

Brain Injury Advisory Committee

2026 New Member Orientation



Welcome. Meet the Team.



**Maggie
Ferguson**
Project Director



Jim Pender
Grant Manager

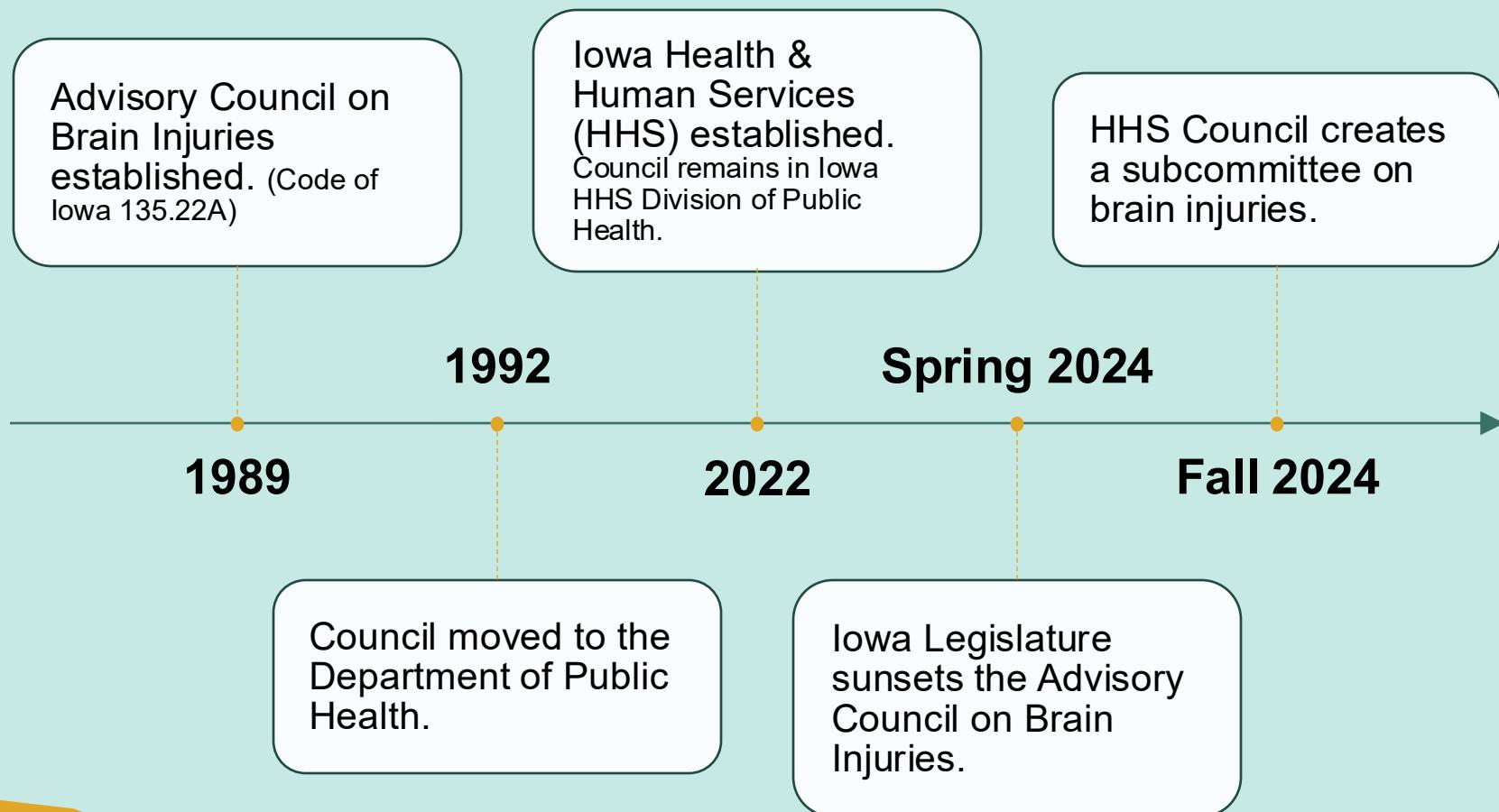


Toby Yak, PhD
Epidemiologist

Brain Injury Committee

History and current structure

From Council to Committee



Mission

To **help Iowans** by suggesting **system changes** that can **stop brain injuries** from happening **and make things better** for those who already have one.



Council structure: Community members

Appointed by the HHS Council annually.

- Survivors of brain injury
- Family members/care partners
- Professionals or other stakeholders

Council structure: Standing members

State agencies:

- Education
- HHS' Public Health, Aging & Disability and Medicaid Divisions, and Long-term Care Ombudsman's Office
- Vocational Rehabilitation Services

Advocacy organizations:

- Brain Injury Association of Iowa
- Developmental Disabilities Council
- Disability Rights Iowa
- Statewide Independent Living Council

Meetings

- Meet as needed
- Typically, remote meetings using Zoom
- 2-3 hours/meeting
- Currently drafting the State Plan for Brain Injury

Upcoming and past meeting information available at:

[Iowa HHS Brain Injury Advisory Committee](#)
[Health & Human Services](#)

Calendar invites and email updates also available for members.

