

Iowa Department of Public Health

# Traumatic Brain Injury in Domestic Violence Programs in Iowa: Screening Pilot

This project and report was supported by Grant #H21MC06748: Traumatic Brain Injury Implementation Partnership through the Health Resources and Services Administration in partnership with the Iowa Coalition Against Domestic Violence and the Brain Injury Alliance of Iowa.

Megan Hartwig  
2/22/2013

## Introduction

Individuals who have experienced domestic violence are at great risk for a TBI due to the nature of abuse including being hit on the head, having the head struck against something including a wall or the ground and strangulation. Domestic violence often goes unreported and individuals do not always seek help because they are afraid of personal consequences related to the violence.

Traumatic brain injury like domestic violence is underreported at times and can cause ongoing physical, cognitive and psychosocial challenges including isolation and greater risk of victimization. By identifying a possible TBI and providing helpful resources and referrals to organizations that can help; survivors can begin to build a support network and receive help and services to help overcome challenges they may face.

## Background

In 2009 the Iowa Department of Public Health (IDPH) was received a grant award from the Health Resources and Services Administration in the U.S. Department of Health and Human Services. The TBI State Implementation Partnership Grant #H21MC06748 required states to choose a population as high risk for traumatic brain injury to focus on throughout the grant period. Iowa's grant has a focus on survivors of domestic violence. Goal three of the grant is to increase the availability of comprehensive and coordinated services for individuals harmed by domestic violence and individuals who are incarcerated that have experienced TBI. Objective five of goal three focuses on collecting screening data, analyzing the data and developing a report on the prevalence of Traumatic Brain Injury (TBI) in domestic violence programs.

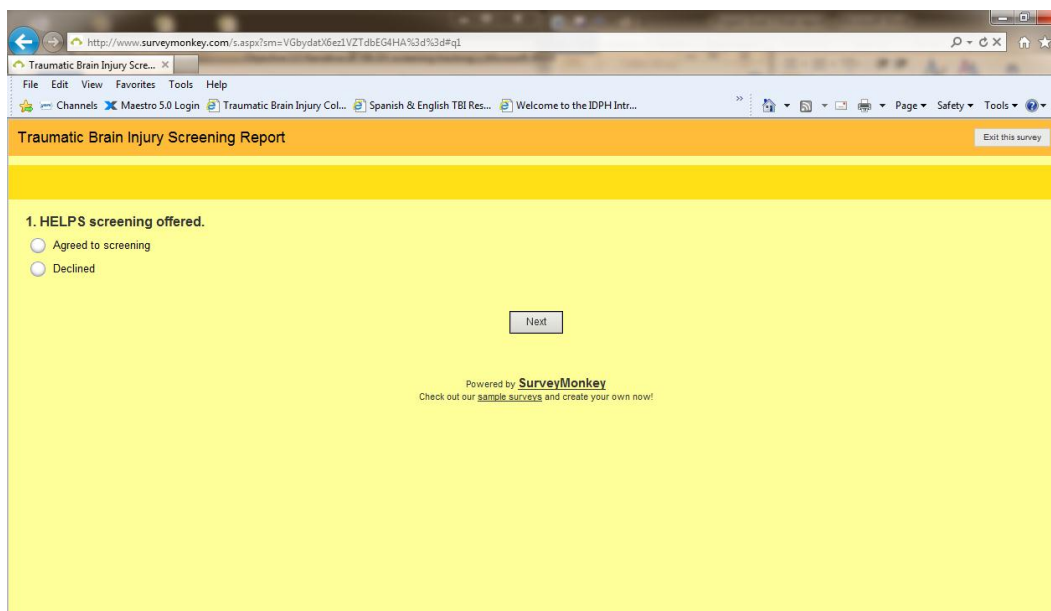
Employees from the IDPH Brain Injury Program and the Violence and Injury Prevention program met with staff from the Iowa Coalition Against Domestic Violence and the Brain Injury Alliance of Iowa to discuss how the objective would best be met. The team identified a goal of ten domestic violence programs would screen clients and provide them with resources about traumatic brain injury and domestic violence. The team identified the HELPS brain injury screening tool would be used to complete the screenings (see appendix A). The HELPS tool was reproduced on a triplicate form; this allowed the programs who were completing the screenings to archive a copy of the screen in an client's file, while also providing the client two copies of the completed screening to take with them. The extra copy allowed clients to keep a copy for their records and share a copy with their healthcare provider if they wished to do so. The team identified and developed resources to provide to clients who screened positively for TBI (see appendix B).

