A film by Eric Daniel Metzgar
Dear Viewer,

I knew Jason before this tragedy struck. He wasn’t one of my closest friends, but he was one of my favorite people. Funny as hell, warm and wise. A wildly talented musician. I was in Connecticut when I got a call — “Jason’s in the hospital. It’s touch and go.” My girlfriend and I hopped on a train and a few hours later I was looking down at Jason on a hospital bed. He looked awful. He had a hole in his skull. Tubes everywhere. Dozens of friends were lingering in the halls. All we could do, it seemed, was to keep hugging each other.

The filmmaking didn’t begin then. No one considered it. Jason’s family was in shock. Everyone was.

It was many months later that the Criglers called me and said, “We were going to write a book about this whole saga, but we think a documentary might be better. Are you interested?”

Of course I was. For months, I’d been in the email loop, receiving occasional updates about Jason’s condition, Monica’s pregnancy, the surgeries, the setbacks and all the other aching news. But these updates, sent by the Criglers to their vast web of friends, were more than just informational. They were illuminated by the family’s intense optimism. There was an incandescent love in these letters, in these people. This misfortune, it seemed, had created, or uncovered, something splendid.

That, I thought, will be the story. Amidst the heaps of suffering, I’ll focus on this beautiful and shining optimism. I’ll search for the source of the family’s strength, the seed of their unwavering faith. This will be a love story.

Of course, I underestimated the entire thing. Making the film, in every respect, has been a blessing and a vastly enriching experience. I anticipate that audiences will be deeply enriched as well.

An inevitable question arises in the mind of anyone who sees this film: Would my family rally around me the way Jason’s family rallied around him? Or… would I rally around a family member?

The Criglers, at Q&As after festival screenings, have always been clear in saying, “You don’t know what you’re capable of until you’re tested.” How true. The Criglers have always been extraordinary people, but this crisis forced them to draw upon untapped strengths deep at the bottom of their reservoirs. So for anyone feeling discouraged by personal comparisons to the Criglers, for anyone doubting his or her own capacity to confront such trying crises, I would say, don’t let this film tell you what you lack; let this film be an illustration of what’s possible.

Eric Daniel Metzgar, Director/Producer/Cinematographer

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Dear Viewer,

Every year, millions of people experience brain injuries. Some of these injuries are strokes, others are traumatic brain injuries (for example, from a car or bicycle accident) and still others come from diseases such as cancer. The Pentagon estimates that up to 360,000 veterans of the Iraq and Afghanistan wars have brain injuries.

Yet the brain — its construction, its mechanisms, its ability to heal — remains largely a mystery. Fortunately, modern medicine is changing its approach to brain injury. In the past, doctors viewed brain injuries as fixed, final and hopeless. New research, technology and treatments are revealing the brain to be remarkably resilient and adaptable — what neurologists term “plastic.”

No one plans for a stroke. It comes out of the blue. In Jason’s case, he was playing guitar onstage in New York when a blood vessel in his head ruptured. Like many people in similar situations, we found ourselves enrolled in a crash course on neuroanatomy, neurosurgery, physical therapy, speech therapy, occupational therapy — not to mention health insurance management. We might have accepted the doctors’ opinions that Jason would have poor neurological functioning forever; we might have followed their advice to put him in a nursing home. Instead, we stayed with Jason day and night and caught enough glimpses of his personality — his humor, his taste, his intelligence — to know that the man we loved was alive inside. We vowed to do everything in our power to help him. Every day, Jason progressed in tiny but significant steps toward a full recovery. Not only his medical team and his family, but also his friends and colleagues in the New York and Boston music scenes helped Jason return to living, working and playing. His success was never a sure thing. But in order for it to happen, Jason had to be given a chance.

During this ordeal, we often talked about ways to share our crazy, improbable story. Once Jason was back on his feet, the idea of a documentary came up. Jason and Monica knew Eric Metzgar from the New York music world. Not only was Eric a smart and talented filmmaker, but he was also a friend. The project came together as easily as that.

We have traveled to numerous film festivals with Life.Support.Music., and the response has been overwhelming. So many people have suffered brain injuries or know someone who has. So many people meet resistance from the medical community. So many people have defied expectations and recovered from devastating injuries. We hope that Life.Support.Music. inspires people who are facing brain injuries. We hope it informs the medical community. We hope it helps people consider what is possible.

