

FILL THE CRACKS

SPECIAL UPDATE 2025

YES, IT'S TRUE! LEARN HOW I AGREED TO A TV DOCUSERIES THAT IS NOW BEING NOMINATED FOR AWARDS!

To spread awareness, Sally fights her stage fright, which leads to big opportunities and bigger gains In the Fill the Cracks Movement!

READ ABOUT THE COST TO CHANGE THE ODDS

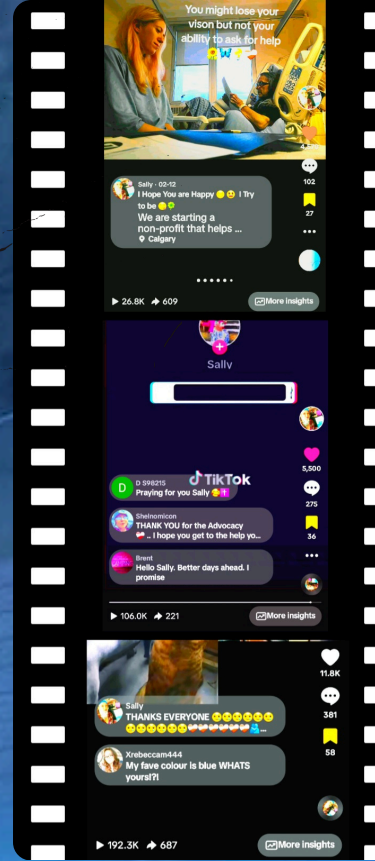
A mix of stories from citizens: meet Karen - supporter, advocate, & more.

RIDING THE RAILS FOR CHANGE

A BIG ask means a train ride from the Mountains of Jasper to Niagara Falls, New York & Miami !

BIG NEWS

INSIDE!



@HELPCARENETWORK.CA



Photo taken at radium hotsprings,

staff there go the extra mile where they can, the springs have provided healing for ages but the staff there today cheer on their local families where they can including helping Rebecca start physical therapy while on waitlists, like fish out of water Rebecca and thier partner had no clue where to start and no experience living with wheelchairs and paralysis. Staff just stepped in to help and gave weary hearts insight to the success help creates.

BEFORE YOU READ



Welcome to a newsletter crafted with heart and purpose by a dedicated community – *patients, caregivers, advocates, and volunteers united effort immediate support to 50 sick and suffering people now, then paving the way for thousands more with our Fill the Cracks Plan and Committee.*

What you're about to read is ment to inspire and enjoy but it is more than an update; you will see in practice it's a call to join a transformative movement.

We are hoping the mass ol fashion word-of-mouth meets mass social sharings of this newsletter will help flood out and get people contacting us to help these Patients!

See page 5 & 6 for what we need and a new force in power in people.



Watch for Legacy Makers episode release about advocacy and hard work

We designed this newsletter to go beyond storytelling. It's meant to be shared – spreading hope, person to person, friend to friend, like a phone tree that replaces fear with promise.

Every time you share, you create a new path for us to connect with those who can help:

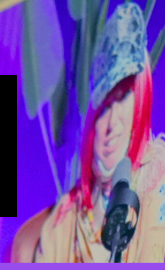
a doctor, an advocate, a donor, an organization, or simply someone willing to carry the message forward. Please enjoy these stories and help us open doors by sharing them far and wide.

Everyone knows someone with brain- and spine- related challenges. Paths for help aren't all on Google, we are small but with your part we become large.

Together we can fill the cracks no one should ever fall into

MOVING MOUNTAINS

WHAT TO KNOW ABOUT A MOVEMENT ON SOCIAL MEDIA THAT STARTED A NON-PROFIT, NETWORK, & TECH THAT WILL CHANGE OUR FUTURE.



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Help-Care for Healthcare!

Across social media and peer-to-peer networks, we've found thousands of patients living in the cracks of Canada's healthcare system – people with brain –and spine– related medical conditions who fall between systems, referrals, and access points.

Many of these patients live with spinal fluid leaks, disc compression and instability, or conditions such as EDS, CCI, AAI, Lyme Disease, Eagle Syndrome, POTS, MCAS, Stiff Person Syndrome and other degenerative conditions that have treatments to help, but are not accessible or to get diagnosed to gain access to Canadian treatment takes travel to the USA for testing, equipment Canada does not have, especially for spinal fluid leaks and cervical instability.

For most, getting properly diagnosed and treated means travelling to the United States, spending \$50,000 to over \$100,000 just to access the testing and specialists needed to find and confirm their condition before they can even return to Canada for treatment.

This isn't about wait lists – it's about access. The right testing equipment, referral pathways, and inter-provincial care systems simply aren't set up to meet these patients needs – and that's where we come in.

This fall we're launching a fundraiser to support these patients directly – helping cover the costs of diagnosis, travel, and treatment planning. Each year, we'll expand our mission to fill the cracks for more underserved and unheard communities.

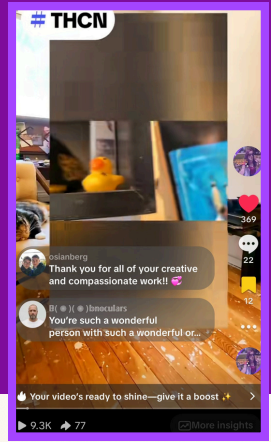
Our first beta project focuses on CSF leak and complex spine and brain patients. With the Peace of Mind Clinic we'll help 50 patients receive diagnoses and treatment plans for their complex conditions, while facilitating access to care both in Canada and abroad when necessary.

To ensure long-term impact, we're also building a committee of nonprofits, medical experts, and advocates to review the Peace of Mind Clinic's work and assess what supports exist, where gaps remain, and where permanent solutions can be developed for this community.

And as part of our beta, we'll also provide direct support and funding to existing nonprofits and organizations helping these patients – strengthening the network of care from the inside out.

The Help-Care Network Beta is where we start filling the cracks – creating real pathways to diagnosis, treatment, and change.

Riding the Rails for Change, Saying Yes to TV



Duck release video on TikTok @thesallyproject

FACING STAGE FRIGHT & SAYING YES TO A DOCUSERIES THAT IS GROWING IN POPULARITY AND GAINING NOMINATIONS FOR AWARDS IN FILM FESTIVALS, SHARING LIGHT TO THE WORLD SOON ON MAJOR STREAMING PLATFORMS.

TheSallyProject's determination caught the attention of Legacy Makers, a docuseries highlighting visionary leaders. This fall, Help-Care Network will be featured in an episode about resilience, advocacy, and building something that lasts. The founder, however, was hesitant at first. Cameras made her nervous, and the idea of travelling thousands of miles with her disability seemed impossible, but the opportunity was too important to pass up.

"This isn't my story alone," she says firmly. "It's the story of the people who helped me – and of the patients we're standing up for now."

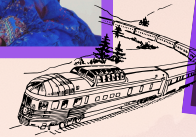
This led to Rebecca travelling on a train across Canada and the USA to the studio in Miami. She tracked her travel to share as we wait for the docuseries to air.

"Travelling was not easy, but I hope I can share an honest view of looking for joy in pain and the view of someone constantly needing relief and help. I found many people shared their time and stories with me as I travelled for my purpose. It gave me even more drive to be a strong voice for others needing help in their health battles.

After filming wrapped, the show's early support and success – even before airing – proved invaluable in helping the Help-Care Network reach its goals. This momentum has led Rebecca into new paths and meaningful conversations.



