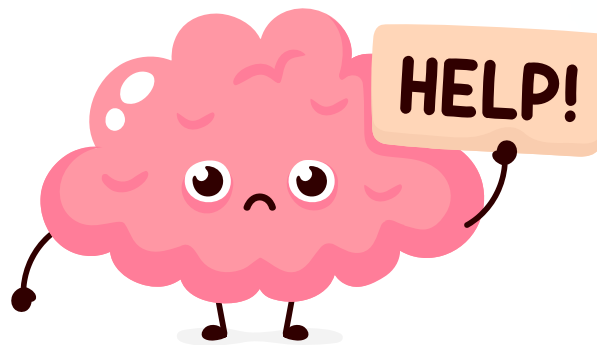


SECTION 3

MENTAL HEALTH AND DOMESTIC VIOLENCE



Mental Health

Suicide Crisis Hotline:

855-CRISIS-1
855-274-7471

Suicide and Brain Injury

The Brain Injury Association of North Carolina

NAMI Tennessee

National Alliance on Mental Health Tennessee Chapter

Concussion and Mental Health

This Infographic was developed from the Ontario Neurotrauma Foundation
(<https://concussionsontario.org>) is being shared by Brain Links with permission.

Mental Health and Brain Injury ([English](#) [Espanol](#))

In collaboration with the Brain Injury Association of Virginia, the Mental Health & TBI Quick Guide was customized for TN.

Tennessee Mental Health and Substance Abuse Services

Resilience and the Brain Factsheet

This material is great for people of all ages who are looking to learn more about resilience helping themselves and/or others. Building resilience supports brain health mental health physical health and ultimately longevity.



We want to hear from you!
Complete our short survey to let us know how we're doing.

SUICIDE

AND BRAIN INJURY

Acquired brain injury (ABI), including traumatic brain injury (TBI), can cause a lasting change in a person's thinking, how they react to certain situations, and how they relate to others. The intersection between suicide and brain injury is complex and overlapping. Suicide attempts may result in a brain injury (from falls, lack of oxygen, substance use, etc.). On the other hand, sustaining a brain injury might lead to an increased risk of suicidality due to additional stressors, medication, and impulsivity. Common influences might be:

- increased stress, helplessness, and isolation
- greater difficulty with relationships
- depression, and other mental health conditions
- difficulty controlling emotions, decision-making, planning, and problem solving
- loss of support system, job, and/or income

COMMON DEFINITIONS

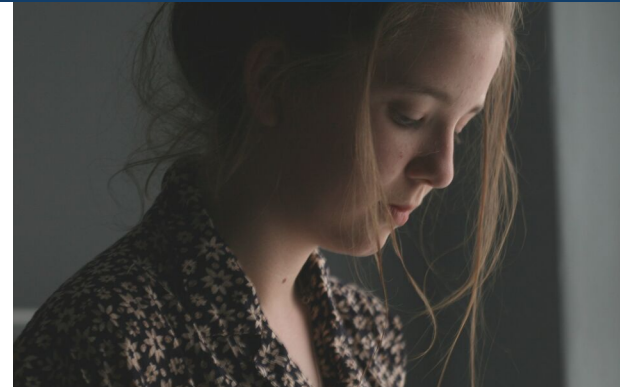
Suicidal ideation – self-reported thoughts of engaging in suicide-related behavior.

Suicidal behavior – a spectrum of activities related to thoughts and behaviors such as suicidal thinking, attempts, and completed suicide.

Self-harm/Injury – the methods by which individuals injure themselves of suicidal or non-suicidal intent, such as self-laceration, battering, or recklessness.

DID YOU KNOW? a person with brain injury is at an increased risk of suicide.

Mackelprang et al. (2014) found that 25% of participants experiencing hospitalization reported suicidal ideation at some time during the first year after TBI, a rate that exceeds the general population by almost 7 times. Screening and assessment is crucial at all stages following injury because there is not a specific window of risk for suicidality after TBI.



SUICIDE WARNING SIGNS



Talk or comments may be passive or directly related to suicide.

If a person talks about:

- Killing themselves
- Feeling hopeless
- Having no reason to live
- Being a burden to others
- Feeling trapped
- Unbearable pain



Behaviors that may signal risk, especially if related to a event, loss or change:

- Increased use of alcohol/ drugs
- Looking for a way to end their lives, such as searching for methods
- Withdrawing from activities
- Isolating from others
- Sleeping too much/ little
- Visiting or calling people to say goodbye
- Giving away prized possessions



Moods may be persistent or fluctuating, but often are all-consuming:

- Extreme sadness or stress
- Loss of interest
- Irritability or aggression
- Humiliation/Shame
- Agitation/Anger
- Relief/Sudden Improvement

Offer Support

Every person, brain injury, and struggle is different. Together we can all help to prevent suicide. As a supporter, be sure to keep in mind follow-up strategies within 48 hours after a suicidal crisis or hospital discharge: make a phone call, send a short text message, write a letter/email, or visit their residence. Here are strategies & resources to help change the internal narrative that there is no way out to one of hope and community.



Promote Prevention

FOR INDIVIDUALS & FAMILIES

- Talk to someone with psychotherapy, counseling, & support groups.
- Medication and management can be helpful for regulating emotions.
- Encourage connecting to providers, transportation, and group activities.
- Provide or seek a positive environment and support.
- Take time to evaluate a sense of purpose & of self, spirituality, or meaning.
- Responsibility such as a pet, chores, or job can help with purpose and feeling valued.
- Distractions & self-care can help to reduce stress.
- Helping others (volunteer work, acts of kindness, donating, etc.) can feel rewarding.

