

# Quick Turn Around

Project



FORUM

QTA – A brief analysis of a critical issue in special education

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## Traumatic Brain Injury

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### Purpose

This *Quick Turn Around* summarizes information gathered by Project FORUM on the topic of Traumatic Brain Injury (TBI). As part of its Cooperative Agreement with the U.S. Department of Education's Office of Special Education Programs (OSEP), FORUM collected this information by: (1) surveying state education agencies (SEAs), (2) contacting other federal agencies and offices about major TBI projects and initiatives, and (3) conducting a search of the National State Policy Database and other pertinent web sites. The purpose of this inquiry was to obtain information from states regarding use of the TBI disability classification and to examine the nature of state-level activities related to the education of children and youth with TBI.

### Background & Federal Legislation

When the Individuals with Disabilities Education Act (IDEA) was amended in 1990 by P.L. 101-476, the disability category *Traumatic Brain Injury* was added to the list of disabilities that qualifies a student for special education services under the IDEA. This federal disability category is unique in that it describes the etiology or cause of the disability. The federal definition of TBI is as follows:

*...an acquired injury to the brain caused by an external physical force, resulting in total or partial functional disability or psychosocial*

*impairment, or both, that adversely affects a child's educational performance. The term applies to open or closed head injuries resulting in impairments in one or more areas, such as cognition; language; memory; attention; reasoning; abstract thinking; judgment; problem-solving; sensory, perceptual, and motor abilities; psychosocial behavior; physical functions; information processing; and speech. The term does not apply to brain injuries that are congenital or degenerative, or to brain injuries induced by birth trauma. [34 CFR §300.7(c)(12)]*

For the 1991-92 school year, states had the option of using the TBI category when reporting to the federal government the number of students served under IDEA. Beginning in the 1992-93 school year, TBI was a required reporting category. Prior to that time, a child who sustained a traumatic brain injury is likely to have qualified for IDEA services under another disability category (e.g., specific learning disability, and mental retardation). Those who lobbied for the addition of this disability category believe that it is important to know that a child has sustained a traumatic brain injury in order to design an appropriate individualized education program (IEP).

### Project FORUM Survey

All SEAs were mailed a survey in June 2000 requesting information on a variety of topics related to TBI. The survey items included: (1) use of TBI disability category and

federal definition, (2) SEA contact person and services provided, (3) federally-funded TBI projects and interagency initiatives, (4) teacher certification or endorsement, and (5) professional development opportunities related to TBI.

Forty-three states and three non-state jurisdictions returned completed surveys July through September 2000. The survey results, along with information from other sources, are summarized below in narrative format. A table with specific data by SEA can be found at the end of this document.

### **Use of TBI Category & Federal Definition**

Project FORUM obtained information from 53 states and non-state jurisdictions regarding the use of the disability category TBI. Of these 53, four do not use the specific term TBI; however, three of the four use a similar term. Massachusetts and Pennsylvania use the category *Neurological Impairment* in place of TBI, and Iowa uses *Head Injury*. In Michigan, one of the other disability categories is used, determined by the team that writes the student's individualized education program (IEP).

Thirty-five (35) of the 53 SEAs use the federal definition of TBI. The states that do not use the federal definition are Alaska, Arizona, Colorado, Florida, Georgia, Kentucky, Minnesota, Missouri, Montana, New Jersey, New York, North Carolina, Pennsylvania, Tennessee, Vermont, and Wisconsin. Four state TBI definitions (Alaska, Arizona, Minnesota, and Montana) are very similar to the federal definition; however, there is additional language specifying that the student has special educational needs; the severity of TBI may vary; or the TBI affects the student's ability to participate in the education program. North Carolina's definition is shorter and uses different wording than the federal

definition, but essentially has the same components.