Rebecca in Legacy Makers Studio In Miami



This second episode will follow as we continue the beta, if and when we reach our \$200K goal and start travel for our first patients for diagnosis treatment plans, and other opportunities I can't speak to at this time. It will also shed light on other patients, nonprofits, and organizations that have been helping our community by sharing and uplifting them on this platform offered in this docuseries.

In contract I have rights to all the content, and the support they have given me so far has made a big impact on our current position with the Fill the Cracks plan.

Wish me luck as I work hard and please keep watch when we get to go public!

@everyone – thank you for the support; it has kept me going while stressed, sick, and tired!

This is Sally's Power necklace each animal gave Note to its unique Power to respect. She wore this To fight pain During travel



Ducks, Ducks, Ducks

Even during those early months of intense groundwork, there were moments filled with joy and camaraderie. thoughtfully prepared Care packages were sent out to volunteers, and livestream followers it became a source of laughter and connection – But most memorable of all were the ducks.

"My friend handed me a bag of rubber ducks and said, 'Do something with these!'"

Each duck carried a handwritten note of encouragement on its underside, meant to be exchanged for a Livestreamsticket – Yet, almost no one could part with them. "People kept them instead," she says, her smile widening. "Now, those ducks sit proudly on dashboards and shelves, like little trophies – poignant reminders that they are part of something much greater than themselves."



Shared within a private group for the organization, Rebecca announced:

"I'm excited to let you know that, despite the challenges of filming, I have agreed to participate in a second episode of the docuseries, provided that the focus remains on showcasing the CSF & Complex Brain & Spine Community.

The motivation behind my decision to join this docuseries stems from the public relations and additional support that Legacy Makers offers me as an entrepreneur – support that other companies have quoted me \$80,000 to provide.

While I can't disclose many specifics, I can share that the docuseries is being considered for awards at film festivals, and we were selected based on the hard work and achievements we've made since stepping back from the public eye. We have been diligently advancing our fundraising and financing efforts for websites, trademarks, tax law, and contractor communications. Our next phase in the beta process will involve our public launch, during which we will begin sharing and sponsoring content."

PATHS AND OPPORTUNITIES TO JOIN

OPPORTUNITIES FOR PEOPLE AND PATIENTS

We're now opening up our Fill-the-Cracks Patient Group to anyone with serious brain or complex spine conditions who need help accessing proper healthcare. Find us on Facebook to join. We're expecting more openings soon for patients to travel, get diagnosed, and finally move toward answers. We're also looking for both patients and the people who support them to join us in Miami for in-studio filming for the next episode of our docuseries.

If you're interested in being part of the episode, you can find our group on Facebook or email us at media@helpcarenetwork.ca.

JOIN THE FUTURE FILL THE CRACKS COMMITTEE

We are now building our large Fill the Cracks Committee, and we're inviting anyone who feels called to make a difference—professionals, nonprofits, community organizations, caregivers, patients, advocates, supporters, and anyone with lived experience or expertise. Our first review will look at three urgent questions: What does access to prescriptions really look like across Canada? Is disability truly livable today? And where are the missing pathways for complex brain and spine conditions—and how can we strengthen the systems that already exist?

If you'd like to contribute your voice, your experience, or your professional insight, please email us at volunteer@helpcarenetwork.ca. Together, we can make meaningful change.

PLEASE SHARE THE WORD! SEND US PATHS FOR PATIENTS

We've spent hundreds of hours preparing the Fill-the-Cracks initiative—researching every path we can find online, in patient groups, and through Google. But we know there are diagnosis and treatment options that aren't visible online, and we need your help to reach them. Almost all of us know someone who has needed spine surgery, faced a rare condition, or works somewhere in healthcare.

Please share this newsletter with anyone who might have ideas, connections, or insight. Help us flood every path so these patients finally get the answers they deserve. If you have leads, want to support our group, or wish to be notified when we open our next call for proposals, email sallyproject@helpcarenetwork.ca.

I AM READY- TEACH ME

Before I finally received a proper diagnosis, I often came across doctors and specialists who worried I was imagining my symptoms or "reading them online." Each time they hinted at that, it added a new layer of fear for me—not just fear of what my body was doing, but fear that speaking up would make me sound confused or irrational. I was terrified that if I described everything honestly, they might think I was mixing up symptoms because I had read too much. Meanwhile, I wasn't researching rare conditions at all; I was fighting to understand the very real things my body was doing as I lost my vision, experienced mini-strokes, and landed repeatedly in the ER. I was simply trying to survive what was actually happening.

Now, even with vision loss and the realities of surviving on disability, I'm ready to step into something bigger. This year, I'm challenging myself to learn recovery tools, strategies, and all the daily-living technology that could support a healthier version of me.

I'm excited to collaborate. Big ideas, small ideas, research, tools, tech, resources, lived experience—all of it matters.

If you want to explore something together, share knowledge, open doors, or help build solutions for patients like me, please reach out at media@helpcarenetwork.ca. Let's learn, build, and make change—side by side.

Join my Path to Learn

Contact me for help find walkers, nutrition, & fitness.



**CASTING CALL!
NEXT EPISODE!
DETAILS PAGE 6**



WORDS ARE POWERFUL

C P O A C L M M Z I X Z E B J J E N D U I
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AAI	CAREGIVERS	CASTING
COMMUNITY	CRACKS	CSF
EAGLES	EDS	HELPCARE
LEGACY	MCAS	MOUNTAINS
PALLIATIVE	PHONETREE	RESILIENCE
SALLY		



A SYMBOLIC CAMPAIGN TO FILL THE CRACKS

DONATE



CASTING CALL

Thank you for taking a moment to read this. What you're about to see is more than a fundraiser — it's the first step in a national movement to fill the cracks no one should ever fall through.

When I was told like thousands in our online groups I would have to fundraise \$350,000 just for myself to save my life knowing then this whole group would have to raise a total of \$20,000,000-\$70,000,000, Fill the Cracks was born out of need to end personal hardships and force movement if we get the power of the people to make a path for patients without this personal hardship.

Over the past year, our volunteers, patients, caregivers, and advisors have worked tirelessly to build the foundation of the Help-Care Network™ and our first major initiative, Fill the Cracks. We have created a plan to directly support 50 patients who urgently need diagnosis and treatment, while laying the groundwork to help thousands more in the future.

Across Canada, patients with complex spine, brain, and neurological conditions are falling through the cracks of the healthcare system. They are forced to travel abroad at immense personal cost just to access the testing and specialists they need. Our goal is to fundraise \$2.5 million to cover travel for all 50 patients, create the Fill the Cracks Review Committee, and ensure we can sustain this initiative.

Be a Star, Advocate, share your story, nonprofit, joint efforts, time to share stories of how we worked and fought to be where we are today and gain a platform to share your voice or mission in Our Next Docuseries Episode!

We're seeking nonprofits, advocates, and individuals with compelling stories for Episode w of our TV docuseries, filmed where you are and be considered to join in studio in vibrant Miami.

We're looking for changemakers ready to share their impactful work and passion. Participants gain not just exposure, but also exclusive celebrity coaching, PR strategies, and social media support that is helping our Fill-the-Cracks movement grow with out pressure release of the first episode to air!

If your organization is driving change and inspiring others, we want to hear from you — your story could transform lives!

Contact us at media@helpcarenetwork.ca if you are interested!

WE NEED YOUR HELP TO START RIGHT NOW!

♥ The Power of a spectacle of power in People, and plan to show a true (ac)count of struggle.

A single person adds to what will become a flood of eyes to a GoFundMe page to see a wall of

5,5,5,7,7,5,7,5,7,7,7,543,7,7,7,7,5,7,5,5,7,7,219,7,7,7,7,7,5,5,740,7,7,5,92,7,7,7

For two years, we never asked struggling patients for a cent, our values are firm on not taking from the suffering despite the asks to donate.

