# **Traumatic Brain Injury & Behavioral Health**

## Traumatic Brain Injury Definition

Traumatic Brain Injury is a common neurological condition that results from an external force to the head that alters normal brain function.

The four lobes of the brain include: Frontal, Temporal, Parietal and Occipital Regions.

Once there is enough force to the head from a blow, shake or blast, the brain can jiggle like Jell-o within the skull to cause bruising, bleeding, swelling and/or lack of oxygen to the brain.

The TBI requirement of an external force clearly separates it from other acquired brain injuries that occur after birth such as stroke, tumor, anoxia, or shock.

TBI Facts… Effects from a TBI may be temporary or permanent. No two brain injuries are alike. Male incidence is 2 to 1 versus female and after the 1st TBI, the chance of having a 2nd TBI is 3X greater.

##  Causes of Traumatic Brain Injuries:

* Falls in Younger Children and Older Adults
* Vehicle & Recreational Boarding Accidents
* Intimate Partner Violence
* Sports-Related Injuries
* Combat Injuries
* Shaken Baby Syndrome/Child Abuse
* Near Drownings
* Gang Violence/Criminal Activities
* Firearms/Gun Shots
* Overdose/Strangulation

## Severity

TBI varies greatly in severity based on the effect on brain function. Alteration in function can range from a brief, temporary disruption in thinking such as being dazed or confused, to being in a coma during which the brain is not able to respond to pain or other strong stimuli. All levels require recovery after a hospital discharge.

**Toll Free TBI Helpline 1-888-879-4706**

#### The classifications of TBI include 3 Levels:

1. Mild (also known as concussion, occurs in 80% of head injuries)
2. Moderate (10-13% of head injuries)
3. Severe (8-10% of head injuries)

## Effects of TBI

Lasting effects of a TBI depend on whether there are multiple injuries, at what age they occur, and whether the individual already has another source of compromise to brain function.

Effects can be temporary, and others can be permanent.

###  Neurobehavioral Effects may include:

####  Thinking and Processing Effects:

* Memory Loss
* Problem-Solving or Reasoning
* Comprehension
* Impaired Judgment
* Language/Aphasia
* New Learning

####  Sensory Effects:

* Sensitivities to Light, Noise, Hot and Cold
* Hearing and Vision Impairments
* Diminished Taste or Smell

####  Physical Effects:

* Extreme Fatigue
* Headaches
* Sleep Disturbance
* Seizures
* Balance/Coordination
* Weakness on One Side/Paralysis
* Slurred or Impediment in Speech





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####  Behavioral Effects:

* New Onset or Increased Depression/Anxiety
* Impatience/Impulse Control (short fuse)
* Increased Self-Focus
* Socially Inappropriate Behaviors/Expressive Language
* Aggression or Agitation
* Perseveration (stuck on a word, item or subject)
* Irritability or Frustration
* Social Isolation
* Difficulty Initiating
* Unrelated Laughter or Crying
* Lack of Awareness of Excessive Talking or Personal Boundaries

### Behavioral Health Treatment for Individuals with TBI

There is a **need to recognize** individuals with a problematic history of TBI. A diagnosis of TBI **should** **not** undermine an individual’s ability to participate in or benefit from common treatments.

If a behavioral health provider is TBI informed and **engaged from the start** - appropriate referrals, accommodations and treatment will follow.

Extensive Expertise **is not** required to make simple adjustments or accommodations in treatment. Simple adjustments depend on a previous diagnosis, pre-injury functioning, severity, and after-effects of each injury.

All Behavioral Health services should begin with a **brief** TBI Screener Questionnaire. Allow yourself time to consider the effects from the head injury or injuries and which simple accommodations are to be made **before the treatment begins.**

####  Considerations in Treatment:

* Unintentional multiple missed appointments and non-compliance
* Need for repeated instructions to ensure comprehension
* Focusing on deficits
* Extreme fatigue and processing overload
* Lack of emotion or flat affect does not equal lack of interest
* Increased sensitivity to common medications

 **Considerations in Treatment (contd.):**

* Unintentional low motivation and non-commitment to change
* Large amounts of group work or memorization of multiple steps

####  To achieve better results, A Treatment Plan should

####  address:

1. A Daily Schedule
2. Cognitive Activity
3. Medication Review
4. Sleep
5. Nutrition
6. A Supportive Environment

####  TBI Protocols or a TBI Gold Standard in Treatment

####  should include:

1. A Brief Screener or questionnaire that asks about History of Head Injuries
2. Simple Accommodations for Neurobehavioral Effects
3. A Holistic Approach - for dual diagnosis and co-occurring conditions
4. Creation of person-centered supports
5. Supports to increase TBI Self-Advocacy by including location and utilization of TBI State Programs, TBI Specialists, Advocacy Organizations, and /or Peer Specialists.

For TBI Screener Information and TBI Information & Support, contact: <http://www.alabamatbi.org/>





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