FOR PROVIDERS

- Take more time, be patient, and promote independence at all opportunities.
- Repeat or cue the person many times and provide written handouts for memory.
- Involve support, family, or friends whenever possible to avoid misinformation or confusion.
- Coordination of care should be communicated between all providers.
- Recommend family and couples counseling or positive group interactions with other people.
- Provide consistent monitoring and follow-up because memory and organization may be a barrier.
- Communicate that there is a possibility of suicide and the resources available.
- Medication may help, but pay attention to potential misuse or negative side-effects or ones that may be awkward to talk about.
- Written communication (i.e. emails) are often not enough to fully assess needs.
- Educate and support caregivers on expectations, coping skills, burnout, and connection to respite services.

Encourage Connection

RESOURCES & REFERENCES

- | | |
|--|---|
| National Suicide Prevention Lifeline: | Substance Abuse and Mental Health Services Administration (SAMSHA): |
| • 1-800-273-TALK (8255) | • www.samhsa.gov |
| • TTY: 1-800-779-4889 | |
| • suicidepreventionlifeline.org | |
| Veterans Crisis Line: | Defense and Veterans Brain Injury Center (DVBIC): |
| • 1-800-273-8255 and Press 1 | • 1-800-870-9244 |
| • www.veteranscrisisline.net | • dvbic.dcoe.mil |
| Suicide Resource Prevention Center: | North Carolina Resources: |
| • 877-(438-7772) | • crisissolutionsnc.org |
| • www.sprc.org | • hopeline-nc.org |
| | • LME/MCO Crisis Centers |

HOPE is available.

Let's talk about

CONCUSSIONS & MENTAL HEALTH

Mental health issues are common after sustaining a concussion. The information below can help you identify, get help for, and recover from any mental health challenges you face after a concussion.

SYMPTOMS



IRRITABILITY

ANXIETY

MOOD SWINGS

DEPRESSED

MOOD

APATHY

IMPATIENCE

Know what to look for.

Symptoms of mental health problems can affect your wellness, ability to function in daily life, and relationships with others. Identifying symptoms early will prevent them from getting worse and interfering with your recovery.

DIAGNOSIS

Talk to your primary healthcare provider about your mental health.



Let your doctor know if you experience any mental health issues after your concussion and if you have had mental health challenges in the past. They will ask you questions and observe your behaviour to make a diagnosis and recommend treatment. They might also talk to your family members to find out more information about your symptoms.

TREATMENT

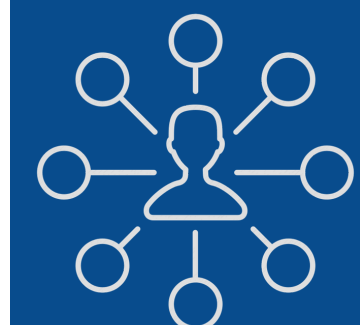
Get on the road to recovery with an individualized treatment plan.



You may need counseling, talk therapy, or medications (sometimes a combination is best). Your primary healthcare provider will create your treatment plan based on your the type and severity of your symptoms. You might be referred to a mental health specialist if your symptoms are complex.

RECOVERY

Recovery takes time. Build a strong support system to help you through this process.



Having a support system of close friends and family members is important. Avoid isolation and reintegrate yourself into daily activity as symptoms allow. Connect with a peer support group, create a consistent routine, exercise regularly, and eat balanced meals to support recovery.

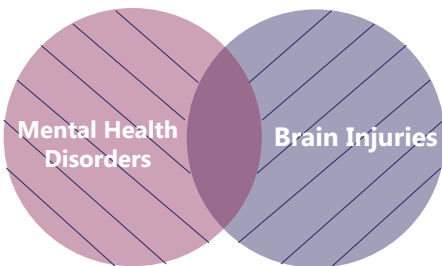
tndisability.org/brain

**QUICK
GUIDE**

Mental Health & Brain Injury

The relationship between brain injury and mental health is strong, but still under-researched. What we do know is while sometimes brain injury is an entirely separate issue to mental health, brain injury can lead to new mental health issues developing, and mental health issues can make brain injury symptoms worse. The effects of brain injury and mental illness can look very similar, which is why understanding the relationship between the two is important for individuals to advocate for themselves and for medical professionals to make accurate diagnoses.

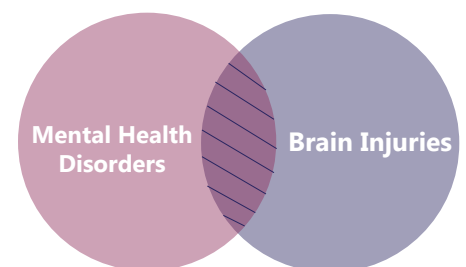
What are the differences between mental health disorders and brain injuries?



While many symptoms of a brain injury overlap with those of a mental health disorder, not all mental health issues that develop after a brain injury are severe enough to be considered “disordered.” However, this does not mean the mental health issues an individual experiences are not real, important, or cause challenges. Talking about mental and emotional struggles with medical professionals can help determine whether or not they are related to a brain injury.

What are the similarities?

There are many symptoms caused by a brain injury that are also typical for different types of mental health disorders (see chart on next page). If a mental health issue or disorder is already present for an individual, a brain injury can also make those symptoms worse, creating more challenging problems. Tracking symptoms (like emotions and mental state) in a journal and trying to identify when they first started and compare that timeline to when the brain injury occurred can help the individual and medical professionals determine the root cause and best treatment options.



How do substance abuse disorders impact brain injuries and vice versa?

Substance abuse and addiction to drugs and alcohol is considered a mental disorder, and can be intertwined with the effects of a brain injury. Being under the influence of substances that impair judgment, motor functions, and memory increases the likelihood of being injured. The symptoms of a brain injury also increase chances of developing a substance abuse disorder. In fact, individuals with a brain injury are 11 times more likely to die of an overdose than people without a brain injury¹. This means substance abuse can be both a cause and a symptom of brain injury, making it especially important to be aware of.

Overall, the symptoms* of some mental health disorders and brain injuries overlap in many ways:

	Concussion	Anxiety	Depression	Substance Abuse
Headaches	X	X	X	X
Drowsiness	X	X	X	X
Irritability	X	X	X	X
Poor memory	X	X	X	X
Fatigue	X	X	X	X
Poor sleep	X	X	X	X
Nausea	X	X	X	X
Dizziness	X			X
Blurred vision	X			X

*For a comprehensive list of mental health disorder and brain injury symptoms, please consult with a medical professional.

