Connecting Intimate Partner Violence & Traumatic Brain Injury (TBI)

- Increasing Awareness
- Assessment
- Accommodations
Prepared by…

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Visit our resources section for Abuse in Later Life Handbooks for Professionals & Survivors & brochures.
Objectives

• Define intimate partner violence & traumatic brain injury (TBI)
• Discuss the causes of TBI and its consequences for survivors of relationship violence
• Identify practical strategies to assess and screen for TBI
• Receive tools to help survivors accommodate for their injuries, tips for communicating with people who have TBI, and how to help survivors improve their memory and organize their life
• Receive resources for service providers, consumers, and survivors
American’s Silent Epidemic

- 10 million are affected.
- 1.4 million people survive a TBI each year in the U.S. (CDC)
- Of all disabilities, TBI ranks 2nd yet only 1 in 3 Americans are aware of this injury.
  (Cathy Ficker-Terrill, M.S. et al. Overview of Brain Injury)

“Every 23 seconds… someone in the U.S. sustains a traumatic brain injury.” (CDC)
Linking TBI & Partner Violence

- Greater than 90% of all injuries secondary to IPV occur to the head, neck or face region. (Monohan & O’Leary 1999)
- Of the 53 women living in a DV shelter, on average the women experienced five (5) brain injuries in the prior year and almost 30% reported 10 injuries the prior year. (Jackson & Phillips 1998)
- Persons with TBI may experience physical/sexual violence, emotional abuse, or neglect by a caregiver in return for access to medication, adaptive equipment, or assistance with activities of daily life. (Oktay and Tompkins 2004)
Intimate Partner Violence Definition

A *pattern* of abusive behavior that is used by one person to gain or maintain *power* and *control* over another person.

Relationship abuse can be...

- Physical;
- Sexual;
- Emotional;
- Economic; and
- Culturally-specific

Abuse can happen to anyone!
Traumatic Brain Injury is...

“...the most misunderstood, misdiagnosed, underfunded public health problem our nation faces.”

- Susan Connors, President
The Brain Injury Association of America
A TBI is a blow or jolt to the head, or a penetrating head injury (knife, bullet) that disrupts the function of the brain. The severity can range from “mild” to “severe.”

Mild = brief change in mental status or consciousness (ex: concussions)

Severe = an extended period of unconsciousness or memory loss after injury. (CDC)
Causes of Brain Injury Resulting from Violence

- Falling (40%)
- Blow to the head with any object (15%)
- Pushed against a wall or any other solid surface
- Being strangled
- Near drowning
- Punched in the face or head
- Putting pillow over head – smothering
- Strenuous shaking of the body – forceful whiplash motion
- Being shot in the face or head
Increasing a Survivor’s Risk to Continued Harm

- People who are abused are unaware of long-term consequences of brain injury therefore fail to seek specialized services.
- Professionals fail to link issues presented by people from an undiagnosed brain injury – unable to make appropriate referrals to rehabilitation services & community-based advocacy programs.
- Lack of knowledge = failure in any intervention.
Consequences of Brain Injury

“Rehabilitation for brain injury isn’t necessarily about getting back to normal; it’s about establishing a new normal.”
Consequences of Brain Injury

Deficits in:

- Physical mobility, i.e., paralysis, seizures, headaches, dizziness, decreased stamina, balance problems
- Cognitive impairments, i.e., thinking, reasoning, remembering, attention span
- Attention, judgment
- Organizational skills
- Sensory, vision, loss of taste, smell, sensitivity to noise & bright lights
- Perceptual impairments
- Social behaviors – loss of interest, inability to get along
- Personality changes – sadness, irritability
IPV Victims with TBI report…

- Headaches
- Dizziness
- No initiative
- Can’t retain information
- Can’t concentrate
- Irritability
- Apathy
- Agitation
- Memory loss
- Can’t tolerate frustration
IPV Victims with TBI report...

- Blurred vision; hearing problems
- Confusion
- Can’t process information
- Can’t follow directions
- Mental fatigue
- Can’t make decisions
- Depression
- Can’t sleep
- Poor judgment
- Can’t project into the future
Issues for IPV Victims with TBI

- Assessing danger & defending themselves against assaults
- Deciding to stay or leave
- Adapting to living in a shelter
- Getting needed medical or rehab care
- Financial dependence – inability to hold a job or go to school: Have they applied for victims of crime compensation?
- Living independently – their abuser may be their caregiver
- Caring for children
Making Accommodations

- Assessment
- Screening
- Addressing Challenges
Screening for TBI

During her shelter intake, Julia says that she has been living with her mother, who threw her out after Julia “went ballistic” following a phone call from her husband. She left her husband a month ago after he almost killed her. He has been following her around & harassing her wherever she goes. She needs to find an apartment and a job but feels overwhelmed by the process of looking.
Brain Injury Screening Questions