Ten domestic violence shelters from around Iowa were solicited and agreed to participate in the project including one domestic violence program for Latinas. A Spanish version of the HELPS tool (see appendix C) and Spanish language resources (see appendix D) were developed for the Latina shelter. Following is a list of participating programs:

- Crisis Intervention and Advocacy Center – Adel
- YMCA Domestic Violence Shelter & Sexual Assault Program – Burlington
- YWCA DV/SA Resource Center – Clinton
- Phoenix House – Council Bluffs
- LUNA – Latinas Unidas por un Nuevo Amanecer – Des Moines

- Seeds of Hope – Grundy Center
- Crisis Intervention Service – Mason City
- Crisis Intervention Services – Oskaloosa
- Family Center of NW Iowa – Sioux Center
- Council on Sexual Assault & Domestic Violence – Sioux City

Staff at the participating programs were trained by the Brain Injury Alliance of Iowa and the Iowa Coalition of Domestic Violence on Brain Injury 101 and how to administer the HELPS screening tool. Participating programs were requested to report screening data related to the HELPS tool into online tracking tool. Survey Monkey was utilized as the tracking tool format. The survey tracked how many individuals were offered screening; how many screened positively for TBI as well as if resources were offered and whether or not the resources were accepted. A picture of the first page of the online tracking tool and a table of the all of the questions from the tool follow.



Traumatic Brain Injury Screening Report Survey Questions

Question number	Question	Answer options
1	HELPS screening offered	a. Agreed to screening b. Declined screening
2	Total YES responses	a. 0 – zero b. 1 – one c. 2 – two d. 3 – three e. 4 – four f. 5 – five
3	Client declined reporting personal information	a. Yes b. No
4	Gender	a. Male b. Female

5	Age	a. 0 – 17 b. 18 – 24 c. 25 – 59 d. 60+
6	Service type	a. Shelter (client is currently in shelter, safe home, or transitional housing) b. Out-client (all other clients)
7	Resource packet offered	a. Offered b. Accepted c. Not applicable
8	TBI referral made	a. Yes b. No

## Screening Results

The participating domestic violence programs completed screenings between July 1, 2012 and December 30, 2012. Screenings were limited to in-person clients who staff had time to develop a relationship with; screenings were offered and not required. Shorter term clients were not usually screened as there was more of a focus on meeting immediate needs. 53% of the clients who agreed to screening were in a shelter, safe-home or transitional housing; 47% were categorized as out-clients (not residing in a program).

162 individuals were offered the opportunity to complete the screening with 148 completing the screen. 92% of individuals screened provided demographic information; 97% of those who provided demographic information identified as female. The average age range of individuals who screened and shared demographic information was 25 – 59 years. Of the 148 screened, 88 individuals or 60% screened positively for a TBI. Staff offered resources to 106 individuals; 63 accepted the resources. 55 individuals were referred to outside TBI services including the Brain Injury Alliance of Iowa.

## Recommendations

Due to the short screening time period and an additional year of funding that has been made available from April 1, 2013 to March 31, 2014, it is recommended the screenings continue to gather additional information to compare to initial findings.

The following would help to strengthen the screening program:

1. Continue screenings at shelters in all regions.
2. Include a resource survey with a postage paid envelope to measure the helpfulness of the resources.
3. Distribute final findings to stakeholder groups including the Governor’s Advisory Council on Brain Injuries, the Iowa Coalition Against Domestic Violence and partners, the Brain Injury Alliance of Iowa and additional groups as identified.

