

Identifying Post-War Problems: Shepherding Returning Veterans with Traumatic Brain Injury

by Amy Blumenshine, *Coming Home Collaborative*

As the church calendar turns toward Lent and Easter, self-reflection and evaluation are traditional. For those who care about recent veterans, sooner is better than later in helping determine whether re-adjustment problems may be related to traumatic brain injury (TBI). Church leaders, families and congregation members connected to recent veterans should be able to recognize symptoms and know available resources.

The Minneapolis area is fortunate to have special services available at the Fort Snelling Veteran's Administration (VA) Hospital geared up for the large number of veterans who have been exposed to potential damage as part of their war-time deployments. As many as one in five Iraq veterans have been exposed to blasts that can cause invisible injuries. Many more have suffered falls, motor vehicle accidents, whiplash or other head impacts that can cause problems.

Those who know the veteran prior to deployment are best able to identify changes in functioning. A common feature of TBI is the person's inability to recognize that they have a problem. A Department of Defense study urges early diagnosis of TBI in order to prevent even worse harm. Their statistics show that those who have mild TBI are particularly vulnerable to incurring additional head injury, often through impaired judgment or balance.

When someone in civilian life suffers a concussion, medical procedure typically protects them from additional injury as they recover (i.e. contact sports are prohibited for a period). During war-time deployments, however, soldiers are often re-exposed to additional injury. Many times soldiers reject seeking medical protection after an injury because they have a strong sense of loyalty to their units and do not want to let their buddies down. Additionally, most mild TBI is not diagnosed in the war zone. Some problems do not become apparent until veterans encounter the complexities of civilian life.

Some veterans with undiagnosed TBI may lose jobs or spouses due to their frustration or depression around their symptoms, instead of getting the understanding and treatment that their war-related injury merits. "Come in and check it out," encourages Stacy Tepper, senior polytrauma case manager at the VA hospital. The "wait and see; give it a few months" attitude of many family practitioners is inappropriate when TBI may be the problem, she explained at a recent workshop for care providers.

People with mild TBI may have some of the following symptoms: headaches, dizziness, balance problems, fatigue, sensitivity to noise and light, insomnia, impaired memory, poor concentration, depression, anxiety and irritability. For instance, someone with mild TBI may be distractible, lose their train of thought or have trouble focusing. They may not remember conversations, phone numbers, appointments or directions. They may have trouble planning, initiating or organizing; they may leave tasks unfinished or act impulsively.

Iraq and Afghanistan region veterans and their families can contact Mark Frenzel, their special liaison at the VA

Synod Roundtable Scheduled

People involved in ministry with veterans and their families are invited to share their ideas and resources at bi-monthly roundtables. Our Saviour's Lutheran Church, 2315 Chicago Ave., Minneapolis, will host networking and information luncheons regarding veteran's ministry on Tuesdays, March 11 and May 15, noon-1:30 p.m. RSVP ListenToVets@comcast.net or call 612-871-2967.



Hospital at 612-725-2000, extension 3929. Another good local resource is the Minnesota Brain Injury Association, www.braininjurymn.org. They provide free case management for families in the initial two years of coping with diagnosis and treatment, and work with many veterans.

Constitution Review Committee Restates Guidelines

The synod congregation constitution review committee recommends the following steps for congregations that are considering amending a constitution.

First, obtain a copy of the latest (2007) *Model Constitution for Congregations of the Evangelical Lutheran Church in America* and the Guidelines. Both can be downloaded from the ELCA Web site (www.elca.org/secretary/Constitutions/congregations/index.html). Second, bring the present constitution into compliance with the model at those sections where specific wording is required (marked with an asterisk in the model). Third, submit the constitution and bylaws to the synod review committee *before* they are taken to the congregation for the first vote. If the constitution is not in a form which can be recommended to the synod council for approval, the remedial work can be done before the congregation takes the first vote.

"If those assigned to amend a constitution have questions, they may feel free to contact me," says Rev. Leonard Flachman, chair of the synod committee.