HAPPY NEW YEAR!!!

You are not alone in the tradition of setting that yearly New Year’s Resolution - Lose weight, eat healthier, exercise more, stop smoking, stop drinking, etc. If you are still on the path to meet your resolution, CONGRATULATIONS! New research shows it takes an average of 66 days to develop a habit. With that as a mindset, you are almost half-way to making a new habit for yourself. Keep working toward the New Year Resolution you have set.

If you’re reading this and your New Year’s Resolution has already met its failure, don’t give up so quickly. Research actually shows you are not alone in this arena. Averages from review of the research shows New Year’s Resolutions success rates range from as high as 20% to as low as 8%. The key is you have recognized ‘it’ (the New Year’s Resolution) as a need to change some part of your lifestyle or well-being for the betterment of you.

The reality is setting small, attainable goals throughout the year versus one REALLY big goal (such as a New Year’s Resolution) can generally lead you to a more attainable success rate.

Develop a plan of action that is very specific with focused steps. Example, I’m going to exercise more this year. This is a very broad statement or goal to set.
Instead, be very specific. Set focused steps, such as, I am going to exercise for 15 minutes every Tuesday and Thursday at 5:00 p.m. When you are ready (generally after 3-4 weeks), add another day to your plan of action. Now your plan of action becomes I am going to exercise for 15 minutes every Tuesday, Thursday, and Saturday at 5:00 p.m. After a few weeks of the added day, add 15 more minutes so you will have three 30-minute exercise sessions each week.

Most of all, develop a support system that will help you attain the goal you set for yourself. If you slip from the goal you set, talk about it and get back on track. Remember the old saying, when you fall down, get right back up. We are human. Expecting not to fall at some point is not possible. Humans are designed to make our lives our own. Hence, OWN ‘IT’ and shoot for the moon!

Make Sure You Are Setting S.M.A.R.T. Goals

Specific – Goals are well defined and focused
WHO is involved; WHAT do I want to accomplish; WHERE will it be done; WHEN will I be finished; WHY am I doing this?

Measurable – Have outcomes that can be measured or counted
How much; how many; how will I know when my goal is accomplished?

Attainable – Set a realistic and achievable goal
Make sure the goal is not out of reach; is it a reasonable goal?

Relevant – The goal makes sense when you consider all factors
Is each goal consistent with other goals you have established and fits with your immediate and long term plans; is it worthwhile?

Timely – Set a time frame that is neither too short nor long
When will this be accomplished? Set a time limit in order to establish a sense of urgency and prompt good time management.

Reference: https://www.jbcharleston.jb.mil/News/Art/igphoto/2002088561/
Shoulder Pain & SCI

Shoulder pain is a very common problem after a spinal cord injury and can have many contributing factors. Leg weakness requires increased shoulder activity with excessive stress on the arms during activities such as wheelchair propulsion, weight-bearing during transfers, and activities of daily living (ADLs), which can cause shoulder arthritis and rotator cuff tears. Other contributing factors are injuries from falls or minor trauma, degenerative joint changes associated with aging, and obesity with weight gain putting extra stress on the shoulder. In those with paraplegia, there is a tightening of shoulder muscles in the front and weakening and over stretching of shoulder stabilizing muscles and ligaments in the back due to manual wheelchair pushing mechanics. Even with good shoulder sensation and strength, shoulder pain can be exacerbated by frequent overhead reaching activities from a seated position which puts increased stress on the rotator cuff.

In those with tetraplegia, there is chronic shoulder joint looseness due to arm and shoulder girdle muscle weakness. Spasticity in the arms can cause abnormal shoulder forces, and joint contractures can cause abnormal shoulder and arm movements, putting extra stress on the shoulders. Then to make matters worse, in those with a high cervical spinal cord injury with tetraplegia there are sensory changes in the C4 dermatome, which is located in the shoulder area, which can result in neuropathic pain in the shoulders.

