Terry Welch: Hello, and welcome to the TBI family. I'm Terry Welch, producer of the podcast, and I'm super excited you've decided to join us for this first episode of season two of the podcast. I think the whole season's going to be great. We're going to be talking about things like how to deal with sleep issues after a TBI, why women are affected differently by a traumatic brain injury, and in this podcast, we're going to be talking about caregivers helping other caregivers. Before we get started with the podcast, though, I wanted to give you a quick heads up. On March 28th, on our Facebook page, that's The Defense and Veteran's Brain Injury Center Facebook page, at 1:30 PM., that's March 28th at 1:30 PM, we're going to be having a TBI townhall featuring our director, Ms. Kathy Helmick. In order to get as many questions answered as possible, we would love it if you would send us the questions that you have about traumatic brain injury. You can send them to info@dvbic.org, that's info@dvbic.org. I-N-F-O @ D-V-B-I-C dot O-R-G. And just put TBI townhall question in the subject line. Please send those questions by 9 AM on March 26th. That will give us time to look up any numbers or data that we need to answer your questions. Once again, that's March 28th at 1:30 PM. So thanks again for joining us. Let's get started with the podcast. Here's the music.

[music]

Dr. Scott Livingston: Welcome to season two of The TBI Family, the podcast for caregivers of service members and veterans who've experienced traumatic brain injuries. This program is produced by the Defense and Veterans Brain Injury Center, otherwise known as DVBIC. I'm your host, Dr. Scott Livingston. We've got a great season planned for you. We're going to give you advice on how to best advocate for your care recipient. We'll discuss how to recognize and deal with depression. We'll talk about caregiver self-care and why taking time for yourself is necessary. And we're also going to look back at the financial and legal issues that can be problematic for caregivers. There will be a lot more to this season 2, so if you're not already subscribed, why not take a moment to do so now, so you don't miss anything. We'll be here when you get back. If you feel like the podcast has been helpful or interesting, why not give us a review on iTunes or whichever podcast program you prefer. Reviews make us easier to find in the search tool which helps other caregivers to find us as well. We found out recently that The TBI Family is the most listened to caregiver podcast in the nation thanks in no small part to those of you who've provided reviews or shared the podcast with your friends. We're proud of the success of the podcast and thank you for your help.

If you're new to the podcast, feel free to go back and listen to the 10 episodes that made up the first season. The subjects of each podcast are right in the titles so there's no need to listen in order. Just pick a topic that interests you. If you feel like we're missing a topic, let us know by emailing us here at info@dvbic.org. In this episode, we're talking about caregivers helping other caregivers. So let's get started.

[music]

Back in December 2005, Bob Woodruff was named the co-anchor of ABC World News Tonight. He'd won multiple Emmys and was known for reporting from some of the world's most difficult places including North Korea, Afghanistan, and Iraq. A little over a month after rising to ABC's anchor desk, Woodruff and his cameraman were
injured by an improvised explosive device base near Taji, Iraq. Shrapnel and stones penetrated his face and neck, and he suffered a TBI severe enough to require that a portion of his skull be removed to ease the pressure on his swelling brain. The left lobe of his brain was injured leaving him with language difficulties that would keep him from the anchor’s chair. He spent five weeks in a medically induced coma and awoke to a life that had changed forever.

But his wasn’t the only life that had changed. A writer, businesswoman, and mother of four, Woodruff’s wife, Lee, also realized that her life would never be the same. Thrust into the role of a caregiver, and the caregiver of the nation’s then most famous TBI patient at that, Lee saw areas in which caregivers could use help. So she and her husband leveraged the attention that they were receiving to found the Bob Woodruff Foundation. Lee Woodruff spoke with TBI family producer Terry Welch about the shock of becoming a caregiver and why she and her husband created their unique organization. So last season we started this whole podcast off by talking to people who had kind of only just joined the ranks of caregivers.

Welch: Could you tell me what those first days were like for you?

Lee Woodruff: Well, the first days of caregiving for me were just a blur. And I think for most people thrust into that situation you're just kind of still in shock. So if you're caregiving somebody-- and I'm going to imagine most brain injury patients, it's been a sudden event that has caused the brain injury. So I think you're just making it sort of day by day. You're trying to learn as much information as you can. And you're in a state of shock.

So then over time you and your husband you were led to found the Bob Woodruff Foundation. Tell me a little bit about what led you to actually found the foundation itself.

