

Mind Matters:

Building a Justice System That Is Inclusive and Responsive to Brain Injury

April 9, 2024 | Megan Davidson & Kate Reed

Speakers

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Agenda

- Why Brain Injury?
- Project Overview
- Information-Gathering Methods
- Final Report Overview
- Findings and Recommendations
- Reflections & Questions?



The Council of State Governments Justice Center

We are a national nonprofit, nonpartisan organization that combines the power of a membership association, serving state officials in all three branches of government, with policy and research expertise to develop strategies that increase public safety and strengthen communities.



How We Work

- We bring people together
- We drive the criminal justice field forward with original research
- We build momentum for policy change
- We provide expert assistance



Our Goals

- Break the cycle of incarceration
- Advance health, opportunity, and equity
- Use data to improve safety and justice



Equity and Inclusion Statement



The Council of State Governments Justice Center is committed to advancing racial equity internally and through our work with states, local communities, and Tribal Nations.



We support efforts to dismantle racial inequities within the criminal and juvenile justice systems by providing rigorous and high-quality research and analysis to decision-makers and helping stakeholders navigate the critical, and at times uncomfortable, issues the data reveal. Beyond empirical data, we rely on stakeholder engagement and other measures to advance equity, provide guidance and technical assistance, and improve outcomes across all touchpoints in the justice, behavioral health, crisis response, and reentry systems.



Mind Matters: Building a Justice System That Is Inclusive and Responsive to Brain Injury



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Why Brain Injury?

- Over ½ of individuals encountering the criminal justice system have experienced at least one brain injury.
- Legislative action with the passing of the Traumatic Brain Injury and Post-Traumatic Stress Disorder Law Enforcement Training Act (H.R. 2992) in August 2022
 - Requires Bureau of Justice Assistance (BJA) to develop training tools/resources focused on brain injury/PTSD for first responders
- BJA requested the CSG Justice Center to conduct landscape review and lay the foundation for future work in this area



Project Overview

Goal

- Conduct landscape review around the prevalence of and responses to people with brain injury encountering the justice system
- Develop recommendations to address gaps in services and resources for the criminal justice field

Information Gathering

- Review literature, best practices, and policies in the brain injury/justice space
- Gather insights from criminal justice agencies, brain injury organizations, and subject matter experts via focus groups and interviews



Project Overview

Synthesis and Recommendations

- Synthesize findings and organize information into clear recommendations
- Review/refine findings with a work group of subject matter experts, CSG staff, and BJA representatives

Outcome

- Integrate project findings and final recommendations into a report to be shared with the criminal justice field
- Use the report as a foundation to further brain injury work in the justice space



Information-Gathering Methods



Focus Group Sessions

state brain injury networks, local law enforcement, national law enforcement training organizations, intimate partner violence advocates, treatment courts



One-on-One and Group Interviews

brain injury researchers, subject matter experts, corrections, veterans



Conference Listening Session

National Co-Responder Conference, 2023



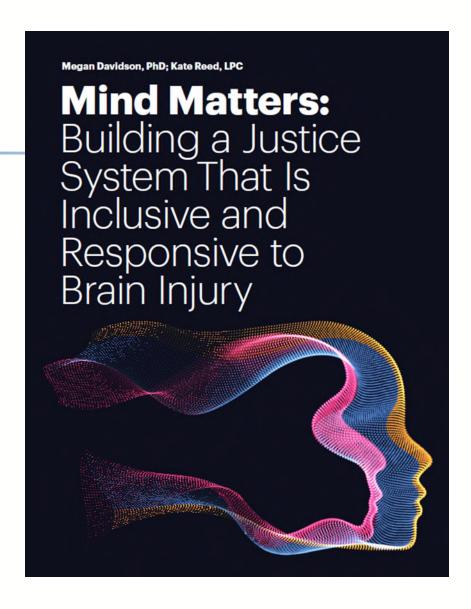
National Forecasting Meeting

"Courts Leading Change through the Justice and Mental Health Collaboration Program," 2023



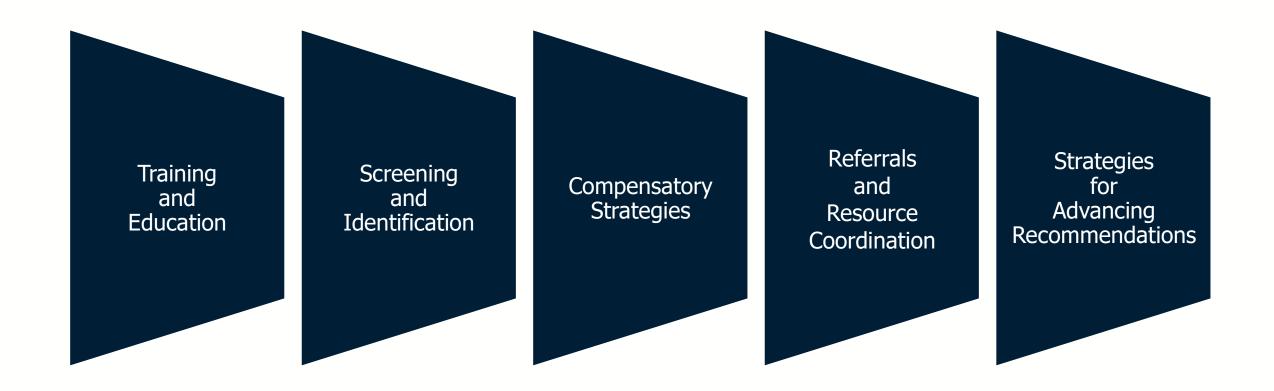
Final Report Overview

- Prevalence and Nature of Acquired Brain Injury in the Criminal Justice System
- Pathways to Justice System Involvement
- Brain Injury and the Criminal Justice Experience
- Findings and Recommendations





Findings and Recommendations





1. Training and Education

- Implement easily accessible, standardized brain injury training model.
- Cultivate cross-training opportunities.
- Provide psychoeducational resources.