Now, we invite everyone — patients, families, supporters — to give in a way that symbolizes their reality and gives them and you indexing a valuable part of our movement. We are asking now to:

- \$5 if you Suffer from Brain or complex Spine disability
- \$7 for those Not Surviving \$\$\$ as a Family unit or on Broke on Disability — the cost of a jug of milk
- For all to share loud who can!

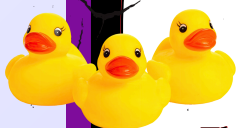
The cost of a prescription that once shocked or scared you

These symbolic amounts will create a public map of the crisis — a list of donations that show just how many people are suffering. Every small donation is evidence. Every share is a new path to help.

✦ Our Immediate Goal: \$200,000 to Begin Patient Travel and Filming

Begin traveling non-critical patients for diagnosis and treatment

Your support in reaching this \$200,000 milestone will let us start this work immediately — turning plans into action and hope into reality.



CLICK HERE!

[HTTPS://GOFUND.ME/94066D2FD](https://gofund.me/94066d2fd)

THROUGH THE EYES OF ANOTHER - We Witness

NO ONE CAN PREPARE FOR WHAT YOU WITNESS

I never meant to become a witness. But when I was going blind, when no ER doctor could help me and no nonprofit had a path forward, I found others like me — people surviving the impossible. And in my sickest moments, I watched them with awe, wondering how they kept going.

As I grew to know them, I learned the truth: they used their last scraps of energy not for themselves, but for each other. A single hour of strength spent on advocacy.

A final spoon of energy spent lifting someone else out of the dark. I became a witness to people who should have been resting, yet were fighting for strangers.

A witness to someone approved for MAID who — with help — found treatment, traveled south, and now lives a full, bright life.

A witness to those who never made it, not because they couldn't be helped, but because they couldn't gather "enough evidence" to fight a system that prefers paperwork over pain. I've seen patients spend over \$100,000 to fix their bodies, then come home and serve others in detox centers because they know what happens when the disabled fall into poverty.

I've seen sick people start nonprofits from their beds, companies from their hospital rooms, support groups from the living room couch — all because they refuse to let anyone else slip through the cracks they nearly died in.

I've seen doctors penalized for caring too loudly, academics begging for funding for conditions no one bothered to study, and provincial committees dismissing world-renowned neurosurgeons because no official pathway exists.

ABOUT THIS SECTION & STORIES

This section and the following pages in A Witness: is a thank-you to you know who — the ones who have walked beside me through the hardest moments. You'll soon read stories from people who have held me up in my darkest hours, who volunteer for the nonprofits supporting this community, and who make an enormous difference while carrying battles of their own. Their courage is the heartbeat of this movement, and I'm honored to share their voices here, on the docuseries and our platforms. Thank you!

And yet, I have also seen unbelievable hope:

doctors calling universities on their lunch breaks, specialists taking on more patients than they're paid for, nurses giving hugs instead of protocol, strangers holding doors for someone fighting invisible battles.

This is what I've witnessed. This is what has shaped me. This is why the Fill the Cracks Movement exists.

Because behind every patient is a chorus of unseen helpers — exhausted, heartbroken, determined, and brave. And behind them, a community that refuses to let these stories keep repeating. If you are reading this, you are now a witness too.

And witnesses change things — quietly, powerfully, and together. Thank you for walking with us. Thank you for sharing.

Thank you for helping us build the movement that will carry thousands out of the cracks.

"Thank you for helping us build the movement that will carry thousands out of the cracks"



Now I see: needing help doesn't make you less worth, it makes you human."

IS MY FAMILY OK?

When I first came to disability, I was ashamed of asking for help.

Now I see: needing help doesn't make you less worthy. It makes you human.

In 2025, the maximum monthly benefit under CPP Disability is \$1,673.24 — if you happen to have contributed the maximum for years. The average provincial benefits are less than this and the average cost to raise a child is \$1400 a month. What are we forcing people to lean on?

How do the sick get out of illness to go protest at parliament buildings?

That's the maximum. For many, the reality is much less. Still not enough to cover rent, medications, adaptations, travel for care.

Leaving severely disabled people to go with nutrition supplements or aids to daily living.

A friend of mine was drawing herself along the floor for 5 years with the worst form of MS until they won a wheelchair through Provincial disability.

The Reality: Disability Isn't Security — It's Survival—the Fill the Cracks Committee will be reviewing help for patients and its first year research is started for a review of disability and livability and access to drug coverage, another challenge among 30% of Canadians and many disabled and of old age find cracks to access prescriptions.

You may lose friends, you may lose family and supports because they're stretched, because illness keeps repeating. You may lose your job, lose savings, lose hope of the life you once planned.

A Message for Anyone Struggling
If I could leave one message from my journey it is this:

You are not a burden.
You are not alone.

The smallest act of help — a text, a door held open, a bag carried — can save someone's whole day, or their whole life.

To the caregivers, to the family, to the friends, to the partners: you are the real heroes.

To the nonprofits, the volunteers, the advocates: you fill the cracks when no one else will.

Together, we carry lives. Together, we fill the cracks. Together, we move mountains.

ONE SLIP TO A LONG ROAD OF RECOVERY, HEROES IN ALL PLACES

Help-Care Heroes: The quiet army behind every sick person

Written by our Patients, Contractors & Volunteers

Looking after your own life is hard enough. Even when we're healthy we lean on friends, family, doctors, counsellors – we trade favours, share burdens. There's always something: the dishes piled up, the bills unopened, the unread emails we know we must answer tomorrow.

Life takes work.

But what happens when you have to look after yourself AND someone else?

What if you're sick yourself AND you're also helping someone who's sick?

What if you don't have family nearby, or the people around you are already carrying heavy loads – financially, emotionally, physically?

In a world where phones bring answers instantly, contrast that with someone who's too exhausted to lift their arm, who spends hours just trying to recover enough strength to sit up again. This isn't a tough week; this is their every day, for the rest of their life.



Karen's Story

A Wrong Slip & Slide Costs A Family More Than \$100,000 And It's Not Over Yet...

Spinal CSF leaks remain one of the most under-recognized and under-treated neurological conditions in Canada. Patients often spend years seeking answers. With little coordinated care and even less awareness among physicians. What's changing that? Community. Karen's story is just one example of what's possible when patients lead the way. Karen's concussion came from a Slip 'N Slide accident while playing with her son. It was her sixth concussion, and this time the story didn't end after the visit to the doctor. Two months later, she suddenly couldn't walk, her head throbbed constantly, and everyday sounds and motion overwhelmed her senses.

Once an active mom and a full-time strategist for The City of Calgary, she was suddenly stuck in bed, unable to be upright, and without answers or a way forward. What followed wasn't just a string of misdiagnoses, it was a years-long fight to be taken seriously. Where the system couldn't help her, other patients did.

The accident happened in 2013. At first, doctors treated it like it was "just a headache" with dizziness. Then came a diagnosis of Lyme disease, which led to years of treatment with only marginal improvement. It wasn't until she came across references to orthostatic headaches (what she had been calling "positional head pressure") that some of the pieces began to fall into place.

Picture of Karen in a satisfied smile to her friends sharing her adventure getting into the river with the help of her wheelchair while out with her family on a good day.