Protection of your shoulders after a spinal cord injury is difficult and fraught with challenges. The necessity of arm use for mobility, transfers, and self-care mandates that you use your shoulders. However, being smart about how, when, and how often you do these activities is important. Taking advantage of help from other people, using the available technology and working smarter at the wheelchair level is important. You can do this by lowering your workspace or using a seat elevator on your power wheelchair to minimize reaching overhead. Reaching overhead causes shoulder impingement of the rotator cuff tendons and over time can result in a rotator cuff tear. Avoid or minimize transfers which require you to reach overhead to get out of bed or into your vehicle. Wheelchair pushing mechanics can be improved with better technique and power assist, and changing to a power wheelchair as you age can be a smart protective measure. Biomechanical studies have demonstrated that higher forces on the push rim of the wheelchair are associated with progression of abnormal MRI findings of the shoulder over time.
One of the best things you can do on a routine basis is daily strengthening and stretching exercises of the shoulder girdle muscles, particularly the rotator cuff muscles as recommended for persons with SCI by the Clinical Practice Guidelines: Preservation of Upper Limb Function following Spinal Cord Injury.\(^i\) Several research studies have documented that a strengthening and stretching program can decrease shoulder pain in persons with chronic SCI. One such study by Mulroy et al.\(^ii\) found a significant decrease in shoulder pain after 12 weeks of a home-exercise program (HEP) with pain relief continuing at least 4-weeks after intervention. Repetitive and frequent steroid injections into your shoulder can cause weakening of the shoulder ligaments and are not recommended. Steroid injections are okay once or twice to get your pain under control so you can get back into an exercise program or to allow you to get your pain under control while you transition to power assist mobility or change your living environment, but frequent steroid injections can lead to rotator cuff pathology and eventually a tear. Other options to consider are prolotherapy or platelet rich plasma (PRP) shoulder injections, which can actually increase blood supply and healing to the area by increasing the healing process.

Shoulder surgery for repair of a rotator cuff tear or to replace the shoulder can be considered if necessary, but the post-op limitations of weight bearing and motion will mean you will need help with all your transfers, need assistance or power for wheelchair mobility, and will have to deal with the loss of one arm for 6-12 weeks depending on the surgery.

The bottom line is to be smart, proactive, and protect your shoulders.

\(^i\) https://pva-cdnendpoint.azureedge.net/prod/libraries/media/pva/library/publications/cpg_upperlimb.pdf


Our sincere condolences to the friends and family of...

Kenneth W. Balch 02/04/19
James J. Rofkahr 03/15/19
George Elliott 05/01/19
Ronald G. Rogers 06/01/19
Esther J. Wegener 06/08/19
Wendell M. Rainey 06/09/19
Ronald Haight 06/10/19
Michael T. Roberson 06/19/19
Bob R. Caldwell 07/05/19
Trevia L. Partin 07/21/19
Jean Ward 08/13/19
Stephen M. Shepherd 08/16/19
Harold “Buddy” Ruteledge 08/17/19
Richard D. Hudon 08/19/19
Dennis W. Brown 08/31/19
Dudley W. Arnold 09/04/19
Emma J. Wooldridge 09/16/19
Patricia C. Reed 09/16/19
William R. Young 09/21/19
Janice Young 09/24/19
George K. Teichmer 10/15/19
Raymond C. Force 10/22/19
Leonard A. Boyle 10/31/19
Carol L. Culver 11/15/19
Santos Cruz 11/16/19
Carmilina C. Inserra 11/19/19
Brian T. Bartlett 11/23/19
Dennis W. Reed 12/14/19
ASCC 2020 Conference - Save the Date!

The Arkansas Spinal Cord Commission is pleased to announce that it will hold its biennial spinal cord injury/disability conference on Thursday, October 15, 2020. The conference will be held at the Benton Event Center located at 17322 I-30, Benton, AR 72019. More information will follow in our next quarterly newsletter. In addition, you can always access the latest available information on our website as well as our Facebook Page.

Spina Bifida Tax Credit

We want to remind parents of children with Spina Bifida that they may qualify for a $500 tax credit. When you complete your state tax return, be sure to include Form AR1000RC5: CERTIFICATE FOR INDIVIDUALS WITH DEVELOPMENTAL DISABILITIES.

You can find the form on the AR Department of Finance & Administration Income Tax Forms page under the title “AR1000RC5 Certificate for Individuals With Developmental Disabilities.”

DFA Tax Forms: Click here or type https://tinyurl.com/ar-tax-forms in your web browser.

If you have questions, contact:
AR Department of Finance and Administration, Individual Income Tax Section, 501-682-1100

New Staff at ASCC

Please join us in welcoming Marneka Creggett!

