

## **The Kindness of Strangers**

### **Civilians bring healing to wounded soldiers**

By *Marlene Harris*

When arriving to the United States from the battlefield, wounded soldiers usually have nothing with them: no toothbrush, no clothes, no money, and no personal belongings. With severe physical and emotional wounds, soldiers are expected to heal in an environment most civilians never face — alone in a hospital far from home. It's a difficult and lonely time.

Initially, when overseas, medevac delivers the wounded to the Combat Support Hospital (CSH), a mobile military hospital assembled into a tent staffed by trained medical personnel. It's a temporary stop equipped only for minor surgery. Soldiers are brought back to life but can't stay for long; incoming wounded need the room.

Janice Buckley, president of Operation Homefront Washington (OHWA), a nonprofit civilian organization that supports troops and their families, said, "In addition to physical injuries, soldiers arrive with many emotional issues.

"These trained, tough service members just want to protect their country. Suddenly, they come home and can't provide for country, family, or self. It's a huge blow to their morale that affects their physical health."

Operation Homefront Washington lends a hand with various needs like car payments and school supplies. The Department of Defense has rules that prohibit the military from soliciting, but this poses no problem. Buckley contacts Fort Lewis in Tacoma, Washington regularly to ask about soldiers' needs and offer OHWA's help.

Welcoming Our Wounded Warriors is an OHWA program for wounded soldiers. Buckley said, “Since wounded service members don’t have family here to help, we provide toiletries, clothes, phone cards, and commissary gift certificates so the soldiers can eat.”

Buckley recently met a wounded soldier who couldn’t use his arms. Unable to use a keyboard to e-mail friends and family, he was isolated during a critical time in his life. Although the government provided voice-activated software, a specialized computer was too costly.

Operation Homefront quickly provided one — the soldier’s life improved. Organizations like OHWA allow service members to focus on healing rather than constantly searching for resources.

Another example of OHWA’s support is airfare to help families visit wounded soldiers. “Sometimes families cry when we offer help because it brings tremendous relief; it helps them to know that people truly care,” said Buckley.

### **Madigan Army Medical Center**

Many arriving soldiers go to Madigan Army Medical Center in Fort Lewis. It’s one of the largest military hospitals on the West Coast, providing health services to thousands of service members. The medical center’s multiple buildings occupy more than 120 acres.

In 1999 Madigan became the second military hospital to receive a perfect score from The Joint Commission, the predominant, national accrediting body in health care. Madigan is one of three designated trauma centers in the United States Army Medical Command. The medical center is also headquarters for Western Regional Medical Command, which supports National Guard and Reserve units in six western states.

“They do a good job, but this is a time of war; there’s an increase in wounded soldiers and admissions to Madigan, including service members’ families,” said Buckley.

Madigan recently built an improved Medical Holding Company (Medhold) to provide more resources. The new facility, now called Warrior Transition Battalion (WTB), will soon house soldiers released from the hospital and in need of outpatient treatment and a place to recover. WTB will serve about 700 service members — doubling the previous Medhold’s capacity.

Still, not all wounded soldiers’ needs get met. Too many soldiers and too many needs make it difficult. There are 27,800 physically wounded U.S. troops; approximately 20 percent are brain or spinal injuries that need long-term care.

### **Traumatic Brain Injury**

Traumatic brain injury (TBI) has become the signature injury of the War on Terrorism much the way Agent Orange was for the Vietnam War. According to some reports, it’s as high as 20 percent. Tests can now determine the extent of TBI and its cause.

Service members sustain significant problems from constantly riding vehicles in rough terrain and the nonstop exposure to mortars. This causes the brain to move violently in the skull, sometimes resulting in damaged brain tissue and TBI.

TBI symptoms vary. The range is from mild to severe: mood swings, frustration, attention deficits, decreased problem-solving abilities, headaches, impaired memory, and sensitivity to light or noise.

Severe injuries like TBI can require constant care, which impacts family members. Buckley said, “A spouse might have to quit work to care for the service member. This puts a huge financial drain on them.”

Many civilians assume the military provides for all service member needs. Not so. Paychecks don't always arrive on time either. It requires mounds of paperwork to locate a check from a huge bureaucratic machine difficult to reach. It's not the same as a civilian complaining to the boss.

Although soldiers' lives change after their war experiences, organizations like OHWA offer a chance at a healthier life. Knowing that the American community cares builds morale and helps the healing process.

Kiecolt-Glaser and Glaser, in a 2005 study reported in *Archives of General Psychiatry*, found that wound-healing was far more sensitive to minor emotional stresses than doctors ever assumed.

Buckley said, "One soldier told us that OHWA was a godsend and that he didn't know what would have happened without us." Health care comes in many forms.

Helping wounded soldiers heal provides an opportunity for civilians to give back.

Buckley said, "What are we doing to help those who voluntarily serve and sacrifice more than any other group? During war everyone needs to ask how they can serve those who sacrifice everything for us."

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