Through her own research and connections in patient communities, she started to suspect something deeper was wrong. A neurosurgeon in New York, Dr. Paolo Bolognese, was the first to suggest a spinal CSF leak. That diagnosis opened the door. Karen reached out directly to Dr. Farnaz Amoozegar in Calgary (one of the few Canadian neurologists familiar with CSF leaks) and to her surprise, Dr. Amoozegar responded. Within weeks, Karen had a clinical diagnosis and access to imaging and treatment, but the search didn't end there. When blood patches in Calgary failed, she flew to Los Angeles, paying over \$30,000 out-of-pocket for advanced scans. Suspicious leak sites were identified, but follow-up treatments back home didn't bring lasting relief.

Eleven years later, Karen finally received the golden ticket – a diagnosis of spinal CSF leak by a new Interventional Neuroradiologist in Toronto, whom she learned about through one patient who highlighted her success in a TV news spot. Karen's two spinal CSF leaks were swiftly repaired in Toronto using a technique only available in a few cities in Canada. Now she's gone from having not enough CSF to having too much CSF and learning to cope with a new condition. What helped, and kept her going, was the network she found along the way. A Facebook message from another patient led her to the Canadian CSF Leak Facebook support group, where strangers swapped PubMed links, doctor names, and practical survival tips. People who had never met in person became lifelines. It was peer knowledge, attending conferences and reading articles in order to advocate for better care that got Karen where she needed to go. It wasn't just about information – it was about solidarity. Karen said it best: "Patients shouldn't have to read medical journals to get help, but we do – and we share what we find." The deeper issue, Karen says, is that most doctors aren't trained to recognize CSF leaks – many still believe they are rare and are entrenched in old myths that become barriers to care.

Keep reading Karen's Story on the next page...

KARENS MILES OF TRAVEL FOR ANSWERS



One on many Mount Signi in the USA that Karen, Sally & many Canadians travel for doctors or imaging
Not available or Not Accessable in Canada

While awareness is slowly improving, far too many physicians dismiss symptoms or misdiagnose patients, sending them down years-long detours. Even the imaging used to confirm leaks is prone to false negatives, which can shut down care entirely. CSF leaks don't always come from dramatic injuries. Karen points out that women develop leaks during childbirth – specifically after receiving an epidural. While acute post-dural puncture headaches are sometimes recognized and treated, leaks that persist or appear later often go undiagnosed. "There are many women who walked out of the hospital thinking they were fine," she says. "Then they get hit with a wave of symptoms months later – and nobody connects the dots." For these patients, the trail often goes cold before it even starts. The result is a system that often rewards certainty over persistence.



Thanks to patient advocacy, diagnostic capacity in Canada is improving. Calgary and Edmonton now have imaging specialists with leak experience, and Dr. Amoozegar's clinic is no longer the only one of its kind. Some physicians are starting to pay attention – including those who once dismissed these cases entirely.

Karen sees this shift as slow, but meaningful. She points to the role of individuals willing to challenge the status quo: the doctors who answer cold emails, the specialists who conduct new research, the patients who organize care resources and fundraising campaigns, the community that refuses to let each other fall through the cracks. She continues to navigate her own uncertain path – with consultations out of province and out of country, while grateful for the opportunities offered in Calgary – but she's no longer doing it alone. "Canada is in a better place right now," she says. "The community patient expertise is second to none. We're getting better, because we're doing it together." The solutions to this crisis won't come from one clinic or one specialist. They'll come from networks like this one – sharing knowledge, building trust, and refusing to give up on each other. That's what keeps people going. That's what will change the system.



Doctors may not see many leak cases, but that's partly because they're not looking — and patients who don't fit the textbook picture are often told it's all in their heads. In that vacuum, patients become the educators, advocates, and case managers for themselves and each other. As Karen puts it, "We're connecting the dots because no one else is." Still, there are signs of progress. Canada now has more experienced neurologists, more precise diagnostic imaging options and expertise, and more options for CSF leak repairs.

Further, national networks have been established and continue to grow through Spinal CSF Leak Canada and the Medical Advisory Team. Toronto has some of the top experts in this field. They host National Case Rounds and are developing a standard of care with practicing physicians. Plus, Spinal CSF Leak Canada hosts the big annual conference and other advocacy and education events. These organizations are fairly new, and they have developed a lot in a short time frame with little funding.



On her good days, when Karen can sit up, she posts pictures of her garden tracking the birds and buds.

DIARY LIFE OF A CHRONICALLY SICK / CITIZEN-SHARED STORIES



CITIZEN JOURNAL ENTRY 1

Written by Patients being Advocates

So, it happened again. It's a beautiful Saturday morning, the birds chirped joyfully outside my bedroom window, and other than that the house was silent.

The soft warmth of my blanket slides along my skin like silk. Finally, my pain has gone. I pulled the blankets up over my shoulder and reached forward. Blindly, I pulled the cat into my embrace, her deep purrs are heaven to my ears. Suddenly something bounced onto the bed behind me, another something crawls under the blanket right where the warmth of the cat can still be felt. Somehow my furry friend managed to sneak away.

I groaned like every morning when these creatures wake me. I tell them to go have cereal; they just giggle at me. I tell them to have bread. "But mom," says a small voice from behind me. "We had breakfast, and I was big and made lunch and now it's dark. I think we missed dinner, the clock says 11:39. My eyes flew open, the creature in my arms looks at me with a little smile. Pure love emanating from her tiny face. I glanced across the room for the clock: 11:39. What?

I jumped straight up not realizing I'm tangled in the sheets, the bedroom carpet comes flying at my face. Well, more accurately, my face greeted the carpet—and trust me, the carpet was not invited. The two creatures giggled even harder, one even reminded me that my pyjamas lie at the foot of my bed by announcing they can see my butt. Again, I had torn them off during the night. Even though they were baggy on me they still had felt restricting, causing everywhere to ache. An ache so intense that it awakens you in tears, panic, and fear. It is like thousands of little ants are crawling inside of you and biting anything they can find.



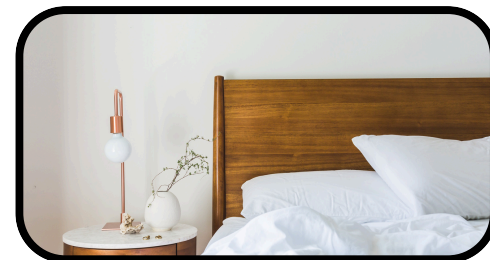
CITIZEN JOURNAL ENTRY 2

I'm flaring again.

This time I don't think it was the weather. I think it was all the people at the grocery store. Trying to find parking was a nightmare, even for handy cap. When I finally found a spot, parked and got out, there was this woman watching me. She looked at me with absolute disgust. That happens often. There seems to be a social mentality that handicap parking is for senior citizens.

Like usual, I ignored it. As I made it slowly through the aisles, I was so nauseous. I have gotten so used to my stomach contents coming back up that I don't think about vomiting. I just swallow what comes up to say hello, letting it burn its way back down. So much better than hanging over a toilet bowl for an entire day. Each step I took in the store shot pain up my legs. I thought for sure a couple times my legs were going to give out. They reminded me of my arm this morning.

I had woken before my alarm finding my arm completely limp. Try as I might it would not move. It was like it wasn't even there. Honestly, that should have been my sign that I was coming into a "flare." After flopping my arm around with my other hand, I could move and feel it again. Sitting up I realized my legs were in a similar state. My toes wouldn't even wiggle. I spent the next few minutes pile driving my thighs with my fists. Once I could move my toes, I realized the alarm was still beeping annoyingly. Frustrated, I stood up, a little wobbly. Suddenly a warm sensation rolled up from my chest into my head, the world tilted and began to spin. I quickly sat back down. With the dizzy birdies gone I carefully crawl-walked around my bed to shut my alarm off. Just as I'm rounding the last corner of the bed, it shuts itself off. I was mad. Taking a breath I crawl-walked around to my dresser. I turned my nightstand light on; a jolt of sharp pain stabbed through my eye like a dagger. It instantly started watering. I quickly shut off the lamp, still watering I closed it. Pain! I rub it. Pain! "Fine, be like that," I thought. After years of this bull, I can find all the clothes I need for the day just by feeling the fabric.