Sincerely,

The Criglers

Monica, Lynn, Carol and Marjorie

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Dear Viewer,

For years, my passion has been music. Playing the guitar, writing songs, singing. Being in bands, accompanying other musicians, writing music for films. From time to time, people would ask whether I could imagine doing anything with my life other than music. Could there be any other occupation that would satisfy me?

Music, for me, was a way to connect with people in a meaningful way. I could connect with the people playing with me, the other musicians. I could also connect with the audience. From an early age, connecting through music was my way of developing a certain amount of self-confidence.

I've always had a good number of friends over the years. I’ve also always been close to the other members of my family. And yet . . . there was something about playing music that helped me feel less . . . alone.

What happened to me on the night of August 4, 2004 was completely unexpected. There were no warning signs. In fact, I was in excellent shape at the time. Ate well. Had a healthy social life. Was generally happy. There was no indication, no sign. That day was totally normal. And then, wham!

My life as I knew it was wiped out in an instant. I “woke up” 17 months later, living in a different city, with a one-year-old daughter, dealing with all sorts of physical and emotional challenges on a daily basis. A memory gap of a year and a half was a huge hurdle to overcome. Add to that all of the physical issues I had to deal with, along with daily exercises, therapy appointments, doctors’ appointments. “Recovering” became my full time job.

It was very easy to feel sad and depressed about what had happened to me. It was easy to feel angry. After all, I had been “robbed” of being present for my daughter’s birth. I was (instantly, it seemed to me) saddled with a multitude of physical issues I now had to address on a daily basis. I experienced extreme fatigue on a regular basis. My vision was impaired – I saw double images of everything. My hands were tight, making it virtually impossible for me to play the guitar.

Maybe the toughest thing about recovering from a brain injury is the loneliness. Although I was surrounded by caring family and friends, there was no one who could truly relate to what I was experiencing. I felt lost in a world I did not quite recognize.

“Why me?” I would wonder.

But there is no answer to that.

As my awareness slowly returned, I started to understand the decisions I had to make. How do I choose to deal with this? What is my life about now? How do I make sense of all this? How do I move forward?

Most importantly, I realized that I had choices. There was nothing I could do about what had happened. But I could control what happened next. I saw that giving in to negative feelings would accomplish nothing. Recovery required a positive way of thinking. I have been, and continue to be, determined. Whenever a doctor would say something negative to me, it would only drive me to work harder.

In the spring of 2006, I asked Eric Daniel Metzgar if he wanted to make a film about my story. I have known Eric for years and have always had a lot of respect for his integrity, esthetic taste and artistic choices. I knew he would approach the film with the right kind of sensitivity. I knew he would create a work of substance.

Sharing the story has been a tremendous experience. It feels good to meet others and hear their stories. I feel like I am part of a large extended family. I feel less alone. I feel a sense of elation from giving back in a meaningful way.

It’s a feeling that is familiar to me, somehow.

Connecting with people through this story reminds me of how it feels to connect with people through music. I feel a shared sense of knowing something that can’t quite be put into words. I have a feeling that we have all been through something exceptional and come out on the other side. I feel a connection with people I have only just met.

My family and I were put in an extreme situation. We were forced to deal with a sudden, horrifying reality. Variations of our story are happening to other families all over the world every day. I think of Life, Support, Music, as a road map or template for what to do when a loved one is struck down. In today’s world, we need these stories more than ever. These are the stories that illuminate possibilities. These are the stories that show us what human beings are truly capable of.

Sincerely,

Jason Crigler
# FACILITATOR’S GUIDE

**Life. Support. Music.**

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In 2004, Jason Crigler, an established guitarist living and working in New York City, suffered a brain hemorrhage during a concert in Manhattan. The doctors’ prognosis was dire: If he survives, he’ll be a vegetable.

Jason’s pregnant wife and the rest of his family refused to accept that prognosis. Wary of clinging to false hope, they made a commitment: They would do whatever it took to help Jason make a full recovery.

Life. Support. Music., a feature length (79-minute) film, documents just what that commitment would mean. In training footage shot by the hospital staff, home videos and interviews, we watch as Jason gradually breaks through his vegetative state.

As we witness the return of Jason’s consciousness, it is not only Jason who is transformed. Honest and insightful reflections from Jason’s doctors and family recount the toll and triumph of their all-consuming efforts to bring back the Jason that they remember.

Jason was fortunate to have family members who were physically, emotionally and financially able to devote considerable daily time and energy to the healing process, but not all patients are so lucky. As an outreach tool, Life. Support. Music. leads viewers to think about our medical system and how we can build better support systems for patients and families.

The film takes viewers on an intimate journey in which strength of family and belief in recovery intersect with medical reality. Deep questions about what it means to be human and the complex connections between mind, body and soul confront mundane policy issues related to health insurance and available care, making Life. Support. Music. a powerful springboard for substantive discussion.
Life. Support. Music. is well suited for use in a variety of settings and is especially recommended for use with:

- Your local PBS station
- Groups that have discussed previous PBS and P.O.V. films and series relating to health care and family, including *A Lion in the House*, *Critical Condition*, *The English Surgeon* or *Unnatural Causes*
- Groups focused on any of the issues listed in the “Key Issues” section, including hospitals, organizations of medical professionals, social service providers and family caregiving support organizations or meetings
- High school students
- Faith-based organizations and institutions
- Cultural, art or historical organizations, institutions or museums
- Civic, fraternal and community groups
- Academic departments or student groups at colleges, universities and high schools
- Community organizations with a mission to promote education and learning, such as local libraries

Life. Support. Music. is an excellent tool for outreach and will be of special interest to people interested in the following topics:

- Biography
- Brain injuries and treatment
- Communication between medical professionals and family members
- Communication issues between family caregivers and extended family and friends
- Coping with stress
- Family
- Family caregiving
- Health insurance
- Human identity
- Medical care
- Music (especially popular music)
- Personality
- Rights for people with disabilities

**USING THIS GUIDE**

This guide is an invitation to dialogue. It is based on a belief in the power of human connection, designed for people who want to use *Life. Support. Music.* to engage family, friends, classmates, colleagues and communities. In contrast to initiatives that foster debates in which participants try to convince others that they are right, this document envisions conversations undertaken in a spirit of openness in which people try to understand one another and expand their thinking by sharing viewpoints and listening actively.

The discussion prompts are intentionally crafted to help a wide range of audiences think more deeply about the issues in the film. Rather than attempting to address them all, choose one or two that best meet your needs and interests. And be sure to leave time to consider taking action. Planning the next steps can help people leave the room feeling energized and optimistic, even in instances when conversations have been difficult.

For more detailed event planning and facilitation tips, visit: www.pbs.org/pov/pov2009/lifesupportmusic
Jason Crigler

Guitarist Jason Crigler has been intensely involved in New York’s downtown music scene for over a decade, playing, recording and touring with numerous bands and musicians, including John Cale, Linda Thompson, Ollabelle, Teddy Thompson and Marshall Crenshaw, and performing with Suzanne Vega, Norah Jones and Rufus Wainwright. On August 4, 2004, Jason suffered a brain hemorrhage while onstage at a show. His wife, Monica, then two months pregnant with their first child, raced Jason to the hospital, where doctors offered a grim prognosis.

Jason’s hemorrhage was caused by an arteriovenous malformation (AVM). An AVM is an irregular blood vessel with arteries and veins that lack pressure-diffusing capillaries, often causing the blood vessel to spring a leak. (An AVM bleed is usually less volcanic than an aneurysm.) Doctors believed Jason would most likely not survive, and in the unlikely event that he did, they predicted he would probably require constant care for the remainder of his life.

Over the months that Jason spent in the neuro ICU, his family, including his wife, his parents and his sister, remained with him for every minute of every visiting hour and often overnight. They talked to him, read to him, played music, stretched him, hugged him and over and over told him, “I
love you.” They never left his side. They never stopped stimulating him. They never stopped believing that Jason could make a full recovery, even as Jason faced one life-threatening complication after another. At last Jason reached rehabilitation. With the baby due soon, Monica and the rest of Jason’s family decided to move to Boston. Monica’s family was there and could help her with the newborn, and Jason could receive intense treatment at Spaulding Rehabilitation Hospital.

At Spaulding, Jason began an aggressive regimen of speech, physical and occupational therapies. Slowly but surely, he regained control of his body and began speaking and walking again. One year and one week after the initial hemorrhage, Jason went home. Therapies continued through Spaulding’s out-patient program, but Jason began rebuilding an independent life. At first, he needed help bathing, dressing, cooking, eating, planning his day and getting around. Over time, he needed less and less help. He began to take on the responsibilities of being a father. He began to play the guitar again.

Jason has returned to writing and performing music, and in 2008 he released the album *The Music of Jason Crigler*. In December 2008, Robert Siegel of NPR’s “All Things Considered” interviewed Jason about the album. Recognition of Jason’s determination and grit in dealing with the many challenges he faced was offered when he was honored at Spaulding’s 2008 Annual Dinner. Jason’s story continues to be featured as one of the success stories on Spaulding’s website. Jason and his sister, Marjorie, travel extensively to share this remarkable story with brain injury survivors, caregivers and medical personnel at schools, hospitals and brain injury associations. As Jason says, “We want to show what is possible.”

**Sources:**

Brain Trauma: Arteriovenous Malformations and Brain Aneurysms

An arteriovenous malformation (AVM) is a defect in the circulatory system in which arteries and veins become tangled and interfere with the circulation of blood. Many people with AVMs outside of the brain experience no symptoms, and the condition can persist undiagnosed for a person’s entire life. It is not known why AVMs occur; research suggests that they develop early in life, before or shortly after birth. It is estimated that about 12 percent of people with AVMs in the brain or spine will experience symptoms of some kind. These symptoms can range from seizures to headaches.

The most significant risk of a neurological AVM is a hemorrhage, which can cut off blood flow to parts of the brain, starving them of oxygen. Less catastrophically, problems with blood flow in the brain can result in seizures or headaches, which sometimes lead to the discovery of AVMs. When an aneurysm bursts and bleeds in a brain hemorrhage, it can result in a stroke — the sudden cutoff of blood flow — which can result in loss of function in parts of the brain. After a stroke, individuals may be able to recover brain function, but the consequences can include permanent loss of function in parts of the brain.

AVMs can be discovered by doctors using angiography, in which a dye is injected into arteries before an X-ray scan is taken. Less invasive scans include computed axial tomography (CT) and magnetic resonance imaging (MRI). Once discovered, AVMs can be treated with surgery or radiation. Short of surgery, medication can be used to treat the symptoms of an AVM.

Current research into AVMs is focused on both treatment and on improving doctors’ ability to determine the risk of hemorrhages.

Brain injuries, in general, are much more common than many realize. In the United States alone, there are 1.4 million brain injuries each year. There are 3.17 million people living with a disability as a result of a brain injury. Each year, 125,000 people incur lifelong disabilities as a result of a brain injuries. The estimated annual cost of these injuries is $60 billion.

Sources:
Long-Term Care, Insurance and Health Policy

Recovering from a brain injury may require intensive, long-term care, which can exhaust individuals’ health insurance and personal resources. The federal government’s Medicare website describes long-term care as a variety of services, including medical and non-medical care of people who have chronic illnesses or disabilities. Most long-term care is meant to assist people with daily living activities such as dressing, bathing and using the bathroom.

For those without insurance, or those who have reached a cap on their benefits, federal and state funds may be available, although certain qualifying conditions must be met. Medicaid is the primary source of funds for long-term care in the United States. In 2000, 45 percent of funds spent on long-term care came from Medicaid; individuals paid out of pocket for approximately one third of such care. (Many individuals pay part of their expenses while receiving funds through Medicaid.)

Demand for long-term care support exceeds the available amount of resources. In 2005, about 2 million people were on waiting lists for some type of long-term care. As the American population ages, the need for long-term care is projected to grow sharply. At the same time, costs for care
have been increasing quickly, and funds from state and local government sources have not kept up.

Most funding for home care is provided by Medicare, which offers insurance for those 65 or older and for younger people with certain conditions. Medicare is typically granted after an injured adult is approved for Social Security disability payments. However, there is a mandatory two-year waiting period between the time a person is approved for Social Security disability payments and the time that person is eligible to apply for Medicare.

Medicaid funds about 20 percent of home care costs. One complicating factor in funding long-term care is that there is no single agency to oversee such care; a report from the National Council on Disability says more than 20 different agencies and nearly 200 programs are involved at the federal level. State and local programs further complicate the situation. Thus, those who wish to provide at-home care face a daunting set of bureaucracies in seeking support.

Sources:
Family Care

According to the National Family Care Association, more than 50 million family caregivers help care for family or friends. Assistance with basic daily routines such as bathing, dressing, cooking and eating, as well as medical necessities such as taking medication and performing rehabilitation activities is common (www.familycaregiving101.org/about).

A 2008 update of the National Family Caregiving Survey by the American Association of Retired Persons (AARP) and the National Alliance for Caregiving estimates the economic value of this unpaid work at $375 billion. In 1999, the MetLife Mature Market Institute calculated additional costs of as much as $29 billion to employers in lost productivity from workers whose caregiving responsibilities sometimes interfere with jobs.

This economic loss is of concern because over 64% of family caregivers are employed in jobs in addition to performing their caregiving responsibilities. The 1997 National Family Caregiving Survey described the typical caregiver as “a married woman in her mid-forties [who] provides an average of 18 hours/week of caregiving, works full-time, lives near the care recipient and has an annual household income of approximately $35,000.” The average length of time they spent caregiving was about eight years, with about one-third of the respondents providing care for 10 or more years.

More difficult to quantify are the effects of emotional, physical and financial stress on caregivers. In addition to the toll on their own health, caregivers often helped with expenses, spending an average of $19,525 out-of-pocket over the course of care.

Sources:
www.aarp.org/research/housing-mobility/caregiving/aresearch-import-685-FS82.html

In 2005, soon after he returned home from a year-long stay in the hospital, Jason’s family (his daughter, wife and father) take him for a walk in the woods. Photo courtesy of Marjorie Crigler

Jason Crigler – Jason, a much sought-after guitarist, was 34 and living in New York City with his wife, Monica, when he suffered an AVM

Monica – Jason’s wife

Carol – Jason’s mother

Lynn – Jason’s father

Marjorie – Jason’s sister

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Immediately after the film, you may want to give people a few quiet moments to reflect on what they have seen. If the mood seems tense, you can pose a general question and give people some time to themselves to jot down or think about their answers before opening the discussion.

Unless you think participants are so uncomfortable that they can't engage until they have had a break, don't encourage people to leave the room between the film and the discussion. If you save your break for an appropriate moment during the discussion, you won’t lose the feeling of the film as you begin your dialogue.

One way to get a discussion going is to pose a general question, such as:

- If you could ask anyone in the film a single question, who would you ask and what would you ask them?
- What did you learn from this film? What insights did it provide?
- If a friend asked you what this film was about, what would you say?
- Describe a moment or scene in the film that you found particularly disturbing or moving. What was it about that scene that was especially compelling for you?
The Healing Process

• The filmmaker asks, “So why do you think Jason pulled through?” How would you answer that question? How does your answer compare to the answers given toward the end of the film by Monica, Marjorie and Jason’s doctor?

• How did their experiences caring for Jason change his family members’ definition of success or perspective on what constitutes quality of life?

• When Jason is moved out of intensive care, Marjorie writes, “I never knew gratitude until now.” Monica says she doesn’t want to romanticize the experience, but “when you’re forced to examine things that you didn’t want to look at before or didn’t have the opportunity to look at before, you’re given the opportunity to see the beauty in it and you can’t help but love more in that instant.” What other gifts does the family talk about receiving from witnessing and facilitating Jason’s healing? How does their ability to recognize those gifts help them cope with adversity? What other things do you see that helped them cope?

• In what ways did people outside Jason’s immediate family support him? How did they support his family? If you were Jason’s parent, sibling or spouse, what would you want other people to do (or not do)? What actions could you take to support people facing medical or caregiving challenges?

• Jason’s father, Lynn, remembers thinking, “Jason will get well” rather than, “I hope Jason gets well.” What is the difference between the two and what difference might Lynn’s attitude have made in Jason’s recovery and in sustaining his family’s ability to help?

Health Care Policy and Practice

• Marjorie attributes Jason’s recovery to living in the United States, where there are “fantastic doctors and medical care.” In your view, how well does the U.S. medical system deal with brain trauma? How equitable is access to treatment? What could be done to ensure access to high-quality care for all patients?

• Have you ever experienced a medical emergency with a loved one? How was your experience like or unlike the Criglers’ experience? What did the medical staff do that made things easier or more difficult?

• Jason reached his lifetime insurance cap of $1 million long before he was well enough to be released from a medical facility. In your view, to what degree is payment for medical care the responsibility of individuals or families and what is the appropriate role of government in guaranteeing coverage of medical expenses? Given that Jason’s pre-existing condition will make it difficult to obtain health insurance in the future, how should his future medical expenses be covered?
• For the family, much of the process of healing was about Jason “regaining himself.” Monica notes that the doctors didn’t know “what would be left of the Jason we know.” Jason’s father says, “I always felt like he was in there.” In your view, what is it that defines a person? What are the sources of your beliefs about personality, personhood, and/or the human soul? How do those beliefs intersect with or contradict legal, medical or scientific definitions of personhood? How do beliefs about what makes us human influence treatment protocols and decisions?

• Jason’s sister, Marjorie, remembers thinking about how they could stimulate Jason “thousands of times every day” the way that other people’s senses are stimulated by typical daily activities. What lessons does Jason’s experience offer for the design and function of hospitals? If healing is aided by stimulation, what kinds of things could medical facilities add to their routines or surroundings that would benefit brain-injured patients?

• Over doctors’ objections, Jason’s family opts to care for him at home rather than place him in a long-term care facility. What kinds of factors (e.g., finances, abilities of potential caregivers, size or design of home, etc.) govern the decision to provide home care? Should health care policy, including government services and insurance, be designed to ensure that everyone has the option to care for loved ones at home? Why or why not?

• Well before Jason has regained significant function, his doctors need to make a call about when to discharge him. Currently, many patients with brain injuries are discharged as soon as they are medically stable, irrespective of whether or not continued rehabilitation therapy could eventually result in regaining function. The challenge lies in the fact that no one has the financial resources to sustain care indefinitely and no one knows enough about brain trauma to guarantee outcome or predict with certainty the length of time needed for intensive therapy to produce significant results. Given these circumstances, what criteria would you recommend that insurers, medical professionals, family members or the government use in determining whether or not care should continue? In your view, what is an appropriate balance between unlimited care and reasonable care?

Personal Reflection

• In the face of a bleak prognosis from the doctors, Jason’s father talks about wanting to be hopeful without being naive. What are the advantages and disadvantages of being hopeful? What are the advantages and disadvantages of being realistic? When you face tough situations, how do you balance hope, faith and realism?

• Even when Jason was significantly incapacitated, Jason’s father believed that the “real” person was still there, but that Jason was “unable, physically to be himself.” How would you describe the links between mind and body? How about the relationship between soul and body?

• Jason returns to performing, but at first it seems mechanical. Eventually he regains a sense of emotional attachment and his music once again feels like an expression of himself. How do you express yourself in ways that feel authentic?
• At the end of the film, we see Jason speaking about his experience to kids who have had brain injuries. Find ways to facilitate similar connections in your community. Identify people who have recovered from brain injuries or disease and their family members who might make good speakers and connect them with speaking invitations from local schools and organizations.

• Investigate the availability in your community of medical and support services for people with brain injuries. Work with local medical professionals, social service agencies and volunteer groups to fill any gaps.

• Hold a fundraiser for an organization or agency that provides aid to people with brain injuries or that supports research on the prevention and treatment of brain injuries.

• Monica says that Jason’s recovery doesn’t mean that the family’s job is over and the next chapter will be “dedicated to helping the next families.” If you or a loved one has experienced a brain injury or disease, brainstorm ways that you could help “the next family” and make a plan to put at least one of your ideas into action.

• Facilitate family meetings to arrange for health care proxies and discuss how care would be provided in the event that a family member could no longer care for himself or herself.

• Train medical professionals who deal with brain-injured patients about how best to work with families, including how they might teach family members to provide effective help to the patient.

• Examine community support structures for people in need of care and recruit volunteer advocates and care givers to provide services to patients who do not have family available.
Original Online Content on P.O.V. Interactive (www.pbs.org/pov)


To further enhance the broadcast, P.O.V. has produced an interactive website to enable viewers to explore the film in greater depth. The companion website to Life. Support. Music. offers a streaming video trailer of the film; an interview with filmmaker Eric Daniel Metzgar; a list of related websites, organizations and books; a downloadable discussion guide; classroom activities and the following special features:

**VIDEO UPDATE**

Watch this video update with Monica, Jason and the entire Crigler family from June 2009.

**JASON’S MUSIC**

Listen to streaming versions of Jason’s music, including the tracks “The Books on the Shelf” and “Through Tomorrow,” which are both featured in Life.Support.Music.

**ASK THE CRIGLERS**

Pose a question to Jason, Monica and the Criglers after the broadcast of Life. Support. Music. The Criglers will answer select questions and respond to viewer comments.

**DEFYING THE ODDS**

Jason and his sister Marjorie have embarked on a speaking tour to talk about how he recovered from his devastating brain hemorrhage. Watch part of their presentation, and hear about how and why Jason pulled through, and why the Criglers believe intense family involvement makes the difference in a positive recovery.

**Film-related links**

**DEFYING THE ODDS**

www.defyingtheodds.net

Defying the Odds is the speaking project that Jason and his sister, Marjorie, are implementing around the country. The website offers a brief description of Jason’s story and a list of upcoming dates of talks by Jason and Marjorie.

**JASON CRIGLER**

www.jasoncriglermusic.com

Visit Jason’s official website to access current information about Jason and his music, including an interview with NPR’s Robert Siegel and links to performance videos on YouTube.

