



**DEFENSE CENTERS OF EXCELLENCE**  
For Psychological Health & Traumatic Brain Injury

# **Resilience Efforts to Assist Recovery for Families Affected by Polytrauma**

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**NICoE**  
National Intrepid  
Center of Excellence

# Topics

- Introduction
- Defining Resilience/Polytrauma
- Significance of the Caregiver
- Providing Family-Centered Care
- Review of Resilience Efforts

# Chairman's Priority

- “How we take care of those who are wounded and their families, and the families of the fallen, is right at the center of my life”
- Long-term commitment
- Shift in thinking
- NOT just about medical care
- Reorient leadership

# Chairman's Intent

**Total Force Fitness** is “a state in which the individual, family, and organization can achieve and sustain optimal well-being and performance under all conditions.”

# Total Force Fitness

MIND

BODY

Spiritual  
Psychological  
Behavioral  
Social

Physical  
Nutritional  
Medical  
Environmental



# Total Force Fitness



# Core Messages

- Treatment works: the earlier the better
- Reaching out is an act of courage and strength
- You are not alone: help is available
- Practice realistic optimism (education of expected recovery/proactive reintegration)
- Post-Traumatic growth

# Definition

## Resilience (psychological):

- is the positive capacity of people to cope with stress and adversity
- is an individual's capacity to thrive and fulfill potential despite or perhaps even because of such stressors
- is NOT the power or ability to return to the original form

# Definition

## Family Resilience:

- “the ability of a family to respond positively to an adverse situation and emerge from the situation feeling strengthened, more resourceful, and more confident than its prior state”

(Source: Simon, Murphy, & Smith, 2005)

# What is Polytrauma?

**Polytrauma** is two or more injuries to physical regions or organ systems, one of which may be life threatening, resulting in physical, cognitive, psychological, or psychosocial impairments and functional disability.

- Lack in universal consensus
- Trauma = bodily shock or emotional injury
- Poly = many (often times TBI)

# Comprehensive Evaluation

- 1) Physical
- 2) Cognitive
- 3) Behavioral (emotional)
- 4) Social Support/Community reintegration
  - **Family/Significant other(s)**
  - **Social Interactions**
  - Financial Stability (habits)
  - Employment (uniform/civilian)
  - Academic/School
  - Recreational activities
  - Various psychosocial complexities

# Families Coping w/ Polytrauma

What we know:

- Long-term care and support is needed
- Shift from acute care to chronic and long-term care
- Shift from institutional/formal to family/informal care
- Care: 1) complex, 2) unknown, 3) family dynamics
- Pain, depression, and anger

# Families Coping w/ Polytrauma

What we don't know:

- Little knowledge exists about how families function and cope after a loved one has sustained polytrauma
- Family functioning three years post injury?
- Best practices for communication/education for adaptation/adjustment across continuum
- Best practices for providing family-centered care

(Source: van Ryn, Griffin, Phelan, Hall, and Friedemann-Sanchez, 2009)

# Significance of Caregiver

- Caregiver problem-solving abilities to patient adjustment
- Direct relationship w/ health of patient
- Strengthen the relationship/strengthen the recovery
- Crucial that we identify caregiver characteristics that may be associated with patient adjustment

(Source: Elliot, Shewchuk, & Richards, 1999)

# Caregiver Influence

Caregiver adjustment is believed to be a function of interactions between environmental and individual characteristics

- characteristics include primary stressors (e.g., role overload)
- secondary stressors (e.g., loss of self in the caregiving role)
- coping strategies (e.g., problem-solving skills, management of meaning)
- social support

(Source: Pearlin, Mullan, Semple, & Skaff, 1990 )

# Caregiver Characteristics

- personal characteristics (e.g., stress appraisal, coping strategies, social support) predict caregiver adjustment as delineated in Pearlin's Process Stress model.
- when caregivers are unable to cope effectively with role responsibilities, the health and well-being of the care recipient may be jeopardized
- caregiver problem-solving characteristics are essential yet understudied elements of the caregiving process

(Source: Chwalisz, 1992, 1996; Haley et al., 1996; Shewchuk, Richards, & Elliot, 1998)

# Caregiver: key findings

- Global challenges: physical, emotional, economic, legal, etc.
- Primary skills required:
  - 1) Problem solving skills (social problem solving abilities)
  - 2) Stress management
  - 3) Coping skills
- Medical condition, understanding of expectations for recovery, skills needed to provide direct care
- (Support and Family Education (**SAFE**) program

# Family-Centered Care

- Prepared Family Caregiver model
- COPE:
  - Creativity
  - Optimism
  - Planning
  - Expert information

(Source: Houts, Nezu, & Bucher, 1996)

# Resiliency Model of Family Stress, Adaptation, & Adjustment

- 1) balancing the illness with other family needs
- 2) maintaining clear family boundaries
- 3) developing communication competence
- 4) attributing positive meanings to the situation
- 5) maintaining family flexibility
- 6) maintaining a commitment to the family as a unit
- 7) engaging in active coping efforts
- 8) maintaining social integration
- 9) developing collaborative relationships with professionals

(Source: Patterson, 1991)

