Brain Injury and the ADA

Presented by:
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David Kracke, JD

- Oregon’s Brain Injury Advocate/Coordinator 2018- Present
- Oregon's Veterans and Military Personnel Brain Injury Advocate
- Oregon Bar member since 1990
- Litigator 28 years
- Co-author of Max’s Law (2009): Return to Play after a Concussion
- Co-author of Jenna’s Law (2013), Return to Play after a Concussion Expansion
- Co-author of HB 4140 (2020): Immediate Temporary Accommodations Plan (ITAP)
- Co-author HB 4126 (2022): Zoonotic disease prevention
- Co-author SB 420 (2023): Brain Injury Resource Navigation
- Other laws and ballot initiatives (UIM, Environmental)
- Co-author of HB 3007 (2025): Mandating the ITAP in Oregon Schools

Brain Injury

Brain injury means damage to the brain from **an internal or external** source that results in impairment in critical functions that is of sufficient severity to produce disability.

These functions include but not limited to:

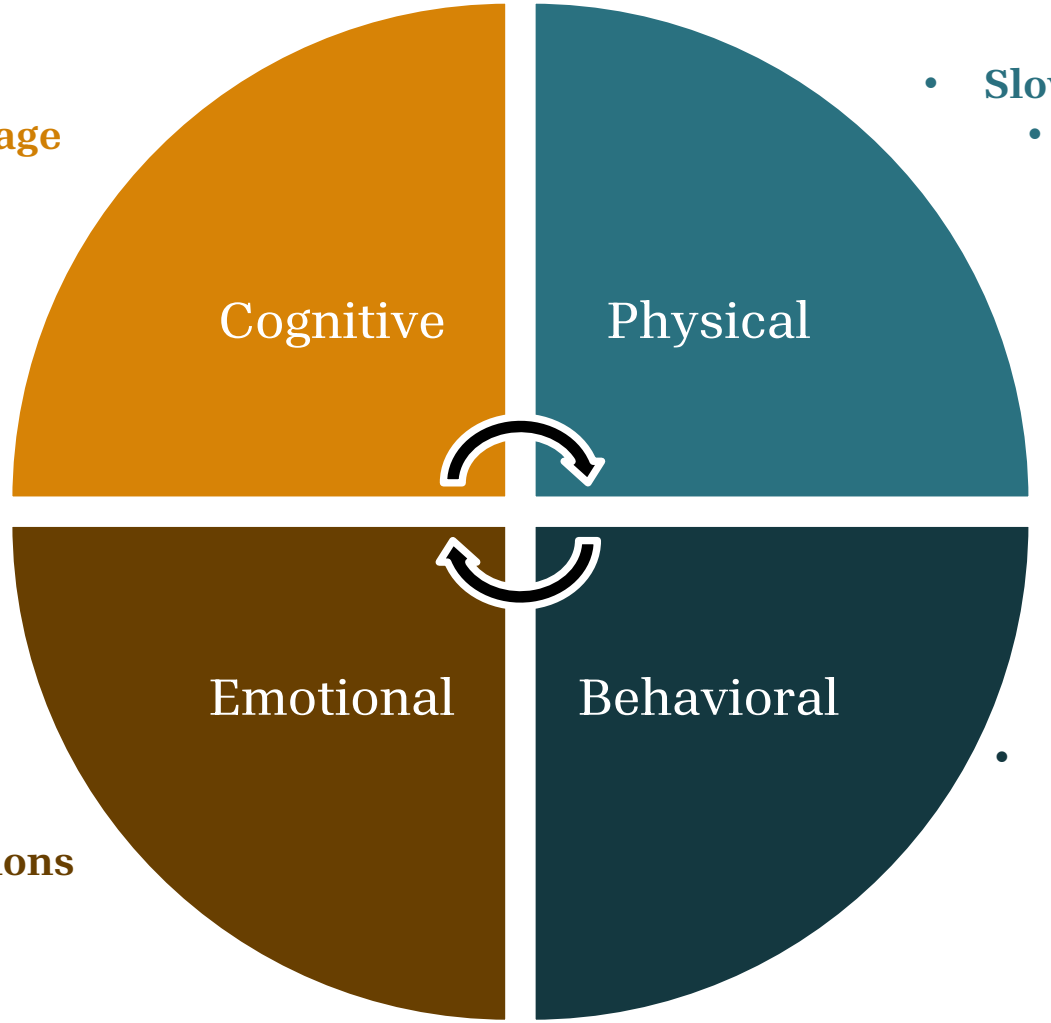
- attention
- memory
- reasoning
- problem solving
- processing speed
- decision-making
- learning
- perception
- sensing
- speech and language
- motor and physical function
- psychosocial behavior

