

TBI TODAY

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

THE VIRGINIA TBIMS TEAM

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Improving Relationship Intimacy After TBI: Part II by Emilie Godwin

After brain injury, most people report big changes in intimacy with their spouse or partner. In a three-part series, TBI Today will feature articles on improving intimacy after TBI. Included here is Part II. Look for Part III in a future issue!

Part II: Sharing a Love Style with Your Partner

In our previous issue, we discussed the importance of improving emotional intimacy with your spouse after a TBI. Emotional intimacy refers to the connection that spouses share with one another - specifically, when partners are open and honest, and can give and receive love from one another. Following TBI, there can be many reasons why emotional intimacy might suffer between partners or spouses. In Part II of our three part series on relationships after brain injury, we will discuss the importance of sharing a love style with your partner.

Both before and after TBI, couples often struggle to let their partner know how much they care because they have different styles for expressing their love. For example, some people feel loved when they hug and kiss their spouse. If this is how they feel love, then it is usually how they show love, too. So, when someone who feels loved by getting hugs and kisses wants to show their partner they love them, they will hug or kiss their partner. If their partner shows and feels love in the same way, this works well. However, many times spouses do not show or experience love in the same way. Let's say the person just mentioned is married to someone who feels loved by having long talks about their day with their spouse. Their spouse may hug them five times in one day, and yet the person may still feel – and say – you never show me that you love me! This leaves both spouses hurt and confused. (contd. on page 6)

Speaking of Relationships... there's a new intervention for couples after brain injury! The Therapeutic Couples Intervention (TCI) is designed to assist couples after TBI with communication, stress management, goal-setting, renewing intimacy, and for some couples—parenting post-injury.

Participation is free, and study volunteers will be compensated. Please contact Jenny Marwitz at 804-828-3704, or call toll free at 1-866-296-6904. Or, send an email to jhmarwit@vcu.edu.

Help for Couples After TBI

by Rosemary Rawlins

I admit it. I was resistant to talk therapy. How could spilling my guts to a therapist for thirty minutes help me when I felt that a year of straight venting might not even scratch the surface? I have since learned that talk therapy is not about venting. It's about facing the problems that confront us and finding practical solutions to those problems. It's about understanding ourselves in ways we didn't know we could. It's about unmasking, seeing possibilities, and finding our own truth.



When Hugh and I began rebuilding our relationship after he suffered a TBI, job loss, and feelings of lost identity, we turned to Dr. Kreutzer at VCU for help. Hugh and I were trying to figure out who we were, post-injury, as a couple. Both of us had changed in the year following the accident. Hugh had some personality changes from his injury, and I grew tense, vigilant, and over-protective.

Communication was a sticking point for us. I had been Hugh's caregiver for so long that my identity as a wife faded somewhere into the distance. I needed to trust Hugh to get on with his life independently, to not feel so alarmed whenever he tried something new.

I'm a person who suggests and insinuates, where Hugh is a more direct person. This kept us from understanding each other at times and it caused arguments. For instance, I'd walk by a sink of dirty dishes that Hugh promised to do earlier, and I'd say, "The sink is full of dishes," with an edge in my voice. Hugh would ignore me. Gone were the days when we understood each other with a simple glance. Dr. Kreutzer pointed out that I did not remind Hugh to do the dishes, or ask him directly. I just got mad. Once I began asking Hugh in a direct way to do things, he was more cooperative. I came to realize that I didn't know what Hugh was thinking at all, and I made some wrong assumptions based on our past.

Dr. Kreutzer was able to objectively observe us interacting, and that gave him insight into how we were affecting each other. He saw how we pushed each other's buttons, and (contd. on page 6)

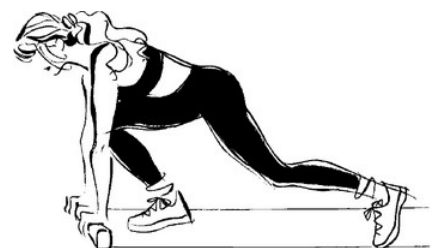
Depression, Exercise, and TBI Study

A research study at VCU is evaluating the effect of exercise on depressed mood in people that have had a traumatic brain injury.

Qualified volunteers will participate in a 12 week exercise program. They will undergo study related testing before starting the exercise program and after completing the program. Testing would include paper and pencil tests, blood tests, and some participants will undergo MRI of the brain. If you choose to participate in this study, you may continue any on-going depression treatment you are already receiving.

