Report to Council on Health and Human Services - Brain Injury, November 2024

Surveillance and Outreach

Incidence & Prevalence of Brain Injury in Iowa

In 2022, there were more over 10,000 traumatic brain injury (TBI) cases in Iowa. This included 741 deaths, 7,816 emergency department visits, and 1,637 hospitalizations. This does not include brain injury from non-traumatic causes like stroke, overdose, or infections or TBIs seen in other setting or not reported. Falls are the leading cause of TBI in Iowa.

It is estimated that approximately 1 in 4 adults in Iowa have experienced a brain injury in their lifetime (Iowa BRFSS, 2022) and 1 in 8 Iowa adolescents reported having a concussion in the past 12 months from playing sports (Iowa YRBS, 2021).

The Brain Injury Program staff continue to receive support from the lowa HHS Behavioral Risk Factor Surveillance Survey (BRFSS) Epidemiologist to analyze data and better understand the prevalence of brain injury in lowa adults as well as how having a history of brain injury may be related to other experiences across the lifespan. The data shows that adults in lowa who have experienced a brain injury have a higher prevalence rate of poor mental health days, ever being diagnosed with depression, use of alcohol (heavy drinking and binge drinking) and use of prescription opioids. Iowa adolescents who reported having a concussion from sports had a higher prevalence rate of being in a physical fight at school and binge drinking as compared to peers who had not experienced a concussion.

Brain Injury Registry Outreach Activities

As of September 2024, the Brain Injury Program team sent 1,193 letters to individuals on the Brain Injury Registry with newly acquired TBIs.

Screening for Lifetime History of Brain Injury

HF2673, the Behavioral Health Redesign bill, included specific language that the state of lowa recognizes brain injury as a disability and that each agency and subdivision of the state will recognize brain injury as a distinct disability. It requires that each state agency will make reasonable efforts to identify individuals with brain injury among the people served by the agency. In lieu of a medical diagnosis, screening and assessment serve as a process for identifying individuals with history of traumatic and non-traumatic brain injuries.

Screening for lifetime history of brain injury, assessing for brain injury-related symptoms and referring to Brain Injury Resource Facilitation is a strategy the Brain Injury Program has been promoting among a variety of organizations such as those providing behavioral health services, serving individuals who experience homelessness,

supporting survivors of intimate partner violence, and other setting where individuals who have brain injury are likely to be seen.

Recommendation: In 2019, the Iowa Advisory Council on Brain Injury endorsed a brief, modified version of the Ohio State University Traumatic Brain Injury Identification Method for identifying Iowans who have history of brain injury. The Brain Injury Program recommends that this tool be used, when medical documentation is not available, to screen individuals for history of exposure to brain injury.

Brain Injury Resource Facilitation & Training

Brain Injury Resource Facilitation is a service administered through a contract from Iowa HHS. It is intended to provide a linkage to existing services and increase the capacity of Iowa providers by providing brain injury-specific information, support and resources.

In SFY24, the contractor, the Brain Injury Alliance of Iowa, achieved the following:

- 602 new participants enrolled into resource facilitation,
- 11,731 contacts made to participants in the Resource Facilitation Program,
- 635 brain injury resource tote bags and 41 resource guides disseminated, and
- 39 individuals completed the Brain Injury Fundamentals certificate program.

Traumatic Brain Injury State Partnership Program Grant

The Brain Injury Program has entered Year 4 of its five-year cooperative agreement funded through the Administration for Community Living. The goal of the lowa project, Neuro Resource Child Welfare Collaborative, is to develop brain injury-informed systems through increased screening, training and awareness. The project is currently partnering with the Family Well-Being and Protection Division on a pilot in three lowa counties within the child welfare system. Through this pilot, caregivers meeting specific criteria are screened and assessed for brain injury; then, appropriate supports are provided to individuals who screen positive to support them to successfully comply with requirements outlined in their case plans. Data from the project is currently being analyzed for program evaluation.