What does treatment and recovery look like?

There is no "cure" for brain injury or mental health disorders. However, there are many effective treatment options like cognitive-behavioral therapy and medication to help decrease symptoms and manage challenges. Be aware not all doctors who treat brain injury are mental health experts and vice versa, which is why being as honest as possible about your difficulties is key.

The TN Traumatic Brain Injury Program can help you better understand brain injury and consult with you about your personal situation. We can then direct you to services you might need in your area. Our services are confidential and free.

To get in touch: 1-800-882-0611

Visit the TN TBI Program

<https://www.tn.gov/health/health-program-areas/fhw/tbi.html>

Contact Brain Links for "free" Training & Educational Information at: tbi@tndisability.org

1. Administration for Community Living National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR) "Opioids and TBI" Brief, April 2019.

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With permission from the Brain Injury Association of Virginia, this product has been adapted for Tennessee by Brain Links.

1.800.444.6443
biav.net

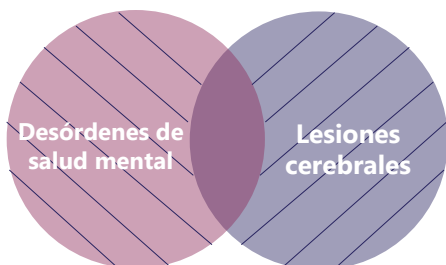
This project is supported [in part] through state general funds (Contract #16-002A) administered by the Virginia Department for Aging and Rehabilitative Services (DARS). 2025 Revised



Salud Mental y Lesiones Cerebrales

La relación entre las lesiones cerebrales y la salud mental es fuerte, pero aún falta investigación. Lo que sabemos es que aunque algunas veces las lesiones cerebrales son un asunto totalmente aparte de la salud mental, las lesiones cerebrales pueden llevar a que se desarrollen nuevos problemas de salud mental y los problemas de salud mental pueden hacer que los síntomas de lesiones cerebrales empeoren. Los efectos de una lesión cerebral y una enfermedad mental pueden parecer muy similares, por tal motivo, entender las relaciones entre ambas es importante para que las personas aboguen por sí mismas y para que los profesionales de la medicina hagan diagnósticos exactos.

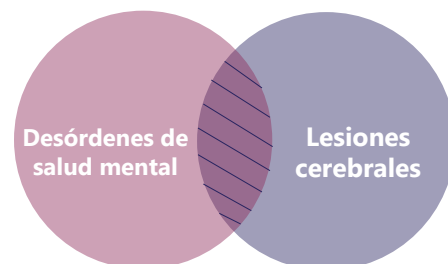
¿Cuáles son las diferencias entre los desórdenes de salud mental y las lesiones cerebrales?



Aunque muchos síntomas de una lesión cerebral se traslapan con los de un desorden de salud mental, no todos los problemas de salud mental que se desarrollan después de una lesión cerebral son lo suficientemente severos como para ser considerados "desordenados". Sin embargo, esto no significa que los problemas de salud mental que una persona experimente no sean reales, importantes o desafiantes. Hablar acerca de las luchas mentales y emocionales con los profesionales médicos puede ayudar a determinar si dichos problemas son o no relacionados a una lesión cerebral.

¿Cuáles son las similitudes?

Hay muchos síntomas causados por una lesión cerebral que también son típicos para diferentes clases de desórdenes de salud mental (consulte el gráfico en la siguiente página). Si un problema o desorden de salud mental ya está presente para una persona, una lesión cerebral también puede hacer que empeoren esos síntomas, creando más problemas desafiantes. Registrar los síntomas (como emociones y estado mental) en un diario y tratar de identificar cuándo aparecieron por primera vez y comparar esa línea de tiempo al momento en que ocurrió la lesión cerebral puede ayudar a la persona y a los profesionales médicos a determinar la causa raíz y las mejores opciones de tratamiento.



¿Cómo impactan los desórdenes de abuso de sustancias a las lesiones cerebrales y vice-versa?

El abuso de sustancias y la adicción a las drogas y al alcohol se consideran un desorden mental, y pueden entrelazarse con los efectos de una lesión cerebral. Estar bajo la influencia de sustancias que deterioran el juicio, las funciones motrices y la memoria, incrementan la probabilidad de ser lesionado. Los síntomas de una lesión cerebral también pueden incrementar la probabilidad de desarrollar un desorden de abuso de sustancias. De hecho, las personas con una lesión cerebral son 11 veces más propensas a morir de una sobredosis que una persona sin una lesión cerebral¹. Esto significa que el abuso de sustancias puede ser tanto una causa como un síntoma de lesión cerebral, haciendo que sea especialmente importante estar conscientes de ello.

En general, los síntomas* de algunos desórdenes de salud mental y lesiones cerebrales se traslapan en muchas formas:

	Conmoción cerebral	Ansiedad	Depresión	Abuso de sustancias
Dolores de cabeza	X	X	X	X
Somnolencia	X	X	X	X
Irritabilidad	X	X	X	X
Memoria deficiente	X	X	X	X
Fatiga	X	X	X	X
Sueño deficiente	X	X	X	X
Náuseas	X	X	X	X
Mareos	X			X
Visión borrosa	X			X

*Para una lista minuciosa de desórdenes de la salud mental y síntomas de lesiones cerebrales, favor de consultar con un profesional médico.

¿Cómo son el tratamiento y la recuperación?

No hay "cura" para la lesión cerebral o los desórdenes de salud mental. Sin embargo, hay muchas opciones de tratamientos efectivos como la terapia cognitiva-conductista y medicamentos para ayudarles a reducir los síntomas y manejar los desafíos. Tenga presente que no todos los doctores que tratan lesiones cerebrales son expertos en salud mental y vice-versa, razón por la cual, es un punto clave ser tan honesto como sea posible acerca de sus dificultades.

