

TRAUMATIC BRAIN INJURY AND HOMELESSNESS

US Version

WHAT IS A BRAIN INJURY?

Acquired brain injury describes damage to the brain that occurs after birth as a result of a traumatic or non-traumatic injury. One type of acquired brain injury, **traumatic brain injury (TBI)**, is caused by external physical force, such as a blow to the head, and may involve brain tissue being torn, stretched, bruised, or swollen.

A TBI is classified as mild (e.g., concussion), moderate or severe. Severity is based on the person's level of consciousness at the time of injury, amnesia after the injury (i.e., posttraumatic amnesia), and findings from brain imaging. Even if consciousness is not lost and brain imaging appears normal, a TBI may have occurred. However, not all jolts to the head will cause a TBI.

TBI IS A LEADING CAUSE OF DEATH
AND DISABILITY WORLDWIDE^{1,2}

COMMON CAUSES INCLUDE FALLS,
UNINTENTIONAL STRUCK BY/AGAINST
EVENTS, AND MOTOR VEHICLE
COLLISIONS³

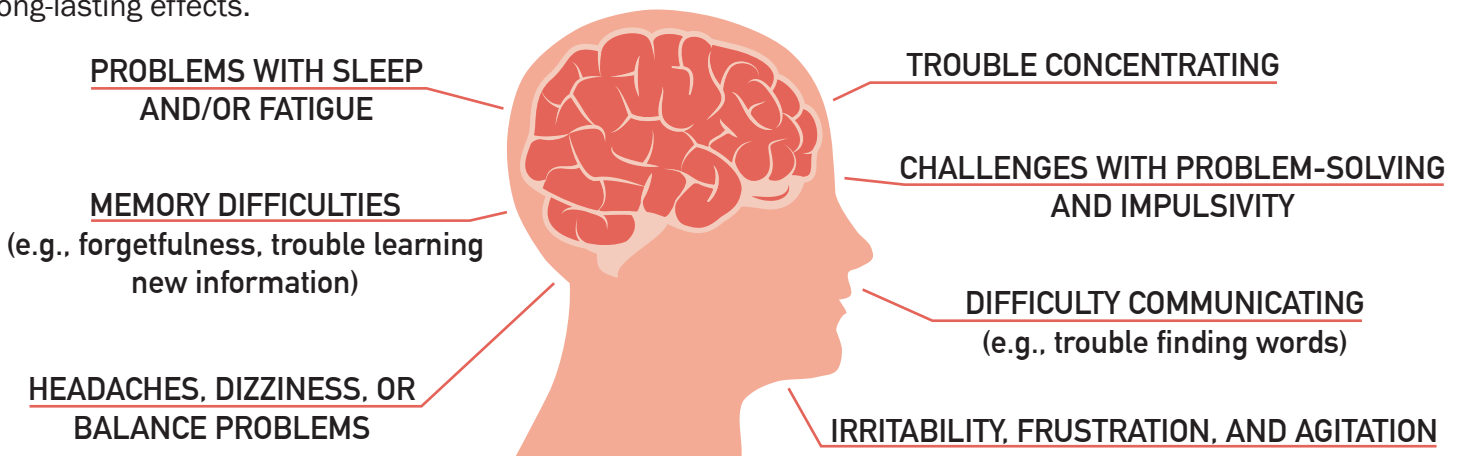


ODDS OF TBI ARE
2x HIGHER IN
MEN THAN WOMEN⁴



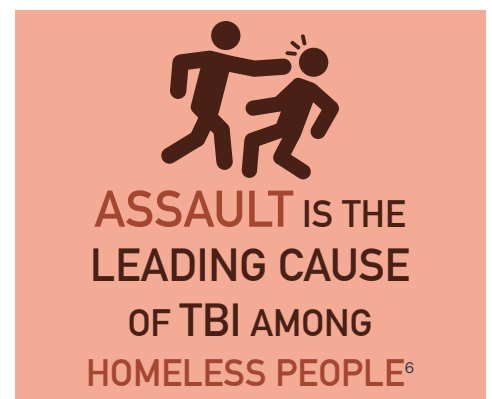
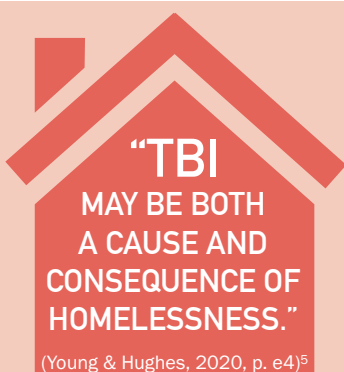
WHAT ARE SOME ACUTE SYMPTOMS OF TBI?