Georgia, Kentucky, and Tennessee indicate that the TBI may be temporary or permanent. Arkansas, Kentucky, Missouri, Tennessee and Wisconsin have additional language regarding the nature of the impairments (e.g., executive functions and language pragmatics). Georgia and Missouri elaborate on possible causes of TBI (e.g., vehicular accidents and child abuse) and their impact on school performance. Georgia's definition also mentions the varying severity of TBI, as do the definitions used in Arkansas and New York.

Several state definitions elaborate on what TBI is not. For example, Pennsylvania's definition states that TBI is not minimal brain dysfunction or the result of visual, hearing or motor handicaps. The Georgia and Wisconsin definitions expand on the federal exclusion of internal brain injury, specifying that occurrences such as tumors are not TBI. In contrast, the Vermont definition includes medical conditions such as stroke and aneurysm, as does New York, which also lists encephalitis, anoxia and tumors. Missouri, New Jersey and Tennessee do not exclude brain injuries that are induced by birth trauma as the federal definition does.

Kentucky has proposed the adoption of the federal definition of TBI. Pennsylvania is currently reviewing its definition and may propose adoption of the federal definition.

According to FORUM's 46 survey respondents, 33 SEAs have been using the TBI disability category for five years or more, whereas seven states reported adding this category more recently. Four states did not provide this information and two states do not use this specific disability term.

## **TBI Contact Person at the SEA**

Thirty-four of the 46 survey respondents identified a contact person at the SEA or consultant on contract with the SEA who addresses issues related to TBI. However, this person may have other responsibilities as well. The types of services the SEA contact person provides are as follows:

- Professional development (e.g., workshops and presentations) [23 SEAs]
- One-on-one consultation and technical assistance with educators [21 SEAs]
- Liaison with state TBI projects or other agencies/serves on taskforce or council [29 SEAs]
- Parent contact/workshops [4 SEAs]

## **Federally-Funded TBI Projects**

A number of federal agencies provide funding in the area of TBI; however, the focus and scope of these projects varies considerably. OSEP currently funds 10 projects in eight states that address personnel preparation/development or improved services for children with TBI. The Health Resources and Services Administration (HRSA) in the Maternal and Child Health Bureau (MCH) funds TBI demonstration programs in 29 states. Fifteen state health departments are collecting information on the incidence, prevalence and causes of TBI with funding from the Centers for Disease Control and Prevention (CDC). Please refer to Table 1 for names of states that have the federal funding described above.

As a point of information, the National Center for Medical Rehabilitation Research at the National Institute of Child Health and

Human Development, National Institutes of Health (NIH) funds about 50 projects related to TBI. There are also TBI projects funded by the National Institute of Mental Health and the National Institute for Neurologic Disease and Stroke. These NIH projects are mostly basic research and clinical trials.

## **Community & Interagency Initiatives**

The Brain Injury Association (BIA), with headquarters in Alexandria, Virginia, has been active in a variety of education initiatives over the years. There are also state associations around the country. According to survey respondents, 23 SEAs have involved a BIA representative in a planning or policy meeting in the past year.

Many states have support groups for persons with TBI and their families. Twenty-one SEAs reported that a representative from such a group has been involved in a SEA planning or policy meeting.

All 29 states that have HRSA/MCH Demonstration Projects are required to have “inter-organizational collaboration” and the SEA may be one of those organizations. Five additional SEAs reported interagency initiatives with medical or rehabilitation institutions or other agencies on the Project FORUM survey. Sixteen SEAs provided a description of their interagency initiatives on the survey form. Some examples follow.

In Iowa, there are 15 regional brain injury teams that work directly with medical providers particularly on re-entry to school issues. HRSA/MCH funding has helped perpetuate these teams. The Kansas SEA has an agreement with hospitals and rehabilitation institutions to assist with school re-entry planning for students with TBI; Northern Mariana has similar collaboration.

