

## Brain Injury and Domestic Violence

Domestic Violence is recognized as a leading cause of Traumatic Brain Injury (TBI). Abusers target the head, neck and face more than any other area of the body, which creates the potential for brain injuries. Brain Injury must be considered when working with survivors.

### 20 Million

As many as 20 million women each year could sustain a brain injury caused by domestic violence.

### 85%

In 1 study of women who experienced DV, 85% experienced blows to the head; for 50% of them, it was too many times to count.

### 83%

In the same study, 83% were strangled (which can lead to a brain injury from lack of oxygen), 88% were strangled multiple times.

### 26%

Men are victims of domestic violence, too.  
26% of men report domestic abuse in their lifetime.

## Best Practice

Domestic Violence personnel should:

- SCREEN for prior history of Brain Injury
- ASSESS Cognitive & Functional Impairment
- EDUCATE staff on Brain Injury
- EDUCATE the person about their Brain Injury
- PROVIDE and TEACH Accommodations
- CONNECT person served with Community Resources

## COMMON PROBLEMS

After Brain Injury, we often see problems with:

- Attention, memory and new learning
- Slowed speed of processing
- Organization, problem solving & impulsivity

Irritability, frustration & agitation  
Balance, dizziness & headaches  
Poor awareness of deficits & difficulties  
Difficulty being flexible, poor self-monitoring

#### What to Look For

Domestic Violence personnel may see:

Missing information because they cannot pay attention  
Difficulty assessing danger, making decisions related to safety  
Slow to follow directions because they cannot process quickly  
Difficulty adapting to living in a shelter  
Falling into things, often getting hurt  
Vulnerability to being exploited by others  
Gets stuck on an idea or a way of doing something, does not recognize mistakes

15.5 MILLION children witness domestic violence per year. Women often seek shelter before treatment for injury.

#### Common Accommodations for Brain Injury Challenges.

Here are some common and simple accommodations:

Working for shorter periods of time  
Getting rid of distractions around you, like noise or movement  
Taking notes (on paper, in a notebook, on a phone or computer)  
Using a phone to set timers to remember appointments  
Repeating information to the person  
Slowing down when talking; giving them more time to respond  
Giving the person a list of house rules, written directions, or pictures to help them understand and remember  
Coaching the person with the injury to “Stop, think and plan” then act  
Coaching the person to take deep breaths when feeling angry or anxious

#### Tools for Best Practice

Brain Links’ Strategies & Accommodations Tool: <https://www.tndisability.org/rehabilitation>  
Symptom Questionnaire: <https://mindsourcecolorado.org/adult-symptom-questionnaire/>  
Cognitive Strategies Guidebook: <https://mindsourcecolorado.org/wp->

[content/uploads/2019/05/Strategies-and-Accommodations-Guidebook-CJ-Professionals-5.6.19.pdf](https://content/uploads/2019/05/Strategies-and-Accommodations-Guidebook-CJ-Professionals-5.6.19.pdf)

Brain Injury Screening Resources:

OSU TBI Identification Method: <https://wexnermedical.osu.edu/neurological-institute/neuroscience-research-institute/research-centers/ohio-valley-center-for-brain-injury-prevention-and-rehabilitation/osu-tbi-id>

NASHIA's OBISSS: <https://www.nashia.org/obissprogram>

Tennessee Resources

Brain Links' Website with many resources: [tndisability.org/brain](https://tndisability.org/brain)

Brain Links' Toolkits (for Service Professionals and Survivors):

<https://www.tndisability.org/brain-toolkits>

TN Department of Health TBI Program:

<https://tinyurl.com/3v5jrtd3>

Tennessee Brighter Futures' Resource Pages & Training for Brain Injury:

<https://www.tndisability.org/tbf-brain-injury>

Resource Pages & Training for Domestic Violence:

<https://www.tndisability.org/tbf-domestic-violence>

TN Brighter Futures is organized and facilitated by Brain Links through a contract from the TN Department of Health TBI Program.

References:

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