



UNITED STATES
**Brain Injury
Alliance**

USBIA Internship Influences Career of Health Policy Expert

by Ed Roberts

Why does someone choose to become a health policy analyst? For Zeke Dominguez, it's two-fold: He gets to help those who need it and also raise the public's perception of social work as a profession. Suffice it to say, he is doing both.

The 24-year-old Phoenix native credits the United States Brain Injury Alliance (USBIA) with giving him a new perspective of the field. "I wanted to be a psychotherapist. But as an intern with USBIA, the more I saw how they tackled more macro issues, the more I wanted to broaden awareness of the benefits of social work."

Zeke's internship was located at the Brain Injury Alliance of Arizona office in Phoenix under Executive Director Carrie Collins-Fadell. Completing the circle (or starting the new journey), this spring, Zeke is scheduled to receive his MSW from Arizona State University, where he also received his BA. What makes this even more noteworthy is the fact that he is the first person in his family to go to college.

My family encouraged my career, even when it wasn't so clear," says Zeke proudly. "When I enrolled at community college, I didn't know what I wanted to do. My mom told me about social work." For the record, Zeke's "mom" is technically his grandmother, who, along with his grandfather, raised him from a young age. "I had to write an entry essay. I realized I wanted to

help other people, which is the foundation of social work. I also wanted to tackle oppression and racism."

"Then, as an intern with Carrie, I started learning about community organization, which was eye-opening."

Carrie noted that the summer Zeke interned was a particularly hairy one for federal policy. The Affordable Care Act (ACA), which contains critical pieces of protection for those with a disability--like brain injury--was under attack all summer. "When he started I thought it was going to be a quiet summer spent learning about a broad range of policy and grassroots tactics.

Instead, it was moving from one fire to the next due to federal Congressional action," said Carrie. "I worried that this burned him out because it was more work than he signed up for on a topic he initially only had peripheral knowledge of, but imagine my delight when I ran into him a few years later and found out it had the opposite effect."



Zeke Dominguez, BIA AZ Intern

Zeke went on to become a member of Arizona State University's Sex Trafficking Intervention Research, exploring the relationship between both traumatic and non-traumatic brain injury and sex trafficking. In this capacity, he has worked closely with Director Dr. Dominique Roe-Sepowitz. After beginning as a graduate research assistant, he is now the organization's Director of Policy Analysis. He strives to improve policies geared toward victims. Carrie and Zeke reconnected at the BIAAZ professional conference where Dr. Roe-Sepowitz had been invited to speak. Zeke enjoys the challenges of addressing a vulnerable population with a higher incidence of brain injury.

"Unfortunately, survivors of sex trafficking are often locked out of **compensation, particularly** in rural areas, because it isn't always easy to identify those engaged in trafficking."

He is quick to add that Arizona is advanced in this battle to care for those who have been entangled in a trafficking situation, tailoring training to professionals in the field. The state is also making headway training correctional officers. "It's bittersweet being in this field," explains Zeke. "It's sad that this

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Intern (con't)

problem exists, but I like being a pioneer helping find solutions.”

Painting a bigger picture, Zeke adds, “As a society, we have to challenge how we perceive Social Work as a profession. **It** needs to be seen as a valued profession.”

Zeke Dominguez is doing his part every day.

Former Minnesota Brain Injury Alliance Staffer Now Serves as Arizona Interpersonal Violence Liaison

By Ed Roth

What is one of the many great things about being part of a national network working to erase the stigma of brain injuries? It has allowed Janice Podzimek to transition her skill set from the cool Midwest winters of Minnesota to sunny Arizona. Here she continues to help those seeking to live well after brain injury.

The Brain Injury Alliance of Arizona (BIAAZ) was recently pleased to announce the transition of longtime community leader and team member Janice Podzimek to a new role within the organization - Interpersonal Violence Liaison. Janice had previously served as the Director of Survivor and Professional Programs. As a resource facilitator, she earned her Certified Brain Injury Specialist (CBIS) credentials helping families navigate the complexities of the healthcare system.