Marneka will be the Case Manager for residents in the following counties: Arkansas, Cleveland, Dallas, Desha, Grant, Jefferson, and Lincoln

Background: I graduated with my high school diploma from Altheimer High School. I then received an associate degree from Southeast Arkansas College in Pine Bluff, AR. After receiving my associate degree, I furthered my education and earned a bachelor's degree in Psychology with a minor in Criminal Justice in May 2005. In February 2006, I began to work with The Division of Children and Family Services (DCFS) with the Department of Human Services (DHS). While I was employed with
I completed my master's degree in Counseling with a focus on Rehabilitation Counseling in May 2011. I continued employment at DCFS until August 2011. After that time, I went back to open up a family restaurant (Kibbs BBQ), as I've helped out since the age of 16. As of today, I still assist with manager duties at the restaurant. Starting August 2015, I began employment with DHS as a Program Eligibility Specialist (PES), processing Medicaid applications while working with the public. On December 13, 2019, I began my career with the Arkansas Spinal Cord Commission where I am happy to serve clients with spinal cord disabilities.

**What led you to this field of work?** I decided to apply for this position because I wanted to work in my field of "Rehab Counseling" and assist clients with unique disabilities. I wanted to make a difference in peoples' lives by bringing joy and making sure they are comfortable in the process. Public service is my calling.

**What are your interests and/or hobbies outside of work?** I enjoy playing softball, cooking - I have a small endeavor that I am working on called DIPS (dipped chocolates), making my kids smile, attending my son's basketball games, and just being there for my family as a whole.

**Do you have any favorite books/movies/plays?** My life has always been busy from childhood to adulthood. I love to read and watch movies and plays that make me laugh and relax from time to time.

**What is something you still have left to check off your bucket list?** Something I would love to challenge myself with is achieving a Certified Rehabilitation Counselor (CRC) license.

**Anything else you wish the reader to know about you?** I have two handsome boys, Cadarius and Kingsley, and a fiancé, Del.

Please join us in welcoming Dani Glenn!
Dani will be the Case Manager for residents in Washington County.

**Background:** I went to the University of Arkansas to study Speech therapy in my undergraduate career and stayed to complete my master's degree in Rehabilitation Counseling. I am currently working on my Doctorate in Occupational Therapy.

**What led you to this field of work?** I have always loved working with individuals, of all kinds, to achieve their greatest abilities and access resources that otherwise may have been unknown to them. Rehabilitation Counseling has been the greatest outlet to working in a field I am passionate about, and I feel lucky to be a part of this career.
What is your experience as it relates to this position? I have worked both for the University of Arkansas in a grant called Arkansas Promise, which worked directly to help youth with special needs transition into life after high school, and a non-profit called HARK at the Center for Collaborative Care. At HARK, I was first tasked with bringing over my PROMISE families to their platform so they could help them access resources in their community after the grant closed, and then went on to work both with clients in Fayetteville and as a Community Coordinator for the Benton County Juvenile Court and Zero to Three Safe Babies. All of these positions have helped me prepare for working with the Spinal Cord Commission by helping acquaint me with individuals and resources in Washington County, as well as practice skills of organization, honest communication, and perseverance.

Where did you grow up? I grew up in Rowlett, Texas right outside of Dallas. It is located in between Plano, Garland, and Rockwall and was the perfect “small” town to be a teenager in. We were close enough to the big city to learn how to drive intentionally, and access fun events, but far enough away to still enjoy traditional Friday night lights. I graduated with a class of over 600 and had many close friends that I am lucky to still be in touch with today. It is not the town I have chosen to call home any longer, but it treated me well as I grew!

Favorite places visited? Colorado & Boston are my top two favorite places in the US. Belize, specifically Dangriga, is my favorite outside of the country. My fiancé & I love to travel in our free time!

What are your interests and/or hobbies outside of work? I am newly engaged, a new home owner, a student, and have two dogs and a cat - so my days are consistently filled with hobbies that I love!

Do you have any pets/animals? I have two dogs (Buddy and Louie) and one cat, Wiz.

What is something you still have left to check off your bucket list? I have always wanted to see a Quokka in real life! If you haven’t ever googled them – do so immediately. It will make your whole day!

Anything else you wish the reader to know about you? I am incredibly happy to be a part of this team and look forward to serving Washington County to the best of my abilities!
Telecommunications Access Program (TAP)

Could you use an iOS, Android, or other assistive device to better communicate with friends, family, or colleagues? If so, be sure to check out the TAP program! They have recently added Android devices to the list of available equipment. Check the eligibility requirements and apply at: https://arktap.org/eligibility/

The Telecommunications Access Program (TAP) provides free telecommunication equipment to eligible Arkansans who are deaf, hard of hearing, deafblind, or who have a speech, visual, mobility, or intellectual impairment. TAP removes the barriers to telecommunication access through the provision of accessible communication technology.