CITIZEN JOURNAL ENTRY 3

Today is a little better than the last five days. I've actually got a few hours of good sleep.

I still feel weak. I made it to the bathroom and the couch with minor pain. Hot bags and ice packs are what the doctor recommended for pain management. The ice packs feel nice on my arthritis, but my fingers go purple so fast, that I find myself running lukewarm water over them. Crying the whole time because it feels like someone has put your hand through the sewing machine.

Bringing them back to life hurts so much more than the pins and needles you get for sitting on your foot. I was given a heated blanket to help. It warms my legs beautifully.

I feel alive again, at least until I move. Which unfortunately I had to do when the mail arrived. Low and behold in the mailbox sat a brown government letter addressed to me. I took a deep breath in fear for the worst because it's always bad when the government sends you a brown letter. Well, sometimes. I mean sometimes it's a cheque and that's good, but I digress. I open the brown envelope, inside it has my claim number for CPP.

Oh no! Here I go again. It could be an audit. I read the page frantically. CPP has sent yet another letter saying the same thing they always say, that when I turn 65 and it becomes old age pension, I'm going to have very little income because I've been using it early. What am I supposed to do? I'm on it because I can no longer hold a job. So what are they trying to get me to do? I can't go back to work, and if I stay on CPP I am going to be a homeless senior citizen. This of course causes me so much stress, which turns into a "flare", which debilitates me. Keeps me on the couch or in my bed. Listening to all the stories my children tell me. Stories I should have been able to see with my own eyes.

I can see the happiness in their eyes, but I can also see the sadness.

A PERSONAL STORY OF THE SALLY PROJECT

A 6-YEAR BATTLE ENDS IN STARTING A NON-PROFIT ORGANIZATION



I THOUGHT I WAS OKAY

Written by Rebecca Klassen with help of her friends
When I go out it takes longer than it would for others because my smile, approachable attitude, and gratitude makes everyone want to stop and ask me, "Why are you in a neck collar?" Sometimes I joke to explain it away, but if they're really interested, I tell them the truth. I used to dread this because most people want to hear a happy ending, but I still have a mountain of a hurdle to jump.

My name is Rebecca. I was a successful cross-boarder business consultant and Executive Director before I was 30, and I never thought our health care would choose for me to die for lack of available treatment in Canada.

On March 31, 2018, I was in an accident. The ER team and doctor first thought it was a bad concussion, but it turned out I had a small spinal leak that had my doctors fighting for over a year to understand and treat. **Sadly, there are few protocols in Canada to get treatment - it got worse, and I was facing going blind a year after the accident.** The emergency room doctors would send me home after diagnosing me with a migraine, ignoring my doctors handwritten notes and calls. I had no choice but to seek private care. I fixed the leak, but it left me with a terminal issue with the structure of my neck. In the US, UK, Australia, and other countries it would be treated with surgery, but not in Canada. As the leak continued, I had drop attacks, headaches, and began losing my vision.

Once, after being unconscious for 45 minutes in the ER, they consulted my neurologist, who kept asking for a contrast MRI to test a suspected spinal fluid leak. I was told they couldn't treat me in the ER because that would be "skipping the line".

Though I privately recovered from my leak during 2020, I found out while in the USA undergoing intense cognitive therapy and brain mapping, the travel and activity meant **I had had Bow-Hunter's Strokes. They were a result of the permanent damage from the leak.** It had been going on so long that my ability to hold up my neck was gone and I am actively compressing my brain stem, arteries, and nerves that control breathing, circulation, and heart rate.

NOT OUT OF THE WOODS

They told me I needed urgent surgery. I told them I was strong and could wait to get back to Canada. They spoke to my doctors and helped me get all the tests my Canadian neurologist requested and I was on my way home to see about a surgery to stop my ongoing strokes.

It was then we found out that Canada did not have a diagnosis and treatment plan for my condition. This led me to another group of patients who need this surgery. Out of all these years, only a handful seemed to be approved for surgery, and there was a lot of work to get qualified to apply.

With the long road ahead and my determination to recover without surgery, I decided to move to the mountains and work hard on physical therapy. Five days after moving I had the biggest stroke that left me in palliative care and without the use of the right side of my body.

I was told over and over to give up. Every time we asked if I could have physical therapy to walk again they told me my situation is what it is, and my options were long-term palliative or hospice. Not physiotherapy to be able to walk or use my hand again. Not the surgery that two doctors in different provinces had recommended.

I don't have much family, but the ones I have and my friends were calling into the hospital to advocate and eventually I got approved for rehabilitation.

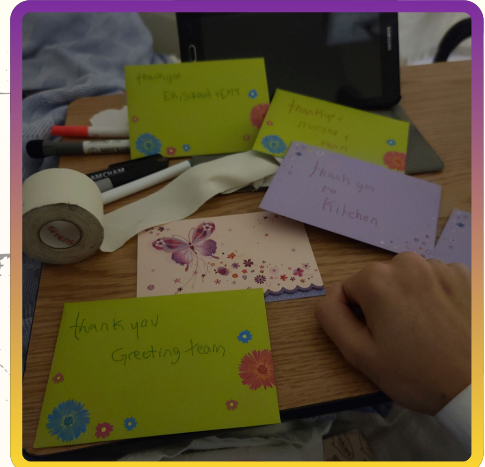
THIS SERIES OF EVENTS LEAD TO MY FIRST VIRAL TIKTOK THANK-YOU VIDEO. WHILE FINALLY FREE AFTER MONTHS OF CAPTIVITY IN HOSPITALS AS AN OUT-PATIENT. THERE WAS A QUIET STARBUCKS RIGHT ACROSS THE PARKING LOT OF MY ROOM. EVERY MORNING FOR TWO WEEKS I TRIED MY BEST TO PUSH MY WALKER CLOSER AND CLOSER TO MY REWARD. SOMETIMES FOR 11-MINUTES AT A TIME EACH DAY I GOT STRONGER AND FINALLY ONE DAY I MADE IT INTO THE WOODS. SOMETIMES PATRONS AND STAFF OF THE STRIP MALL AND HOTEL WATCHED AND OFFERED HELP. BUT I REFUSED. THIS WAS SOMETHING I NEEDED TO DO FOR ME. I REFUSED TO GIVE UP EACH DAY. WALKING TO GET MY OWN ORDER BECAME MY GOAL IF I WASN'T GOING TO LAY DOWN AND DIE. I COULD ONE DAY GET HEALTHY ENOUGH. WORK HARD ENOUGH. AND BE REWARDED WITH SURGERY IN THE USA. I WOULD WORK FOR THE DELICIOUS REWARD HERE.

The day I finally made it there the staff took a break and sat down with me. We recorded the first TikTok video, which went viral.

I kept on showing who I am to the world. I started with small things like anonymous thank-you notes or decorating the front doors with hearts and kudos to friends and helping non-profits so they'd have something cheerful to greet them at the start of their day.

For years friends and supporters watched me struggle, relearn to walk, travel back and forth at my own expense and with the support of others to get the diagnostic imaging and other evaluations that were necessary to complete the application to still have no hope.

"I must wear this brace to live, I feel like the fable of the greek women who must wear lace around their necks or their head would fall off!"