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AHEAD Curriculum

- Developed by MINDSOURCE Brain Injury Network and Dr. Bradley McMillian from the Denver County Jail
- Psychoeducational curriculum designed to help participants understand brain injury, its effects, and symptom management
- Specifically created for mental health and criminal justice staff to facilitate group sessions



A.H.E.A.D.

Achieving Healing through Education, Accountability, and Determination

A PSYCHO-EDUCATIONAL CURRICULUM
FOR TRAUMATIC BRAIN INJURY



2. Screening and Identification



Prioritize screening youth.



Conduct universal screening.



Assess for symptoms and develop interventions.



Establish data tracking and information-sharing protocols.



Raise awareness and reduce stigma.



Brain Injury History Screening Tools

- Ohio State University TBI Identification Method (OSU TBI-ID)
- Acquired Brain Injury (ABI) Screen
- Brain Injury Screening Questionnaire (BISQ)
- NASHIA's Online Brain Injury Screening and Support System (OBISSS)



Photo by Tara Winstead via Pexels



Screening, Assessment, & Evaluation

Brain Injury Screening	Symptom/Impairment Assessment	Neurocognitive Evaluation/ Neurological Examination
Administered to whole population (e.g., all individuals being booked into jail)	Conducted after an individual screens positive for brain injury Administered by clinical personnel and occasionally non-clinical personnel, depending on the instrument(s) being used Typically uses tools that identify an individual's specific symptoms, level of impairment, and strategies to support the individual	Conducted if an individual needs more advanced or in-depth assessment as determined by the screener or assessor
Can be conducted by non-clinical personnel Typically uses a reliable, validated tool composed of a standardized list of questions that, depending		Administered by trained master's-level clinicians, neuropsychologists, and/or neurologists
on the individual's answers, indicates the person either has or does not have a history of brain injury/injuries.		Typically uses more advanced clinical tools and medical interventions or procedures (e.g., fMRI)



3. Compensatory Strategies/Modifications



Modify programs to ensure successful navigation and safety.



Develop symptom management strategies in partnership with the individual living with brain injury.



4. Referrals and Resource Coordination

Establish partnerships and referral mechanisms between criminal justice entities and brain injury services providers.

Build care coordination into the brain injury referral process.



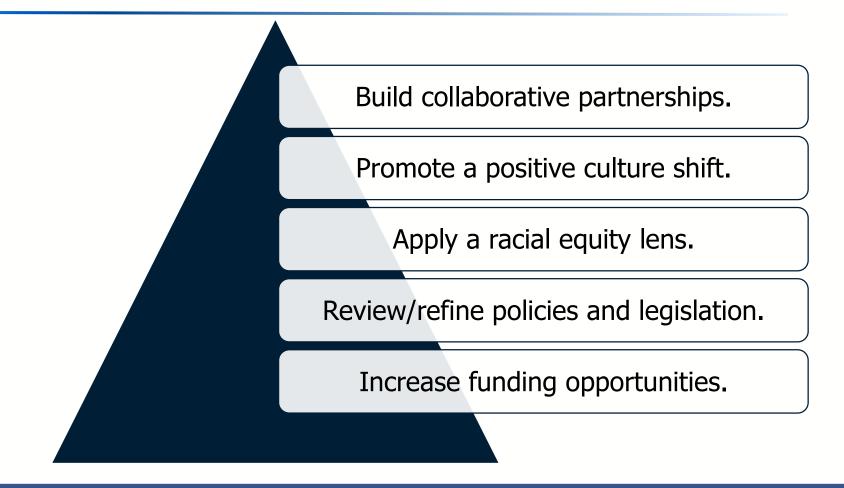
NeuroResource Facilitation

- Similar to intensive case management
- Helps individuals with brain injury access appropriate services
- Involves directly assisting with applications, appointments, problem-solving, and advocacy
- Should be implemented in correctional settings and at other points along the criminal justice continuum based on need and available resources

Research shows NRF leads to improved outcomes, such as increased community participation and employment, and decreased recidivism rates for individuals with brain injury.



5. Strategies for Advancing Recommendations



Reflections & Questions?



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This project was supported by Grant No. 15PBJA-22-GK-03568-MENT awarded by the Bureau of Justice Assistance. The Bureau of Justice Assistance is a component of the Office of Justice Programs, which also includes the Bureau of Justice Statistics, the National Institute of Justice, the Office of Juvenile Justice and Delinquency Prevention, the Office for Victims of Crime, and Office of Sex Offender Sentencing, Monitoring, Apprehending, Registering, and Tracking. Points of view or opinions in this document are those of the author and do not necessarily represent the official position or policies of the U.S. Department of Justice.

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