El programa para Lesiones Cerebrales Traumáticas de Tennessee puede ayudarle a entender mejor las lesiones cerebrales consultar con usted acerca de su situación personal. Luego, podemos referirlo a los servicios que pueda necesitar en su área.

Para ponerse en contacto:
1-800-882-0611
Póngase en contacto con Brain Links para Capacitación "gratuita" e información educativa al correo: tbi@tndisability.org

1. Administración para el Instituto Nacional de Vida Comunitaria sobre Discapacidad, Vida Independiente e Investigación de Rehabilitación (Siglas en inglés: NIDILRR) Resumen de "Opioides y TBI", Abril de 2019.



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Con permiso de la Asociación para las Lesiones Cerebrales de Virginia; este producto ha sido adaptado por Tennessee por Brian Links.

Este proyecto es apoyado [en parte] a través de los fondos generales del estado (Contrato #16-002A) administrado por el Departamento de Servicios para el Envejecimiento y la Rehabilitación de Virginia (Siglas en inglés: DARS). 2025 Revised

Domestic Violence

Victims of Domestic Violence may have sustained a brain injury in the past or have accumulated injuries that might have been misidentified and untreated.

TN Domestic Violence Helpline: 800-356-6767

Domestic Violence and Sexual Assault Center:

The center specializes in a wide array of vital healing and protective services including 24/7 crisis support, emergency shelter, sexual assault advocacy including onsite medical exams, counseling, and legal/court advocacy to all current or past victims of domestic violence, sexual assault, or stalking free of charge. [**Emergency Shelter, Court Advocacy, Counseling.**](#)

DOMESTIC VIOLENCE HOTLINE: (615) 896-2012

SEXUAL ASSAULT HOTLINE (615) 494-9262

Tennessee Mental Health & Substance Abuse Services

Tennessee Coalition to End Domestic Violence & Sexual Violence:

The mission of the Coalition is to end domestic and sexual violence in the lives of Tennesseans and to change societal attitudes and institutions that promote and condone violence, through public policy advocacy, education and activities that increase the capacity of programs and communities to address such violence. For more information call 615-386-9406 or toll- free at 800-289-9018.

WRAP – Wo/Men's Resource and Rape Assistance Program:

Call For Help: (800) 273- 8712

Has Your Head Been Hurt: CARE Education Card April 2019 (odvn.org)

Invisible Injuries: When Your Head is Hurt While Experiencing Domestic Violence

Invisible Injuries: When Your Head is Hurt - Booklet



We want to hear from you!
Complete our short survey to let us know how we're doing.

HAS YOUR HEAD BEEN HURT?

It can affect your life in many different ways. Rest and time help, but you might need additional care, especially if your head has been hurt more than once.

Has your partner...

- Hit you in the face, neck or head?
- Tried to choke or strangle you?
- Made you fall and you hit your head?
- Shaken you severely?
- Done something that made you had trouble breathing or black out?



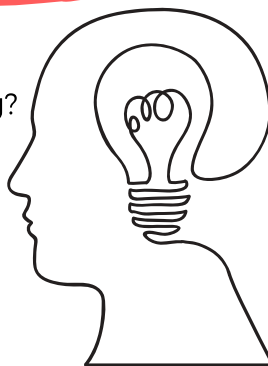
Are you having physical problems?



- Headaches?
- Fatigue, feeling dazed, confused, or in a fog?
- Changes in your vision?
- Ringing in your ears?
- Dizziness or balance problems?
- Seizures?
- Pain in your head, face or neck?

Are you having trouble...

- Remembering things?
- Paying attention or focusing?
- Getting things done?
- Organizing things?
- Following conversations?
- Feeling motivated?
- Controlling your emotions?



IF YOU SAID YES, YOU MIGHT HAVE A HEAD INJURY.

Talk to a domestic violence advocate or go to www.odvn.org

AFTER A HEAD INJURY



See a doctor and tell them you have been hurt in head or choked, especially if you have ANY symptoms that worry you or someone else.



Stay with someone safe for 24 to 72 hours to watch for the red flags listed below.

Danger Signs/Red Flags

These don't happen often, but if they do it's really important to see a doctor.



- ✓ A headache that does not go away or gets worse
- ✓ One pupil (eye) is larger than the other
- ✓ No memory of what happened
- ✓ Extreme drowsiness or having a hard time waking up
- ✓ Slurred speech, vision problems, numbness, or decreased coordination
- ✓ Repeated vomiting or nausea, or shaking or twitching
- ✓ Unusual behavior, confusion, restlessness or agitation
- ✓ You peed or pooped unintentionally
- ✓ You were knocked out, passed out, or lost consciousness

If you were choked or strangled:

It can be a terrifying experience and very dangerous. Even if you don't have any marks, serious injuries can happen under the skin, get worse over the next few days, cause long term damage and even death.

SEE YOUR DOCTOR IMMEDIATELY IF:

- YOU HAVE A HARD TIME BREATHING
- IT'S PAINFUL TO BREATHE
- YOU HAVE TROUBLE SWALLOWING
- YOUR VOICE CHANGES
- YOU HAVE PROBLEMS SPEAKING

We care about your safety.

People who put their hands around their partner's neck are very dangerous and are much more likely to seriously harm or kill you. Talk to a domestic violence advocate about safety planning.

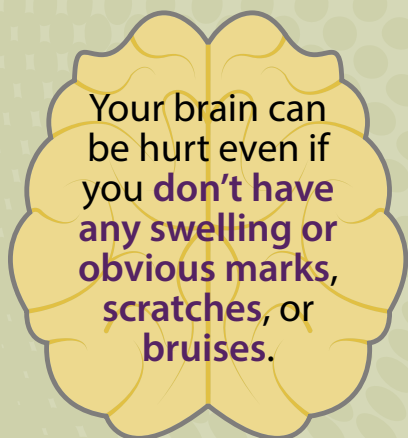


DV NUMBER: _____

This brochure was produced by the Ohio Domestic Violence Network under grant 2016-VX-GX-K012, awarded by the Office for Victims of Crime, Office of Justice Programs, U.S. Department of Justice. The opinions, findings and conclusions or recommendations expressed in this brochure are those of contributors and do not necessarily represent the official policies of the U.S. Department of Justice.