Woodruff: Well, Bob and I were civilians in Walter Naval Medical Center at Bethesda. And we got the same care as every other service member there, which was absolutely excellent at the acute care stage. But I was thrust into a world of military families that I was really not familiar with. Bob had been covering wars for 10 years. So he knew a lot about the military, about the culture. He had a number of friends who he'd been embedded with. But to me, I was struck so much by the absolute humility and just sense of family of so many of the people I met who were doing this without a lot of support. Our journey really diverged from those of everyone else when we left the acute care stage and went on to a private hospital because Bob was a civilian. And I realized that it was very asymmetrical how people would end up making that transition. And we just determined that if Bob got well enough we would use the kind of crazy amount of attention we got for our story and turn it back on those who needed it.

Welch: So let's get into how the foundation works. How does it work and what are you looking for in organizations to which you provide grants?

Woodruff: Well, we at the very beginning, Bob and I came out with a book called, In An Instant. We went on a book tour around the country. People were very curious about how Bob was because we'd been very private. We had a lot of people in book signing lines or meeting us after we would speak who just sort of- I remember just people putting money in our hands and saying, "Make sure this gets to a soldier." So we realized pretty quickly that we had a moment where we could harness all of this goodwill. We didn't have any expertise. We weren't home builders. We didn't have backpacks. We didn't know anything about rehab but we-- what we realized pretty quickly as two journalists as we were traveling, we were meeting people and we were learning what they were doing in their communities to help that [inaudible] as they returned home. And so we thought, well jeez, maybe we'll just raise money and we can look at those programs that are working, try to connect people, get them to collaborate, and give grants out to the organizations that are doing the work. And that's kind of how we began. And what we realized was it was actually a pretty smart model at the end of the day because these wars are still going on and the needs have changed so much. I mean, 10 years ago, we were writing individual checks for someone's electricity or a wheelchair ramp. And now we're looking at best practices and some of our metrics when you ask who gets a grant. We didn't have any expertise. We weren't home builders. We didn't have backpacks. We didn't know anything about rehab but we-- what we realized pretty quickly as two journalists as we were traveling, we were meeting people and we were learning what they were doing in their communities to help that [inaudible] as they returned home. And so we thought, well jeez, maybe we'll just raise money and we can look at those programs that are working, try to connect people, get them to collaborate, and give grants out to the organizations that are doing the work. And that's kind of how we began. And what we realized was it was actually a pretty smart model at the end of the day because these wars are still going on and the needs have changed so much. I mean, 10 years ago, we were writing individual checks for someone's electricity or a wheelchair ramp. And now we're looking at best practices and some of our metrics when you ask who gets a grant. And I wish we had enough money to give 90% more of the people a grant. But we really look for groups that are operating in areas where veterans and their families live and we look for programs and practices that are replicable because we want people to share best practices. There's too much following in this field. Too many elbows out. There's, as you probably know, more than 45,000 non-profits I think is the working figure that claim to help veterans. And they're not all created equally. It's hard to really know if you're a civilian who's effective and who's not.
And then we look for the actual work that's being done. What are the outcomes? And are people good stewards of the money? Do they keep their overhead low? Do they watch their expenses? So a lot of things go into kind of figuring out where grants go. And at the risk of talking on too long here, right now at this moment in time in the wars, we have three buckets that really matter. One is supporting families, caregivers, and kids. The other is in the employment area, helping people retool their capabilities once they're unable to go back into the military. And third, it's really a lot of work in the area of post-traumatic stress and suicide prevention because mental health is such a huge part of this.

Welch: What have you found most satisfying about your work as an advocate and, some would say, an example for veterans and caregivers?

Woodruff: I think probably the most satisfying thing, for me, is when I meet somebody just off the cuff who says, "Your foundation helped us," and then they go on to tell me the story. Because I think it's the stories that are the thing that really keep you going. When you realize that we're-- all of this stuff that we-- it's real easy to get caught up in sort of the big picture stuff and a big part of my job, I don't do the day-to-day. Bob and I don't get involved in who gets what grants. That would be too hard because we have so many friends in the space. So we let the organization sort of go through the vetting process on their own. And I do a lot of fundraising. So that's big picture stuff. That's putting on some high heels and makeup and walking in a boardroom and asking people for money. And when I get the chance to intersect with somebody who we've actually helped, that's huge.

Welch: What would you say to those caregivers who might be struggling with even just the day-to-day aspects of care and might not have the time or means to start an organization like you have.