“**With increased** violence as a result of the **COVID-19 quarantine** and resulting economic misery, we are in a time where many individuals are unimaginably vulnerable to violence, resulting in an increase in everything

from psychological trauma to head injury,” said Carrie Collins-Fadell, Executive Director of the **Brain Injury Alliance of Arizona**.

“While we may never be able to quantify the totality of the need, we know that it warranted swift and decisive action to pivot our services to meet this growing demand.”

While a true asset in Arizona, the Duluth, Minnesota native has an extensive background serving those struggling with substance misuse and disability. What’s more, this is not her first time as part of the United States Brain Injury Alliance (USBIA) family. In Minnesota she served as an HIV Tester & Prevention Counselor at *Women With A Point*, counselling injection drug users on how to reduce harm to themselves and others. She also worked with the Minnesota Brain Injury Alliance, rising from Volunteer Coordinator to Education & Outreach Specialist, where she helped shape multiple programs.



Janice Podzimek, BIA AZ

But this is far from where Janice’s journey with the invisible disability begins— she has been touched by the trials of brain injury throughout her life.

The youngest of three, she experienced the effects of a father who struggled with alcohol abuse and was involved in several car accidents, including an instance when her mother was a passenger. It wasn’t until years later Janice realized both her father and mother had likely suffered traumatic brain injuries.

“I saw the personality change,” recalls Janice. “He became more hostile and abusive, especially toward my brother. Eventually, he had a stroke, but didn’t want to go to the hospital. When I finally convinced him to go, it was too late; he passed shortly after being admitted.”

Janice now knows how important recognizing the signs of a stroke can be. “Years later, I learned that when it comes to stroke, time lost is brain lost,” she shares. “Unfortunately, that lost time was fatal.”

One of Janice’s four daughters is also a survivor of brain injury. When she was four, she was hit by a train of shopping carts as she ran out of a checkout lane at a grocery store. The doctors at the ER said she was just a bit bruised and sent her home. Turns out, the situation was much more serious; she had damaged her frontal lobes and has since required ongoing treatment.

With such an inordinate personal exposure to brain injury, opioid use disorder, domestic violence, and even a near-death experience, it’s no surprise Janice views her purpose in life as one to help others.

“I know the main concerns people have first-hand: How do I get whole? How do I continue? Can I be a productive citizen?” Janice adds that no matter how bleak the future may look, “everybody has a story and deserves to be heard.”

Bia-NE Leader Peggy Reisher Wins Hearts and Minds in Nebraska

New Board Member, Peggy Reisher, is one of the most modest people you'll ever meet. Nebraska-modest, if you will.

So, it's a bit surprising to discover how tenacious she has been as Executive Director of the Brain Injury Alliance of Nebraska, a role she has held since 2013. Nobody in the state has been more determined to procure resources and funding for brain injury survivors, their families, caregivers, veterans, and professionals.

Born and raised in Nebraska, Peggy is a social worker by trade, earning her MSW from the University of Nebraska – Omaha and BS from the University of Nebraska – Kearney. After her first experience working with individuals with brain injury at St. Vincent New Hope in Indianapolis, she returned to Lincoln to join the staff of Madonna Rehabilitation Hospital, where she was the social worker on the brain injury unit for 14 years.

In 2009, she helped launch the Brain Injury Association of Nebraska (BIA-NE). In her role as Program Director, she coordinated conferences and developed training. This dovetailed well with the impact she was making at Madonna as a liaison between families of brain injury survivors and therapists.

"In my efforts to find services and support for those discharging from Madonna," recalls Peggy, "I realized there were not enough brain injury resources in Nebraska." So she took it upon herself to help raise the stature of

brain injury in the state through the development of BIA-NE.

"My biggest challenge has been getting people to understand brain injury as a public health issue," she acknowledges. "With greater funding, I would love to reach out to the public with an information awareness campaign."

Peggy's passion for helping survivors of brain injury has paid off in many ways. In 2014, Peggy was instrumental in getting Nebraska's Return to Learn law passed, which requires schools to have a protocol in place to assist students with brain injury. "It is important for schools to see kids with concussion as students first and players second."