INVISIBLE INJURIES[©] When Your Head is Hurt While Experiencing Domestic Violence



Your brain plays a role in everything your body does. So when it gets hurt, it can change everything.

Your brain could have been hurt if your partner ever...

- ◆ Choked or strangled you, or did something that made it hard to breathe
- ◆ Hit, hurt, punched, or kicked you in the head, neck, or face
- ◆ Made you fall and you banged your head, or shook you really hard

If you ever hit your head—like in an accident, tripping, falling—that could have hurt your brain, too.

This violence can cause a head injury, which happens when there is a change in how your brain normally works. Your brain can be affected for a few minutes, hours, or days... but sometimes it's weeks, months, years, or forever.

You could have problems **right away** or you might feel okay now, but **have problems later.**

You Are NOT ALONE

Strangulation causes a head injury and hurts your brain!
Strangulation is dangerous and deadly...

...even if you have no marks—most people don't.

...even if you don't pass out.

...even if you don't feel like it's a big deal—it is.



You can be unconscious in seconds, and die within minutes.

It's not over when it's over.

People often thought they were going to die. It's a traumatic experience that affects our body, thoughts, and feelings.

It can impact your life for a long time.

These injuries can make it more difficult for your brain to do many things it needs to for you to live your daily life, get and keep a job, and be healthy.

If you have been strangled, your partner is over 7 times more likely to kill you.

7x

What might I notice that could be a sign my brain was hurt?

- ◆ Felt funny or something seemed different or off
- ◆ Don't remember what happened
- ◆ Felt dazed and confused, like your head was in a fog, or worried you were losing it
- ◆ Couldn't see right or saw stars and spots
- ◆ Felt dizzy or clumsy or had problems with balance
- ◆ Had headaches, pain in your face and neck, or bruising or swelling
- ◆ Felt agitated or restless and couldn't calm down
- ◆ Had problems with sleeping—too much, too little, or bad sleep

These symptoms generally get better with time, though not always.

What should I do if I was recently hurt in the head?

- ◆ **Stay with someone safe for at least 3 days** to watch for signs you need medical care.
- ◆ **See a doctor if you can**, especially if you or someone else is worried about something.

Get Medical Care if You Have:

- ◆ A headache that does not go away or gets worse
- ◆ One pupil (eye) is larger than the other
- ◆ Trouble remembering what happened
- ◆ Extreme drowsiness or difficulty waking up
- ◆ Slurred speech, numbness, or decreased coordination
- ◆ Repeated vomiting or nausea
- ◆ Been shaking or twitching
- ◆ Unusual behavior, confusion, restlessness, or agitation
- ◆ Peed or pooped unintentionally
- ◆ Lost consciousness, passed out, or were knocked out

If it's **hard** or **painful** to **breathe**, **swallow**, or **talk**.

Common Troubles after a Head Injury

These are **not** signs you are stupid or crazy

Physical

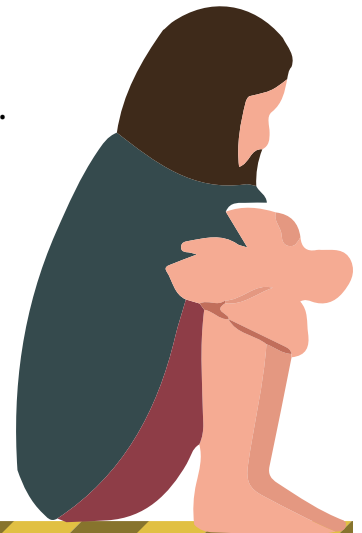
Headaches
Sleeping Problems
Sensitive to light or noise
Dizziness
Balance Problems
Fatigue
Seizures

Emotions

Worries and fears
Panic attacks
Flashbacks
Sadness
Depression
Hopelessness
Anger or rage
Irritable

Thinking

Remembering things
Understanding things
Paying attention or focus
Following directions
Getting things started
Figuring out what to do next
Organizing things
Controlling your emotions or reactions



What are some strategies for dealing with common problems after a head injury?



Problem: Nightmares and flashbacks, feeling jumpy, anxious or withdrawn, racing heart. These are signs you have survived something traumatic.

- ◆ Focusing on your breath and breathing deeply
- ◆ Distract yourself
- ◆ Talk to others for support
- ◆ Learn more about trauma



Problem: Memory.

- ◆ Write down events in a calendar
- ◆ Record things in an app on your phone
- ◆ Always put items (phone, keys, wallet) in the same place
- ◆ Set up alerts or reminders in your phone
- ◆ Request additional reminders for meetings or appointments



Problem: Light or noise bothers you, or you have problems seeing right.

- ◆ Use earplugs, headphones, adjust lighting, wear sunglasses
- ◆ Get eyes checked
- ◆ Increase text size on devices



Problem: Communicating and understanding—when talking, reading, or writing.

- ◆ Ask people to talk slowly or explain information
- ◆ Re-read/review information a few times
- ◆ Ask for help when you need it



Problem: Planning, organizing or problem solving, making decisions, or getting things started.

- ◆ Break things down (or ask for help in breaking things down) into smaller steps
- ◆ Write down different ideas to solve problems and discuss them with someone you trust
- ◆ Use a timer to help you get started and work for a set period of time
- ◆ Take a break when you get frustrated and come back later

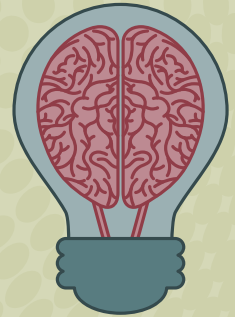


Problem: Concentrating and paying attention.