Woodruff: I get asked a lot from people, not just in the brain injury field, but somebody who's come through something traumatic or had an experience with losing somebody or battling a disease. And I get asked a lot about creating a foundation and non-profit and I say-- my answer, honest to God, is run the other way. Don't do it. And people laugh and they look at me like I'm crazy but I don't think we had any idea what we were getting into when we did this. And America is the most generous nation in the world and people are so great about doing a fun run or a bike challenge across America. But nobody, when they start a 501(c)(3), thinks about the nitty gritty things. They don't think about the fact that the government comes in and looks at your books every year so you have to have bulletproof accounting and you have to do a whole host of things to be a charity and to keep that status. You have to worry about health insurance for your employees if you have employees. All of these things that are essentially running a business and I say to people, "We're all so quick to do Mickey's Fun Run for heart disease and these are great things but there's probably somebody out there who's already trying to raise money for heart disease, research, care, whatever it may be, so do your fun run but have the proceeds go to that person and I think we have so many different areas where people are working on the same cause sometimes but not aways connecting and there are amazing charities out there where you don't have to go to sleep at night, as I used to do in the early days, and say, "Oh my gosh. We have five employees and I'm responsible for them having jobs, and having a paycheck coming in, and paying their mortgage", and this feels like a lot of responsibility on top of taking care of my husband. So think really hard about it, how much you want to be an entrepreneur because that's what it feels like at times.

Welch: Finally, are you heartened by the current state of TBI research, or how do you feel about the current state of TBI research?

Woodruff: So I think that the words and the vast numbers of TBI have certainly brought more attention to research and I'm really heartened by that because the brain is a big old complicated thing and we've got lots of stuff to figure out but just in the 10 years that I've been focused on this area, looking at the ways we now add in non-traditional treatments or consider alternatives or holistic therapy, I'm really heartened by that. [music]

Livingston: After a little over a year of recovery, Bob Woodruff returned to reporting at ABC news. He has said that he has about 90% of the mental capacity he once had but despite ongoing symptoms, he won his most recent Emmy 2015 reporting on the Rohingya Refugee Crisis in Burma. For more information on the Bob Woodruff Foundation or the organizations it assists visit bobwoodrufffoundation.org. [music]
Well, not everyone can start a large non-profit aimed at helping others, there are lots of ways to help fellow caregivers. We've often mentioned here on TBI Family that many caregivers feel like no one understands what they're going through. Simply knowing that they're not alone can be comforting for them. So one way caregivers can help is to tell their stories. One military spouse did just that, telling her inspiring story for Head For The Future, DVBIC’s Traumatic Brain Injury Awareness Initiative. A Head For The Future’s TBI champion video series features real stories of TBI diagnosis and recovery. Robyn Mincher, a staff member with A Head For The Future who helps produce the series just got back from a video shoot and she's here to tell us about it. Welcome to today's podcast Robyn.

Robyn Mincher: Hi Dr. Livingson.

Can you tell us about the video series and a caregiving story you just captured?

Mincher: A Head For The Future has been all over the country filming with inspiring service members, veterans and families who experienced a TBI and got help. Their stories can benefit others through insights about preventing and recognizing signs and symptoms of a TBI, seeking treatment and support, and overcoming challenges that confront both the service member or veteran and their family members. We filmed to people like a Coast Guardsman who fell 60 feet while he was rock climbing. And a veteran who had symptoms but tried to tough it out for years without support. Yet we hadn't touched on a vital part of these compelling stories, the caregiver. That's where Jasmin and her four kids come in. Jasmin is a former airman in the US Air Force. She cares for her husband Wally, a retired Marine Corps officer who sustained a TBI in combat. Jasmi and Wally opened up their home to me and a small video crew to film what they had for the future. And show us what caregiving for someone with a TBI is really like. It's not what you think. How about I take listeners on set to meet the Blair family.

Video Producer: Yeah. Your name for the fourth time [laughter].

Second Producer: I'm speaking.

Video Producer: Okay. Roll.

Jasmin Blair: Sorry. I get really nervous [laughter].

Video Producer: Oh. Yeah?

Mincher: First, we'll meet Jasmin. She's showing me where she puts the keys.

Jasmin Blair: Right. So this is Wally's office. This is where he normally does all of his schoolwork. And this is where I staged his keys, and his wallet, and his phone. That's way in the mornings first thing he knows where everything is. And doesn't have to worry about looking for anything at any point in time.

Good. Good point. I'll [inaudible].

Mincher: Jasmin is giving a tour of the thing she does every day to help her husband like keeping a daily calendar for schedule and activities, appointments, and reminders.

Jasmin Blair: We have multiple calendars in our house. I make sure any appointments he has or anything that I need of him that I put it on his phone calendar. And then I have a calendar above his desk for stuff that I need him specifically to handle. And then I have a family calendar.