In 2019, Peggy, her modest staff (one other full-time person and one part-time person), and volunteers lobbied for, and got, the state's first brain injury trust fund, \$500,000. "We actually got 48 out of 49 state senators to understand brain injury as a public health issue, not a small feat in this state." The annual funds will be used to support resource facilitation, education, awareness, research, and program evaluation.

So, in a state that hasn't historically been brain injury-savvy, how did she do it? Part of her lobbying efforts included sharing the results of a high incidence of brain injury as underlying issues.

Their study revealed 58% of the domestic violence survivors screened positive for brain injury. Despite 84% having reported problems including dizziness, blurriness, and trouble with concentration, roughly two-thirds had

never received emergency care. "In domestic violence cases, they were only asking about abused women; nobody was asking about the kids."

In 2019, with grant funding, Peggy was able to screen 25 youth at the Lancaster Detention Center; the preliminary assessment found 72% of the youth screened positive for brain injury. 76% had injuries as a result of assaults and fights. Peggy shared these results with the teachers at the detention center. "The screening results were a real eye-opener for teachers who hadn't ever considered brain injury as a challenge for the youth for which they worked."

"Nobody is as passionate about helping juveniles with brain injury than Peggy," says BIAAZ Executive Director Carrie Collins-Fadell. "She faces an uphill battle every day and won't stop until there's a greater understanding of these growing issues that impact the state."

This mother of three concurs. "Here in Nebraska, society doesn't recognize the hidden prevalence of brain injury; we need partners on all levels who understand and are funded to help us reach out."

As Executive Director, Peggy is determined to shed light to others throughout Nebraska. "I'm trying to get members to work together and see growth in that area. We can learn from each other."

In her modest approach, she doesn't see this as an overwhelming goal, just an important one. "We can do this."

Tips for Surviving the Summer of COVID with a Brain Injury

By Alina Fong

The COVID-19 pandemic and quarantine have created challenges for people all across the world. This is, perhaps, especially true for traumatic brain injury (TBI) survivors and their caregivers who are already dealing with the physical, mental, and emotional consequences of brain injury (Wilson et al., 2017). While some TBI survivors may initially find following COVID-19 restrictions not too different from their daily lives, effects on psychological health, relationships with family and friends, and lifestyle patterns can have noticeable and long-term consequences (Jimenez-Pavon et

al., 2020). In this article, we are going to address some of the biggest issues COVID-19 and the quarantine may be causing TBI survivors, especially during the summer season, and give you tips on how to manage those issues.

COVID-19 has already had published effects on physical, mental, and emotional health (Holmes et al., 2020; Qiu et al., 2020). These effects come not only from the threat of the viral infection, but also from changes to how we live our lives. For TBI survivors and their caretakers, these changes in lifestyle—such as being on the computer more for work, homeschooling the kids, or experiencing restricted access to social support or medical

providers—will affect the ability to manage TBI-related symptoms. It may be more difficult to stick with healthy coping methods for stress and continue fostering personal relationships. In addition, quarantine can lead to less physical activity and time outdoors, causing an increase in feelings of isolation and depression. Importantly, the effects COVID-19 will have on physical and mental health may last longer than the epidemic itself (Holmes et al., 2020). There are several strategies you can learn, implement, and maintain to support symptom management and overall health. (See Figure 1 Strategies.) The summer of 2020 will present with unique challenges.

