



# NATIONAL COALITION *for* HOMELESS VETERANS

## Findings from the District of Columbia Traumatic Brain Injury Needs and Resources Assessment

DC Department of Health | [Full Report](#)

### Quick Takeaways

- 64.8 percent homeless participants reported a history of head trauma.
- 150,000-180,000 U.S. military personnel has returned with at least a mild traumatic brain injury (TBI).
- Employment is necessary to help TBI survivors regain their independence; broader array of employment opportunities needed, including volunteer opportunities.
- The vast majority (85 percent) of the homeless adults with a history of brain injury was found to be unemployed.
- Lack of training among service-providers showed to be a major gap.

### Introduction

It is estimated that about 5.3 million Americans have a TBI-related disability. The long-term consequences of TBI include altered cognition, personality, and behavior as well as sensory and motor impairments.

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*Traumatic Brain Injury (TBI): an injury resulting from a blow or jolt to the head, or a penetrating injury to the head, that disrupts the function of the brain.*

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In particular, homeless individuals and veterans who may have sustained head injuries and/or post-traumatic stress disorder (PTSD) from their military service are at ongoing risk for head injury.

### Selected Findings from Assessment Surveys

- Nearly two-thirds (64.8 percent) of homeless participants reported a history of head trauma.
- Demographic characteristics of homeless respondents reporting a history of head injury:
  - ◊ At least half were 48 years of age or older
  - ◊ 85.3 percent were African American, non-Hispanic
  - ◊ 78.3 percent were male
  - ◊ 67.4 percent reported education levels of high school graduate/GED certificate or above
  - ◊ Single, never married (72.9 percent)
  - ◊ 61.2 percent were parents with children age 1 to 12; about half (48.1 percent) reported having 1-3 children; none of the respondents indicated their child resided with them.
- The three most frequently reported causes of head trauma reported by homeless adults in the District were fights or assaults (36.2 percent); falls (27.6 percent); and motor vehicle crashes (18.6 percent).

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*National TBI estimates in the US for the period 2002 to 2006, an estimated 1.7 million people sustained a TBI annually, including 52,000 deaths.*

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### Characteristics of TBI Survivors among Veterans and the Homeless

Hard evidence on the rate of head injury among veterans is limited; however, anecdotal evidence suggests that the rate of head injury may be quite high among veterans and that TBI rarely is diagnosed

or rehabilitated. Current figures estimate 10-12 percent of the 1.5 million U.S. military personnel (150,000-180,000) has returned with at least a mild TBI. The survey found 21.8 percent of male respondents reporting a head injury were veterans.

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*Primary TBI-related causes: falls (35.2 percent), motor vehicle-traffic accidents (17.3 percent); struck by/against events, which include colliding with a moving or stationary object (16.5 percent); and assaults (10 percent).*

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Furthermore, TBI survivors who are homeless may be more likely to have nicotine addiction, high blood pressure, and/or asthma. Recommended options to address these needs include tobacco cessation products and programs; medication and treatment options for high blood pressure; and asthma management.

### Employment Concerns

The vast majority (85 percent) of the homeless adults with a history of brain injury were found to be unemployed. Of this population, 47 percent reported that they were currently looking for employment. Barriers to employment included transportation needs (50 percent) and job training needs (40 percent).

Employment is believed to be necessary to help TBI survivors regain their independence and that a broader array of employment opportunities is needed, including volunteer opportunities. Results from the focus group saw respondents discuss the need for volunteer opportunities, the need to practice how to work, and proper career and vocational evaluations to decide the best kinds of jobs to explore. In addition, respondents felt that a screening tool and training/education would be helpful for service-providers to recognize and help them receive the appropriate services.

### Survey Respondents Concerns about Service-Providers

One major gap discovered in the survey was lack of training among service-providers on TBI-related injuries. Only one provider indicated any training at all, and all service-providers indicated that staff would benefit from TBI training. Support offered to homeless individuals with TBI by service-providers included: individual counseling (75 percent), mental health counseling (67 percent), housing assistance (67 percent), medical care (67 percent), GED/high school diploma (67 percent), vocational training (58 percent); and nutrition (58 percent).

Lack of awareness among service-providers proved to be a concern from several respondents during the survey. Some individuals stressed the importance for counselors to not limit their thinking in finding employment opportunities. Service-providers could also increase their outreach to homeless individuals who may have a TBI-related injury. 83 percent of the individuals indicated they would like to know more about brain injury effects. Currently, only 26 percent learn about TBI through their case manager or counselor.

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*"I get tangled in my thinking - I'm single, my dad is terminally ill and I'm trying to maintain everything. I have a house and I've heard there are vouchers, but I can't find anything out. It's just too much and then I forget where I left off."*

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The focus group also stressed the importance of a clearinghouse of information to find services they may qualify, one suggestion included creating a flow chart that described what materials and information is needed at each particular office. The report also explores the impact of domestic violence on TBI-related injuries.