Appendix A

**HELPS Traumatic Brain Injury Screening Tool**

<b>HELPS Screening offered:</b>		Agreed to screening	Declined
<b>H</b>	Have you ever <b>Hit your Head</b> or been <b>Hit on the Head</b> ? Incidents may have occurred at any age and include: car accidents, falls, assault, sports, etc., also violent shaking of the head (such as whiplash, being shaken), and strangulation.	YES	NO
<b>E</b>	Were you ever seen in the <b>Emergency room, hospital, or by a doctor</b> because of an injury listed above?	YES	NO
<b>L</b>	Did you <b>Lose consciousness</b> or were you dazed, confused, or could not remember what just happened?	YES	NO
<b>P</b>	Do you experience these <b>Problems</b> in your daily life since the injury? <ul style="list-style-type: none"> <li>• difficulty reading, writing, or doing math</li> <li>• difficulty performing your job/school work</li> <li>• headaches or dizziness</li> <li>• anxiety, depression, or mood swings</li> <li>• difficulty concentrating or staying on one topic</li> <li>• difficulty remembering</li> <li>• problems with eyesight or hearing</li> <li>• paralysis</li> <li>• weakness in your hands, arms, or legs</li> <li>• balance problems</li> <li>• constantly tired</li> <li>• epilepsy</li> <li>• trouble learning new things</li> <li>• trouble making decisions, planning</li> </ul>	YES	NO
<b>S</b>	Any significant <b>Sicknesses</b> ? Brain injury may be caused by medical conditions, such as: brain tumor, meningitis, West Nile virus, stroke, seizures, or oxygen deprivation following a heart attack, carbon monoxide poisoning, drowning, or suffocation.	YES	NO
<b>TOTAL</b>			

**Demographic Data:**

Client declined reporting personal information:			YES (skip to TBI info)	NO
Gender:	Male	Female		
Age:	0-17	18-24	25-59	60+
Services:	Shelter		Out-client	

**TBI Information:**

TBI bag offered?	YES	NO	Accepted?	YES	NO
TBI referral made?			YES	NO	

A HELPS screening is considered positive for a possible TBI when the following 3 items are identified:

- 1.) An event that could have caused a brain injury (yes to H, E or S), and
- 2.) A period of loss of consciousness or of being dazed and confused (yes to L or E), and
- 3.) The presence of two or more ongoing problems listed under P that were not present before the injury.

**If you feel concerned about your results or would like more information, please talk to your health care provider or call the Brain Injury Association of Iowa at 1-855-444-6443.**

The original HELPS TBI screening tool was developed by M. Picard, D. Scarisbrick, R. Paluck, 9/91, International Center for the Disabled, TBI-NET, U.S. Department of Education, Rehabilitation Services Administration, Grant #H128A00022. The Helps Tool was updated by project personnel to reflect recent recommendations by the CDC on the diagnosis of TBI. See [http://www.cdc.gov/ncipc/pub-res/tbi\\_toolkit/physicians/mtbi/diagnosis.htm](http://www.cdc.gov/ncipc/pub-res/tbi_toolkit/physicians/mtbi/diagnosis.htm).

This document was supported in part by Grant 6 H21MC06748-06-03 from the Department of Health and Human Services (DHHS) Health Resources and Services Administration, Maternal and Child Bureau to the Iowa Department of Public Health. The contents are the sole responsibility of the authors and do not necessarily represent the official views of DHHS. This is in the public domain. Please duplicate and distribute widely.

## Appendix B

### English Resource Packet Contents

- Brain Injury Alliance of Iowa Business Card
- Brain Injury Alliance of Iowa Feedback Card
- Brain Injury Alliance of Iowa Neuro Resource Facilitation Flyer
- Brain Injury Alliance of Iowa Veterans Flyer
- Brain Injury Support Network (BISN) Brochure
- CDC – Facts about Concussion and Brain Injury Flyer
- CDC – Victimization of Persons with Traumatic Brain Injury or Other Disabilities: A Fact Sheet
- Disability Resource Library at the Center for Disabilities and Development Brochure
- Disability Rights Iowa Brochure
- Iowa Compass Brochure
- Iowa Medicaid Home and Community Based Services Brain Injury Waiver
- Iowa Vocational Rehabilitation Services Brochure
- Quick Series: Understanding Brain Injury
- Safety Planning: For Domestic Violence Victims who Have Been Hit on the Head
- Solutions: Assistive Technology for People with Hidden Disabilities Booklet
- Strangulation – What to do if you have been Strangled Brochure
- Understanding Brain Injury: A Guide for the Family (Mayo Clinic)
- Should I Stay or Should I Go? Book by Lundy Bancroft

