



2025 ANNUAL REPORT

Screening Data for the
2025 Calendar Year



NATIONAL ASSOCIATION
OF STATE HEAD INJURY
ADMINISTRATORS

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WHAT IS THE OBISSS?

The OBISSS (Online Brain Injury Screening and Support System) is an online screening system to determine lifetime exposure to a potential brain injury that is likely to be causing current challenges and to identify those associated challenges that may be present for youth and adults. The system utilizes the validated and reliable online and self-administered version of the Ohio State University TBI-Identification Method (OSU TBI-ID). It is appropriate for ages 13 and up. Any individual can complete the OBISSS screen on their own or with the help of a service professional. The OBISSS collects demographic information from individuals to help inform systems about the individuals they serve. If the individual screens positive for having a possible brain injury that is likely to be causing them challenges currently, they are prompted to complete the Symptoms Questionnaire for Brain Injury (SQBI). Tip sheets are delivered, responding to identified challenges, to the individual and to the service professional. The OBISSS provides state-specific resources helping individuals access additional services and supports.

With the partnership of The Ohio State University, MINDSOURCE of Colorado, and the Alabama Department of Rehabilitation Services - Traumatic Brain Injury Program, the OBISSS launched in January of 2023. Since its inception, the program has grown nationally to include over 18 subscribers and has collected support from the Department of Justice's Bureau of Justice Administration (Megan Davidson and Kate Reed, *Mind Matters: Building a Justice System That Is Inclusive and Responsive to Brain Injury*. New York: The Council of State Governments Justice Center, 2024).



2025 OBISSS SUBSCRIBERS



MassAbility



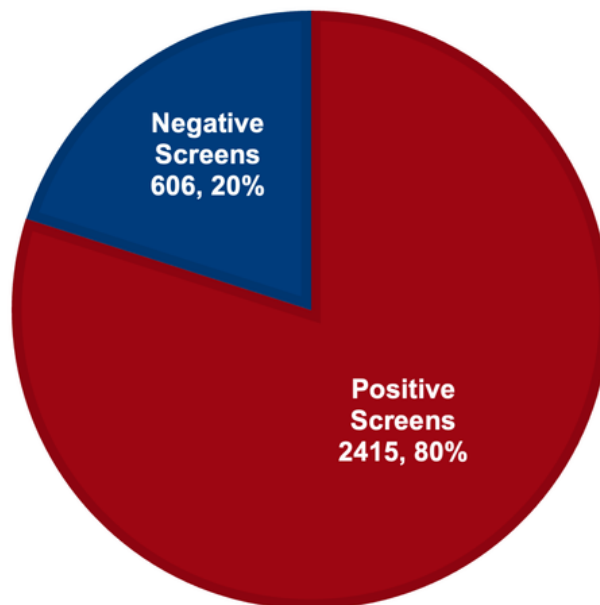
ANALYZING AGGREGATE DATA

What is “Aggregate Data?”

The OBISSS data are collected from across all active subscribers, then combined into a single, comprehensive dataset. The aggregate data provide a broader overview of the OBISSS collected data as a whole.

