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Why are Veterans health issues different than the general population?



The image is a classic World War I recruitment poster featuring Uncle Sam, an elderly man with white hair, a top hat with stars and stripes, and a blue jacket. He is pointing directly at the viewer. Below him, the text reads "I WANT YOU FOR U.S. ARMY" in large, bold, red letters, with "NEAREST RECRUITING STATION" in smaller black letters underneath.

Perspective



The image shows a military helicopter, possibly a Chinook, in a desert environment. Several soldiers in camouflage gear are visible around the helicopter, some appearing to be disembarking or preparing for a landing. The terrain is arid and rocky.

During the Revolutionary War there were 1.4 "nonmortal" wounded for every soldier killed in combat. That ratio rose to 2.3 in World War II and 2.6 in Vietnam. The ratio more than tripled in Iraq and Afghanistan, where there are more than seven wounded survivors for every soldier killed.

Some 633,000 veterans -- one out of every four of the 2.3 million who served in [Iraq and Afghanistan](#) -- have a service-connected disability, according to the Bureau of Labor Statistics.

Rate of Traumatic Brain Injury



The total diagnosed number of traumatic brain injury (TBI) cases from 2000 – 2012 was 266,810 Service Members of which 58% was U.S. Army Soldiers. Traumatic events may simultaneously cause TBI and post-traumatic stress disorder (PTSD), with many symptoms overlapping that require extensive medical, therapeutic and rehabilitation services to maximize overall function and independence.

Iraq and Afghanistan Presumptive Illnesses



- Brucellosis
- campylobacter jejuni
- coxiella burnetii (Q fever)
- Malaria
- Mycobacterium tuberculosis
- nontyphoid Salmonella
- Shigella
- Visceral leishmaniasis
- West Nile Virus

Gulf War Presumptive Illnesses



Undiagnosed illnesses. These are illnesses that may include but are not limited to: abnormal weight loss, fatigue, cardiovascular disease, muscle and joint pain, headache, menstrual disorders, neurological and psychological problems, skin conditions, respiratory disorders, and sleep disturbances.

Functional gastrointestinal disorders. Functional gastrointestinal disorders are a group of conditions characterized by chronic or recurrent symptoms that are unexplained. These disorders may include but are not limited to irritable bowel syndrome, functional dyspepsia, functional vomiting, functional constipation, functional bloating, functional abdominal pain syndrome, and functional dysphagia.

[Chronic Fatigue Syndrome](#)
[Fibromyalgia](#)

Vietnam War Presumptive Illnesses



- AL Amyloidosis
- Chronic B-cell Leukemias
- Chloracne
- Diabetes Mellitus Type 2
- Hodgkin's Disease
- Ischemic Heart Disease
- Multiple Myeloma
- Non-Hodgkin's Lymphoma
- Parkinson's Disease
- Peripheral Neuropathy, Early-Onset
- Porphyria Cutanea Tarda
- Prostate Cancer
- Respiratory Cancers
- Cancers of the lung, larynx, trachea, and bronchus
- Soft Tissue Sarcomas (other than osteosarcoma, chondrosarcoma, Kaposi's sarcoma, or mesothelioma)

The Veterans Administration



The largest department is the Department of Defense with about 670,000 employees. The magnitude and importance of national defense is even further underscored by the fact that the next largest department is the Department of Veterans Affairs with nearly 236,000 employees.

Title 38 Code of Federal Regulations



8045 Residuals of traumatic brain injury (TBI):
 There are three main areas of dysfunction that may result from TBI and have profound effects on functioning: cognitive (which is common in varying degrees after TBI, emotional/behavioral), and physical. Each of these areas of dysfunction may require evaluation. Cognitive impairment is defined as decreased memory, concentration, attention, and executive functions of the brain. Executive functions are goal setting, speed of information processing, planning, organizing, prioritizing, self-monitoring, problem solving, judgment, decision making, spontaneity, and flexibility in changing actions when they are not productive. Not all of these brain functions may be affected in a given individual with cognitive impairment, and some functions may be affected more severely than others. In a given individual, symptoms may fluctuate in severity from day to day. Evaluate cognitive impairment under the table titled "Evaluation of Cognitive Impairment and Other Residuals of TBI Not Otherwise Classified." Subjective symptoms may be the only residual of TBI or may be associated with cognitive impairment or other areas of dysfunction. Evaluate subjective symptoms that are residuals of TBI, whether or not they are part of cognitive impairment, under the subjective symptoms facet in the table titled "Evaluation of Cognitive Impairment and Other Residuals of TBI Not Otherwise Classified." However, separately evaluate any residual with a distinct diagnosis that may be evaluated under another diagnostic code, such as migraine headache or Meniere's disease, even if that diagnosis is based on subjective symptoms, rather than under the "Evaluation of Cognitive Impairment and Other Residuals of TBI Not Otherwise Classified" table. Evaluate emotional/behavioral dysfunction under 94.130 (Schedule of ratings—mental disorders) when there is a diagnosis of a mental disorder. When there is no diagnosis of a mental disorder, evaluate emotional/behavioral symptoms under the criteria in the table titled "Evaluation of Cognitive Impairment and Other Residuals of TBI Not Otherwise Classified."