Mincher: Jasmin has been a caregiver ever since Wally sustained a TBI in a combat incident that earned him the Purple Heart. Yet she's not the type of caregiver you might think of. She's not giving Wally medication. Although, she does make sure that he remembers to take it. She doesn't bathe him, or feed him, or help him walk. Although, some caregivers do these things for loved ones who have more severe TBIs. Wally was diagnosed a several mild TBIs. He experiences challenges with his memory and other symptoms every day. Here's Wally.

Wally Blair: Some of the symptoms do still reside. But I think the family structure and the home life right now is setting this structure that I can maintain where I am. You'll probably look around here. You'll see 12 calendars to include everything that-- things and everything else just to make sure that we're on the same sheet of music. [music]
**Mincher:** Meeting Wally, you’d never know he has a TBI. He’s led a successful military career serving for many years in active duty after his diagnosis. And he’s studying now to become a teacher. He’s smart, witty, and a great dad and husband. TBI is called the invisible wound of war in the military community. It’s not only a physical injury but it affects the lives of Wally, Jasmin and their four kids every day. And many other military families daily.

**Jasmin Blair:** Sometimes it is difficult to see him struggling. And then have to pull people at the side and discuss what he's been through. They've known he was in the military. But because it is an unseen thing. And you don't really know they have it because it's not an instance of you were shot or something like that. You can't see what's going on in his brain.

**Mincher:** And Wally is not alone. Since 2000, more than 375,000 service members had been diagnosed with TBI. And many of them are cared for by military spouse just like Jasmin. Caregiving for TBI is different for everyone because ever TBI is unique. People with the mild TBI have persistent headaches, can't sleep. Others have problems with their balance or hear ringing in their ears. And there are many other symptoms. Some people have a combination of symptoms which can make it an even greater challenge for the caregiver. So like Jasmin, everyone caring for a loved one with TBI needs to find the best way to adjust their lives.

**Jasmin Blair:** Because there are so many resources out there for caregivers. You do have to take the time and energy to put into what might help you or your family or your service member because it's about finding whatever works you in your particular situation since not everyone is the same. And, knowing where your strengths are and where your weaknesses are. And, going in with the organizations that you feel like can better help you become what you need to be.

**Mincher:** Including learning ways to tackle the challenges as a family.

**Wally Blair:** She’s making it better for our children as well. And, they’re very apt to what it is I'm going through and very educated on that as well thanks to her. [music]

**Mincher:** We start filming by talking about perhaps the most important part of Jasmin’s journey, how she met Walley. And, it’s a sweet story.

**Jasmin Blair:** When we met, we sat and talked for about three hours just about life and what we wanted out of it and our goals in life. And, two days after I went back to Las Vegas, and we just decided to get married.

**Mincher:** Jasmin  had just enlisted in the Air Force while he was a young leader in the Marine Corp.

**Wally Blair:** My time in the military was awesome, probably the best 20 something years of my life. It was big in the teamwork, comradery, getting the job done, having fun while doing it, get to explore different places, been all around the world. And, more importantly, just met my wife right around my two-year mark. So, she spent most of my-- most of my time in the career with me. So, it was good times.

**Mincher:** While he deployed several times throughout his military career, while Jasmin took care of their grown family. In 2007, one incident would change his life.

**Wally Blair:** I was conducting a relief in place convoy. Three days in country, there was a vehicle I was riding in was struck by an IED, roadside IED.

**Video Producer:** Do you remember it pretty well?

**Mincher:** That’s my producer, Mike.

**Wally Blair:** I barely remember the stop in Ramadi. But, I don't remember anything that happened in between.

**Mincher:** Although while he was diagnosed with mild TBI, also known as a concussion, TBI recognition and treatment were much different 10 years ago.
Wally Blair: It was very ad-hoc type diagnosis. It was done at an aid station when we got in Falluja. It was off hours. They didn't have a doctor on staff. I followed up with my primary care doc who just, "Well, I see you got your bell rung. Typical thing." So, it was kind of brushed under.

Mincher: Like many service members Wally he was eager to get back to duty.

Wally Blair: My next goal was making sure that my platoon was ready to go for the next convoy and then I kept that pain inside. [music]

Mincher: For almost nine years, Wally had problems sleeping, he had short-term memory loss often forgetting appointments or tasks. He was irritable with Jasmin and his family. He was tired and anxious. While Jasmin was noticing his symptoms he was ignoring them.