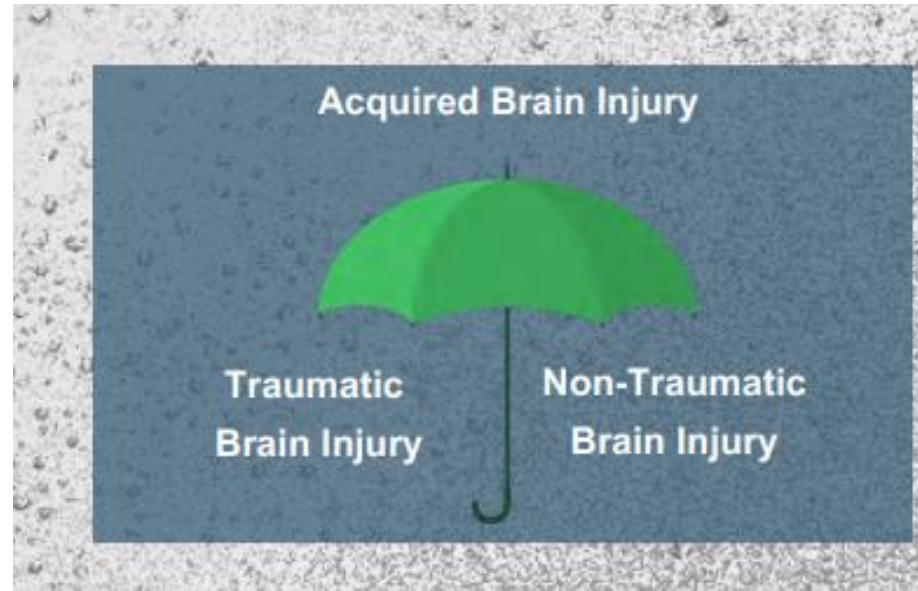
Brain Injury in Iowa

Brain Injury Defined

Head injuries can change how the brain works. This can happen in two main ways.

- ▶ Traumatic Brain Injury (TBI) = external cause
- ▶ Non-traumatic Brain Injury = internal cause

Together traumatic and non-traumatic causes are called acquired brain injury (ABI). However, we will commonly use the term brain injury when referring to both.



Rate of brain injury each year:

Approximately 17,000 Iowans are seen in the emergency department, hospitalized or die due to TBI.

Falls are the number 1 cause of TBI, followed by motor vehicle crashes and assaults.

Over 1,300 Iowans are notified by Iowa HHS regarding support available following brain injury.

(Source: Iowa HHS)

Living with Brain Injury

Approximately 600,000 Iowans report having a head injury resulting in loss of consciousness in their lifetime. Those individuals, compared to Iowans without brain injury, report higher rates of:

- Depression (1 in 4)
- Frequent mental distress (1 in 5)
- Binge drinking (1 in 4, with 3 in 10 having their TBI at ages 15-18), especially among males

(source: Iowa Behavioral Risk Factor Surveillance Survey)

2025 Survey Results

Survivors of brain injury, their care partners and paid professionals participated in an online survey in 2025.

- Respondents found rehabilitation services, financial assistance, government assistance and information about brain injury to be **most useful** supports.
- Government assistance, financial assistance, and counseling/mental health support was **lacking**.
- Increased funding, services and access to support for caregivers/family were **top priorities for improving lives** of Iowans after brain injury.

(source: Iowa HHS)

2025 Listening Session Results

Survivors of brain injury, their care partners and paid professionals also attended listening sessions to share their experiences and ideas in 2025.

What's working well?

- Resource facilitation
- Support networks
- Specialty services
- Education and training

What needs improved, added or changed?

- Public education campaigns
- Provider training
- Support services expansion
- Simplified language

(source: Iowa HHS)



Iowa HHS' Brain Injury Strategy

Building on what we know and have learned

Making the Invisible Visible

- ▶ Brain injury is common, but often undiagnosed.
- ▶ “Mild” classification (i.e. concussions) doesn’t predict long-term impact.
- ▶ Chronic condition that can have an impact throughout the lifespan.
- ▶ As an invisible disability, it is easy to miss and misunderstand.





Identify at-risk stages & populations



Educate and create partner buy-in



**Develop strategies
for prevention and management**



Evaluate and communicate

Experiences to Explore

Homelessness

Adverse
Childhood
Experiences

Veterans

Intimate
partner
violence

Poverty

Juvenile
justice/criminal
legal system

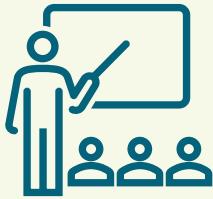
Behavioral
health

Iowa Partnership Strategies

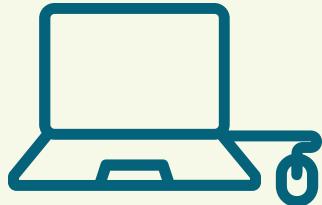
- ▶ Screening during intakes at homeless shelter
- ▶ Training child welfare case workers
- ▶ Co-endorsing resources with Department of Education
- ▶ Conducting landscape analysis of criminal legal system using sequential intercept model
- ▶ Leveraging *Iowa's State Plan for Brain Injury* and brain injury screening requirement in Disability and Behavioral Health Redesign legislation



Brain Injury-Informed Systems



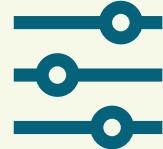
Training & education



Screen for lifetime history of brain injury



Assess for cognitive impairment



Adjust supports & Provide accommodation



Thank you for your
commitment!

Contact us by emailing
brain.injury@hhs.iowa.gov

