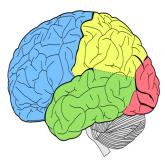
Traumatic Brain Injuries (TBIs) and the Incarcerated Population





What is a TBI?

TBIs, or Traumatic Brain Injuries, occur when the brain is injured in events like fights, gunshot wounds, car accidents and falls. After a TBI, the brain can heal, but it does not always go back to how it was before.

Common things that can occur *after* a TBI can include headaches, dizziness, pain from lights or sounds, memory problems, mental fatigue, easy frustration or anger, depression, anxiety, and difficulty with tasks involving planning or organization.

Why it's important to the Department of Corrections

Many people in prisons and jails are living with TBI- related problems that can complicate their treatment while they are incarcerated. Because most incarcerated individuals will be released, these problems can pose challenges to their well-being when they return to their communities. The Department of Corrections recognizes TBIs are an important public health issue and screening individuals for TBIs is the first step in establishing a standard to address needs of incarcerated individuals with cognitive disabilities.

TBIS AND THE INCARCERATED POPULATION

Causes

- Causes of TBI within the incarcerated population varies greatly. Repeat exposure to violence like gang initiations can contribute to TBIs.
- Female inmates often report having sustained head injuries from domestic violence before ever entering prison.

DID YOU KNOW?

National studies of incarcerated individuals self-reported health indicate those with one or more head injuries have significantly higher levels of alcohol and/or drug use during the year prior to their incarceration.

Effects

The following can be indicators of a TBI:

- Not understanding directions and seeming slow or non-responsive to staff requests.
- Not remembering staff instructions and/or forgetting appointments.
- Difficulty organizing their cell and keeping it tidy.
- Rapid mood swings with no apparent reason.
- Responding too aggressively to other incarcerated individuals or staff.
- Anxiety or depression that causes withdrawal from social events.
- Sensitivity to lights and sounds, especially in common areas.

FREQUENTLY ASKED QUESTIONS



Can a TBI from years ago still affect an incarcerated individual?

Maybe. It depends on many things and not all of them may be because of a TBI.

Any of the following may affect a person's thinking skills. Since many incarcerated individuals have a history of these conditions, it may be difficult to figure out what exactly is causing someone's difficulties.

- Drug/alcohol abuse
- Emotional trauma/PTSD
- Mental illnesses like depression, anxiety, schizophrenia and bipolar/personality disorders

The bottom line is that the likelihood an incarcerated individual has cognitive challenges is high.

Can a person recover from a TBI?

A person can recover from a TBI, but by how much and how fast depends on many factors. TBI severity and amount of physical and psychological trauma can affect recovery.

Sources:

- Traumatic Brain Injury in Prisons and Jails, Centers for Disease Control https://www.cdc.gov/traumaticbraininjury/pdf/Prisoner_TBI_Prof-a.pdf
- 2. Brainline Traumatic *Brain Injury among Prisoners* https://www.cdc.gov/traumaticbraininjury/pdf/Prisoner_TBI_Prof-a.pdf
- University of Washington Traumatic Brain Injury Model System https://tbi.washington.edu/

Other factors like a person's level of education, history of substance abuse, level of social support, access to medical services and whether or not they've already had a TBI or other brain disorder before can all play a role in recovery rates.

How does the Department of Corrections help incarcerated individuals with TBI or other cognitive disabilities?

The DOC screens inmates for cognitive disabilities at intake. Some facilities, such as Stafford Creek Corrections Center, have a Skill Builders Unit specifically for inmates with developmental/cognitive disabilities to keep them safe. Staff receives ongoing training on effective communication and promoting safe interactions with this segment of the incarcerated population. The department also offers coping and self-care classes to inmates to give them skills to promote successful reentry.

Upon release, designated staff refer these individuals to the Department of Social Health Services, Division of Developmental Disabilities and local agencies with resources for people with cognitive disabilities.

NUMBERS AT A GLANCE

25%-87%

Percentage of inmates in US prisons and jails who have experienced a TBI at some point in their lives

8.5%

Percentage of the general public who has ever had a TBI

— For More Information —

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