

Brain Injury and Substance Use Disorder

Brain Injury can be both a cause of Substance Use Disorder and a consequence. Some people with Brain Injuries turn to substances to help with chronic pain, mental health issues (like anxiety and depression) and in an effort to “just feel normal.”

50%

About half of the people in Substance Use Disorder (SUD) treatment have a brain injury

75%

About 75% of people who need both Mental Health and SUD treatment also have a brain injury

70-80%

The percentage of people discharged from healthcare facilities for Brain Injury that are given a prescription for opioids

10-20%

Within one year after injury, 10-20% will develop a SUD problem & that number will grow over time.

For every overdose death, there are approximately fifty overdose survivors, 90% of whom become impaired because of insufficient oxygen to the brain.

BEST PRACTICE

Substance Use treatment centers should:

- SCREEN for prior history of Brain Injury
- ASSESS Cognitive & Functional Impairment
- EDUCATE staff on Brain Injury
- EDUCATE the person about their Brain Injury
- PROVIDE and TEACH Accommodations
- CONNECT person served with Community Resources

COMMON PROBLEMS

After Brain Injury, we often see problems with:

Attention, memory and new learning Slowed speed of processing

Organization, problem solving & impulsivity Irritability, frustration & agitation

Balance, dizziness & headaches

Poor awareness of deficits & difficulties Difficulty being flexible, poor self-monitoring

What to look for

Substance Use personnel may see:

Appearance of “checking out” during a session or group

Appearance of defiance because they cannot remember the rules

Slow to follow directions because they cannot process quickly

Getting into fights because of irritability, anger and impulsivity

Falling into things, often getting hurt

Difficulty staying sober because of cognitive changes

Gets stuck on an idea or a way of doing something, does not recognize mistakes

People with Brain Injury are 10 times more likely to die of accidental overdose, in large part because of cognitive and behavioral changes. 25% of people entering Brain Injury treatment were intoxicated when injured. Being intoxicated at injury makes it harder for the brain to heal.

Common Accommodations for Brain Injury Challenges

Here are some common and simple accommodations:

Working for shorter periods of time

Getting rid of distractions around you, like noise or movement

Taking notes (on paper, in a notebook, on a phone or computer)

Using a phone to set timers to remember appointments

Repeating information to the person

Slowing down when talking; giving them more time to respond

Giving the person a list of house rules, written directions, or pictures to help them understand and remember

Coaching the person with the injury to “Stop, think and plan” then act

Coaching the person to take deep breaths when feeling angry or anxious

Tools for Best Practice

Brain Links' Strategies & Accommodations Tool: <https://www.tndisability.org/rehabilitation>

Symptom Questionnaire: <https://mindsourcelcolorado.org/adult-symptom-questionnaire/>

Cognitive Strategies Guidebook: <https://mindsourcelcolorado.org/wp-content/uploads/2019/05/Strategies-and-Accommodations-Guidebook-CJ-Professionals-5.6.19.pdf>

Brain Injury Screening Resources:

OSU TBI Identification Method: <https://wexnermedical.osu.edu/neurological-institute/neuroscience-research-institute/research-centers/ohio-valley-center-for-brain-injury-prevention-and-rehabilitation/osu-tbi-id>

NASHIA's OBISSS: <https://www.nashia.org/obisssprogram>

Tennessee Resources

Brain Links' Website with many resources: [tndisability.org/brain](https://www.tndisability.org/brain)

Brain Links' Toolkits (for Service Professionals and Survivors):
<https://www.tndisability.org/brain-toolkits>

TN Department of Health TBI Program:
<https://tinyurl.com/3v5jrdt3>

Tennessee Brighter Futures' Resource Pages & Training for Brain Injury:
<https://www.tndisability.org/tbf-brain-injury>

Resource Pages & Training for Substance Use Disorder:
<https://www.tndisability.org/tbf-substance-use>

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References:

Lemsky, C. (2021). Traumatic Brain Injury and Substance Use Disorders: Making the Connections. Substance Abuse and Mental Health Services Administration (SAMHSA).

Substance Abuse and Mental Health Services Administration (2021) “Treating Patients with Traumatic Brain Injury”, update from the SMA10-4591, In Brief, Volume 9, Issue 2.

Administration for Community Living Behavioral Health Guide: Considerations for Best Practices for Children, Youth and Adults with Traumatic Brain Injury. May 2022.

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