The following 10 SEAs noted participation on interagency advisory councils, meetings, taskforces or workgroups related to TBI: Illinois, Louisiana, Massachusetts, Minnesota, Missouri, Nebraska, Texas, West Virginia, Wisconsin, and Guam. In Louisiana, the TBI Special Interest Group is working on a handbook for serving students with TBI. Five states (Alabama, Iowa, Minnesota, Oregon and Wisconsin) mentioned training or conferences for families and/or educators that are an interagency effort.

### **Professional Development**

No state reported teacher certification in the area of TBI, and only two of the responding SEAs have teacher endorsement in this disability area—Oklahoma and Nevada. In Oklahoma, a certified teacher can obtain TBI endorsement on his/her teaching certificate upon successful completion of a 32-hour classroom and practicum program.

Nevada requires an endorsement in TBI to teach students, ages 3 through 21, with this disability. To obtain endorsement, the following is required: completion of a board approved program of preparation in TBI; endorsement from another state; completion of a bachelor's or master's degree in TBI, or endorsement in another special education area and coursework in behavior management, neurological aspects of students with disabilities, and methods and strategies for teaching students with learning disabilities or TBI.

Ten respondents indicated that pre-service courses in TBI are available in their state, and 36 reported having in-service training, workshops or conferences for educators. These numbers may not reflect all professional development activities in the states related to TBI, especially those

operated by institutions of higher education or state agencies other than education, or education activities initiated or sponsored by BIAs around the country.

### **Summary**

Forty-nine of the 53 SEAs on which Project FORUM obtained information use the TBI category, and all but 15 use the federal definition of TBI. State developed definitions elaborate on the federal definition, with the exceptions of New York and Vermont's definitions that include internal brain injuries. At least 34 of the SEAs have a TBI contact person at the SEA who performs a variety of functions. An array of federally-funded projects and interagency initiatives are currently in place across the country targeting children and youth, birth to 21 who have sustained a TBI. Although teacher endorsement or certification in TBI is very rare, ten states have pre-service courses and at least 36 have in-service professional development (e.g., workshops or conferences), many of which are interagency collaborations.

For more information about federally-funded TBI studies and projects, readers are encouraged to check the following websites:

Centers for Disease Control and Prevention  
<http://www.cdc.gov/ncipc/dacrrdp/tbi.htm>

Maternal and Child Health Bureau  
<http://www.mchb.hrsa.gov/needs.doc>

Traumatic Brain Injury Model Systems (funded by the National Institute on Disability and Rehabilitation Research)  
<http://www.tbims.org>

For information about TBI prevalence and other important facts, please contact the Brain Injury Association.  
<http://www.biausa.org>

Table 1  
TBI Information by State

State	Uses TBI	Year Began using TBI	Uses Fed Definition	TBI Contact At SEA	Federal TBI Projects	BIA <sup>1</sup> Involved	Support Group Involved	Inter-Agency Initiatives	State Prof Devel Programs
AK	YES		NO		C, M	DK	DK	NO	None
AL	YES	1993	YES	1, 2, 3	M	YES		YES	Conference
AZ	YES	1996	YES	1, 2	C, M	DK	NO	NO	None
AR	YES	1997	YES	1	C, O	NO	NO	NO	Inservice
CA*	YES		YES		C				
CO	NO		NO	1, 3	C, M, O	YES	YES	NO	BIA conf
CT	YES	1991	YES			NO	NO	NO	Inservice
DC*					M			YES	
DE*	YES		YES						
FL	NO	1991	NO	2, 3, 4	M, O	YES	YES	NO	Inservice
GA	YES	1994	NO	3	M	NO	YES	NO	Inservice
HI	YES		YES	1, 2, 3, 4	M	YES	YES	YES	Inservice
IA	NO	Early 90's	YES	1, 2, 3	M	YES	YES	YES	Inservice BIA conf
ID*	YES		YES		M			YES	
IL	YES	1992	YES	1, 2, 3	M	YES	NO	YES	Inservice
IN	YES	2000	YES			YES	DK	NO	None
KS	YES	1992	YES	1, 2, 3		YES	YES	YES	Preservice Inservice
KY	YES	1993	NO	1, 2, 3		YES	YES	NO	Inservice
LA	YES	Early 90's	YES	1, 2	C	NO	DK	YES	Inservice
ME*	YES		YES						
MD	YES		YES	1, 3	C, M	YES	YES	YES	Inservice
MA	NO	n/a	n/a	3	M	NO	NO	YES	Preservice Inservice
MI	NO	n/a	n/a			NO	NO	NO	None
MN	YES	1992	NO	1, 2, 3	C, M	YES	YES	YES	Preservice Inservice Conference
MS	YES	1992	YES	2, 3		NO	NO	YES	Inservice
MO	YES	2000	NO		C, M	YES	YES	YES	Preservice Inservice
MT	YES	1991	NO			NO	YES	NO	None
NE	YES	1992	YES	2, 3	C, M	YES	YES	YES	Inservice BIA wrkshp
NH	YES	Circa 1998	YES	3	M	YES	YES	NR	Inservice
NJ	YES	1998	NO		M	NO	NO	NO	None