Thank-you letters written by Rebecca to the above and beyond healthcare in Cranbrook Palliative Care

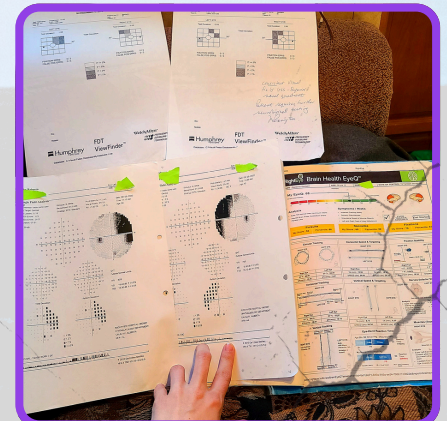
I ask myself sometimes who I would be if this accident had never happened. It is a deep and heavy question, but I am grateful for this experience. I've asked my friends if they would help, not just for me, but for all the people who have also fallen through the cracks - and they are coming through.

I grew up strong. I had to always work as a kid - on the farm, in the factory, the market, the gruelling all-nighters of heavy labour. When on my own working for myself I promised myself I would live my life to the fullest, take every opportunity I could, and have no regrets.

Some might consider my story a sad one, but I feel my life has been leading me here to start this non-profit and help others as much as I can. I have faith that the end of my story will be a positive and successful one.

I am grateful this Fall when I shared my wish to start this non-profit and change the world that even though it's been years of a battle, my friends are here to help me climb this mountain of a problem and see the great reward hard work brings.

Rebecca Klassen - TheSallyProject



Rebecca's eye charts with her Doctors handwritten plea to ER Doctors to help her after finding out she was turned away again being told its just a migraine.

FROM OUR LAST NEWSLETTER

What is the Help-Care Network™?

BY FOUNDING MEMBERS OF THE HELP-CARE NETWORK™

We are currently building the Help-Care Network™ – a non-profit that supports patients in finding and accessing the help they need on their medical journey through the use of our apps, directory database, help line, and programs for people who have no options to help them.

In tandem, it will be an invaluable business-to-business network, that uplifts organizations for positive partnerships, resources, and bring like-minded organizations together.

The Help-Care Network™ is connecting businesses, practitioners, and non-profit organizations with each other and with trusted partnerships to grow and better serve their patients and clients in our app, helpline, and database. It will act as a central resource – a hub of information and advocacy for all parties. The revenues from advertising, programs, fund-raising, recognition-awards ceremony, conferences, and social reach of this network will be used for our charitable foundation to build programs and grants to support patients and other non-profits, organizations, and healthcare professionals that serve them.

A special thank you to some of our volunteers and professionals who helped create this newsletter.



BERNIE MAY-DERBYSHIRE
PRACTICALMANGERS.COM

WRITER, FRACTIONAL PROJECT/PRODUCT/PROGRAM MANAGER & LEADERSHIP COACH FOR, CONSULTANTS, ENTREPRENEURS, AND SOCIAL INNOVATION PROJECTS.



AMBER SHELSON
AMBERSHELSON@GMAIL.COM

SOCIAL MEDIA MANAGEMENT
LOGO/GRAPHIC DESIGN
BOOKKEEPING
ADMINISTRATIVE & TECH SUPPORT

CONNECTIONS AMONG CONDITIONS

Ehlers-Danlos Syndromes (EDS) are a group of disorders that affect connective tissues supporting the skin, bones, blood vessels, and many other organs and tissues. EDS can weaken the connective tissue in the neck, leading to instability.

Cranio-cervical Instability (CCI) and Atlantoaxial Instability (AAI) are conditions often associated with connective tissue disorders like EDS. CCI involves excessive movement between the skull and the top of the spine, while AAI involves instability between the first and second cervical vertebrae. Both can lead to neurological symptoms due to pressure on the spinal cord and brainstem.

Cerebrospinal Fluid Leak (CSF Leak) occurs when CSF escapes through a tear or hole in the dura mater, the outermost layer surrounding the spinal cord and brain. This condition can be a consequence of surgical procedures to correct CCI/AAI or may occur spontaneously, especially in individuals with connective tissue disorders like EDS. Other causes can be whiplash, sports injury, cysts, and disease.

THE FIRST
HEART ATTACK
THANK YOU
WAS FOR
URSA IN
CALGARY, AB



PROGNOSIS

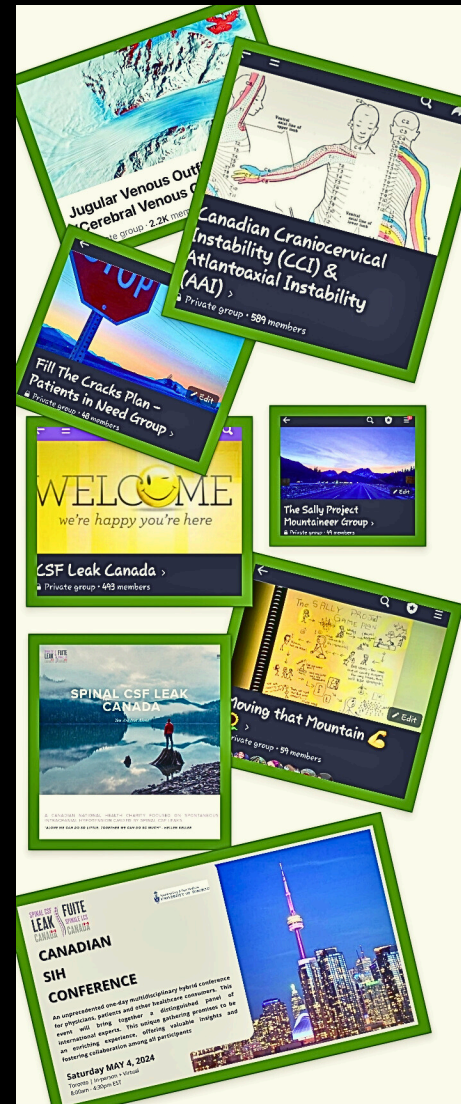
The prognosis for patients with EDS, CCI, AAI, and CSF Leaks varies significantly depending on the severity of the conditions, the effectiveness of the treatment, and the presence of co-morbid conditions. Early diagnosis, comprehensive management (and in severe cases, surgical intervention) can preserve, improve, and save their quality of life. These are often chronic conditions that may require ongoing management. The variability of these disorders means that some individuals may lead relatively normal lives, while others may face significant limitations.

In large proportion, the diagnosis and treatment of these conditions are not supported in Canada, leaving many sufferers to a preventable decline in health and quality of life over time, that is, if they survive long enough to be properly treated or even diagnosed.

Follow us on Facebook and TikTok and join us in launching our first year of service, as we fundraise and campaign for this deserving community of over 1,000 patients seeking access to resources for their debilitating and life-threatening medical challenges.

