

TBI TODAY

News, Ideas, and Resources from the Virginia TBI Model System

THE VIRGINIA TBIMS TEAM

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Sharing Knowledge in Williamsburg: The 2010 Brain Injury Rehabilitation Conference

By Emilie Godwin

On June 2nd-4th, the VCU TBI Model System and Brain Injury Services, Inc. held their annual brain injury conference. The conference, "Rehabilitation of the Adult and Child with Brain Injury" has been held every June in Williamsburg, Virginia since 1977. Professionals, many of whom were also survivors or family members, made up an audience of nearly two hundred people. Conference participants came to hear professionals in the field of brain injury rehabilitation speak on topics ranging from relationships after injury to maintaining a positive attitude in recovery. In addition to two full days of break-out sessions on a variety of topics, participants listened to lectures in the mornings and were offered the option of attending a full-day pre-conference workshop on either whole family recovery or cognitive rehabilitation. The success of this year's conference was in part due to the wide range of presentation topics. More importantly, though, conference attendees reported that the presenta-

tions were chock-full of new and inspiring information about recovery.

Two of the presentations can help to show how useful conferences focusing on brain injury can be for professionals. One of the pre-conference full-day workshops was led by Caron Gan, Jeff Kreutzer, and Taryn Stejskal. This presentation focused on how to include family members in the recovery process. Dr. Kreutzer also discussed how family members need help to deal with the changes that have happened in their own lives. The talk included specific, practical tips professionals can use to work with everyone in the family during recovery.

Another highlight of the conference was the keynote speech given by Greg Goldberg. Mr. Goldberg is a brain injury survivor and current motivational speaker. He spoke with the audience about his own experiences recovering from brain injury. The main (contd on page 2)



(from left to right) VCU's own Taryn Stejskal and Jeff Kreutzer with Marriage and Family Therapist Caron Gan, just before their group presentation: "Family Intervention after Brain Injury: Working with Adults & Adolescents"

(contd from page 1) message Mr. Goldberg shared was even though he had a right to be angry about losing his job, his wife, and having to deal with personal changes, he decided that he could choose to make positive changes in his life. While he is still grieving for his losses, his focus on taking positive steps has given him a new life – one that he loves. One conference participant explained how important this talk was: “He motivated me, and I’m going to share his story with all of my patients and their families.”

Visit www.tbiconferences.org for more information about VCU sponsored TBI conferences. The 2011 brain injury rehabilitation conference will be held in Williamsburg, May 4-6. We will soon be releasing a call for presentations so be on the lookout.

S	X	Q	H	Q	J	S	M	S	Q	C	V	N	I	Z
T	W	G	A	U	R	A	J	E	A	U	G	U	S	T
K	E	I	L	N	E	W	L	O	Q	O	Q	K	Y	A
E	K	Y	M	R	T	K	P	T	J	A	J	N	N	J
C	B	Y	C	M	Q	S	A	I	F	U	Y	G	O	X
C	L	E	J	R	I	T	V	U	G	C	N	D	R	S
Y	C	Q	G	U	N	N	D	Q	E	P	M	E	R	K
I	C	I	N	C	I	P	G	S	X	D	B	E	S	I
E	U	C	E	B	R	A	B	O	V	G	W	B	T	Y
N	O	I	T	A	C	A	V	M	N	O	E	K	R	M
A	L	N	F	Q	I	D	T	I	L	A	E	O	O	X
J	T	Y	W	H	S	A	P	F	C	E	T	M	H	I
V	X	T	E	N	N	M	F	H	A	M	D	O	S	W
X	N	F	N	N	A	S	U	N	B	U	R	N	H	L
Q	X	P	R	C	V	D	Z	O	D	G	O	H	U	E

Summer Word Search!

See if you can find all 16 words related to the summer! They can be forwards, backwards, diagonal, or vertical.

ANTS
AUGUST
BARBECUE
BEACH
CAMPING
FLOWERS
HOT
ICECREAM

JULY
JUNE
MOSQUITOES
PICNIC
SHORTS
SUNBURN
SWIMMING
VACATION

Mark Your Calendar!



- ◆ **Event:** T.G.I.F.
- ◆ **Location:** Belmont Recreation Center, 1600 Hilliard Road in the Lakeside area of Henrico Co. every 1st Friday of each month
- ◆ **Description:** the local departments of recreation & parks host this monthly social event for survivors of brain injury, ages 18+
- ◆ **Contact:** Call Kariayn Smith, 804-501-5135, for more information and/or to be placed on the mailing list for monthly reminders.
- ◆ **Event:** Richmond Chapter and Support Group
- ◆ **Location:** 3rd Monday every month at 6 pm, in the Children’s Hospital Auditorium at 2924 Brook Rd.
- ◆ **Contact:** Call the Richmond BIAV at (804) 355-5748 for more info!

September 26, 2010

- ◆ **Event:** 7th Annual Kit Callahan’s Miracle Mile
- ◆ **Location:** George Mason University, Fairfax VA
- ◆ **Description:** 10k Run/Walk to benefit Brain Injury Services, Inc.
- ◆ **Contact:** Call Brain Injury Services Inc (703-451-8881 ext 223) for more info or visit www.kitsmiraclemile.org

November 2-3, 2010

- ◆ **Event:** Brain Injury Family Intervention (BIFI): An Evidence-Based Approach
- ◆ **Location:** The College of William & Mary, Williamsburg, VA
- ◆ **Description:** Workshop for professionals working with families after brain injury
- ◆ **Contact:** Call Brain Injury Services Inc (703-451-8881 ext 223) for more info

If you have an upcoming event of interest to the Brain Injury community in Virginia, we would be glad to consider including it here. Please contact Matthew Wetsel at 804-828-3703 or wetselme@vcu.edu

JUST THE

FREQUENTLY ASKED QUESTION S

THE INFORMATION PROVIDED IN THE FAQ IS INTENDED TO FAMILIARIZE THE PUBLIC WITH ISSUES RELATED TO TBI. NO INFORMATION PROVIDED HEREIN SHOULD BE CONSTRUED AS THERAPEUTIC ADVICE OR AS A SUBSTITUTE FOR CONSULTATION WITH A COMPETENT MEDICAL OR MENTAL HEALTH PROFESSIONAL.

Q: My mother thinks I have PTSD from a car accident I had over a year ago. I try not to think about what happened but sometimes I feel like I'm going through it again. How do I know if I have PTSD and what can I do about it?

A: Post-Traumatic Stress Disorder (PTSD) is categorized as an anxiety disorder in the Diagnostic and Statistical Manual of Mental Disorders (DSM). Persons who have experienced a traumatic event, such as a car accident, often develop symptoms of PTSD. Symptoms of PTSD generally include the following:

- ✦ Recurrent, intrusive, distressing recollection of event
- ✦ Reoccurring dreams of event that cause distress
- ✦ Acting or feeling as if the traumatic event were recurring
- ✦ Efforts to avoid thoughts, feelings, or conversations associated with the trauma
- ✦ Efforts to avoid activities, places, or people that may trigger memories of the trauma
- ✦ Reduced interests or participation in significant activities
- ✦ Difficulty falling or staying asleep
- ✦ Irritability or outburst of anger
- ✦ Difficulty concentrating
- ✦ Extreme sensitivity to environment (smell, sight, sound, and touch), a condition known as hypervigilance
- ✦ Exaggerated startle response (for example, nearly jumping out of your skin if someone taps you on the shoulder!)

If you answered yes to several of above difficulties, you might meet the criteria for a diagnosis of PTSD.

The good news is that you don't have to live with the symptoms. There is treatment to cope with the problems. Consideration should be given to seeking help from mental health professionals, such as psychologists, who have experience working with persons with a brain injury or trauma, and specialize in PTSD. In addition, you may wish to consider medication. Discussing the options with healthcare providers will be important.

U.S. Capitals Word Scramble

See if you can unscramble these 15 U.S. capitals. Answers on page 7!

1. YRGEMTMNOO

2. NXPOHIE

3. VEREND

4. TAALTNA

5. OOBTSN

6. ASJOKNC

7. TEROTNN

8. NLBAYA

9. LEHRGAI

10. IALLENSHV

11. SATNUI

12. OCIMNHRD

13. SHAESELLAAT

14. EIBSO

15. USLCUMBO



Questions for Pat or the FAQ column are welcomed.

Send them to: "ASK PAT" OR "FAQ"
 P.O. BOX 980542. RICHMOND, VA 23298-0542
 or e-mail: jhmarwit@vcu.edu





CHAT WITH PAT

Pat answers your personal questions about brain injury with compassion and practical advice. However, advice from Pat's column should not be substituted for consultation with a doctor or rehabilitation specialist. The identity of individuals submitting questions to "Chat with Pat" is kept strictly confidential.

DEAR PAT: I am a 42-year-old mother who was in a horrible car accident and suffered a bad brain injury almost three years ago. I don't really remember what happened, but have been told that a SUV crashed into me. The only thing I remember that day was leaving work and the next thing I know I was in the hospital hooked up to tubes. It's hard to believe that I survived that crash when I look at pictures taken of the accident. Anyway, my hospital stay was a big blur to me, though I know I was in the hospital for a long time between ICU and rehab. I had to learn how to walk and talk again.

I was not able to go back to work as a teacher and became a full-time mother to my two young children. It took a total of two years after the accident for me to get my life in order or at least some sense of organization. Through trials and tribulations, I figured out how to make it through the day without collapsing. It is still exhausting but manageable now.

The reason I'm writing is because of my relationship with my husband. Barry has been there for me throughout this process. He was by my bedside the whole time I was in the hospital. He helps out around the house when I ask him. I know this has been a lot for him to deal with because he's used to me taking care of everything. He also feels the pressure of being the sole breadwinner.

Despite what he has done, I have been angry at my husband in the last few months, even feeling resentful. I hate to admit to feeling this way about my husband. Yet, I just feel like he doesn't understand that I still have a lot of problems with finding the right words, remembering things, and processing information. And, this fatigue thing is still an issue. Barry has never been a patient person so he gets frustrated easily. Instead of waiting for me to get my words out, he just walks away. I think he can be inconsiderate at times. I wish he could be more understanding.

What can I do to make him understand and do things without me asking? How can I get him to initiate more to help out? I need advice on how to communicate better with him.

Frustrated Wife



PAT'S RESPONSE:

First of all, I want to congratulate you on all the improvements you have made since your brain injury. It sounds like you have come a long way. Way to go! Secondly, it is understandable to feel angry and resentful when you feel like you have not been treated fairly. It is also frustrating to feel like you are doing your best and not be appreciated for what you do.

With that said, it is common to experience changes in interpersonal relationships following a brain injury because of changes in roles between spouses. The roles that used to be carried out by you and Barry are different now. Household responsibilities are divided by you two instead of just you. In addition, Barry is likely coping with changes the he has seen in you. He might be having a difficult time adjusting to the "new" you. Barry might have expected you to go back to the person you were before the injury and would like things the way they were. He is not used to this person who has trouble coming up with words,

forgets things, and does not understand what he is saying. It is difficult adjusting to changes. Changes cause anxiety and distress.

It will be important for you and Barry to develop some skills to cope with the changes. Following are some ideas to consider:

- Realize that your feelings are a common, normal response to a difficult situation.
- Be hopeful and say positive things.
- Avoid thinking about making comparisons to how things were.
- Try to do fun things together and get to know each other again.
- Talk about the future you both want and the best ways to get there.
- Talk to and spend time with people who care about you.
- Give yourself breaks and learn when and how to ask for help.

You might also want to consider couples counseling with a family marital therapist who specializes with working with families of brain injury survivors. It will be important for you and Barry to talk about your respective experiences since the brain injury. Finally, seek out support from others by joining a local support group.

If you wish to get involved with your local support group to share your experience, the Brain Injury Association of America has a list of support groups you and your husband may attend. To contact BIAA, you may call their family helpline (1-800-444-6443) or send them an e-mail at familyhelpline@biausa.org. The website for BIAA (www.biausa.org) provides links to state chapters and additional brain injury resources. You may also write BIAA for more information at 8201 Greensboro Drive, Suite 611, McLean, VA 22102. For Virginia residents, please contact the Brain Injury Association of VA (see page 8 for contact info).



**HAVE YOU
MET CHRISTINE
TROTТА?**

Christine Trotta, B.A., is a research specialist and psychometrist in the Department of Physical Medicine and Rehabilitation at VCU. She is involved with a variety of projects including the Brain Injury Inpatient Educational Intervention for Families and Caregivers, a series of information sessions intended to improve families' knowledge and understanding of life after brain injury. She also works with the Bridge project, a pilot program designed to be part of multidisciplinary assessment of community readjustment in individuals diagnosed with HIV and recently released from incarceration. In addition, she assists with neuropsychological evaluations. She greatly enjoys interacting with patients and their families, and listening to their stories and experiences.

Christine grew up in Pensacola Florida, and moved to Charlottesville, Virginia, when she was ten years old. She recently graduated from the University of Virginia this past May, receiving a B.A. in both biology and psychology. She particularly enjoyed taking neuroscience courses, and discovered her interest in research while working as a research assistant in the UVA Emotions and Cognition Lab. She has always been interested in medicine, and has worked or volunteered at various physical therapy clinics in the Charlottesville area throughout college. Additionally, she worked part time as a server at a local fine dining Italian restaurant. Outside of school and work, she enjoys being outdoors, spending time with friends and family, playing soccer, and running. In the future, she plans to go to physician assistant school. For the time being, however, she is getting settled into the city of Richmond, and is extremely excited to be starting work at VCU!



Survivor Stories Wanted!

Recovering from a brain injury can be very difficult. Sometimes, one of the most helpful and inspiring things is simply hearing from other survivors who have gone through recovery and faced the same challenges. Are you a survivor with a story you'd like to share? If so, then we'd like to hear it, and it might get into a future issue of TBI Today!

Submit to: jhmarwit@vcu.edu

or

TBI Today

VCU P.O. Box 980542

Richmond, VA 23298-0542



Federal Government Launches New and Improved National Resource Directory for Military and Veteran Communities

The U.S. Departments of Defense, Labor, and Veterans Affairs have put together a comprehensive website to provide quick and easy access to thousands of resources nationwide. This free service connects users to services, resources, and programs at the national, state, and community level. Resources on the National Resource Directory are vetted and must meet the participation policy standards before being added. This ensures that all the posted resources are relevant and from reputable sources.

For more than a year, the National Resource Directory has provided Wounded Warriors, transitioning Service Members and Veterans, and those who support them with quick and easy access to resources they need. To learn more about the directory and explore what it has to offer, go to: www.nationresourcedirectory.gov



Who's Who? Finding the Help You Need after Brain Injury

By Emilie Godwin

As a family member or survivor, you may be experiencing some changes in you or your loved one's emotions or behaviors that concern you. You may want help. But where do you turn? The table below describes different professionals who may be able to help you with your problems. Review the list and find the specialist that seems to best fit your needs. Remember, no matter what type of professional you are looking for, always ask for someone who has specific training in brain injury. By selecting the professional who is best trained to address the challenges you are having, your experience is likely to go more smoothly. Making a call for help is the first step toward making the changes you would like to make!

<u>Professional Title</u>	<u>Degree</u>	<u>Job duties</u>	After brain injury, works with patients by....	After brain injury, works with family members by....
Psychiatrist	M.D.	Prescribes medicine for mental health issues such as anxiety, depression, agitation, etc.	Prescribing medicines to help with the emotional and behavioral changes that follow brain injury.	Prescribing medicine when family members experience anxiety, depression, fatigue or other emotional symptoms when a loved one is recovering from brain injury.
Neuropsychologist	Ph.D. or Psy.D.	Gives cognitive (thinking) tests; provides counseling	Testing to figure out how the brain injury has impacted thinking, understanding and remembering.	Helping families understand patient and family changes that happen after brain injury. Providing tools to address those changes.
Clinical or Counseling Psychologist:	Ph.D. or Psy.D.	Provides counseling services to individuals on a range of issues.	Counseling to provide ways to change behavior and thinking to help better deal with the injury and intense emotions. Addressing feelings of sadness, grief, loss and worry.	Counseling family members who are experiencing sadness, grief, loss and uncertainty. Helping family members adjust to changes in their own lives.
Rehabilitation Psychologist	Ph.D. or Psy.D.	Works as part of the rehabilitation team to address issues related to behavior, emotions and thinking.	Creating a rehab plan to address patient emotional, behavioral and thinking-related problems.	Assisting family members with understanding the rehabilitation process and how the family fits into the rehab plan.
Licensed Professional Counselor (LPC)	M.A. or Ph.D.	Provides counseling services to individuals on a range of issues.	Helping patients identify problems, create goals, and work toward solutions.	Helping deal with family members' intense emotions and understand how the injury has affected their own lives and to address the challenges of care-taking.
Marriage and Family Therapist (MFT)	M.A. or Ph.D.	Works with either couples or the whole family to address problems in the home or in the marriage.	Working with the patient and the family together to address emotional and behavioral changes.	Working with the patient and family together to address changes in the family.
Certified Rehabilitation Counselor (CRC)	M.A. or Ph.D.	Works with people who have disabilities to achieve their personal and career goals.	Identifying new opportunities for personal and career success after the brain injury.	Supporting the family in caregiving. Helping the family learn how to best help the patient achieve goals.
Licensed Clinical Social Worker (LCSW)	M.A. or Ph.D. or DSW	Helps individuals find and use resources in their area. Offers some counseling for emotional or behavioral problems.	Assisting with coordination of all resources, people and agencies who can help in brain injury rehabilitation.	Providing information about available services in the community. Working with families to address concerns about emotional or behavioral changes in the patient.