The time commitment is 3-4 hours per week for 12 weeks, in addition to 2 entry and 2 exit appointments. Study volunteers will be compensated for their time. Study related costs, including parking, tests, and exercise sessions, will be covered by the study.

If you are interested in participating, please contact: Justin Alicea 804-628-1355 or joalicea@vcu.edu, or Anne Hudak at 804-628-3962 or ahudak@vcu.edu.



TBI Survivor Book Announcement

"Oh, God, I'm so scared...please protect my Patti – we can't lose her!!!" one friend pleaded as the frightful adventure jerked into motion.

Patti Foster definitely has "stick-with-it-ness!" On June 18, 2002, Patti - a former radio personality who had such a zest for life - was severely injured in a horrific traffic wreck and suffered traumatic brain injury, along with fractures all over her body. For six weeks, her life hung in the balance as she lay in a coma.

"Lives can be changed quickly, in a blink of an eye...a young woman's life is ended and a dear, vivacious friend is in surgery" journaled a close on-looker.

For more than a decade, Patti's focus was radio. She was the morning show host at WFRN, an inspirational Christian station broadcasting in Indiana and Michigan. Before this, she was the afternoon show host at KVNE/KGLY covering Texas and Louisiana.

As a college student majoring in music education, Patti traveled abroad to Australia, the British Isles, the heart of Mexico, and Eastern Europe providing music for crusades and teaching conversational English through music.

Today, as a traumatic brain injury survivor, Patti shares her story in the hope it will inspire others. In 2013, Patti's gripping book, **COPING with TRAUMATIC BRAIN INJURY: One Woman's Journey from Death to Life** was released.

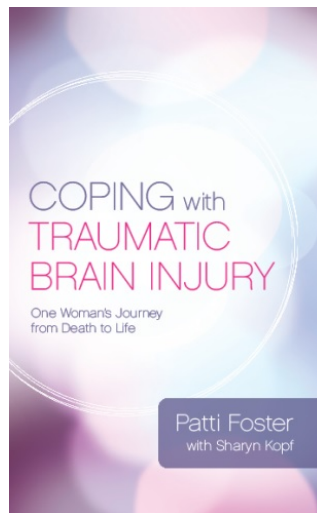
As Patti leans into life, she lays hold of every moment to live her motto: **M.A.D. Now!**

(Make A Difference Now!)

Purchase Patti's book as paperback or eBook at:

www.pattifoster.com.

Article adapted from press release.



Mark Your Calendar!



T.G.I.F.

- ◆ **When:** Meets quarterly, please call for more info.
- ◆ **Location:** Varies, please call!
- ◆ **Description:** the local departments of recreation & parks host this quarterly social event for survivors of brain injury, ages 18+
- ◆ **Contact:** Call Lizz Billings at 804-501-7489 for more information and/or to be placed on the mailing list for monthly reminders.

Richmond Support Group

- ◆ **Location:** 3rd Monday every month at 6 pm, Children's Hospital Auditorium, 2924 Brook Rd, Richmond, VA 23220
- ◆ **Contact:** Call the Richmond BIAV at 804-355-5748 for more info!
- ◆ **Location:** Tuesdays 6-8pm, Food Court at the Regency Square Mall, 1420 Parham Road, Richmond, VA 23229
- ◆ **Contact:** Call Ted Taylor at (804) 852-6644 or call the BIAV (355-5748) for more info!

Hopewell Tri-Cities Support Group

- ◆ **Location:** 2nd Tuesday every month at 6:30 pm, Nelson Library 209 East Cawson St, Hopewell VA 23860
- ◆ **Contact:** Call Mary Wallace at 804-355-5748 or email at mary@biav.net

Chesterfield Support Group

- ◆ **Location:** 2nd Monday every month at 6:30pm at the Woodlake United Methodist Church, 15640 Hampton Park Drive, Chesterfield VA 23832
- ◆ **Contact:** Call Elizabeth Perry-Varner at 804-276-5761 or email eperryvarner@verizon.net

Richmond Aphasia Group

- ◆ **When:** 2nd Thursday of every month
- ◆ **Where:** Location varies, please contact Marcia Robbins, CCC-SLP at 804-828-7947 or email at mrobbins@mcvh-vcu.edu.

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





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 22 years old and trying to go to school to become a medical assistant. Well, that's not going well. I'm afraid that I might not be able to do it. It's been over a year now since I was in a car accident. At that time, I thought it was not a big

deal, a minor fender bender. I didn't have a scratch on my body. The ER doctor told me that I had a concussion and would be back to "normal" in a few weeks.