\* State did not submit Project FORUM survey form. Blank cells for states with asterisks indicate that information is unknown.

<sup>1</sup> BIA = Brain Injury Association

**KEY:**

• **TBI Contact at SEA**

- 1 – Professional development/workshops
- 2 – One-on-one consultation/ technical assistance
- 3 – Liaison w/projects & agencies
- 4 – Parent contact/workshops

• **Federal TBI Projects**

- M - Maternal & Child Health Bureau (MCH)
- O - Office of Special Education Programs (OSEP)
- C - Centers for Disease Control and Prevention (CDC)

Table 1  
TBI Information by State (*continued*)

State	Uses TBI	Year Began using TBI	Uses Fed Definition	TBI Contact At SEA	Federal TBI Projects	BIA Involved	Support Group Involved	Inter-Agency Initiatives	State Prof Devel Programs
NM*	YES		YES						
NY	YES	1993	NO	3	C, M, O	YES	YES	NO	Preservice Inservice
NV	YES	1993	YES	3		DK	DK	DK	None
NC	YES	1990	NO	1, 3	M	NO	NO	NO	Inservice
ND	YES	Early 90's	YES	2, 4		NO	NO	NO	None
OH	YES	Early 90's	YES	1, 2, 3	M	YES	YES	YES	Inservice
OK	YES	Early 90's	YES	1, 4	C, M	YES	YES	YES	Inservice
OR	YES	Early 90's	YES	1, 2, 3	O, M	YES	YES	YES	Preservice Inservice
PA	NO	1991	NO	1		NO	NO	NO	Inservice
RI	YES	1992	YES	1, 2, 3	C, M	YES	YES	NO	Inservice
SC*	YES		YES		C				
SD	YES	1996	YES			NO	NO	NO	Inservice
TN	YES	1992	NO	1, 2, 3	M, O	NO	NO	NO	Inservice
TX	YES	1989	YES	2, 3	M, O	YES	YES	YES	Preservice Inservice
UT	YES	1990	YES	1, 3	C, O	DK	YES	YES	Preservice Inservice
VT	YES	1992	NO	1, 2, 3		NO	NO	NO	Conf w/ Voc rehab
VA	YES	1994	YES			YES	DK	NO	None
WA*	YES		YES		M				
WI	YES	1995	NO	1, 2, 3, 4	M, I	YES	YES	YES	Preservice Inservice
WV	YES	1992	YES	1, 3	M	YES	NO	YES	Preservice Inservice
WY	YES	1992	YES			DK	DK	NO	Inservice
GU	YES	1992	YES			NO	NO	YES	None
MP	YES	1994	YES	2, 3		No BIA	DK	YES	Inservice
VI	YES	1991	YES			No BIA	DK	NO	Inservice

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- M - Maternal & Child Health Bureau (MCH)
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