



**BRAIN INJURY
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Helpline: 1-800-669-4323

No Brain Injury is
Too Mild to Ignore,
or Too Severe to
Lose Hope

The Positive Approach to Coping with Life after Brain Injury

By Carolyn Rocchio

Brain injury is a major public health problem worldwide, and when it occurs, it intrudes upon the lives of every member of an extended family. Just as the person who is injured is changed, all others who care about that individual are affected in a variety of ways, some positively, while others negatively. What are some of the forces at work that help people cope with these inevitable changes? When speaking with survivors of brain injury and their families, I found that there are many commonly shared ideas about getting through catastrophic situations in an emotionally and physically healthy manner. Some recommendations worth considering follow.

Many families immediately respond that faith helped them through the recovery of a loved one. Some families with no religious affiliation and little or no experience with prayer found that when faced with tragedy involving a family member or dear friend, they found themselves praying, possibly for the first time.

The healing power of prayer is universally accepted as the first line of defense for "believers," and recent studies support the theory that faith influences the body. "The mind and body used to be considered separate realms," says S. Bryant Kendrick, associate professor of internal medicine at Bowman Gray School of Medicine, Wake Forest University in Winston-Salem, N.C. (Goodwin p. 83) Just as stress increases the production of hormones that affect the immune system, so also does the mind over body theory hold true when dealing with other life events.

The federal government has funded 43 medical studies on spirituality and religion as therapy, and even the prestigious *Journal of the American Medical Association* has shown interest in the subject by asking its readers if prayer or participation in religious observances should be recommended when prescribing for patients. The National Institute of Healthcare Research (NIHR), a think-tank, has initiated a project called "Faith and Medicine" to educate medical students in the value of spirituality in patient care and promote additional research in this area. Thirty of our 126 medical schools now offer courses in faith and medicine. We are coming closer to a time when the two previously diverse subjects are becoming recognized as equal components for improving health and well-being.

A San Francisco cardiologist conducted a study in 1988 of patients admitted to his cardiac care unit. In a double-blind study, half of the patients were randomly selected to be prayed for by persons they had never met. All patients were receiving standard cardiac care, but the other half were not prayed for by large numbers of persons other than their families.



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The recovery was astounding in the group receiving prayers -- they experienced fewer complications, fewer cardiopulmonary arrests and less pneumonia.

An interesting statistic compiled by the Gallup Poll in 1994 indicates that 96 percent of Americans believe in God; however, the American Psychiatric Association published a report in 1989 indicating that only 43 percent of therapists believe in God. And the Journal of Family Medicine reported in 1990 that 50 percent of individuals polled wanted their doctors to pray with them.

In addition to faith as a major component promoting healing, many families talked about humor and a positive attitude as a force that sustained them through difficult times. There is certainly nothing funny about brain injury, but finding reasons to smile each day is a factor in health and raises the level of optimism. Experts in child behavior agree that laughing and having fun with your kids increases their self-esteem, teaches them social skills and helps them establish positive peer relationships. (Ford) If in fact that statement is true, then it stands to reason that finding ways to approach our problems with humor and greater optimism should reduce the negative impact and allow us to deal more effectively with them.

I know that humor is a significant factor in my son's ability to cope with his life changes after brain injury. Always a laid-back casual guy, he found many opportunities to laugh at himself during his recovery and throughout the last 15 years of living with brain injury.

He was the family comedian with a knack for the ridiculous; he was a disinhibited show-off, but also very manipulative. For example, in the midst of having the riot act read to him for some indiscretion, he would envelope me in a bear hug and plant a sloppy kiss on my forehead. It was hard to stay mad at him for any length of time, even while being manipulated.

As he lay in a coma after his brain injury, I tried to find ways to stimulate him, to coax him into consciousness, but most of all maintain my own sanity by feeling I was fulfilling an important mission at his bedside. I told him jokes, read MAD magazine, and told him about the latest skit from Saturday Night Live, a show he faithfully watched with his sisters. Once he moved out of the ICU and could have visitors, I made sure his friends were prepared for his appearance (trach, G-tube, and a variety of other unfamiliar medical trappings), and that they came often and always with an upbeat attitude. Whether or not the atmosphere we created changed the course of Tim's recovery remains to be seen, because there is little evidence that persons can be awakened from coma by external means. However, we were rewarded when he smiled for the first time on the 71st day post-injury. The smile gradually took shape as he thumb-wrestled with a visiting friend. We



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played finger games frequently to keep his hands and fingers from contracting. I recorded this event in my daily journal as a red letter day. Although no sound accompanied the smile, it encouraged us immensely. We hoped it was the beginning of the return of the Tim we knew best – always smiling.

One of the most talked about examples of the healing quality of humor is the story of Fulton Oursler, a former editor of Reader's Digest, who when diagnosed with an incurable illness simply decided that he wasn't ready to die. He rented a suite at a hotel, assembled all of the films of the Marx Brothers, Abbott and Costello, Ritz Brothers, Charlie Chaplin and all other comedians, shut himself off from the rest of the world, laughed and put all cares of the world aside. His health gradually improved.

Over the years, I have been amazed about ways families manage catastrophic events. Those whose energies are spent in more positive and upbeat ways, such as praying for survival and hopeful outcomes, viewing life from the perspective of the half-full versus half-empty glass, seem to survive with less emotional scars than others whose negativity seems to sabotage efforts to improve outcome. In the 15 years I have dealt with my son's injury, and my 14-year involvement with the Brain Injury Association, I have been privileged to meet and form friendships with some of the most optimistic and fulfilled people I know. They are the movers and shakers of the brain injury movement, and they are the backbone of support group development and advocacy. You won't find sad faces at a brain injury conference. You'll find people from all walks of life pursuing their goals in a positive and forward-thinking mode.

It's not to say that all prayers are answered, or that feeling the need to act happy when you're not will result in the good life. However, the "whatever works for you" strategy does make one an active participant in the outcome. Problems will accompany us wherever we go, but it's a less-rocky road if we trod it with faith and find ways to laugh off the heartaches we experience.

References

- Ford, J. (1997). The family that laughs together. *Family Circle*, 86.
Goodwin, J. (1996). The healing power of prayer. *Family Circle*, 82-85.

Carolyn Rocchio is the parent of a son with a brain injury sustained in a 1982 automobile crash. She is the founder of the Brain Injury Association of Florida and a former Board member of the Brain Injury Association.



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*Additional information can be found at: Helpline: 1.800.444.6443
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