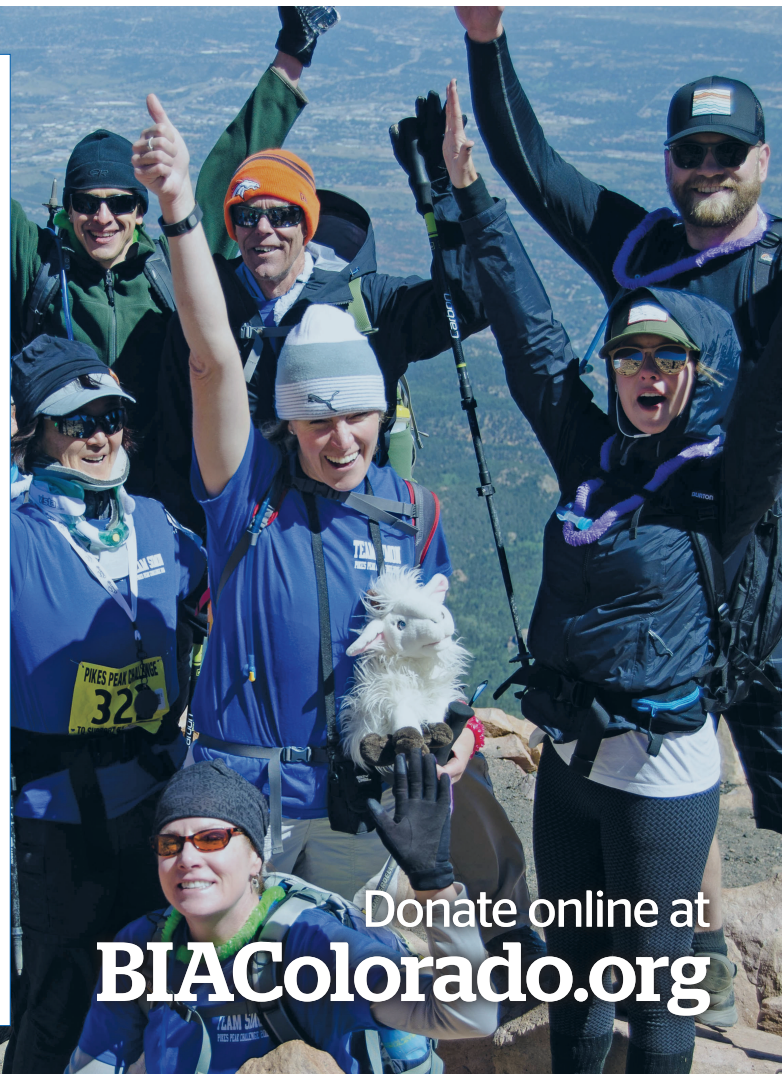
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