TBI is associated with changes in cognitive functioning (e.g., memory problems), emotion regulation and mood, and behavior (e.g., impulsivity). Symptoms vary depending on the severity of the injury, how long ago it occurred, and the location of injury in the brain. Most people who experience a mild TBI recover within a few weeks, though some people will have symptoms that persist. Moderate and severe injuries often have more long-lasting effects.



WHAT IS KNOWN ABOUT TBI AND HOMELESSNESS?

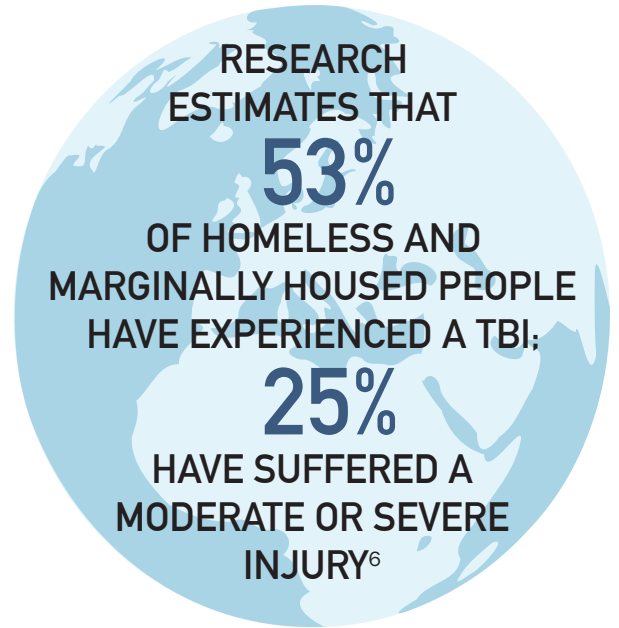
TBI is common among people who experience homelessness and is associated with poorer physical and mental health (including suicidality), memory concerns, and increased involvement with health services and the justice system.⁶



TBI is a risk factor for homelessness. More than half of people experience their first TBI before becoming homeless.⁶ After becoming homeless, unsafe living situations and risky behavior (e.g., substance use) may increase risk of later injuries and complicate the task of exiting homelessness.

TBI may prolong homelessness.

- TBI is often a “hidden disability” and service providers may underestimate a survivor’s need for additional supports.
- Physical, cognitive, and emotional changes after TBI may make it difficult for a person to take the necessary steps to exit homelessness, such as applying for housing, budgeting, paying rent, and maintaining property.
- TBI survivors may struggle “remembering to remember” (e.g., have difficulty recalling appointments or turn up on the wrong day, forget to take medication).
- It may be difficult for TBI survivors to communicate their needs or they may be unaware of the extent of their difficulties, which may lead them to not seek services or to decline services.
- Emotional and behavioral symptoms of TBI (e.g., mood swings, temper outbursts) may be mistaken for deliberate disruptive behavior by service providers, landlords, and others, which may affect an individual’s eligibility to participate in programs.



WHAT DO I NEED TO KNOW AS A SERVICE PROVIDER?

Eighty-one percent of frontline workers (e.g., housing workers, case managers) report they have worked with one or more homeless clients who have been diagnosed with a TBI.⁸ However, in many cases, a formal diagnosis of TBI is not available, especially if healthcare was not sought at the time of injury. TBI symptoms may be misattributed to mental illness, a learning disability, or other difficulties (e.g., substance use), which may lead to provision of inappropriate or ineffective support. Learning about TBI, including evidence-based support strategies, will enable workers to provide more effective support and referrals.

If you are concerned that a client is affected by a history of TBI, consider contacting your state brain injury support service to seek consultation regarding resources in your area. For general information about brain injury, explore resources provided by the national brain injury organizations above. If you are concerned that a client has suffered a TBI in recent days and may require medical care, evaluation at an emergency department or by a primary care provider may be necessary.

**NATIONAL
RESOURCES**

**Brain Injury Association
of America**
<https://www.biausa.org>

**Centers for Disease Control
and Prevention**
<https://www.cdc.gov/traumaticbraininjury>



Scan the QR code to download this factsheet and the reference list.



Development of this resource was funded by the Mercy Foundation.

SUGGESTED CITATION: Mackelprang, J. L., Hartanto, S., Thielking, M., & Graves, J. M. (2020, December). *Traumatic brain injury and homelessness* [US fact sheet V.1]. Swinburne University of Technology. <https://doi.org/10.25916/zebe-xn70>

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