TOTAL SCREENS: ALL SUBSCRIBERS

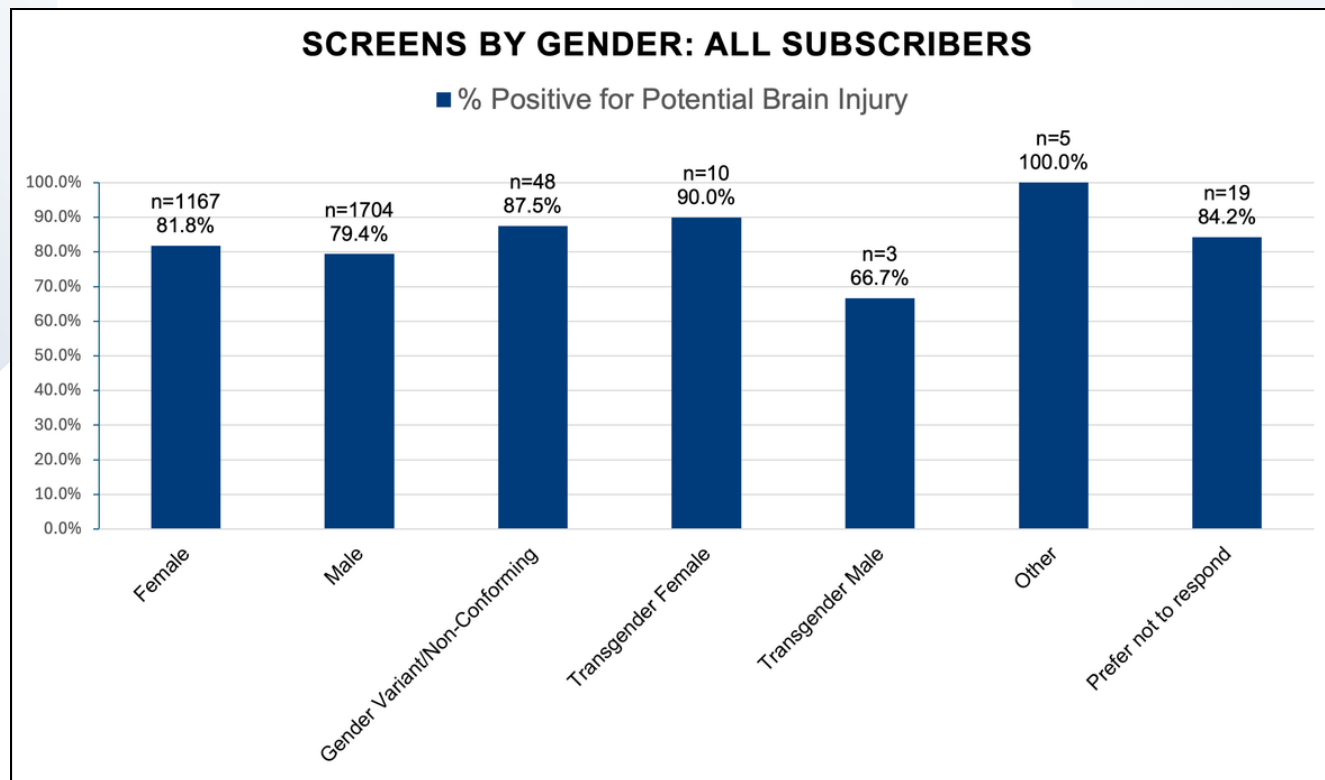
Total Screens = 3021



DEMOGRAPHIC ANALYSIS - GENDER

Screening Results:

- Out of **1,167** screens of **females**, a **81.8%** positivity rate was shown.
- Out of **1,704** screens of **males**, a **79.4%** positivity rate was shown.
- Out of **48** screens of those who are **gender variant/non-conforming**, an **87.5%** positivity rate was shown.
- Out of **10** screens of **transgender females**, a **90.0%** positivity rate was shown.
- Out of **3** screens of **transgender males**, a **66.7%** positivity rate was shown.
- Out of **5** screens of “**other**” genders, a **100.0%** positivity rate was shown.
- Out of **19** screens of those who left **no response**, a **84.2%** positivity rate was shown.