# Resiliency Model of Family Stress, Adaptation, & Adjustment

Family resilience = a positive outcome after exposure

- Identify protective factor/buffer
- Supports ability to endure and adapt
  1. Adjustment: protective factors
  2. Adaptation: recovery factors

# Cultural Transformation Beyond Military Medicine

## Resilience

- A set of actions and attitudes that prepare individuals and groups for adapting to challenging situations; establishing a “new normal;” and realizing one’s potential for growth

## Recovery

- Assessing and treating physical, psychological, and spiritual issues, and ensuring that warriors and their families have the resources they need to recover to pre-injury levels or higher

## Reintegration

- Providing support networks and resources for successful reintegration; and continuing to encourage and support programs that foster warrior and veteran employment, education and health care

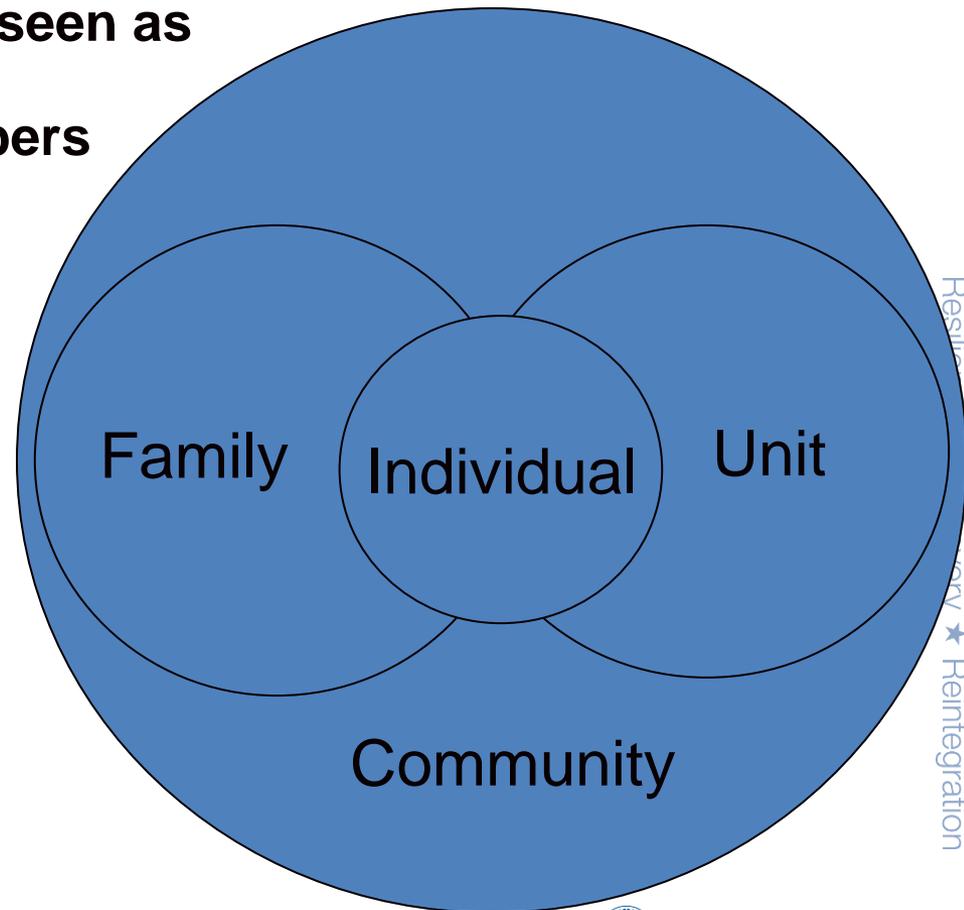
# Benefits of Social Support

- **Social support (civilian literature):**
  - Higher income (Huang & Tausig, 1990; Campbell et al, 1986)
  - Fewer mental and physical health concerns (Resick, 2001)
  - Higher life expectancies (Berkman, 1995)
- **Social support/cohesion (military literature):**
  - Buffers against PTSD and post-deployment mental health concerns (Solomon & Mikulincer, 1990; Brewin, Andrews & Valentine, 2000)
  - Continued good performance under stress (Griffith, 2007)
- **Marriage & marital satisfaction**
  - Higher income, fewer mental and physical health concerns, & higher life expectancies (Waite & Lehrer, 2003)

# Social Fitness

- Recognizes critical role of relationships/social support
- Social fitness domains can be seen as ecological model
- TFF model includes review papers about unit and family factors

- Considerations:
- Individuals exist within multiple social systems
- Social relations can be resources and/or demands