Appendix C

**AYUDA lesión cerebral traumática herramienta de examen**

	<b>AYUDA a los exámenes ofrecidos:</b>	De acuerdo para un examen	Rechazar
<b>H</b>	¿Alguna vez se ha Golpeado la Cabeza o ha sido Golpeado en la Cabeza? Los incidentes pueden haber ocurrido a cualquier edad y son: accidentes automovilísticos, caídas, agresiones, deportes, etc., también sacudida violenta de la cabeza (como el latigazo cervical, siendo sacudido), y la estrangulación.	SI	NO
<b>E</b>	¿Alguna vez se ha visto en la sala de Emergencia, hospital, o por un médico debido a una lesión arriba mencionada?	SI	NO
<b>L</b>	¿Perdió el conocimiento o estaba aturdido, confundido, o no podía recordar lo que acaba de suceder?	SI	NO
<b>P</b>	¿Experimenta estos Problemas en su vida diaria desde la lesión? <ul style="list-style-type: none"> <li>• dificultad para leer, escribir, o hacer matemáticas</li> <li>• dificultad para realizar su trabajo / trabajo en la escuela</li> <li>• Dolores de cabeza o mareos</li> <li>• La ansiedad, depresión o cambios de humor</li> <li>• dificultad para concentrarse o permanecer en un tema</li> <li>• dificultad para recordar</li> <li>• Los problemas con la vista o el oído</li> <li>• Parálisis</li> <li>• Debilidad en las manos, los brazos o las piernas</li> <li>• Los problemas de equilibrio</li> <li>• constantemente cansado</li> <li>• epilepsia</li> <li>• dificultad para aprender cosas nuevas</li> <li>• dificultad para tomar decisiones, la planificación</li> </ul>	SI	NO
<b>S</b>	¿Todas las Enfermedades importantes? La lesión cerebral puede ser causada por condiciones médicas, tales como: tumores cerebrales, meningitis, virus del Nilo Occidental, accidente cerebro vascular, convulsiones, o la privación de oxígeno después de un ataque al corazón, el envenenamiento de monóxido de carbono, ahogamiento o sofocación	SI	NO
<b>TOTAL</b>			

**Datos Demográficos:**

El cliente se negó a reportar información personal:			SI (pase a la información TBI)	NO
Genero:	Masculino	Femenino		
Edad:	0-17	18-24	25-59	60+
Servicios:	Albergue		Fuera del Cliente	

Información del TBI:

Bolsa de TBI ofrece?	SI	NO	Aceptado?	SI	NO
TBI remisión hecha?			SI	NO	

UNA AYUDA considerada positiva para una posible lesión cerebral traumática cuando los siguientes 3 puntos se identifican:

- 1.) Un suceso que podría haber causado una lesión cerebral (que sí a H, E o S), y
- 2.) Un período de pérdida de conciencia o de ser aturdido y Confundido (sí a L o E), y
- 3.) La presencia de dos o más problemas en curso que figuran en P que no estaban presentes antes de la lesión.

**Si usted se siente preocupado por sus resultados o si desea más información, por favor hable con su proveedor de atención médica o llame a la Asociación de Lesiones Cerebrales de Iowa en el 1-855-444-6443.**

El original AYUDA TBI herramienta de detección fue desarrollado por M. Picard, D. Scarisbrick, Paluck R., 9/91, Centro Internacional de las Personas con Discapacidad, LCT-NET Departamento de Educación de EE.UU., la Administración de Servicios de Rehabilitación, Donación # H128A00022. La Herramienta de Ayuda se ha actualizado por el personal del proyecto para reflejar las recientes recomendaciones de los CDC sobre el diagnóstico de lesión cerebral traumática. Ver [http://www.cdc.gov/ncipc/pub-res/tbi\\_toolkit/physicians/mtbi/diagnosis.htm](http://www.cdc.gov/ncipc/pub-res/tbi_toolkit/physicians/mtbi/diagnosis.htm).

Este documento fue apoyado en parte por la subvención 6 H21MC06748-06-03 del Departamento de Salud y Servicios Humanos (DHHS) Administración de Recursos y Servicios, Oficina Maternal e Infantil en el Departamento de Salud Comunitaria de Iowa. Los contenidos son de exclusiva responsabilidad de sus autores y no representan necesariamente la opinión oficial del DHHS.

## Appendix D

### Spanish Resource Packet Contents

- Estrangulada – What to Do if you Have Been Strangled Brochure
- Facts about Concussion and Brain Injury Flyer – Spanish – CDC
- Informacion Acerca de la Lesion Cerebral Leve – CDC Booklet
- Iowa Compass Brochure – Spanish
- Neuro Resource Facilitation Flyer – Spanish version
- Planes de seguridad – Safety Planning Brochure – Spanish
- Understanding Brain Injury Booklet – Mayo Clinic – Spanish