

TBI & PTSD

1. Prior to the Afghanistan and Iraq conflicts, Traumatic Brain Injury (TBI) and Post-traumatic Stress Disorder (PTSD) were not conditions anyone focused on in the Research community.
2. TBI has been labeled “the silent epidemic” ... even prior to these conflicts.
3. Though TBI has received much notice in recent years; there has, in fact, been a long history of TBIs throughout the world resulting from auto accidents, falls, assaults, sports injuries, etc. Public knowledge and awareness has simply increased due to conflicts such as Iraq and Afghanistan.
4. While there is no simple “cure” for these conditions, there is a strong need to invest in research to develop community-based systems of support and services that address the needs of this silent epidemic that are life-long.
5. At the Office on Disability at HHS, I prepared with the support of the Honorable Margaret Giannini and her staff many research papers that analyzed TBI programs and services identified through a “Continuum of Care” analysis of TBI Rehabilitative Services categories, including ...
 - A. Acute Trauma Care (Medical)
 - B. Acute Inpatient Rehabilitation
 - C. Post Acute Rehabilitation (Transitional / Outpatient)
 - D. Recreation
 - E. Behavioral Health
 - F. Transportation
 - G. Education
 - H. Vocational Rehabilitation / Employment Training
 - I. Housing
 - J. Advocacy

With this perspective, we analyzed TBI Programs & Services ... as provided by

- U.S. Federal Departments
- a sampling of International countries
- non-governmental organizations

While our efforts at HHS / OD were a strong beginning on researching a “Silent Epidemic” ... the project must be continued! To facilitate the creation and facilitation of programs and services needed by all TBI survivors, such research must be included in future health research goals. And, more to the point, women who survive TBIs have additional health needs that are all the more neglected. In fact, studies conducted after the Gulf War concluded that female service members were more likely than their male counterparts to develop PTSD.

To cite just one study, “there is a tendency to diagnose women as having depression, anxiety and borderline personality disorder instead of combat-related PTSD.” In addition to struggling with TBI and PTSD, women often must deal with sexual assault and victimization (whether military or civilian).

In conclusion, TBI and PTSD are critical topics that require much more Women’s Health Research.

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