Frustration



Delays
As of Veterans Day 2013, 401,000 claims remained officially backlogged, meaning that the applicants have been waiting at least four months — the agency's target for the maximum allowable delay

Errors
But according to audits by the department's inspector general, VA has a persistently high error rate with those complex claims. In one category the IG examined, Traumatic Brain Injury claims, VA personnel made errors in 31 percent of cases in 2011.

In response, VA made some changes to its quality assurance process. But during a follow up inspection during 2012, the error rate was still 29 percent.

Still other Frustrations



Veterans' Unemployment Edges Down but Still High

WASHINGTON March 20, 2014 (AP)

Beyond the frustrations of the VA Veterans have a higher rate of unemployment. New Labor Department figures show the unemployment rate for working-age veterans who served on active duty in the U.S. armed forces since September 2001 edged down slightly in 2013, to 9.0 percent. But Thursday's report also found that the rate remained well above the overall civilian unemployment figure of 6.7 percent.

The suicide rate among veterans remains well above that for the general population, with roughly 22 former servicemen and women committing suicide every day.

As of January 10, 2014

Things that we do to help

Employment Resource Room

Print and Internet Resources

Garden Program

Resource Room



Working in cooperation with VA's Compensated Work Therapy Program (CWT), BIAK has room dedicated so that Veterans and others with TBI who are seeking employment, but lack resources can come and search for a job.

The Resource Room provides a quiet secure environment for the veterans to fill out applications on-line, create a resume, and search for work. In addition we provide USB drives and portfolios to help the job seeker, when they leave our office.

Media Resources

Military Resource Guide

Going Back to Work

Going Back to School

Garden Program

Three categories of Gardens

1. Independent
2. Dependent
3. Fort Knox

The following community partners have made the Garden Program possible:

Agrability, Jefferson County Cooperative Extension, Hardin County Cooperative Extension, Bullitt County Cooperative Extension, Mason County Cooperative Extension, Farm Bureau, University of Kentucky Horticulture Club, Kentucky State University, Fort Knox Military Reservation, Veterans Administration Mental Health Intensive Case Management, and Metropolitan Sewer District.

Independent

VETERANS GARDEN PROGRAM

FREE

Community Garden Plots available to Veterans at *no charge*

Tools Provided
Gardening Classes (No Cost)
Master Gardener Certificate Program Fees Waived
(Master Gardener Program enrollment is optional)

Sponsored By:
Brain Injury Alliance of Kentucky
University of Kentucky Cooperative Extension

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Just as the title indicates this part of the Garden Program is independent. Jefferson County Cooperative Extension has donated plot fees and gardening classes to any veteran that wants to have space in one several community gardens.

Dependent



Jefferson County Cooperative Extension has given BIAK space in the community garden for VA Mental Health Intensive Case Management (MHICM). The space provides an outlet for some veterans who are too disabled to effectively manage their own affairs. It helps combat depression and draws new veterans into an alternative space that might need assistance. Another critical function of the garden is that it provides care-giver respite, it is vital that caregivers have a break from their responsibilities, the garden at Farnsley-Moorman provides a 5 hour break every week during the season to those caregivers

Elements of the Farnsley-Moorman Garden



- Shade
- Water
- Bathroom
- Tools
- Transportation

(Not self-directed)



Fort Knox Wellness Garden



The Wellness Garden is unique because it is a self-directed learning environment.

The garden incorporates all elements of the Master Gardener curriculum, it is essentially a large laboratory where the soldiers can learn about gardening. It has all of the same elements of the garden at Farnsley-Moorman.

Building Raised Beds





Thank you.



Conclusion: Whether the TBI survivor is a veteran or not, it is our goal to provide a positive atmosphere to help with recovery.