- ◆ Do one thing at a time
- ◆ Do things for a shorter period of time
- ◆ Have shorter meetings, activities and conversations
- ◆ Work where it's quiet and distraction-free

Can brain injuries heal?

You are amazing, and so is your brain. Your brain can heal, and brain injuries can get better, especially when they get identified early. There are many different ways professionals treat brain injuries, but who will help you depends on how you were affected by your head injury. If your vision is off, you will see someone different than if you are having seizures, or if you are having thinking problems such as paying attention or focusing.



What helps my brain get better after it was hurt?

Get good sleep

Don't do anything that makes you feel worse

Don't use screens for a few days, the light and stimulation can hurt your brain

Take it easy and rest your brain and body

Plan ahead

Expect things to take extra time

Take breaks

Do important things in the morning, because your brain is fresher

Try to avoid your head being hurt again

You Are **STRONG**



To talk with someone about domestic violence:

Call the National Hotline at
1-800-799-7233 to find your
nearest program.

Your local program:

To learn more about head injuries caused by domestic violence go to
www.odvn.org/brain-injury





NECK PAIN INJURIES[®]

When Your Head is Hurt

To talk to someone please contact

The National Domestic Violence
HOTLINE

1.800.799.SAFE (7233) • 1.800.787.3224 (TTY)

Developed by



1855 E. Dublin Granville Road, Suite 301

Columbus, OH 43229

1-800-934-9840 • www.odvn.org

info@odvn.org

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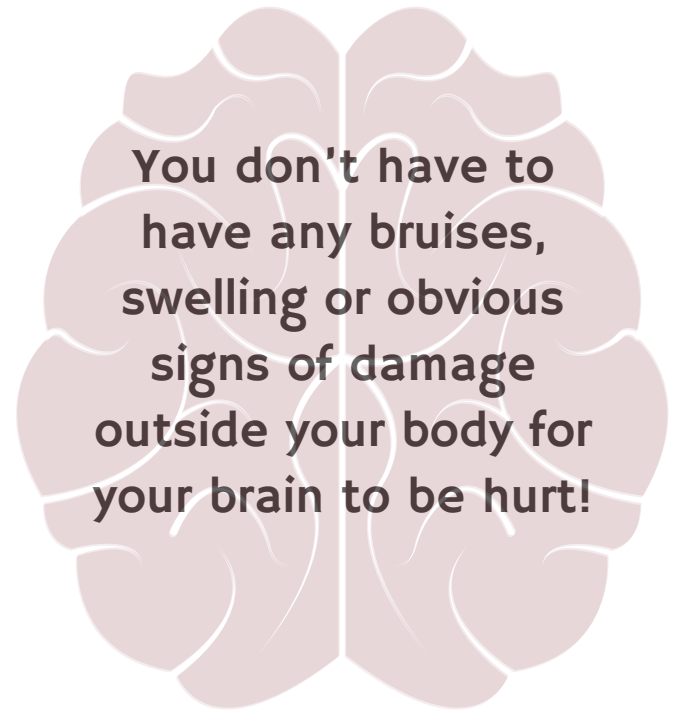
WHAT HAPPENS WHEN YOUR HEAD GETS HURT



What is a head injury?



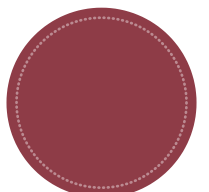
A head injury is when there is a change to how your brain normally works due to a bump, blow, or jolt to your head. Or when your brain does not get the oxygen or blood it needs, like when someone chokes you or does something that messes with your breathing. Sometimes the change is temporary and sometimes it lasts longer.



Just like broken arms, brains need time to heal. It might feel like your brain isn't working right or that it's hard doing things you used to. This happens to all brains that have been hurt.



Sometimes the problems get better or go away. Even if they don't, you can do things that can help.



WHAT CAUSES A HEAD INJURY



How might I get a head injury?

An abuser most often targets a person's head, neck or face, more than anywhere else on the body.

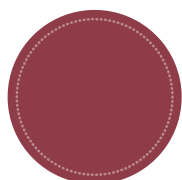
YOU MIGHT GET A HEAD INJURY IF YOUR PARTNER:

- Hits you in the face or the head
- Puts their hands around your neck or tries to choke or strangle you
- Makes you fall and you hit your head
- Shakes you severely
- Has done something that made you pass out, lose consciousness, or have trouble breathing. Did your partner sit on your chest, suffocate you, or put their hand over your mouth so you can't breathe or put you in a choke hold?

You can also get a head injury from things that have nothing to do with domestic violence. Maybe you hurt your head when you were a kid. You could fall and trip, be in a car accident, or in another type of accident or situation where your head was hurt and your brain doesn't work normally.



An abuser most often targets a person's head, neck or face, more than anywhere else on the body.



RIGHT AFTER YOUR HEAD HAS BEEN HURT



After a head injury, what can I expect?

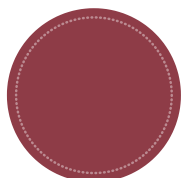
After a head injury it is common to:

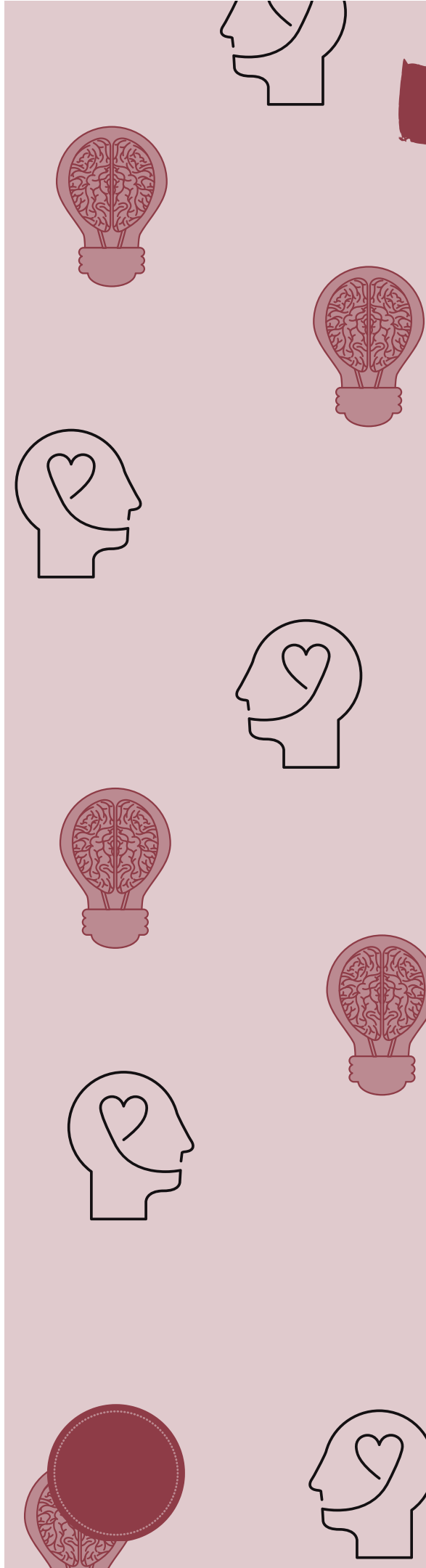
- Ask yourself, “Where am I? What just happened?” or not be able to remember recent events.
- Black out (also called losing consciousness). You might not know if it happened,. A clue might be if suddenly are in a different place or position than you last remember being in.
- Feel like you are “losing it”, feel dazed and confused, or as if your head is in a fog.
- Have changes in your vision, see stars or have ringing in your ears.
- Feel dizzy or have problems with balance.
- Have headaches, pain in your face or neck, or bruising or swelling.

Do I need to go to the doctor?

These symptoms generally get better with time, but not always.

- It's always a good idea to see a doctor and tell them you have been hurt in the head or strangled or choked, especially if ANYTHING worries you or someone else.
- Stay with someone safe for 24-72 hours to watch for the warning signs on the next page. If any of these happen, get medical care immediately.





WARNING SIGNS

- A headache that does not go away or gets worse
- One pupil (eye) is larger than the other
- You can't remember what happened
- Extreme drowsiness or difficulty waking up
- Slurred speech, numbness, or decreased coordination
- Repeated vomiting or nausea
- Shaking or twitching
- Unusual behavior, confusion, restlessness, or agitation
- You peed or pooped unintentionally
- Loss of consciousness, passed out or knocked out

IF YOU HAVE BEEN CHOKED OR STRANGLING:

- It becomes more difficult or painful to breathe
- You have trouble swallowing
- Your voice changes
- You have problems speaking



COMMON SIGNS OF A HEAD INJURY

PHYSICAL:

- ☐ Headaches
- ☐ Sleeping problems
- ☐ Sensitive to light or noise
- ☐ Dizziness
- ☐ Balance problems
- ☐ Fatigue
- ☐ Seizures

EMOTIONS:

- ☐ Worries and fears
- ☐ Panic attacks
- ☐ Flashbacks
- ☐ Sadness
- ☐ Depression
- ☐ Hopelessness
- ☐ Anger or Rage
- ☐ Irritable

THINKING:

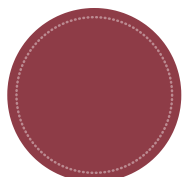
- ☐ Remembering things
- ☐ Understanding things
- ☐ Paying attention or focusing
- ☐ Following directions
- ☐ Getting things started
- ☐ Figuring out what to do next
- ☐ Organizing things
- ☐ Controlling your emotions or reactions

LOG OF SYMPTOMS

Filling this out will help you see if your injury is getting better or not. If symptoms aren't getting better within 2 or 3 weeks, consider sharing this log with your doctor and telling them that you have been hurt in your head.

Date/time	Symptom	How often in 24 hrs?	Severity (1-10)	Notes

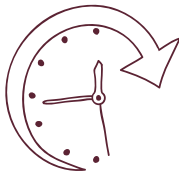
 NOTE: If your head gets hurt again before your brain has healed, it can mean that problems might be more severe, last longer, or become permanent.



STRANGULATION IS A HEAD INJURY & HURTS YOUR BRAIN.

Strangulation is dangerous and deadly.

- Even if you have no marks--most people don't.
- Even if you didn't pass out.
- Even if you don't feel like it's a big deal, it is.



YOU CAN BE UNCONSCIOUS IN SECONDS AND CAN DIE WITHIN MINUTES--OR IT CAN KILL YOU DAYS AFTER IT HAPPENED.

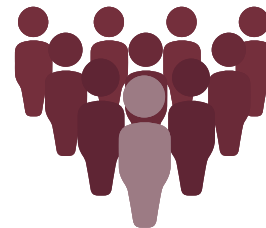


Even with no marks.

You can't see the most dangerous injuries because they happen under the skin. They can get worse over a few days and can cause permanent brain damage and even death.

It usually stays with you after its over

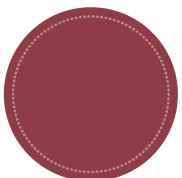
Many victims have been choked over and over and they thought they were going to die when it happened. This trauma can affect our body, our thoughts, and feelings. Sometimes these changes go away and sometimes they stay for a while.



IT HAPPENS A LOT TO VICTIMS & CAN BE TERRIFYING AND PAINFUL.

7 X

IF YOU HAVE BEEN STRANGLED, YOUR PARTNER IS 7 TIMES MORE LIKELY TO KILL YOU.



Most people who have been strangled and are murdered are killed by guns.

If you've been choked by your partner and they can get a gun, this is even more dangerous and could be lethal. Reach out to your domestic violence program and talk with an advocate about safety planning.