Causes of Brain Injury

- **physical injury** – such as an impact (or blow) to the head, which may occur in motor vehicle crashes (20%), sporting accidents (3%), assaults (7%), falls (52%), or other reasons (18%)
- **disease** – such as COVID-19, AIDS, Alzheimer's disease, cancer, multiple sclerosis or Parkinson's disease
- **lack of oxygen** – called anoxic brain injury (for example, injury caused by a near drowning or strangulation)
- **stroke** – when a blood vessel inside the brain breaks or is blocked, destroying the local brain tissue.
- **alcohol or drugs** – which can be toxic to the brain

Brain Injury Signs & Symptoms

Not everyone will experience all, Overlap with other conditions



Difficulty with:

- **Speech-language**
- **Organization**
- **Attention**
- **Learning**
- **Memory**
- **Hearing**

- **Slowed movement**
- **Coordination**
- **Headaches**
- **Balance**
- **Fatigue**
- **Vision**
- **Pain**

- **Depression**
- **Anxiety**
- **Irritability**
- **Mood swings**
- **Blunted emotions**

- **Aggression**
- **Impulsivity**
- **Anger management**
- **Social skills challenges**

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Mood Disorder and Brain Injury

- Most common mental health concern post TBI
- Frequent development without pre-injury history
- Comorbid presentation with anxiety 75% of the time
- 4-6 times more likely to be diagnosed w/ major depressive disorder post TBI compared w/ general population

Ponsford et al., Epidemiology and Natural History of Psychiatric Disorders After TBI J Neuropsychiatry Clin Neurosci 2018; 30:262–270; doi: 10.1176/appi.neuropsych.18040093

Approximately every other person involved in the justice system has a brain injury

55.9%

Prevalence for women

55.2%

Prevalence for men

Hunter, S., Kois, L. E., Peck, A. T., Elbogen, E. B., & LaDuke, C. (2023). The prevalence of traumatic brain injury (TBI) among people impacted by the criminal legal system: An updated meta-analysis and subgroup analyses. Law and Human Behavior, 47(5), 539–565. https://doi.org/10.1037/lhb0000543

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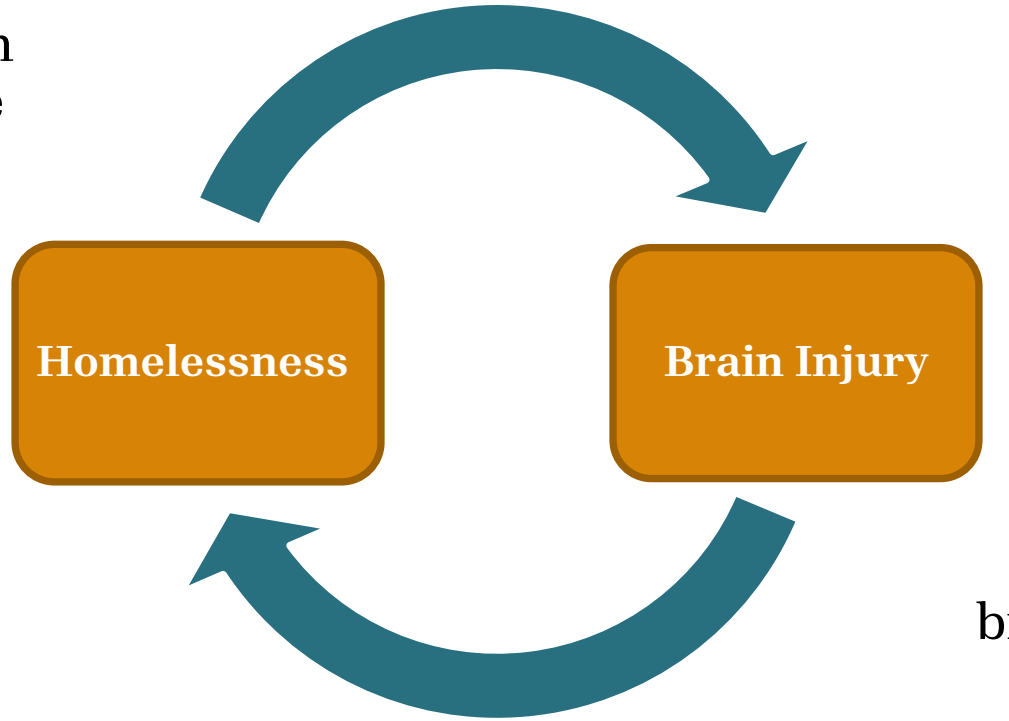
Homelessness and brain injury likely share a bidirectional relationship