Wally Blair: When I got home I was short-fused. I wasn't sleeping. Wasn't eating. Wasn't doing anything normal but I was also just completely lashing out to a point where I think I was losing the family.

Mincher: In 2015, while he was reaching a boiling point, so was Jasmin.

Jasmin Blair: Although I think he knew there was a problem, and he noticed a problem I think there was reluctance on his part to get help. What will my command think? What will my Marines think? What will my family and friends think if it is something serious?

Mincher: Wally went to the TBI clinic at the US Marine Corp Wounded Warrior Battalion, he was assigned a recovery support specialist from DVBIC. And, he told her everything. The symptoms he was experiencing for years, the pain he was going through, and the fear of asking for help with Jasmin by his side. [music]

Jasmin Blair: So I was able to go to the meetings with him every two weeks and sit down and talk with her about any concerns I had, or questions, or-- she would ask him and I, "What have you accomplished of--" she would give him goals every meeting, things that she needed him to accomplish, whether it was appointments, or things to look over for information, or stuff like that. So by doing that, it helped keep me as the caregiver more informed of his process.

Mincher: It was through this support that Jasmin found herself in a caregiving role. Now that they knew what they were dealing with and had resources to help them, life started to return to normal, a new normal after TBI. Wally still copes with his symptoms, but he continues treatment with the healthcare team, and Jasmin understands him and helps him cope.

Jasmin Blair: My goal every day is just to know that when we close down for the night to go to bed, that we have let him lead a normal day, and be productive, and still maintain his dignity and respect throughout the day without making him feel like if he forgot something he wanted to say or something important he was supposed to do, not coming down on him.

Mincher: Jasmin knows when Wally needs to rest, or if he experiences anxiety or other symptoms. And she also knows when to take care of herself, too.

Jasmin Blair: I feel it’s important for caregivers to take care of themselves because if they’re not doing that, then they can’t really better support their service member or their family if they’re constantly at a point to where they’re stressed out. And there have been many days for me to where I haven’t done what I needed to do to take a timeout, and I’ve noticed myself getting frustrated and becoming short with him.

Mincher: And as a family, Jasmin, Wally, and the kids are all in it together.

Jasmin Blair: It’s just due to the TBI, it just make him a little bit more agitated at times. And if they see him in that state, they’ll walk up to him and be like, "Hey, do you want to go for a walk? Or do you want to go for a bike ride?" So they know what they need to do individually or as a group to better help him.

Mincher: After the interviews, Jasmin continues the tour of their home. She pauses at a wooden table that serves as a display box, full of Wally's military medals. Standing out in between rows of badges, medals, and other honors is his bright Purple Heart. [music] It’s a source of both pain and pride for Wally.
**Wally Blair:** I didn't do this for the ribbons, the medals, the pay. And frankly, I don't like to wear my ribbons because it turns into, "Oh, you've been there. You've done this." And my wife finally convinced me to put it in, and I was presented on my retirement day at the retirement ceremony in Camp Legune.

**Mincher:** Jasmin's even more proud of her husband for getting the help he needed. By improving his life he made his family stronger.

**Jasmin Blair:** I'm very proud of him for making sure he stuck with it and did what he needs to do to help himself through the process because as a caregiver and as a family, we can only do so much. He has to meet us halfway in the process. So it's us doing our part, and him doing his. And he's went above and beyond to complete his part of this whole process and continues to work on looking for new ways to health, relax, and things like that.

**Mincher:** And while caregivers in military families don't often get medals, Wally would gladly give them his.

**Wally Blair:** I mean, they've paid more of a price than I have of just working with me and then being there for me throughout the years.

**Livingston:** While we gave you two examples in this podcast of caregivers helping caregivers, remember that there are many other people and organizations out there willing to help, be they caregivers, non-profits, or government agencies. If you're looking for assistance, you can find a list of organizations that provide help in our family caregiver curriculum, which you can download at dvbic.dcoe.mil. [music]

The TBI Family is produced and edited by Terry Welch and is hosted by me, Dr. Scott Livingston. It's a product of the Defense and Veterans Brain Injury Center, led by Acting Director Kathy Helmick and the Defense Health Agency's Research and Development Directorate, commanded by Rear Admiral Mary Riggs. Thanks this week to Sam Kelly of the Bob Woodruff Foundation, to Wally and Jasmin Blair, and to you for listening. We'll see you in two weeks.

**Narrator:** The views, opinions, and/or findings contained in this podcast are those of the host, reporters, and guests. They should not be construed as an official Department of Defense position, policy, or decision unless designated by other official documentation. [music]