If you want to help or join our success, please contact us on Facebook, TikTok, or email: thesallyproject.change@gmail.com

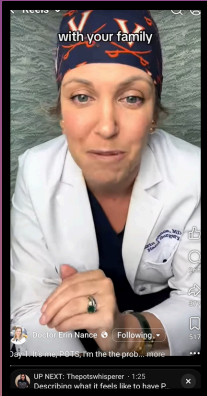
HELPING HANDS FOR PATIENTS



FILL THE CRACKS

BY FOUNDING MEMBERS OF THE HELP-CARE NETWORK™

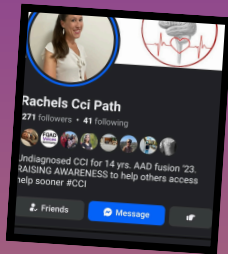
SEEING ADVOCACY AND HARD WORK -A SAMPLE OF SALLY FOLLOWS



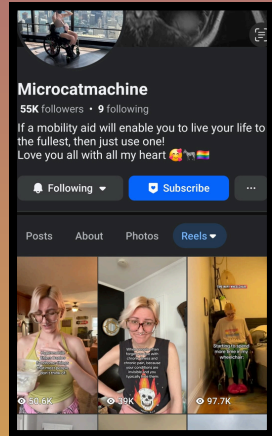
DR. ERIN NANCE — AN EXCEPTIONAL DOCTOR WHO EXPLAINS THINGS CLEARLY, ADVOCATES FIERCELY, TEACHES WITH HEART, AND BRINGS HOPE. SHE HAS SUPPORTED PATIENTS WITH THE COMPLEX CONDITIONS OUR GROUP FACES, AND CONTINUES TO INSPIRE US WITH HER CARE AND EXPERTISE.



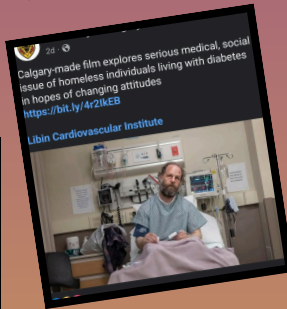
RACHEL IS A BUDDING ADVOCATE WHO POURS HER HEART INTO SHARING WHAT SHE LEARNS AND LIFTING UP OTHERS IN OUR COMMUNITY. HER COURAGE, KINDNESS, AND WILLINGNESS TO SPEAK UP SET AN EXAMPLE FOR ALL OF US. THANK YOU, RACHEL, FOR SHOWING WHAT QUIET STRENGTH AND COMMUNITY CARE TRULY LOOK LIKE.



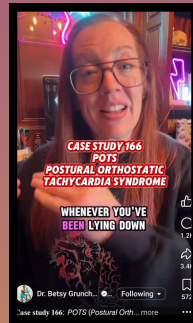
THE POTS LIFE WAS BORN OUT OF NECESSITY AND GREW INTO A VITAL ADVOCACY AND RESOURCE HUB FOR PEOPLE LIVING WITH DEBILITATING SYMPTOMS — RACING HEART RATES, EXTREME HIGHS AND LOWS IN BLOOD PRESSURE, AND EXHAUSTION THAT CAN FEEL AS OVERWHELMING AS HEART FAILURE. IT SHINES A LIGHT ON AN OFTEN INVISIBLE DISABILITY AND GIVES PATIENTS A PLACE TO FEEL SEEN, UNDERSTOOD, AND SUPPORTED.



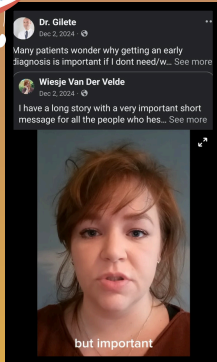
ALLISON HAS SPENT YEARS WORKING TO BREAK THE BARRIERS AROUND INVISIBLE DISABILITY. OPENLY SHARING HOW CHALLENGING LIFE CAN BE WITH EDS AND POTS. THROUGH HER HONESTY, EDUCATION, AND HUMOR, SHE HELPS OTHERS WITH THE SAME CONDITIONS FEEL UNDERSTOOD — AND EVEN FIND A REASON TO LAUGH THROUGH THE HARD DAYS.



THE UNIVERSITY OF CALGARY — ALONG WITH SEVERAL OTHER LEADING INSTITUTIONS — HAS SUPPORTED MAJOR SOCIAL MOVEMENTS IN HEALTH AND HOMELESSNESS, SERVING AS AN EPICENTER OF INNOVATION AND PROGRESS. TOGETHER, THESE UNITIES CONTINUE TO INSPIRE MEANINGFUL CHANGE AND STRENGTHEN THE WELLBEING OF THEIR COMMUNITIES.



DR. BETSY GRUNCH NOT ONLY ADVOCATES AND INNOVATES — SHE ALSO OPENLY SHARES WHAT SHE LEARNS WHILE ATTENDING MEDICAL CONFERENCES, TRAINING SESSIONS, AND OTHER INDUSTRY EVENTS. HER COMMITMENT TO EDUCATING THE PUBLIC AND SPREADING AWARENESS ABOUT BOTH COMMON AND COMPLEX CONDITIONS HELPS PATIENTS FEEL INFORMED, SEEN, AND HOPEFUL.



DR. GILETE IS A LEADING SPINAL SURGEON IN SPAIN, KNOWN WORLDWIDE FOR HIS EXPERTISE IN COMPLEX CONDITIONS. HE IS ONE OF THE RARE SURGEONS WHO CONSISTENTLY AND OPENLY SHARES INFORMATION ONLINE, OFFERING EDUCATION AND ADVOCACY EVEN THOUGH MANY SURGEONS ARE LIMITED BY STRICT PROFESSIONAL RULES, CONSIDERED AMONG THE BEST IN HIS FIELD. HE IS PART OF A SMALL GROUP OF PIONEERS — SOMETIMES CALLED THE 'COWBOYS' OF COMPLEX SPINE CARE — WHO PUSH FORWARD INNOVATION WHILE MAINTAINING EXTRAORDINARY COMPASSION. MANY PATIENTS AROUND THE WORLD HOPE TO TRAVEL TO HIM FOR A CHANCE AT LIFE-CHANGING SURGERY, KNOWING THEIR CARE IS IN SKILLED AND CARING HANDS.



HELPING HANDS FOR PATIENTS



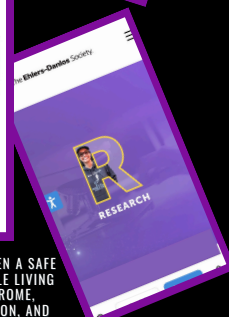
SPINAL CSF LEAK CANADA WAS CREATED BY PATIENTS OUT OF NECESSITY AND HAS GROWN OVER THE YEARS INTO A TRUSTED PLATFORM WHERE PATIENTS AND DOCTORS COME TOGETHER. IT NOW SERVES AS A HUB FOR SUPPORT, SHARED KNOWLEDGE, AND STRONG ADVOCACY FOR THOSE LIVING WITH SPINAL CSF LEAKS.



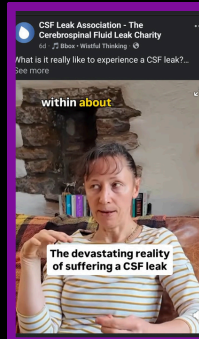
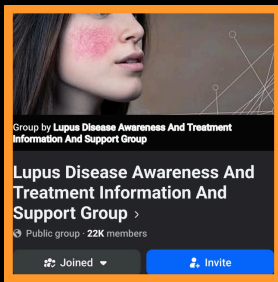
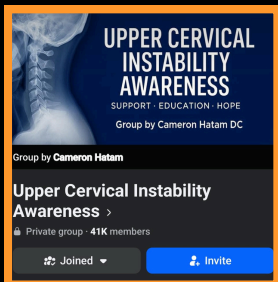
DR. CYR IS WELL-KNOWN FOR HIS DEDICATION TO ADVOCACY AND HELPING PEOPLE RECOVER. HE TAKES IN AS MUCH KNOWLEDGE AS POSSIBLE TO ENSURE SAFE, THOUGHTFUL TREATMENT — AND HE OFTEN GOES THE EXTRA MILE FOR HIS PATIENTS.