I'm still waiting for that to happen. I don't feel "normal". I'm still having many of the problems I had after the accident, such as headaches, trouble focusing, and I'm forgetting stuff frequently. Oh, and I am tired ALL THE TIME. I had to stop taking classes because I can't function. I was an organized person and my life was very structured, but now, it takes me hours to get myself together to leave the house.

How can I get to the point where I can function like a regular person? Is there any hope for me to be back to where I was before the accident? I thought things would be better by now.

Pat's Response:

Feelings of frustration and disappointment are common when accident-related problems do not resolve within a year or two. What you are describing is frequently reported by other brain injury survivors. Most people want improvements to occur quickly so they can return to their lives as they were before the accident. Impatience can set in, and lingering problems begin to take their toll on emotional well-being after a while.

The course of recovery is different for everyone. Therefore, it is difficult to predict what that will look like for you. The good news is that improvements can continue to occur even after one year. From working with brain injury survivors, we have found key factors that can help to make certain that your improvement continues.

- 1) Ability to Learn: Learning allows you to do things better and more efficiently.
- 2) Practice and Training: Mental and physical exercise can help you make gains.
- 3) Ask for Help: Learn when and how to ask for help from other people.

Tips for making progress:

- Keep trying to develop more effective strategies for doing things.
- Stop doing things that don't work.
- Focus on your primary goals, monitor progress, and stick with plans that work.
- See what works for other people and what doesn't.
- Listen to other people's ideas.
- Exercise your body and mind.
- Learn from your mistakes.
- Ask people that care about you for feedback.

Patience is also an important skill to develop. Here are some tips:

- Don't stay angry. Many survivors get angry and frustrated with themselves or family members. Anger is a common feeling, but if you stay angry, you will probably feel worse.
- Be persistent. Being persistent and working hard are the best ways to improve your life and help you get better.
- Define success by all the things you have accomplished since your injury.
- Focus on accomplishments, not failures.
- Avoid becoming overloaded. Impatience often comes about when we are overloaded or weighed down with demands and responsibilities.

(contd on page 5)

(Chat, contd)

Support groups are a great way to get feedback from others, if you wish to recruit more people to help you. Your local Brain Injury Association of America likely has a list of support groups you 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 1608 Spring Hill Road, Suite 110, Vienna, VA 22182.

JUST THE FREQUENTLY ASKED QUESTIONS

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 husband is not the same man I married! His personality changed after his severe brain injury. I feel like I have another child at home. He also gets easily frustrated and angered. Our children try to avoid being around him. What can I do?

A: Personality change is a common occurrence after brain injury. Caregivers and family members often described their loved ones as “different.” They typically have a difficult time coping with this change. It is important to allow yourself time to adjust to the change. Avoid thinking about and making comparisons to how your husband was before and after the injury. Get to know this “different” person your husband has become and try to do fun things together.

Here are some suggestions to help your husband manage his anger:

- ❑ Discourage your husband from saying the first thing that comes to mind. Teach him to think about other people’s reactions before he speaks or acts.
- ❑ Encourage your husband to be positive and sensitive to others’ feelings. Remind him to explain himself calmly.
- ❑ Encourage your husband to take a “time out” and try to relax when he recognizes that anger is building. Helpful strategies include breathing deeply and slowly or counting to ten before speaking or acting.
- ❑ Help your husband develop new ways to release anger and manage stress in the long-term. Examples include exercising, writing, and talking to someone he trusts.
- ❑ Identify trouble situations, people, and places that bring out anger. Make a plan to successfully deal with trouble situations and practice the plan ahead of time.
- ❑ Give praise when he controls his anger and expresses his feelings in positive ways.



*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*



(Relationships, contd. from page 1)

The differences in these styles may have been worked out, talked about, or simply become accustomed to before brain injury. After TBI, though, both survivors and spouses may change the way they express or receive love without ever realizing it. People who used to know just what to say or do to show love to their spouse can be left feeling bewildered. Likewise, both partners may miss the way their spouse used to express love to them and can struggle after TBI to notice their partner's attempts at expressing connection or intimacy.



In order to "close the gap", it is important that you and your spouse or partner work to figure out what preferred style you each have now for showing and receiving love. Overworked care-giving spouses may have formerly preferred physical signs of affection, but now notice that they feel loved when their partner does something for them - like the dishes. Survivors who previously preferred talking with their loved one may now prefer gestures from their spouse such as a hug or holding hands at a party.