Factors associated with homelessness increase risk of brain injury



Factors associated with brain injury increase risk of homelessness

Barnes, S.M., Russell, L.M., Hostetter, T.A., Forster, J.E., Devore, M.D., & Brenner, L.A. (2015). Characteristics of Traumatic Brain Injuries Sustained Among Veterans Seeking Homeless Services. Journal of Health Care for the Poor and Underserved 26(1), 92-105. doi:10.1353/hpu.2015.0010.

Substance Use Disorder and Brain Injury

- High rates of preinjury SUDs due to the relationship between SUDs and TBI
- Evidence suggests SUDs increase in years following injury

Ponsford et al., J Neuropsychiatry Clin Neurosci 2018; 30:262–270; doi: 10.1176/appi.neuropsych.18040093 John D. Corrigan Traumatic Brain Injury and Treatment of Behavioral Health Conditions Psychiatric Services Volume 72, Number 9 https://doi.org/10.1176/appi.ps.201900561

Service Members and Veterans (SMVs) and Brain Injury

- **TBI is the signature wound of the Iraq and Afghanistan wars.**
- **It is a significant wound for Vietnam Veterans.**
- **Brain injury occurs as a result of general military duty.**
  - Falls, weapons systems training, motor vehicle collisions, assaults, and merely hitting your head against something all can lead to brain injuries.

DePalma, R. G., & Hoffman, S. W. (2018). Combat blast related traumatic brain injury (TBI): Decade of recognition; promise of progress. *Behav Brain Res, 340*, 102-105. doi:10.1016/j.bbr.2016.08.036

“Veterans endorsing multiple lifetime TBIs…had significantly higher odds of reporting recent suicidal ideation compared with those who denied a history of any TBI.”

Robert D. Shura, et. al., Relationship Between Traumatic Brain Injury History and Recent Suicidal Ideation in Iraq/Afghanistan-Era Veterans, Psychological Services, Vol. 16, No. 2, 315-320,317. (2019)

“Controlling only for age and gender, those with a history of TBI were 2.15 times as likely to die by suicide compared with those without TBI.”

Trisha A. Hostetter, MPH, et. al., Suicide and Traumatic Brain Injury Among individuals Seeking Veterans Health Administration. Services between fiscal years 2006 and 2015; J of Head Trauma Rehabilitation, Vol. 34, No. 5, pp. E1-E9, E5. (2019)

House Bill 3007 (2025)

Oregon Revised Statute (ORS) 336.495 and Oregon Administrative Rule (OAR) 581-021-3007

HB 3007 Requirements

Immediate Temporary Accommodation Plan (ITAP)

HB 3007 (2025) Requires ODE to:

- Establish a procedure for public education providers to use to develop and implement an **Immediate Temporary Accommodation Plan (ITAP)** for a student who has been diagnosed with a concussion or other brain injury.
- Prepare a sample form, and include written instructions for the sample form, to assist public education providers in following the procedure to develop and implement an immediate and temporary accommodation plan

HB 3007 (2025) Requires Public Education Providers to:

- Upon receiving written notification from a parent or guardian that a student has been diagnosed with a concussion or other brain injury by a health care professional and that accommodations are being requested, a public education provider shall initiate procedures developed by ODE to develop and implement an **Immediate Temporary Accommodation Plan (ITAP).**

Oregon Brain Injury Program

Oregon Revised Statutes (ORS) 410.750 & 410.751

The average person with a brain injury in Oregon needs

12

services and supports.

48%

Do not get the support they need because they are not aware of services.

Data from the 2020–2021 Oregon Brain Injury Services and Supports Survey. This survey was conducted by the Center on Brain Injury Research and Training with funding from the Administration for Community Living's Traumatic Brain Injury State Partnership Program.

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Services we offer

- Help people coordinate with other programs to apply for services.
- Help people by directing them to available resources.
- Help people understand and compare available options (Medicare, Medicaid, OHP plan, etc.).
- Help people advocate for themselves.

Scan the QR code to visit our website for more information.

How to contact the Brain Injury Program

Call **833-685-0848** for free assistance, referrals and resource information about brain injuries. The Brain Injury Program resource line is open Monday-Friday, 8 a.m. to 5 p.m.

brainjury.oregon.gov

833-685-0848

Oregon Department of Human Services

AGING & PEOPLE WITH DISABILITIES

Brain Injury Program

Help Get the Word Out!

- Share information about the referral phone line in your resource guides.
- Download flyers on the Brain Injury Program web page at braininjury.oregon.gov.
- Request additional outreach materials, including posters and branded giveaway items, by emailing apd.braininjury@odhs.oregon.gov.
- Let us know about upcoming outreach opportunities where we could share information by emailing apd.braininjury@odhs.oregon.gov.
- Request a 25-minute presentation about the program by emailing apd.braininjury@odhs.oregon.gov.
- Sign up for program updates.

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TOTS

email kelleyk@cbirt.org for more information

Do you ever care for a military-connected child? Are you a parent, grandparent, sibling, or a babysitter? Help evaluate a new web-based resource for Veterans and their family who are caregivers of young children 2 to 8 years old with developmental delay or challenging behaviors!

Paid research opportunity

UNIVERSITY OF OREGON

cbirt The Center on Brain Injury Research and Training

What is the

TOTS Project

email kelleyk@cbirt.org
for more information

Who this study is for: Caregivers of a child aged 2-8 years old with a family member who has previously served in the military

What this study is about:

A hybrid program of 4 in person or virtual group coaching sessions paired with short online modules, to teach strategies to improve common behavior problems --like tantrums, bedtime struggles, and picky eating.

What you will be asked to do:

Over a 3-month period, you'll be asked to complete:

- 3 questionnaires, each taking less than 2 hours
- 5-10 hours going through the web-based program
- 4 in-person or virtual group coaching sessions each lasting 1 hour

How you will be paid:

- $30 after you complete the first set of assessments and first coaching session
- $30 after each of the remaining 3 coaching sessions
- $50 if you participate in a virtual focus group

Contact Information

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CBIRT Trainings, Tools, & Resources

Topics in Brain Injury: Complex Issues in Vulnerable and At-Risk Populations

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The Center on Brain Injury Research and Training presents:

Topics in Brain Injury: Complex Issues in Vulnerable and At-Risk Populations

Free Webinar Series

Intended audience: Service providers

behavioral health clinicians, case managers, resource coordinators, community health workers, rehabilitation professionals, program directors and others

Professional Development Unit certificate available.

Recorded Webinars

Screening for Brain Injury in Vulnerable and At-Risk Populations (Recorded 10/14/20)

Presenter: Caitlin Synovec, OTD, OTR/L, BCMH

Evaluate this webinar and download certificate here.

Accommodating Brain Injury in Vulnerable and At-Risk Populations (Recorded 1/13/21)

Presenter: Caitlin Synovec, OTD, OTR/L, BCMH

Evaluate this webinar and download certificate here.

Systems-Level Strategies and Resources for Brain Injury in Vulnerable and At-Risk Populations (Recorded 4/28/21)

Presenter: Caitlin Synovec, OTD, OTR/L, BCMH

Evaluate this webinar and download certificate here.

Past Webinar Series

Brain Injury and Co-Occurring Disorders

Traumatic Brain Injury, Mental Health and Addiction (Recorded 10/09/19)

Presenter: John Corrigan, PhD

Evaluate this webinar and download certificate here.

TBI and Behavioral Health Challenges (Recorded 01/22/20)

Presenter: Carolyn Lemsky, PhD

Evaluate this webinar and download certificate here.

Substance Use and Brain Injury (Recorded 08/12/20)

Presenter: Carolyn Lemsky, PhD

Evaluate this webinar and download certificate here.