THE EDS SOCIETY HAS LONG BEEN A SAFE AND TRUSTED SPACE FOR PEOPLE LIVING WITH EHLERS-DANLOS SYNDROME, OFFERING ADVOCACY, EDUCATION, AND UNWAVERING SUPPORT TO THOSE NAVIGATING THIS COMPLEX CONDITION.



All for One & One for All!



THE CSF LEAK ASSOCIATION IN THE UNITED KINGDOM HAS RECENTLY STEPPED UP ITS EFFORTS, ADVANCING AWARENESS AND DRIVING PROGRESS FOR THOSE LIVING WITH THIS DEBILITATING CONDITION. THEIR WORK CONTINUES TO BRING MUCH-NEEDED VISIBILITY, SUPPORT, AND MOMENTUM TO THE CSF LEAK COMMUNITY.



MOVING HOPE FORWARD

A message from Sally in dedication to all, in grateful memory of Valerie & Bette



As we come to the end of this newsletter, I want to speak to you from the same place I've spoken from throughout this entire journey – a place of honesty, humility, and hope. When I started the Fill the Cracks Movement, I wasn't trying to build anything big. I was just trying to make sense of my own suffering while finding others who were fighting the same battles. But along the way – in hospital hallways, online groups, train stations, and quiet corners of the internet – I became a witness to something much bigger than myself. I became a witness to people who showed extraordinary strength in ordinary moments. People like Karen. People like the Citizen writers. People like countless others who chose courage over silence, generosity over retreat, hope over despair. And standing here now – sharing this with you – I am overwhelmed in the best way. Because every story in this newsletter holds a spark. Every spark belongs to someone who kept going when the world gave them every reason not to.

So as we close this chapter of the newsletter, I want to invite you – softly but sincerely – to pick up even the smallest part of this mission. Because every small part matters. Maybe that means sharing the newsletter like a phone tree. Maybe it means donating \$1 or \$5 or whatever feels right. Maybe it means joining our next call, volunteering your skills, or simply telling someone, "Hey, you're not alone." Whatever it looks like, know this: Your part is enough. Your part helps someone breathe easier. Your part makes our community stronger. Your part becomes a piece of the hope we are building together.

But a spark alone is not enough. It needs a community to turn it into a light. That's where you come in. What we are building together is not a charity, not a project, not a campaign – it's a community of people who refuse to walk past someone who has fallen through the cracks. It's made up of strangers who care, friends who show up, families who keep fighting, and readers like you – who choose to stay, to listen, and to act.

Thank you for being here. Thank you for reading these stories with a compassionate heart. Thank you for seeing us – and for letting these stories touch you. As we move forward into the next months of our launch, I ask you to walk alongside us in whatever way you can. Together, we will fill the cracks. Together, we will open doors that were once shut. Together, we will make a difference – one small, steady act of care at a time. This is not the end. This is the beginning of something powerful. And I'm grateful you're with us.

Rebecca Klassen

MESSAGES FROM OTHERS

I USED MY INHERITANCE OF OVER \$100K AT THE MAYO FOR DIAGNOSIS AND EMBOLIZATION, THEN CAME HOME AND IMMEDIATELY BLEW OUT THE FIX. OVER THE LAST 4 YRS I HAVE SPENT 18 MONTHS AS AN IN-PATIENT AND HAD 13 SURGERIES FOR LEAKS OR SHUNTING.

"PARENTS SHOULDN'T HAVE TO CHOOSE BETWEEN FEEDING THEIR KIDS AND GETTING THE MEDICAL TESTS THAT COULD SAVE THEIR LIVES."

“THERE'S A KIND OF SHAME I CARRY THAT I RARELY TALK ABOUT. AS A PARENT ON DISABILITY, I OFTEN FEEL JUDGED FOR A LIFE I NEVER CHOSE. MY OWN FAMILY STRUGGLES TO UNDERSTAND AN INVISIBLE ILLNESS, AND MY CHILDREN HAVE FELT THE STING OF BEING TREATED LIKE THEY'RE "LESS THAN" SIMPLY BECAUSE WE LIVE BELOW THE POVERTY LINE. WHEN YOU'RE SURVIVING ON GOVERNMENT DISABILITY, EVEN BASIC THINGS LIKE CLOTHING BECOME A SOURCE OF STRESS — AND THE NONPROFITS MEANT TO HELP ARE ALREADY STRETCHED FAR PAST THEIR LIMITS. I'M NOT EMBARRASSED OF WHO I AM, BUT I AM HEARTBROKEN THAT THE SYSTEM FORCES FAMILIES LIKE MINE INTO THIS KIND OF STRUGGLE.”

"WE SHOULDN'T HAVE TO BE WARRIORS JUST TO ACCESS BASIC CARE."

"DISABILITY STOLE MY HEALTH — POVERTY STOLE EVERYTHING ELSE."

"INVISIBLE ILLNESS DOESN'T JUST HURT THE BODY — IT RESHAPES YOUR ENTIRE LIFE, AND TOO OFTEN, YOUR DIGNITY."

HELPCARENETWORK.CA



REBECCA KLASSEN

sallyproject@helpcarenetwork.ca

CONTACT US:

info@helpcarenetwork.ca

media@helpcarenetwork.ca

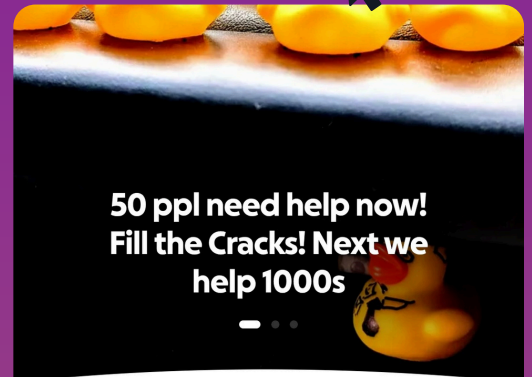
volunteers@helpcarenetwork.ca

network@helpcarenetwork.ca



#TheSallyProject #MoveMountains #FilltheCracks

DONATE



**50 ppl need help now!
Fill the Cracks! Next we
help 1000s**



Be the first to donate

Inspire others and help Rebecca
build momentum.

1ST DONOR

Share

Donate

WHAT YOU'RE ABOUT TO READ IS MORE THAN
AN UPDATE; IT'S A CALL TO JOIN A
TRANSFORMATIVE MOVEMENT.

WE DESIGNED THIS NEWSLETTER TO GO BEYOND
STORYTELLING. IT'S MEANT TO BE SHARED -
SPREADING HOPE, PERSON TO PERSON, FRIEND
TO FRIEND, LIKE A PHONE TREE THAT REPLACES
FEAR WITH PROMISE. EVERY TIME YOU SHARE,



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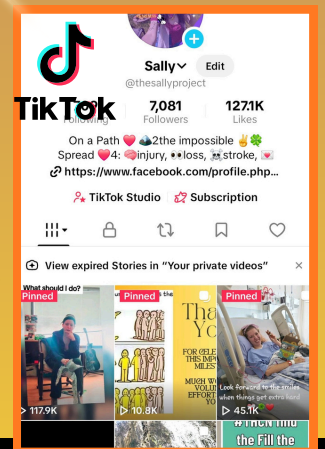


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NETWORK



@THESALLY
PROJECT



OUR PROGRESS SO FAR HAS BEEN POWERED BY PEOPLE SHARING,
BUT OUR COMMUNITY IS STILL SMALL — AND WE NEED YOUR HELP!
IF YOU KNOW ANYONE WHO CAN HELP SPREAD THE WORD,
PLEASE CONNECT US, FOLLOW US, AND SHARE OUR STORY.
EVERY SHARE HELPS SOMEONE FIND HOPE.