



Though rarely stationed together, Iwona's husband, David, (right) was there for her promotion.

A Double-Edged Sword:

War's horrors bond and divide military couple.

by Heidi Evans

As a critical care nurse in Iraq, Iwona Blackledge soothed young Soldiers and Sailors when they lost a leg or an eye. But when her own husband returned from war suffering from post-traumatic stress disorder (PTSD), she was powerless to make him understand that he needed treatment.

Even worse, she was troubled by her own war experience treating patients on the front lines. Angry, anxious and sleepless, she too needed help to heal.

War leaves many unseen wounds, including PTSD. It occurs when a person sees or experiences a traumatic event. It can change brain chemistry, causing many symptoms from flashbacks to anger to alcohol abuse.

Another hidden injury is traumatic brain injury (TBI). This happens when forces, like the blast from an IED, shake the brain inside the skull, shearing the nerve fibers. It can cause headaches, blurred vision and short-term memory loss.

Both concerns seemed far away

when Iwona entered the military in 1992 after an 11-year career as a civilian nurse. Two years later, she met David Blackledge, now a major general. They were married in 1998. It was a second marriage for both.

As a dual-military couple, they were rarely stationed together. In 2001, they planned to wind down their careers and spend time together. The attacks of September 11th changed all that.

"I wasn't sure whether to be mad at him or the Army or the terrorists," Iwona said.

David endured two lengthy Iraq deployments between 2002 and 2006, returning home from the first for treatment after he was injured in an ambush. On his second deployment, he suffered injuries in a suicide bomb attack, but returned quickly. Iwona was deployed to Iraq once in 2003.

The couple was finally able to create a home base in 2006 in Washington, D.C. Their first two months together were "heavenly bliss," Iwona said. ☒

If your spouse won't get help, help yourself

You cannot force an injured veteran to seek help. Instead, focus on what you can control. Care for yourself and the veteran:

Stay safe. If you or your children are in immediate physical danger, go somewhere safe. Families with a veteran suffering from PTSD have a significantly higher rate of physical and verbal abuse.

Know what's normal. Read up on "battle mind" and "reintegration." *The Marines Return and Reunion Guide* describes typical behaviors, like difficulty sleeping. Those should resolve within 30 days of returning.

Educate yourself. It's easier to respond if you understand the condition.

Get someone to support you. Build a network of family and friends—find a shoulder to cry on. Research treatment options. Find a place that meets your spouse's needs and change facilities if needed. Ask if they offer counseling or medication and how many veterans with PTSD they treat.

Be loving, but firm. If your spouse refuses to get help and you know you must leave for yourself and your children, get a plan ready.

Be patient. Many Soldiers wait until rock bottom before they get help. The sooner the treatment, often the better the recovery.



Iwona's work as a nurse at the Balad Air Base was both dangerous and life-changing.



Then Iwona was deployed for six months of horrifying duty in 2007 at Balad Air Base. Too many Soldiers couldn't be healed, only soothed as they died. To this day, the song "Amazing Grace" reminds her of singing to a dying soldier.

"I saw horrible things in Iraq that changed me for life," Iwona said, but she found unique comfort talking to her husband.

"I felt like I could go on with the day by just talking to him and he understood what I was going through," she said.

Even so, Iwona returned changed. Months later, she struggled to fall asleep or stay asleep. Though never diagnosed with PTSD, Iwona jokes she had PTS, post-traumatic stress. Iwona sought behavioral treatment for sleep problems, including medication.

David also struggled. He was irritable and short-tempered. He was always in a hurry, drove aggressively and suffered from nightmares.

"I am a nurse and I know PTSD and I knew the reasons for (his be-

havior). But you can only go on for so long," she said.

Iwona told David he had changed, but he insisted she was the one with the problem. Iwona began to doubt herself. It was only when one of David's best friends mentioned the changes that David finally started to believe it.

David sought individual treatment with therapy specifically for PTSD. The couple also went through couples counseling where they learned better communication skills. Both experiences were successful and positive. Since then, both have been promoted—Iwona in the Air Force and David in the Army.

The Blackledges shared their story with the Real Warriors Campaign, a Virginia-based outreach program dedicated to encouraging Soldiers to seek treatment. They wanted to decrease the stigma of mental health treatment and show that a service member could get help and still be promoted. Since then, they have received many letters of thanks from those who sought help after watching their stories.

Iwona says that one of David's new goals in life is to support wounded warriors and help them recover. Even better, "I found the wonderful, loving man that I married, that I remember." **MSM**

Resources for PTSD and TBI

The following resources are great places to start if your spouse may have either TBI or PTSD. (Some symptoms are similar.)

Military OneSource

1-800-342-9647 (24/7 Hotline)

www.militaryonesource.com

Available to all members and families that are active duty, Guard or Reserves. In addition to information, callers can receive confidential counseling.

Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury (DCoE)

1-866-966-1020 (24/7 Hotline)

www.dcoe.health.mil

Provides in-depth information and helps you find resources to deal with mental health issues.

Real Warriors

www.realwarriors.net

This program offers videos of service members who have sought help, been treated, and continue their military careers. It also contains a live chat feature and additional information about PTSD, TBI and other issues.

TRICARE Assistance Program

Check with your TRICARE region to participate. This program provides one-on-one counseling in your home using video teleconferencing equipment. Counseling is confidential and does not appear on one's service record.

Chaplains/Spiritual leaders

Military chaplains are often familiar with symptoms of TBI and PTSD, while civilian chaplains may be less informed.

DON'T FORGET You can team up with other spouses who have been through it in the MilSPOUSE.com forums.