- Was your head/face ever hit?
- Was your head slammed into an object?
- Did you fall and hit your head on a wall, floor or object?
- Have you ever been injured in a fight?
- Were you strangled, suffocated, or shaken?
- Did you lose consciousness?
- Did you feel dazed and/or confused?
- Are you having trouble concentrating, organizing or remembering things?
Brain Injury Screening Questions

- Are you experiencing emotional changes such as frustration, irritability, sadness, uncontrollable crying, lack of motivation?
- Do you experience headaches, vision and/or hearing problems or loss of balance?
- Do you have trouble sleeping?
- Did your abuser do these things more than once?
- Did you seek medical attention? If so, what did you tell your doctor/nurse? What did they tell you?
Brief Screening for Possible Head Injury

Handout:
Adapted from the Alabama Head Injury Foundation, Alabama Dept. of Rehabilitation Services
Accommodations for Individuals with Brain Injury

Handout for Service Providers
Tips for Communicating with Individuals who have a Brain Injury

Handout for Service Providers
Advocate Accommodation Strategies

- Allow extra time for the client/consumer/victim to get from place to place
- Keep environment quiet – keep noises and bright lights to a minimum & minimize other distractions
- Keep sessions short with scheduled rest periods
- Most of all be PATIENT! Do not rush the process
- Repeat instructions when needed
- Maximize structure
Advocate Accommodation Strategies

- Focus on main points
- Check for understanding
- Use interpreters when needed
- Write things down – “their rights” & the explanation of confidentiality
- Outline steps to accomplish tasks
- Assist with communication: filling out forms, making phone calls, dealing with bureaucracies and interacting with shelter residents/support groups
Compensatory Strategies

- Assist victim with creating a memory notebook
- Use daily planners & calendars
- Use timers to remind them about ADLs (Activities for Daily Living)
- Keep notepads by the telephone
- Create checklists
- Use labels on cabinets or other areas of the house
Compensatory Strategies

- Post shelter rules and schedules
- Help them access social supports
- Minimize anxiety with reassurance, education and structure
- Support their efforts to self-determination
- Provide several solutions to the problem and encourage them to make a choice that works best for them
- Build TBI issues into safety planning
- Be familiar with TBI resources & services
- Educate them about their TBI
Tips for Improving Memory

Handout for Survivors
Tips for Organizing their Life
Strategies that Work

Handout for Survivors

V-DACT
Violence-Disability Assessment Coordination and Training
National TBI Resources & Referrals

- Brain Injury Association of America [www.biausa.org](http://www.biausa.org)
- National Family Helpline 800.444.6443
  - familyhelpline@biausa.org
- Department of Health & Human Services Centers for Disease Control & Prevention
  - [www.cdc.gov/ncipc/tbi](http://www.cdc.gov/ncipc/tbi) 800.311.3435
- National Association of State Head Injury Administrators
  - [www.nashia.org](http://www.nashia.org)
- National Disability Rights Network (NDRN)
  - [www.ndrn.org](http://www.ndrn.org)
National & Nevada Resources on IPV & TBI

- National Resource Center on Domestic Violence
  [www.vawnet.org](http://www.vawnet.org)

- National Domestic Violence Hotline
  [www.thehotline.org/help](http://www.thehotline.org/help)
  Call 1.800.799.SAFE or TTY 800.787.3224

- For a domestic violence advocacy program in your area, visit [http://www.nnadv.org/get-help](http://www.nnadv.org/get-help)
  Contact each program to check on availability for emergency shelter & other advocacy services
Nevada TBI Resources & Referrals

- [www.traumaticbraininjury.com](http://www.traumaticbraininjury.com)
- NV Disability Advocacy & Law Center (NDALC) 702.257.8150 and 775.333.7878
- Disability Services Unit, Aging and Disability Services Division, Dept. of Health & Human Services 775.687.4210. Work with the Nevada Community Enrichment Program (NCEP) 702.259.1903
- Head Injury Association of Northern Nevada [http://hiann.org](http://hiann.org)
Nevada TBI Resources & Referrals

- Resources & services may include:
  - Evaluation
  - In-home and community based rehabilitation
  - Transitional living
  - Protection, advocacy, and support groups
  - Research and educational awareness training
  - Legal services
  - Youth prevention programs

- Contact each organization to check on available services.
Team of Professionals

- Survivors may need to interact with a team of professionals to get the support they need:
  - Neurologists; Neuropsychologists
  - Therapists; Counselors; Psychiatrists
  - Vocational counselors
  - Rehabilitation physicians
  - Case managers/Social workers
  - Domestic violence advocates
What are the next steps?

Examine Policies & Procedures

- Intake form – Does this form incorporate risks for people with disabilities & screen for IPV?
- Review advocacy services for inclusivity for people with disabilities including TBI & LGBTQIA survivors of partner violence
- Does your safety planning process include strategies to help survivors of partner abuse with disabilities?

Share materials with colleagues & contact NNADV or your local domestic violence program for training
A few words...

One Year After Traumatic Injuries Caused by Domestic Violence
by Charlene Carnevale
Questions?

Please complete the evaluation form for this session.