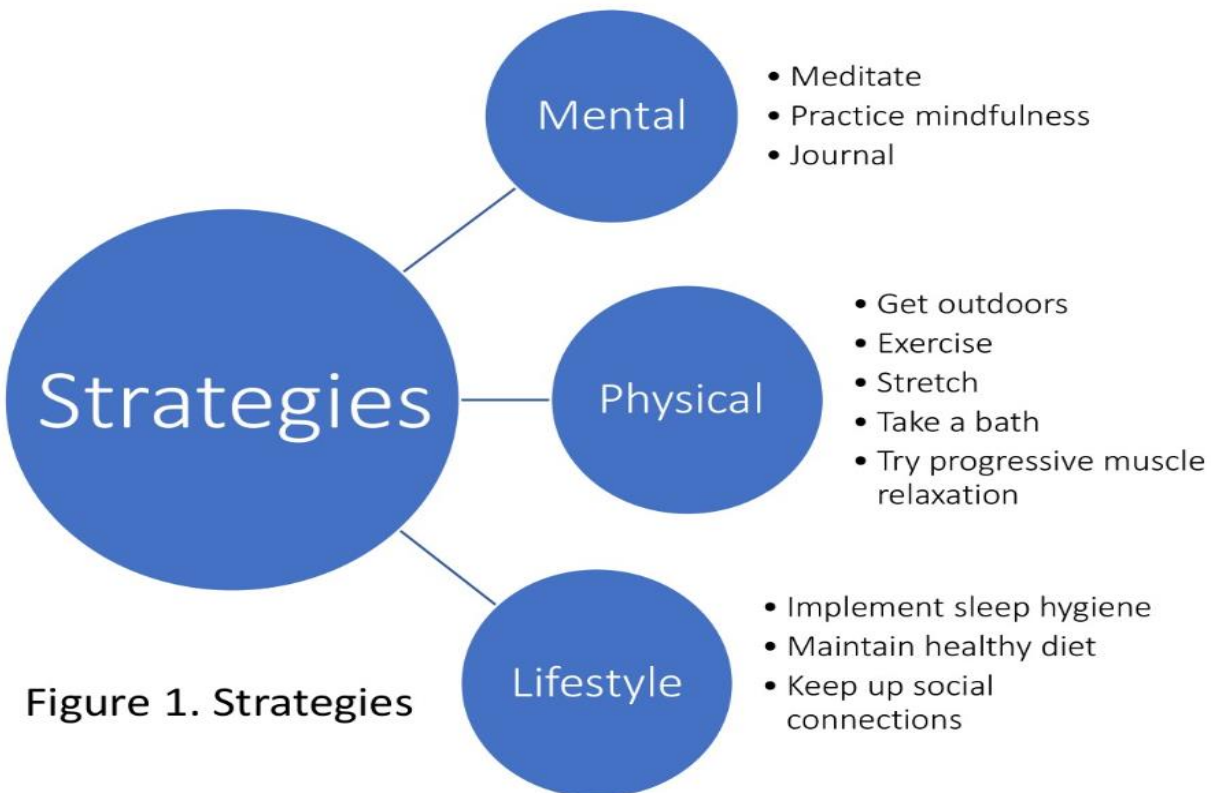


Figure 1. Strategies

The problem: The kids are at home **more**

COVID-19 has caused the closure of summer schools and kids' activities and resources, which means that family members are at home together more hours in the day. And even when facilities open, social distancing measures may drastically change how often you utilize the resources. On one hand, the extra family time can be great. For TBI survivors, however, this often means more noise and chaos during what normally would have been quiet, solitary hours to rest.

Solution: It is OK to take a time-out.

We have heard from many TBI patients that the increased number of people and activities in the home has intensified their symptoms because of overstimulation. Our advice to these patients has been that it is all right to take extra breaks when needed. The same goes for you. Look for opportunities throughout your day to take little breaks. Perhaps you have 10 minutes while the kids are napping or watching a movie. Maybe you have just 15 minutes between Zoom meetings for work. Maybe your break can come while your dinner is cooling. Use that time to de-stimulate. Find a quiet and/or dark room if you can. Practice some slow, deep breathing. Help your mind and body slow down. Don't be discouraged if you feel you need extra breaks to get through your day. Everyone is under extra pressure in these strange times. Be compassionate with yourself and your needs.

