



Traumatic Brain Injury: Criminal Justice

What is a traumatic brain injury (TBI)?

A traumatic brain injury (TBI) occurs as the result of a sudden physical insult to the brain. The injury may be caused by the head forcefully hitting an object such as the dashboard of a car (closed head injury) or by something passing through the skull and piercing the brain, such as a gunshot wound (penetrating head injury). The person may or may not lose consciousness at the time of injury. Often the term "concussion" is used to refer to a mild TBI.

A TBI is the result of a car crash, fall, sporting injury, child abuse, or other contributing factor resulting in problems with thinking, memory, emotions, language, physical, mobility and sensory, which affects how a person is able to return to school, work, home and community.

How prevalent is TBI?

In 2010, the Centers for Disease Control and Prevention (CDC) estimated that TBIs accounted for approximately 2.5 million emergency department (ED) visits, hospitalizations, and deaths in the United States, either as an isolated injury or in combination with other injuries. However, these numbers do not reflect persons who did not receive medical care at outpatient or office-based visits or at all.

How prevalent is TBI among Juvenile Justice and Criminal Justice?

Studies have varied with regard to the incidence and prevalence of TBI in juvenile justice systems. A study conducted by the University of Michigan, School of Social Work, which interviewed 97.3% of the residents in 27 Missouri Division of Youth Services rehabilitation facilities between March 1 and May 31, 2003, reported that one in five youths (18.3%) reported a lifetime TBI. Youth with TBIs were significantly more likely to have received a psychiatric diagnosis, report an earlier onset of criminal behavior/substance use and more lifetime substance use problems and past-year criminal acts, evidence psychiatric symptoms, report lifetime suicidality, be impulsive, fearless, external in locus of

control, and criminally victimized in the year preceding incarceration. More recently, a pilot screening effort by the Colorado Brain Injury Program, University of Denver, and the Denver County Jail found a 97% incidence of TBI in a sample (n=36) of incarcerated youth in the Denver metro area.

In the May/June 2012 *Journal of Head Trauma Rehabilitation*, the article, "Prevalence of TBI in Offender Population: A Meta-Analysis," reports that of the 20 different studies regarding prevalence of TBI, an average of 60.3% of offenders screened positive for lifetime history of TBI, regardless of screening method and length of consciousness. However, it should be noted that lifetime incidence does not indicate a TBI related disability.

How are State TBI Programs Involved with Juvenile Justice and Correctional Systems?

The U.S. Department of Health and Human Services (HHS) Federal TBI State Grant Program, administered by the Administration for Community Living (ACL), has been an impetus for State TBI Programs to collaborate with their juvenile justice and/or corrections systems to screen and identify TBI-related disabilities among youth and adults and to provide Information & Referral Services; Resource Facilitation/Service Coordination; and professional training to juvenile justice/corrections staff. Current States involved include: Alaska, Alabama, Colorado, Iowa, Indiana, Maine, Missouri, Pennsylvania, and West Virginia. Minnesota, Nebraska, Texas, Utah and Virginia used previous grant funding to target this population.

Most of these projects are targeting one or two pilot projects within their States. (State TBI programs may be housed in a Vocational Rehabilitation, health, education, Medicaid or human or social services agency.)

What are State TBI systems challenges and considerations?

- Not all States have an array of TBI services and supports to assist juvenile justice/corrections systems or provide services once youth/adults are released.
- Juvenile justice and correctional systems also differ from State to State, with many players involved (e.g. State and community residential or detention centers, aftercare programs; judges, problem solving courts and law enforcement).
- Collaboration among juvenile justice, corrections, TBI State, and community programs, and other State agencies, such as Vocational Rehabilitation, is necessary to address TBI-related disability needs among adjudicated youth or incarcerated adults.
- To not only screen for lifetime history of TBI, but to be able to determine who also has current impairment that is consistent with TBI, such as cognitive, behavior, medial and/or physical limitations impacting activities of daily living with the intention of guiding those individuals to supports.
- Resources and funding to support juvenile justice and corrections systems over the long term with regard to professional training to conduct screening for a lifetime history of TBI and neuropsychological impairment associated with TBI-related disability; and to provide services and/or accommodations accordingly.
- Understanding the implications of identifying an adjudicated youth or incarcerated adult as having a TBI-related disability and who should receive that information (e.g. parents, attorneys, judges).
- Ability to collect outcome data to determine if screening, identification and provision of services are reducing the rate of recidivism and successful community reintegration.

NASHIA Recommendations:

NASHIA welcomes the opportunity to provide assistance to States who wish to address juvenile justice and corrections systems with regard to TBI. To assist States, NASHIA recommends:

- Collaboration with the U.S. Department of Justice' Office of Juvenile Justice and Delinquency Prevention (OJJDP)/Office of Justice Programs (OJP) in sharing knowledge of TBI among State juvenile justice/corrections systems and educating State TBI programs about juvenile justice/corrections systems through:
 - Resources posted on OJJDP, OJP, and NASHIA's websites;
 - Development of national materials on TBI screening; identification; resources, accommodations and strategies for TBI-related cognitive and behavioral problems;
 - Training targeted to both TBI and juvenile justice and corrections systems audiences to understand systems and implications of TBI among offenders through:
 - Presentations during NASHIA, OJJDP and OJP national conferences and
 - Webinars.
- A national working group consisting of State, federal and national partners to identify other State needs, particularly with regard to:
 - Overall policy with regard to screening and reporting information pertaining to offenders and TBI.
 - Developing evaluation and outcome data to assess successful community reintegration once an offender has been identified and received TBI services, supports and/or accommodations.

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