Quick Takeaways:

- A significant number of veterans seeking VA homeless services may have a history of Traumatic Brain Injury (TBI) prior to experiencing homelessness.
- The most common causes of TBI were transportation accidents, assault, falls, and sports.

Study:

This study analyzed data collected from 207 veterans seeking homeless services at two VA hospitals who reported a history of Traumatic Brain Injury (TBI) to describe the relationship between homeless and TBI for veterans. Participants were asked to recall their history of TBI, age at which the injury was sustained, and the level of severity, symptoms, and treatment. The severity of TBI was defined based on alteration or loss of consciousness. Injuries with loss of consciousness more than 30 minutes were categorized as being moderate to severe TBIs.

The severity of the first instance of TBI was compared to the first incidence of homelessness and used to identify three categories of occurrence: before the first incidence of homelessness, within one year of the first incidence of homelessness, and after the first incidence of homelessness.

Findings:

The vast majority, 90.4 percent, of veterans seeking homeless services reported a history of TBI, with 83 percent having sustained their injuries before becoming homeless. Of participants with a history of TBI, 43.5 percent reported receiving at least one TBI after their first incidence of homelessness. Of the 630 injuries recorded, more than three quarters (77.4 percent) were associated with symptoms such as headaches, dizziness, or fatigue/sleep problem, and approximately 13 percent were defined as moderate to severe. About 30 percent of the participants sustained a TBI while on active duty.

Participants reported a variety of causes for TBI. Prior to entering homelessness, participants reported transportation accidents, assault, and sports as the most common causes. During homelessness, traumatic brain injuries were caused by assault, falls, and transportation accidents. Of the veterans who experienced TBI within one year of their first incidence of homelessness, 60 percent were due to assault.

Conclusion:

The results of this and other studies indicate a bi-directional relationship between TBI and veteran homelessness. Potential connections include the difficulty many TBI patients have maintaining housing and the possibility that homelessness increases risk of sustaining a Traumatic Brain Injury. Additional research is needed examine the relationship more deeply and identify other risk factors. In the interim, programs may want to focus prevention efforts on veterans with TBI and connect them to local TBI treatment resources.