IMPORTANT SAFETY PLANNING

IMPORTANT CONTACTS

IN IMMEDIATE DANGER: *call 9-1-1*

DV PROGRAM #:

TRUSTED PERSON #:

MY DOCTOR #:

where I feel safest
when I'm at home:

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where I feel safest
outside my home:

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some things I can do to
protect my head:

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what I can do to
keep my kids safe:

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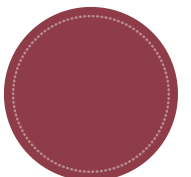
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Notes:



COMMON PROBLEMS AFTER A HEAD INJURY

what you can
do to help!



PROBLEM:

Nightmares or flashbacks; feeling jumpy, anxious or withdrawn; tense muscles or a racing heart.

These are responses to really scary things (called trauma responses) and most domestic violence survivors experience them. They are NORMAL reactions and usually resolve themselves over time as you begin to feel safe again.

ways to help:

- ✓ Focus on your breath. Breathe in and out slowly to help your body calm down.
- ✓ Distract yourself by doing something you enjoy, like listening to music, going for a walk or doing an art project.
- ✓ Talk to others for support, like a trusted friend or family member, a domestic violence advocate, or a therapist or other professional.
- ✓ Learn more about common reactions to trauma.

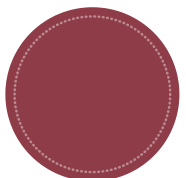


PROBLEM:

You have trouble remembering things.

ways to help:

- ✓ Use a memory/organizational book or an app on your phone to keep important information including to do lists, calendars and phone directories. Look for the monthly and daily planner later on in this booklet.
- ✓ Set a central location where you always put important things, such as keys, glasses, or your wallet.
- ✓ Come up with strategies like developing associations (always take medication with breakfast), following a routine, and changing your environment so that you rely less on your memory.



COMMON PROBLEMS AFTER A HEAD INJURY

& what you
can do to
help!



PROBLEM:

Noise, light, or sound bothers you or your vision is off.

ways to help:

- ✓ Use earplugs, headphones, sunglasses, or adjust lighting if necessary.
- ✓ If vision problems don't get better, consider going to an eye doctor to get an exam and see if you need new glasses.
- ✓ Make text bigger on your computer or your phone so you can see better.



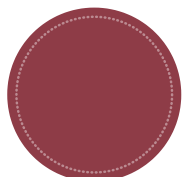
PROBLEM:

You have a hard time understanding information.

Often information doesn't seem to make sense and it feels like everything is slow. Your brain has to work harder to understand the same information because it is injured.

ways to help:

- ✓ Ask people to talk more slowly.
- ✓ Re-read or review information multiple times.
- ✓ Have shorter meetings, activities or conversations with people.



COMMON PROBLEMS AFTER A HEAD INJURY

& what you
can do to
help!



PROBLEM:

Difficulty planning, organizing, or problem solving.
It's hard to start new things or finish things.

ways to help:

- ✓ When problem solving, write down several ideas for solving the problem, and talk them over with someone you trust.
- ✓ Work on breaking down large tasks into smaller steps.
- ✓ Use a timer or an alarm to help yourself get started and work on something for a set period of time.
- ✓ Take a break when you get frustrated and go do something else. Come back to it later.

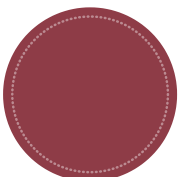


PROBLEM:

It's hard to concentrate or pay attention.

ways to help:

- ✓ Do only one thing at a time.
- ✓ Take frequent breaks when trying to do something.
- ✓ Work where it is quiet and you don't have too many distractions.



tips for anyone with a head injury

GET GOOD SLEEP

Try to get good sleep and re-establish sleep patterns. Identify what helps you sleep (a dark room or sleeping with a fan).

MOVE YOUR BODY

Get exercise daily. Exercise improves your ability to think.

LESS SCREEN TIME

Avoid screens (television, tablets, phones) for a few days after the injury.

TAKE IT EASY

Try to stay away from things that are really demanding for a while. You are more vulnerable to pain, stress and fatigue after a head injury.

PLAN AHEAD

Plan ahead and schedule additional time to do things so you feel less frustrated.

TAKE BREAKS

Take frequent breaks and rest throughout the day.

MORNING BRAIN POWER

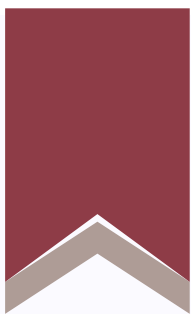
If you are going to do something stressful or hard, do it in the morning, when your brain is more rested.

START SLOW

Ease back into activities, jobs, or life obligations. Begin doing things for a short period of time. Gradually do things for a longer time so your brain and your body can adjust.

STAY SAFE

Problems last longer when your brain is hurt again and again without time for it to heal. Try to protect your head whenever possible.



MONTH:

MONTHLY PLANNER

MONTHLY GOALS

- ☐
- ☐
- ☐
- ☐
- ☐

NOTES

DATES TO REMEMBER

-
-
-
-

IMPORTANT CONTACTS

- ☐ Doctor:
- ☐ Advocate:
- ☐ Crisis hotline:
- ☐
- ☐
- ☐
- ☐
- ☐
- ☐
- ☐
- ☐

My Daily Planner

DATE

DAY

TO DO:

- ☐
- ☐
- ☐
- ☐
- ☐

DON'T FORGET:

- ☐
- ☐
- ☐
- ☐
- ☐

IMPORTANT:

SELF-CARE GOALS

go to bed early, take walk, less screen-time, do art



KarisseJoy.com

My domestic violence program's:

Name:

phone #:



**TO FIND YOUR NEAREST PROGRAM PLEASE CALL
THE NATIONAL DOMESTIC VIOLENCE HOTLINE AT
1-800-799-7233**

Thank You!

We're here to help.

Our mission is to bring together professionals to recognize the far-reaching and unique nature of brain injury and to improve services for survivors. If we can help you, please feel free to reach out!



Contact us:

tbi@tndisability.org

Check out our website:

www.tndisability.org/brain

Follow us on social media:

