**Theme 1: Educational Need**: One of the primary needs expressed by the couples is educational need. Most of the couples have conveyed to know about the patients conditions, brain injury and how it impacts their family life. As they expressed, knowing and understanding the brain injury and their associated psychosocial issues is important in terms of leading good life.

**1.1: Poor Knowledge**: Injured spouses and non-injured spouses have expressed that, they don’t know anything much about the patient’s condition; they even have reported that they don’t even know the diagnosis of the patient; they only know the head is injured. This shows the presence of poor knowledge in the couples.

**1.2: Recovery Process:** The subtheme is describing about the recovery process. Most of them wanted to know the process of recovery. They asked “How long he will take to recover” “will he be alright in 2 months” “will he be able to go for work next month”, these were the questions raised by eh participants in terms of knowing the recovery process.

**1.3:** **Medication and Follow-up:** Another concern was expressed by the couples was about follow-up. They wanted to know how long patient has to take tablets, and how many times they have to come for follow-ups and if in case of emergency where they should go? All these needs were raised by the participants.

**Theme 2: Sexual Issues**: Problem with sexual intimacy is another concern expressed by the couples. Less sexual desire and increased sexual desire have been noticed in the injured spouse and consummation issue as expressed by the non-injured spouse. The survivor may suffer from hormonal changes, fatigue, or negative medicine reactions, while the non-injured spouse may feel angry or rejected. Anxiety and depression are instances of emotional changes that reduce the emotional connection and further decrease sexual desire.

**2.1:** **Decreased Sexual Desire:** In contrast, few participants described their sexual urge has been decreased compare to before. This means they lost interest in the sex and frequency of meeting sexually has come down.

**2.2: Increased Sexual Desire:** Few participants described their sexual urge has been increased than before. They said, they want to be with their spouses in terms of physical relationship.

**2.3:** **Consummation Issue:** It was reported, they are purposefully avoiding sex with their partners as he/she is injured and it was difficult for spouses with TBI to physically complete their relationship. Few other spouses said, their actual marital life is not started which means frequency of sex has tremendously come down.

**Theme 3: Behavioural Issues**: Another emerged concern which couples have reported is anger issues and physical violence in the injured spouse. This is one of the most significant challenges where most of them are encountering with day to day life. Injury might disrupt the balance of neurochemicals in the brain which regularly lead to fluctuations of mood.

**3.1:** **Unable to Control Anger:** Persons living with TBI voiced that they are struggling to control their anger. They even have noticed how it was before and how it is now, as they said there has been changes in their emotions, even non-injured spouses have observed the same.

**3.2:** **Anger Outbursts:** Non-injured spouses observed anger outburst among their injured spouses which was not there before, this is the concern expressed by the caring spouse. It is a sign of psychological or psychosocial issues such as cognitive decline, memory problems, physical limitations, and unemployment or family issues.

**3.3**: **Physical Violence:** This reflects the severity of behavioural issues associated with the traumatic brain injury. Non-injured spouses have expressed concern, that their patients hit them physically and verbally abusing them and their children whenever he/she gets angry.

**Theme 4: Suicidal Ideations:** One of the other most concerning issues reported by the couples is suicidal ideation. A survivor may be more prone to having suicidal thoughts for a number of reasons. A brain injury alone can cause emotional dysregulation, anxiety, and depression among the injured spouse. Memory problems, cognitive difficulties, and physical restrictions can lead to desperation and pessimism. The non-injured spouses have these thoughts because of consistent care, lack of support from others or living with injured spouse.

**4.1: Feeling of Parting from Family:** This was reported by both the couples. Injured spouses have expressed that, they did not want to stay at home; they decided to go away from home and live so that family can be happy. On the other hand, non-injured spouses expressed this in terms of better not to bear all these.

**4.2. Sense of Unworthiness:** Injured spouses expressed their suicidal ideations through having thought of unworthiness. There were questions like “there is no use of me” “my life seems to be waste”. This shows the load of emotions which they have been having throughout these days.

**4.3. Decided to end life**: Few of the injured participants conveyed, they had decided to end their life many times. Few wanted to hang themselves and few wanted to drink poison to end life. On the other hand non-injured spouses described, they wanted to die as they could not bear the issues took place post TBI of their spouses.

**Theme 5: Diminished Well-Being:** The other need which was raised from the couple’s interview is diminished overall well-being. This theme showed how their entire couple family wellbeing destroyed after one spouses TBI. It can be resolved by setting realistic objectives, and seeking professional help.

**5.1: Future Uncertainty:** They have expressed the uncertainty of their future, although it is a persistent issue for both couples, it's not as if one must bear the burden alone. They had lot of questions about the family future like “Will they ever have the same spouse” “Will he/she be alright completely, “nobody is there for us, only he is the asset for us”. This worry has made them to make plans for the future which is causing of inefficiency.

**5.2. Disturbance in Sleep:** The other commonly reported sub theme is disturbance in the sleep. Both the couples reported the issue. The injured spouses have described that, they are not getting enough sleep at night; this issue has been there consistently since hospitalisation. Most of the sleep during the day time also, however this can also cause night sleep disturbances. Non-injured spouses are also reporting of the same problem, though they are tired after continuous work, they sometime don’t get sleep.

**5.3. Alterations in eating Pattern:** This highlights how Traumatic Brain Injuries has altered persons eating habits or food intake. These are including modifications in hunger, either increased or decreased hunger. Here they expressed, appetite has decreased extremely compare to before by both of them. Patients with TBI may be having this issue due to adverse medicine responses, poor psychological health. Whereas, non-injured spouses loss of appetite could be the result of stress, lack of time, continuous care taking or emotional reactions to their altered situations.

**Theme 6: Disturbance in Life:** This specific theme directs about diminish in the couples overall quality of life, relationship they are sharing and their entire marital satisfaction when one spouse is sustained Traumatic Brain Injury.

**6.1. Decreased Productivity:** This examines how the injured spouse’s ability to participate in the work, activities, roles and responsibilities, or personal hobbies has decreased following the injury. Injured spouses reported that, they are unable to be productive as like before in terms of working, earning money, engaging in healthy conversation, meeting friends. It shows how an injured spouse’s cognitive and physical inability has been caused distractions in contributing to family which they used to do before.

**6.2. No peace at Home:** This subtheme explores the increased level of stress and dissatisfaction in the home. It implies that after the TBI, there are more arguments between the couple; injured spouse gets angry with his/her family members or general discord in the household. The non-injured spouse also reported that post injury of the spouse; there has been no feeling of peace with in the home, don’t feel like coming/staying at home. Non-injured spouses would have reported this from the viewpoint of stress, workload, no proper communication or on-going difficulties between couples.

**6.3. Less Social Participation:** This subtheme looks at the couples reduced participation in social circles, neighbourhood events or the family events of closed one or distance relatives. They both are unable to go out together for family function, temple since injury. There has been much reduction in social participation caused by the injury in spouse.

**6.4. Absence of Social Support:** This looks how couples social networks or connection with people have been reduced following the traumatic brain injury. There has been less support noticed by couples form his/her family, friends. Non-injured spouse realised that, since his injury, they have not been able to go anywhere, meet any one much; probably this reason might have made them to lose support or they are not willing to ask support.

**6.5. Communication Difficulties:** This particular subtheme describes the communication difficulties of injured spouse with spouses, children, friends and other family members and the barriers to communicate their needs, wants, concerns. This issue might have been raised due to cognitive decline or emotional barrier post injury in the individual. There was minimal communication between couples compare to before, as non-injured spouses have expressed, now it has become more of need based communication, which was noticeable also.

**6.6. Increased Roles and Responsibility:** There have been changes in roles due to the injured spouses’ physical or cognitive limitations. Responsibilities and financial management were previously performed by the injured spouses, now it has fallen on the non-injured spouse as patients are not taking responsibility due to cognitive and physical ability. This abrupt arise of new responsibilities and roles can cause stress, and anger outburst among non-injured spouses.

***Verbatims***

***First Theme:***

*“I don’t know anything, I only remember when I opened my eyes, I was in hospital, no one told what exactly the problem I am having, I know I am having head injury, I have no idea, what it is” (Mrs. U: 38 Years, Left FT EDH).*

*“I have not heard anything about traumatic brain injury, he was admitted in the ward, but no one told anything about his problem, how long he will take to recover”(Mrs. P, 36 Years).*

***Second Theme:***

*“It is very less compare to before, I used to engage in physical contact with her 3-4 times a week, now I am unable to do so, my interest has come down maximum, I don’t feel like doing anything”(Mr. V, 35 Years, Sub-Dural Hematoma).*

*“She shows more interest in sex than before, she expects me to be with her always” (Mr.G, 39 Years)”.*

***Third Theme:***

*“Yes sir, I get angry very fast, she always tells me to calm down myself but I unable to control my anger” (Mr.JP, 36 Years, Left FT SDH).*

*“All of a sudden, he will get upset on small things like, if suppose power goes off or if children don’t come when he called; these small things are irritating him more”(Mrs. A, 39 years).*

***Fourth Theme***

*“Many times, I had decided to end my life, I thought of hanging myself, but it always bothered me when I thought about my children” (Mr. H, 36 Years, Right FTP ASDH).*

*“I am always thinking why I have to have these, we are having lot of family issues like money, he is also not normal like before, children are growing up, thinking of all these, I decided it is better do die instead” (Mrs.M, 36 years).*

***Fifth Theme***

*“Who will look after my wife, children and parents if anything happens to me, I don’t know, what will happen to me in future, that’s the worry I have but nobody will be there for them” (Mr. T, 36 Years, Right FTP ASDH).*

*“I am worried about our future, we have children , he has to take care of his family as well, I am absolutely worried what will happen, who will be there for us”(Mrs. S, 32 years).*

***Sixth Theme:***

*“Since my injury, I have not been able to work and make any money; I am unable to take care of my family and be as productive as I was before” (Mr.H, 40 Years, Left FT EDH).*

 *“He has not been able to take any responsibility as before, I am the one who takes care of all the household responsibilities including taking care of him, before the injury he used to take of family and children, now he does nothing” (Mrs. K, 34 Years).*