

# Helpful Resources

## INFORMATION & ADVOCACY

**Brain Injury Association of AR (BIAA)**  
800-444-6433 [www.brainassociation.org](http://www.brainassociation.org)  
**Arkansas Department of Health TBI Program**  
501-280-4923 [loretta.alexander@arkansas.gov](mailto:loretta.alexander@arkansas.gov)

**Disability Rights Center (DRC)**  
800-482-1174 V/TTY [www.arkdisabilityrights.org](http://www.arkdisabilityrights.org)  
[eeskew@arkdisabilityrights.org](mailto:eeskew@arkdisabilityrights.org)

## PUBLIC BENEFITS PROGRAMS

**Department of Human Services**  
800-482-8988 [www.state.ar.us/dhs/oas](http://www.state.ar.us/dhs/oas)

**Office of Long Term Care**  
501-682-8487 [OLTC2@arkansas.gov](mailto:OLTC2@arkansas.gov)

**Social Security Disability** 866-593-0933 or  
24 hr service 800-772-1213 [www.ssa.gov](http://www.ssa.gov)

## MILITARY VETERANS

**Defense Veterans Brain Injury Center**  
800-870-9244 [www.dvbic.org](http://www.dvbic.org)

**Arkansas Department of Veterans**  
501-370-3820 [www.veterans.arkansas.gov](http://www.veterans.arkansas.gov)

**Transition Assistant Advisor**  
501-212-4089 [barbaralee@ar.ngb.army.mil](mailto:barbaralee@ar.ngb.army.mil)

## VOCATIONAL REHAB & EMPLOYMENT

**Arkansas Rehabilitation Services**  
501-296-1600 [www.arsinfo.org](http://www.arsinfo.org)

**Client Assistant Program (CAP)**  
800-482-1174 V/TTY  
[eddiemiller@arkdisabilityrights.org](mailto:eddiemiller@arkdisabilityrights.org)

## MENTAL HEALTH & SUBSTANCE ABUSE

**National Alliance on Mental Illness/Arkansas**  
800-844-0381 [karnold@nami.org](mailto:karnold@nami.org)  
**Alcohol & Drug Abuse Prevention**  
501-686-9867  
[www.state.ar.us/dhs/dmhs/  
alco\\_drug\\_abuse\\_prevention.htm](http://www.state.ar.us/dhs/dmhs/alco_drug_abuse_prevention.htm)  
**Mental Health** 501-686-9465 or 501-686-9164  
[marilyn.garvin@arkansas.gov](mailto:marilyn.garvin@arkansas.gov)



DRC's state Protection and Advocacy for Traumatic Brain Injury (PATBI) program supports the rights of people with Traumatic Brain Injury (TBI) through provision of information and referral for individuals, families and service providers, and legal representation. Priority issues are abuse and neglect, community integration, housing and access, employment, education and outreach, training, information and policy.



**PATBI Advisory Council**

In 2004, the PATBI program developed an Advisory Council (AC) with representation from the BIA, State Dept of Health TBI Project, Veterans, and TBI professionals. 50% of the Council's membership is made up of TBI survivors and family members. The PATBI/AC advises DRC on ways to develop and improve services, public awareness, education and training for the citizens of Arkansas.

By working together, we can reduce stigma, commit to healthier personal lifestyles and promote better programs and services to our communities and state.

## Disability Rights Center

1100 N. University, Suite 201  
Little Rock, AR 72207

501-296-1775 V/TTY 800-482-1174 V/TTY

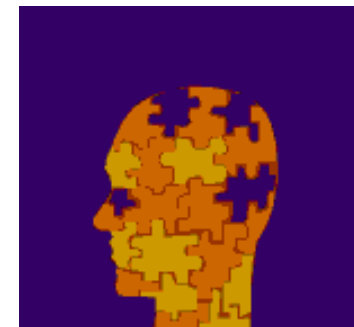
Fax: 501-296-1779

[www.arkdisabilityrights.org](http://www.arkdisabilityrights.org)

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## DISABILITY RIGHTS CENTER

# Important First Steps to Caring for Persons with Brain Injury



**800-482-1174**  
**V/TTY**

## BRAIN INJURY DEFINED

A brain injury refers to anything that causes brain cell death and loss of function.

A traumatic brain injury (TBI) is defined as a blow or jolt to the head or a penetrating head injury that disrupts the function of the brain. Not all blows or jolts to the head result in a TBI. The severity of such an injury may range from “mild,” i.e., a brief change in mental status or consciousness to “severe,” i.e., an extended period of unconsciousness or amnesia after the injury. A TBI can result in short or long-term problems with independent function (Centers for Disease Control and Prevention, [www.cdc.gov/TBI](http://www.cdc.gov/TBI)).

## ABOUT CONCUSSION

Concussion is a mild TBI. The person may or may not lose consciousness for a short time. Some people are simply dazed or confused.

- With proper diagnosis and management, most people recover fully, but long-term, serious consequences are possible.
- The effects of multiple concussions may be cumulative.

## HELPFUL HINTS

People with brain injuries often have memory difficulties. They may have problems carrying out plans and need redirection or become easily frustrated. Tips for working with individuals with brain injuries are:

- Talk slowly and clearly
- Speak in short sentences
- Give time to respond; take time to listen
- Repeat information
- Have patience; stay calm
- Avoid over stimulation
- Read and fill out forms if the person is having trouble
- Ask questions about specific symptoms
- Let them know what to do next
- Follow-up to ensure they take the appropriate next steps

## RECOGNIZING TBI

A brain injury may cause symptoms that appear to fit other diagnostic categories or disabilities and may not be recognized by those providing services. If someone you care for or work with shows symptoms described in this brochure, ask:

*Have you ever hit your head or been hit on the head?*

Prompt the person to think about incidents that occurred at any age, such as:

- Car/bicycle crashes
- Falls
- Assault
- Child abuse/domestic violence
- Sports accidents
- Military service-related injuries

*Were you ever seen in the emergency room, hospital, or by a doctor because of an injury to your head?*

*Did you ever lose consciousness or experience a period of being confused because of an injury to your head?*

## CHARACTERISTICS OF BRAIN INJURY

Just as each individual is unique, so is each brain injury. Problems may or may not be permanent.

### PHYSICAL PROBLEMS

- Headache/pain
- Stiffness/weakness
- Lack of coordination/balance
- Problems with sleep/fatigue
- Problems with planning movement
- Swallowing/dressing/walking problems
- Seizures
- Slurred speech/no speech
- Bladder/bowel control

### BEHAVIORAL/EMOTIONAL CHANGES

- Irritability/impatience
- Anxiety
- Depression
- Low self-esteem
- Difficulty reading social cues
- Mood swings
- Inability to cope
- Self-centeredness

### COGNITIVE/SENSORY PROBLEMS

- Slowed thinking
- Trouble starting/completing tasks
- Difficulty with learning and memory
- Impaired judgment
- Difficulty concentrating
- Changes in smell/taste/hearing/vision
- Difficulty sequencing
- Loss of personal safety skills