This project was supported, in part, by grant number 90TBSG0039-01-00, from the U.S. Administration for Community Living, Department of Health and Human Services, Washington, D.C. 2020 and the Underserved Populations Workgroup

TBI SPP Traumatic Brain Injury State Partnership Program

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ACL Administration for Community Living

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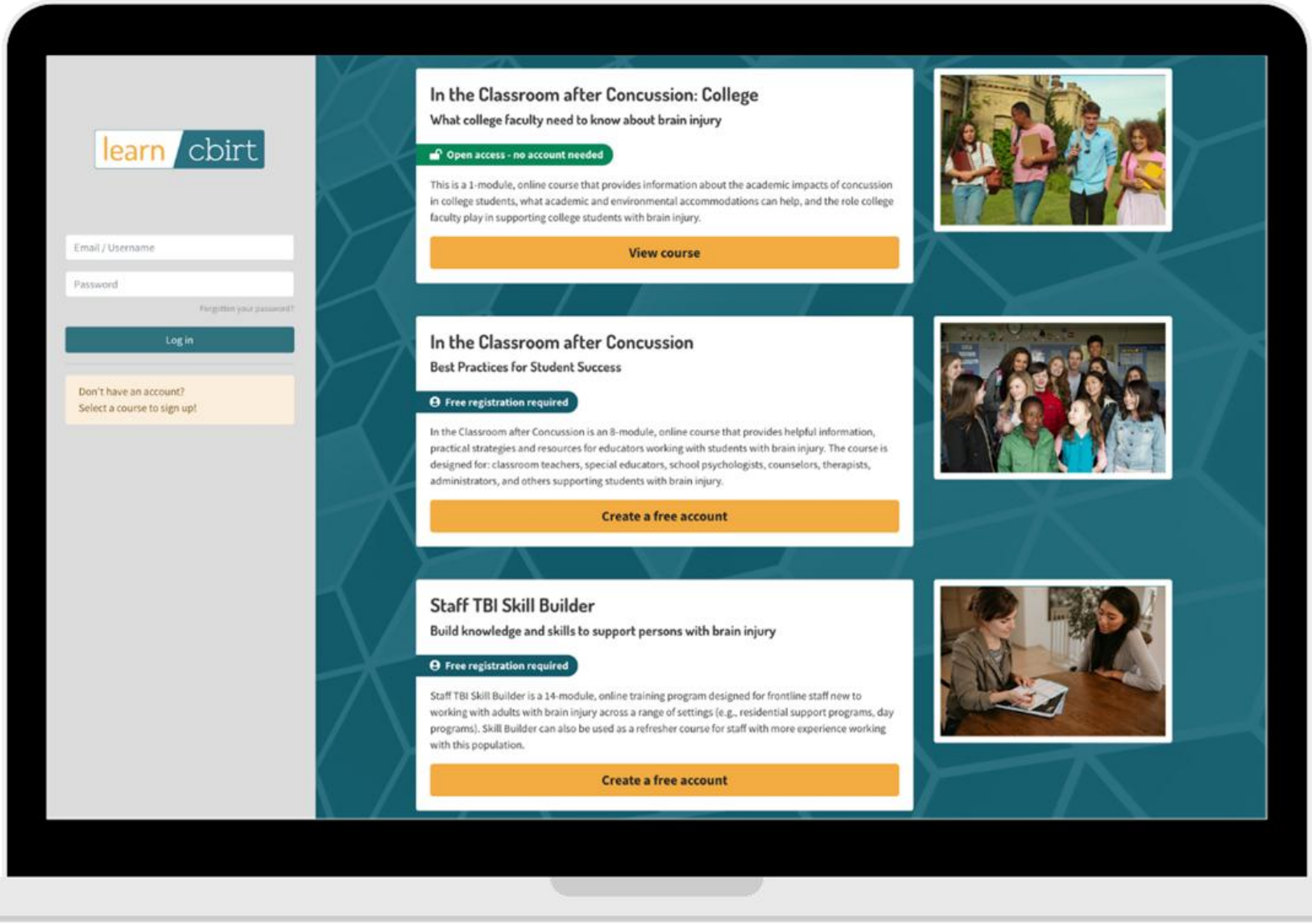

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