Caring for Caregivers: Examining Stress Levels Post-TBI

By Matt Wetsel

Welcome to the first of a series of articles summarizing research findings based on the TBI Model Systems project. If you have participated in doing follow-ups post-injury with us through Model Systems, you may have asked, "What's all this research finding out?" Here is a brief summary of an award-winning research paper which came directly out of the Model Systems. The paper is titled "Caregivers' Well-Being after Traumatic Brain Injury: A Multicenter Prospective Investigation," and was published in the *Archives of Physical Medicine and Rehabilitation* in June 2009.

Sometimes after a brain injury, survivors aren't able to fully care for themselves due to a wide range of problems which can occur. Emotional troubles, memory problems, and other cognitive deficiencies can make the transition back to normal living difficult. For example, research has shown that at least 1/4 of TBI survivors are at risk for depression. Spouses, parents, siblings, or others close to the survivor often take on the role of a caregiver as the survivor recovers. Concern for the welfare of family members has led to more research on emotional distress, such as depression or anxiety, among those who become caregivers to a TBI survivor.

Researchers gave additional surveys to about 300 caregivers of people in the TBI Model Systems. About 30% were spouses, 50% were parents, and the remaining 20% were adult children, siblings, other relatives, significant others, or close friends providing some form of care to a survivor. About

75% of all caregivers lived with the TBI survivor and spent time with them every day.

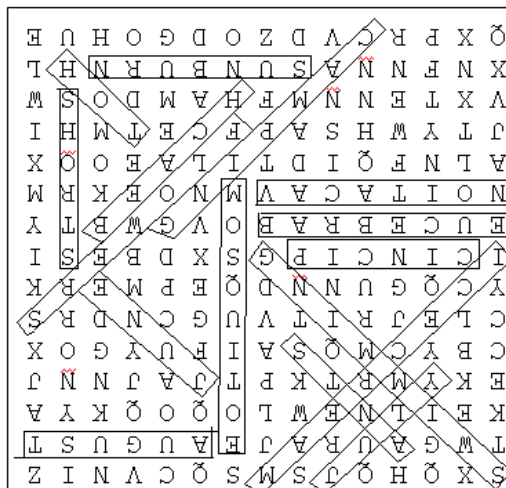
In this study, it was found that roughly 1/3 of family members who provide care to TBI survivors are at risk for depression, anxiety, or other forms of psychological & emotional distress. A number of factors seemed to increase the chance that a caregiver would be more at risk for some form of emotional distress. In general, the more disabled a person was and the more supervision they required, the more likely it was that a caregiver had a significant level of depression or anxiety.

The survivor's involvement in their community, through things like employment, volunteer work, or school was linked to caregiver well-being. If a survivor was able to participate in a productive activity, caregivers were less at risk for emotional distress. The emotional health of the survivor also seemed to have an impact on the caregiver. If the survivor reported being depressed or dissatisfied with their life, it was more likely that the caregiver did too. Finally, if the survivor consumed excessive amounts of alcohol, it increased the chances that the caregiver would have significant depression or anxiety.

Remember that the other 2/3 of respondents seemed to be coping well. More research needs to be done on effective coping techniques for caregivers. The results emphasize the importance of caregivers taking care of themselves, too, either through counseling, support groups, or in their community such as religious institutions and friends.

Word Search answers!

How did you do?



Word Scramble Answers:

Do you know which states each capital goes to?

- | | |
|-----------------|---------------|
| 9. RALEIGH | 1. MONTGOMERY |
| 10. NASHVILLE | 2. PHOENIX |
| 11. AUSTIN | 3. DENVER |
| 12. RICHMOND | 4. ATLANTA |
| 13. TALLAHASSEE | 5. BOSTON |
| 14. BOISE | 6. JACKSON |
| 15. COLUMBUS | 7. TRENTON |
| | 8. ALBANY |



The Brain Injury Association of Virginia (BIAV) is the only statewide non-profit organization in Virginia exclusively devoted to serving individuals with brain injury, their families, and those that care for and about them.

BIAV offers help, hope and healing to persons with brain injury and their families, provides education on the impact of brain injury, and advocates for legislation and improved medical and community based services.

To find out more information about BIAV or to reach our information and referral specialists, contact us at 1-800-444-6443 or 804-355-5748. Or visit our website at www.biav.net.



*Creating a better future for Virginians through brain injury prevention,
research, education, advocacy, and support*

VCU, PM&R

TRAUMATIC BRAIN INJURY MODEL SYSTEM

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