As one strategy for improving your intimate connection to your partner, answer the following two questions. Remember that your answers may be different than they once were:

What are the things that my partner does NOW that make me feel loved?

What are the things that I do NOW when I am trying to show my partner that I love him / her?

Once couples have taken some time to discover their new preferred methods for expressing and feeling love, the true work begins. Sometimes when couples are feeling disconnected, it is natural for each person to want their spouse to be the one to reach out and re-establish a connection. Waiting for this to happen, though, is not the best approach. Each person must work on their own to move closer to an intimate connection with their spouse. After determining what love styles and intimacy approaches each person now prefers, each partner can make a commitment to attempt to show their partner love in the way their spouse prefers. In addition, by learning how your partner now instinctively shows love, you can begin to look for the times that they are reaching out to you that you may have not noticed before. (continued on the next page!)

(Rawlins, contd. from page 2) and once he brought it to our attention, we could do something about it. Instead of engaging in an argument or giving each other the silent treatment when one of us was frustrated with the other one, we found ways to open up and discuss what was really bothering us, so we could work on the root problem together.

I am now a huge fan of talk therapy. It is drug-free, it can provide insights that improve your life for the long-term, and it has no negative side effects. I've learned how to identify and manage my own emotions better, how to cope with change, and how to manage my stress and sleep problems, all through speaking to therapists.

Edited version used with permission from BrainLine.org, a WETA website. www.BrainLine.org. You can find all Rosemary's blog posts at: <http://www.brainline.org/rosemary/>

In order to begin the process of finding out how you and your partner prefer to express and feel love today, take the following quiz and then share your answers with one another. Both survivors and spouses should keep a copy of their partner's answers and work to show love in their partner's preferred way at least once a week. When you notice that your spouse does one of the things that he or she prefers for you, the list can help you to hear your partner say, "I Love You."

After TBI Preferred Intimacy Quiz

People feel loved in very different ways. For example, one person may feel loved when their partner hugs them. Another person may feel most loved if their partner sits beside them at a dinner party.

After TBI, both spouses and survivors undergo many changes. People may not feel love in the same ways they did before. Take this quiz to learn what makes you feel loved today. Share this information with your partner. Have them complete the quiz too, and take care to note their responses.

<input type="checkbox"/> 1. Tells me he/she finds me attractive	<input type="checkbox"/> 10. Helps me to complete a task I am struggling with
<input type="checkbox"/> 2. Says kind things to me	<input type="checkbox"/> 11. Makes me something (e.g. dinner; a card; something I can use; etc.)
<input type="checkbox"/> 3. Praises how hard I am working / trying	<input type="checkbox"/> 12. Does something that is usually my responsibility (e.g. cooks dinner, cuts the grass, etc.)
<input type="checkbox"/> 4. We do something fun together	<input type="checkbox"/> 13. Hugs or kisses me
<input type="checkbox"/> 5. Shows real interest in what I have to say	<input type="checkbox"/> 14. We make love
<input type="checkbox"/> 6. Gives me his / her undivided attention	<input type="checkbox"/> 15. Stays near me (sits next to me, holds my hand, stays with me at an event, etc.)
<input type="checkbox"/> 7. Gives me a gift	
<input type="checkbox"/> 8. Remembers a special day / event in my life	
<input type="checkbox"/> 9. Does something special for me for no reason	

Other ways that let me know my partner / spouse loves me:

Remember that there is no right or wrong way to feel or express love. The important thing is that couples work hard to understand both who they are now since the TBI and who their partner is, and how their expressions of love have changed. Once couples begin to show love in a way that their partner can feel, they will increase their ability to feel emotionally intimate with their spouse in new and exciting ways.

Stay tuned for Part III in our next issue!



VCU, PM&R

TRAUMATIC BRAIN INJURY MODEL SYSTEM

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RICHMOND, VA 23298-0542

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Founded in 1983 by families and concerned professionals, the Brain Injury Association of Virginia 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. Over 10,000 people find help from BIAV each year.

BIAV is a chartered state affiliate of the Brain Injury Association of America and exists to be the voice of brain injury through help, hope and healing for Virginians with brain injury and their families. We educate human service professionals and the community on the risks and impact of brain injury and advocate for improved medical and community-based services. Many of our staff members are Certified Brain Injury Specialists (CBIS Certified).

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



The Voice of Brain Injury: Help, Hope & Healing