**SPaulding rehabilitation hospital**

www.spauldingrehab.org/remarkablerecoverprofiles/jasonprofile

The center’s website includes an article about Jason Crigler’s recovery, as well as a link to Brain Injury Rehabilitation Programs at Spaulding Hospital.

**Brain Injuries**

**Society of NeuroInterventional Surgery**

www.snisonline.org

Visit this organization’s website to learn more about stroke and neurointerventional surgery procedures and practice. Its mission is to provide research, provide education, influence health care policy and foster the growth of the specialty.
AMERICAN STROKE ASSOCIATION: A DIVISION OF AMERICAN HEART ASSOCIATION

www.strokeassociation.org

A division of the American Heart Association that focuses on reducing risk, disability and death from stroke through research, education, fund raising and advocacy. Site visitors can learn to spot the signs of a stroke and what life is like after a stroke, and health care professionals can link to additional resources.

THE ANEURYSM AND AVM FOUNDATION

www.aneurysmfoundation.org

This foundation makes research grants to aneurysm and AVM projects and is dedicated to bettering the lives, support networks and medical care of those affected by aneurysm and other vascular malformations of the brain.

BRAIN INJURY ASSOCIATION OF AMERICA

www.biausa.org

The only national advocacy organization dedicated to helping people with brain injury and their families improve access to care, rehabilitation and support. The Brain Injury Association offers a national Brain Injury Information Center that individuals can contact at 800-444-6443 or braininjuryinfo@biausa.org. The organization works with a network of more than 40 chartered state affiliates, as well as hundreds of local chapters and support groups across the country.

BRAIN INJURY ASSOCIATION OF new york state

www.bianys.org

The Brain Injury Association of New York State provides support services to brain injury survivors and their families, programs for those injured before age 22 and for school-age children with brain injury, an array of resources and publications, support groups and much more.

NATIONAL INSTITUTE OF NEUROLOGICAL DISORDERS AND STROKE

www.ninds.nih.gov

NINDS conducts, fosters, coordinates and guides research on the causes, prevention, diagnosis and treatment of neurological disorders and stroke and supports basic research in related scientific areas. The organization also collects and disseminates research information related to neurological disorders.

YALE UNIVERSITY AVM CENTER

www.hhtavm.org

This is a medical research center dedicated to the care and management of patients with vascular malformations. The website provides a list of senior level physicians recognized for their clinical and research expertise, along with their publications.

Health Care Costs

KAISER FAMILY FOUNDATION: STATE HEALTH FACTS

www.statehealthfacts.kff.org

Learn more about individual states’ health care coverage, policies on Medicaid and Medicare, minority health, women’s health and health care costs and budgets.

NATIONAL COALITION ON HEALTH CARE

www.nchc.org

The website of this non-partisan advocacy organization includes statistics and issue summaries about health insurance.

MEDICAID

www.cms.hhs.gov/MedicaidGenInfo

Visit the federal government’s website, which offers an overview of Medicaid.

MEDICARE

www.cms.hhs.gov/MedicareGenInfo

Visit the federal government’s website, which offers an overview of Medicare.
Rehabilitation and Caregiving

AARP PUBLIC POLICY INSTITUTE: FAMILY CAREGIVING AND LONG TERM CARE
www.aarp.org/research

AARP publishes numerous reports on issues that affect the over-50 population. This report on family caregiving and long-term care includes a fact sheet and general information about the prevalence of caregivers and tax benefits for family caregivers. (November 2002)

AVM SURVIVORS NETWORK
www.avmsurvivors.org

This website provides a network for the survivors of AVMs and those who have known people who have experienced arteriovenous malformations. This network provides information regarding events such as walks to raise money for AVM research, as well as providing space for AVM survivors to share stories and information and connect with one another.

CARING BRIDGE
www.caringbridge.org

Caring Bridge serves as a tool to keep family and friends updated on the progress of a loved one who sustains any type of serious injury. Sites can be set up for free and can be used to share progress and discuss the needs of family members.

FAMILY CAREGIVER ALLIANCE
www.caregiver.org

Family Caregiver Alliance addresses the needs of families and friends providing long-term care at home. The group’s website offers fact sheets on many types of disabilities and issues, as well as information about resources and programs in numerous states across the US.

NATIONAL ASSOCIATION FOR HOME CARE & HOSPICE
www.nahc.org

This organization is the nation’s largest trade association representing the interests and concerns of home care agencies, hospices and home care aide organizations.