# Community Resilience Factors

## RAND Study: Identified Resilience Factors





# Building a Culture of Resilience



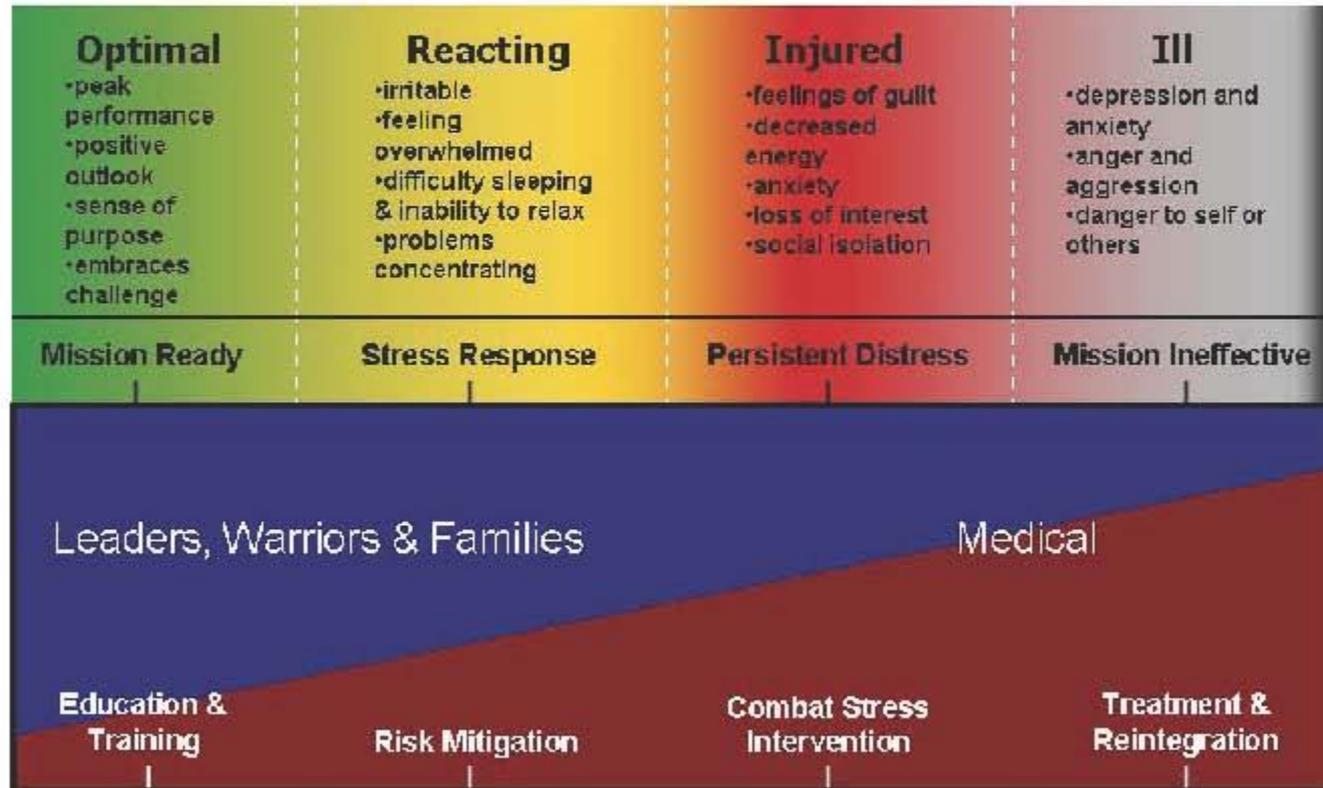
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## EARLY INTERVENTION

MISSION READY

MISSION INEFFECTIVE



## RECOVERY

# Web-Resources

- **afterdeployment.org**
- ***inTransition***
- **Realwarriors.net**
- **Military OneSource**
- **Militarytomedicine.org**

# Evidence Based Caregiver Education Programs: Best Practices

- American Red Cross Family Caregiving Program
- Caregiver Health Education Program
- Caring for You, Caring for Me
- Coping with Caregiving
- Powerful Tools for Caregivers

# Caregiver Education Programs Further Study

- Stress Busting
- COPE (creativity, optimism, planning, & expert information)
- Guided Care Program for Families and Friends
- SAFE program

# Other Resources, to name a few...

- 2011 DoD/USDA Family Resilience Conference- Forging the Partnership (National *Children, Youth and Families at Risk (CYFAR)* Program )
- Warrior Resilience Conference(s)
- DoD Yellow Ribbon Reintegration Program
  
- Families OverComing Under Stress (FOCUS)
- Family Resilience Enterprise
- Soldier 360

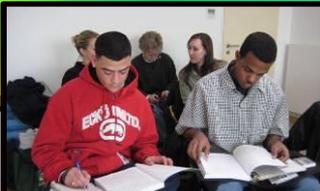
# Other Resources—continued

- America's Heroes at Work
- Entrepreneurship 'Bootcamp' for Veterans with Disabilities/Veterans Families (EBV & EBV-F)  
Syracuse
- Combat2College
- Animal Assisted Therapy

# Leader Comprehensive Fitness Course/Soldier 360°



Couples Communication



Classroom Work



PT Training and Planning

## Target Participants:

Career NCOs with previous Combat Tours

## Proof of Concept:

28 Senior NCOs from 172nd IN BDE, 18th CSSB, 709th MP, and JMTC

## Periodic Group meetings / activities:

Duration - 6 months

***“Learn, Do, Practice, Model, Teach, Change”***



Individual Sessions



Soldier Teaching



Warrior Yoga



Alcohol Management



Pain Management



Meditation Relaxation

# Contact Information

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