The problem: Increased screen time

Since quarantine began, screen time has increased drastically. Now, not only are people using screens for recreational activities and media, but many find themselves attending classes or working all via digital means. Increased use can be especially problematic for TBI survivors who deal with screen sensitivity. Increased screen time can lead to headaches, eye pain, eye strain, dizziness, and difficulty sleeping, among other post-brain-injury symptoms.

make a note to try one of these instead:

- Call a friend that you haven't talked to in a while
- Take a treat to a neighbor
- Do a puzzle or play a board game
- Cook a meal
- Listen to an audiobook
- Send your family a care package

Increased Media & Screen Time: Pros and Cons

<ul style="list-style-type: none"> • Connection to family and friends • Source of news and information • Access to coping mechanisms (tele-health, fun activities, etc.) • Source of distraction or escape 	<ul style="list-style-type: none"> • Increased exposure to sources of stress and anxiety • Detrimental effects on sleep hygiene with improper use • Exacerbation of TBI-symptoms like headaches, eye strain, and fatigue
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Information transfer in our modern world depends on screen use, and now more than ever during COVID-19. Knowing the pros and cons of increased media and screen use during this summer season is vital to keeping us up-to-date, safe, and happy while managing traumatic brain injury-symptoms and maintaining mental and physical health.

Solution: Take a break from the screen and find new **outlets**

It's healthy to follow the 20-20-20 rule (for every 20 minutes using a screen, spend 20 seconds looking away at something 20 feet away). Besides this, break the cycle by taking a break from the screen when you need to. Find other healthy coping methods (see Figure 1. Strategies) for your stress. If you find yourself naturally drawn to screens for distraction,

The problem: Poor sleep

Changes in sleeping patterns has also been a problem with quarantine. More exposure to blue light sources (like screens!), decreased physical activity, and a loss of daily routines are all contributing factors. The warmer weather during summer and longer daylight hours can also affect sleep quality.

Solution: Keep up a daily routine and practice good sleep hygiene

While it doesn't have to be as rigorous as it used to be, keep your daily schedule. Be as productive during your normal active hours as possible, even if these aren't spent working. Limit screen time an hour before bedtime and use blue light filters. Keep your bedroom cool (low to mid 60 degrees F). Limit the number of naps you take during the day, trying not to nap after 3:00 pm.

In summary, COVID-19 has caused an obvious shift in the way the world works, and, as a result, has introduced challenges to the way in which survivors of TBI and their caretakers live. For those who find COVID-19 affecting them currently, or for those who want to mitigate effects down the road, there are a number of strategies you can implement no matter the season. From putting down your phone for a

few hours to finally meeting that couple across the road (across a six-foot distance, mind you), every little thing helps. As this is the first summer in which our society will be adapting to COVID-19 restrictions, knowing possible challenges and their respective solutions will be key for TBI survivors wanting to maintain their mental and physical wellbeing.

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Join USBIA for our next webinar!

**COVID-19 and Brain Injury
Wednesday, July 22, 2020**

2:00 PM ET/1:00 PM CT/12:00 PM MT/11:00 AM PT

This webinar will address the direct and indirect impact of COVID-19 on neurological functioning. Emerging data on the impact of COVID-19 is noteworthy for several risk factors for both peripheral and central nervous system dysfunction. As many as fifty percent of those infected with COVID-19 will experience neurologic symptoms of some sort including short-term and long-term problems. Mechanisms of such changes include viral and toxic encephalitis, cerebrovascular changes to include stroke, and hypoxia associated with respirator use. The webinar will focus on these processes and implications for addressing short- and long-term neurologic issues.

Dr. Michael J. Hall is a staff neuropsychologist at the Iowa City VA Healthcare System, an adjunct assistant professor of psychiatry at the University of Iowa, and he is currently the chair of the Governor's Advisory Council on Brain Injury. Dr. Hall completed his doctorate in clinical psychology at Kent State University, internship at the University of Massachusetts Medical School, and a two-year fellowship in neuropsychology at Harvard Medical School.

To register for the webinar, click [here](#). Can't attend? Go ahead and register so that you will be on the list to receive the recorded webinar a few days after the broadcast.

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The mission of the United States Brain Injury Alliance is to engage the community in preventing brain injuries and improving lives. We will accomplish this through awareness, prevention, advocacy, support, research, and community engagement.

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