NATIONAL CENTER FOR HEALTH STATISTICS: NATIONAL HOME AND HOSPICE CARE DATA
www.cdc.gov/nchs/pressroom/04facts/patients.htm

New data tables from the 2000 National Home and Hospice Care Survey are now available, detailing the latest findings from this increasingly important segment of health care in America. The 2000 National Home and Hospice Care Survey (NHHCS), the sixth in a series of surveys (conducted in 1992, 1993, 1994, 1996, 1998 and 2000), provides information on characteristics of agencies providing home health and hospice care services, their current patients and discharges. This fact sheet provides highlights from the 2000 NHHCS.

NATIONAL FAMILY CAREGIVERS ASSOCIATION
www.thefamilycaregiver.org

With everything from a section on tips and tools for caregivers, to legislation and public policy initiatives, to general information and links to related organizations, this website is a good starting place for anyone involved with home care. Caregivers might be especially interested in NFCA’s joint outreach project with the National Alliance for Caregiving, “Family Caregiving 101,” which has its own website at www.familycaregiving101.org.

Information about Disability

THE ASSOCIATION OF UNIVERSITY CENTERS ON DISABILITIES’ LEGISLATIVE UPDATE PAGE
www.capwiz.com/aucd/issues/bills/

This page contains an up-to-date listing of all major bills currently before Congress that pertain to disability and home health care policy.

DISABILITYINFO.GOV
www.disabilityinfo.gov

This site is described as the Federal government’s “one-stop website” for disability-related information. It represents a collaborative effort on the part of 22 separate government agencies and contains a wealth of information regarding federal programs.
**NATIONAL COUNCIL ON DISABILITY**

**www.ncd.gov**

The National Council on Disability is the highest-level federal council charged with making recommendations to the President and Congress regarding needed changes in federal disability policy. This site contains member information and Council reports, such as one addressing financing and systems reform: www.ncd.gov/newsroom/publications/2006/ltss_brief.htm

**PBS/NPR**

**INDEPENDENT LENS: MUSIC FROM THE INSIDE OUT: MUSIC ON THE MIND**

**www.pbs.org**

Today, researchers and scientists continue to explore how music affects emotions, intelligence and physical well-being. Read about some of the ways music is being used to improve and enrich the way we think, feel and relate to the world. This website is attached to the film Music From the Inside Out. (2004)

**THE NEWSHOUR WITH JIM LEHRER: SEEKING AN ALTERNATIVE**

**www.pbs.org**

More and more hospitals are offering their patients alternative therapies in addition to the traditional treatments. Paul Solman of WGBH-Boston reports on one hospital’s program. (August 27, 1998)

**NOVA ONLINE: COMA**

**www.pbs.org**

Head trauma is the number one cause of death and disability among people between the ages of one and 44, but it doesn’t take a miracle for a patient to come out of a coma and do well — it just takes the application of good science. This website offers links to a support line, a head injury fact sheet and a list of important questions to ask if someone suffers from a head injury. (October 1997)

**NOVA: SCIENCENOW: BRAIN TRAUMA**

**www.pbs.org**

NOVA presents multiple stories in a magazine format show called scienceNOW, with Neil deGrasse Tyson, astrophysicist, author and host. In 2008, scienceNOW aired an episode about brain trauma. The website has links to viewer questions for neurosurgeon Jam Ghajar, a place to share personal stories, additional video, a teacher’s guide and additional resources. (July 30, 2008)

**TALK OF THE NATION: BRAIN INJURIES, RESTORATIVE JUSTICE**

**www.npr.org**

Listeners comment on the effects of traumatic brain injuries, such as TBI (Traumatic Brain Injury), the signature injury from the Iraq War. (May 15, 2007)

**TALK OF THE NATION: AUTHOR EXPLAINS MYSTERIES OF MUSIC AND THE MIND**

**www.npr.org**

Why can music sometimes remain in the brain long after other memories fade? Why is it that some people with limited language abilities can sing unimpaired? Neurologist Oliver Sacks talks about his latest book, Musicophilia, and the way music affects the brain. (November 2007)

**TALK OF THE NATION: MUSIC THERAPY**

**www.npr.org**

Music therapy programs are popping up in hospitals and treatment centers around the country. But what do we actually know about the benefits of music or how music is processed by our brains? In this hour, we’ll talk with patients, doctors and scientists about the research and practice of music therapy. Guests include Connie Tomaino, director and vice president for music therapy services, William Benzon, cognitive scientist and author of Beethoven’s Anvil: Music in Mind and Culture and Dr. Oliver Sacks, clinical professor of neurology. (June 28, 2002)

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P.O.V. Interactive www.pbs.org/pov

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