Ray Himber: The Healing Power of Family and Community

By Mallory Houston, Research Assistant, Center for Traumatic Brain Injury Research, Kessler Foundation

Snowmobiling was one of Ray Himber's favorite sports. The former auto mechanic always enjoyed riding across the snow-covered terrain with his family and friends – until January 6, 1996, when a snowmobiling accident changed his life forever. He sustained a traumatic brain injury, was airlifted to Wilson Medical Center near Binghamton, N.Y., and remained in a coma for seven weeks. When he emerged, Ray was unable to walk or speak. He couldn't swallow and eat. His prognosis was poor.

Ray's mother and primary caregiver, Maria, described the experience in one word: “Devastating.”

Ray was eventually transferred to Children's Specialized Hospital in Mountainside, N.J., for more than four months of inpatient rehabilitation, followed by seven months of outpatient therapies. His rehabilitation program was set up in small, manageable steps to help him regain his strength, skills, and independence. Because the injury affected both sides of his body, Ray received treatment for a wide range of issues, including Botox injections to treat spasticity in his right arm and a cane to compensate for left foot-drop. He worked hard and, to this day, continues to go to the gym with his father to exercise.

For the past several years, Ray has been a client at Opportunity Project in Millburn, N.J., a clubhouse program that provides support and resources to help individuals with brain injury overcome many of the challenges they face. Ray has benefited in countless ways, gaining the skills and strategies to compensate for some of his deficits. For example, due to the extent of his injury, Ray lost much of his vision. He was unable to read, but Maria, a former math teacher, used her knowledge to set up a reading program for her son. Opportunity Project also connected Ray with a teacher, whose various suggestions included purchasing a subscription to the large-print version of Reader's Digest.

Being able to interact with other people and be involved in his community are very important to Ray. “Before his injury, Ray was a quiet person,” Maria says. “Now, he is outgoing and talks to everybody.” Whether joining in his late brother's Fire Company 2 drill night in Mahwah, N.J., volunteering at a local animal shelter with Maria, or attending brain injury support groups, Ray is determined to give back to his community. Although he struggles with long-term planning, with the help of his family and Opportunity Project, he continues to pursue activities that interest him and gains greater confidence and self-awareness.

Most of Ray's time is spent in the company of his supportive parents. At the end of the day, he is upbeat, happy, loving, and thankful. He has always accepted people for who they are. And with an indomitable spirit, unshakable courage, and quiet perseverance, he makes his family – and all of us – proud just by being who he is.
Brain Injury Support Groups
By Andrea Trotta Gagliano, MS, CRC, LPC, Research Coordinator, Center for Traumatic Brain Injury Research, Kessler Foundation

Whether you are a brain injury survivor or a caregiver, your world has forever been changed. You likely face many challenges, have many concerns, and may be unsure how to navigate this “new normal.” You may also feel alone. Finding the right support and resources is critical. And one of the best resources for both survivors and caregivers is a support group.

Peer support groups bring together individuals who share a common condition or situation. More specifically, brain injury support groups focus on the scope of emotional, psychological, behavioral, and social consequences of injury. They provide a forum for discussing challenges, exchanging ideas, and sharing the strategies. According to Neil Jasey, MD, Director of Brain Injury Services at Kessler Institute for Rehabilitation, “Having a solid support network is critical for survivors and caregivers alike. Both report similar feelings of isolation, sadness, anxiety, stress, and depression, and may even feel stigmatized. While brain injury survivors and caregivers each have their own context and perspective, the need for resources and support services are imperative for both.”

So, why attend a support group?

Important benefits include the opportunity to:
• Talk openly about feelings
• Learn coping skills and strategies
• Explore problem-solving ideas
• Improve feelings of acceptance and validation
• Reduce isolation
• Share practical suggestions with peers
• Gain perspective on your own situation

Fortunately, in New Jersey, you do not have to look far for a support group. The Brain Injury Alliance of New Jersey (BIANJ), a statewide nonprofit organization dedicated to improving the quality of life after brain injury, offers free resources to survivors and caregivers, including 20 support groups across 17 counties. If you are interested in trying a support group, go for it! You can attend more than one group, and you are not limited to groups close to home. Some groups even have separate meetings for caregivers. For more information on the locations and details of each group, please visit bianj.org/support-groups.

Learn More:
Brain Injury Alliance of New Jersey (BIANJ)
bianj.org/support-groups
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Individuals with traumatic brain injury (TBI) often face a wide range of challenges, including the ability to connect with others. For many, making or maintaining social connections can be a struggle. They may find it more difficult to engage in conversation or find themselves getting into arguments more frequently. These symptoms are not uncommon and may be due to impairments in social cognition.

Social cognition refers to the skills we use whenever we interact with others. These skills help us understand another person’s thoughts, beliefs, and feelings and how to communicate with them.

For example, think about meeting a friend for coffee. As you walk into the coffee shop, you see your friend smiling and standing up to hug you. How would you respond? Would you smile back? What if you walked in and saw your friend reading a text and crying? Would you still smile? Or would you ask them what is wrong? Making decisions about how you respond to the needs and feelings of others requires social cognition. Without these skills, you may find it difficult or uncomfortable to be in social situations.

Similarly, employment may also pose challenges for persons with social cognition issues. It may be difficult to interact or work with others on the job. Even the process of getting a job may present some hurdles as interviews and meetings require strong social cognition skills.

At Kessler Foundation, our clinicians and research scientists study the impact of social cognition deficits on individuals with TBI, as well as methods to improve social cognition. For example, we are currently conducting a study that helps individuals with TBI practice the social cognition skills they need for obtaining and maintaining a job. Using virtual reality, we are examining how practicing social skills in a virtual environment may help individuals with TBI improve the social cognition skills required on the job.

While social cognition challenges may make life more complicated, we anticipate that the interventions being developed at Kessler Foundation will prove to be effective in helping those with TBI live more comfortable, confident, and fulfilling lives.

For more information about participating in Dr. Genova’s social cognition research, please contact her at hgenova@kesslerfoundation.org.
INDIVIDUALS WITH TBI AND CAREGIVERS NEEDED!

The Model Systems Knowledge Translation Center (MSKTC) is recruiting individuals with TBI and their caregivers to provide feedback on new consumer fact sheets on a wide range of topics such as concussion, behavior problems, and sleep apnea. Eligible participants must be at least 18 years old. Phone interviews will last approximately 60 minutes. Participants will receive $25 for their time. If interested in participating, please contact the MSKTC at 202-403-5600 or msktc@air.org.

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