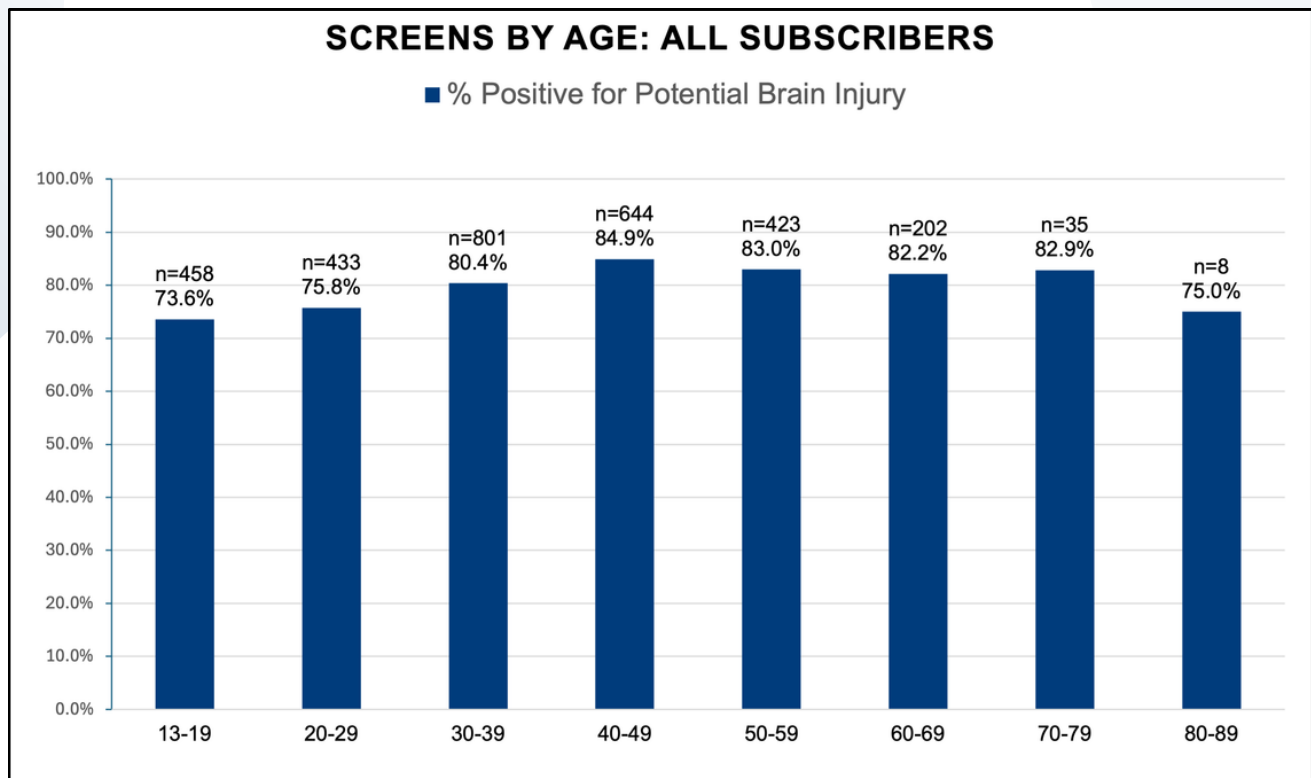
Suggested Strategies:

- **Refined Intake:** Update screening protocols to capture gender-specific injury mechanisms (for example, intimate partner violence) more effectively.
- **Brain Injury-Informed Training:** Ensure training is inclusive of all categories of gender.
- **Marginalized Outreach:** Develop specialized support frameworks for gender-diverse populations to bridge the gap between high-positivity screening and long-term stability.

DEMOGRAPHIC ANALYSIS - AGE RANGE

Screening Results:

- Out of **458** screens for ages **13-19**, a **73.6%** positivity rate was shown.
- Out of **433** screens for ages **20-29**, a **75.8%** positivity rate was shown.
- Out of **801** screens for ages **30-39**, a **80.4%** positivity rate was shown.
- Out of **644** screens for ages **40-49**, a **84.9%** positivity rate was shown.
- Out of **423** screens for ages **50-59**, a **83.0%** positivity rate was shown.
- Out of **202** screens for ages **60-69**, a **82.2%** positivity rate was shown.
- Out of **35** screens for ages **70-79**, a **82.9%** positivity rate was shown.
- Out of **8** screens for ages **80-89**, a **75.0%** positivity rate was shown.
- There were **0** screens for ages **90 and older**.



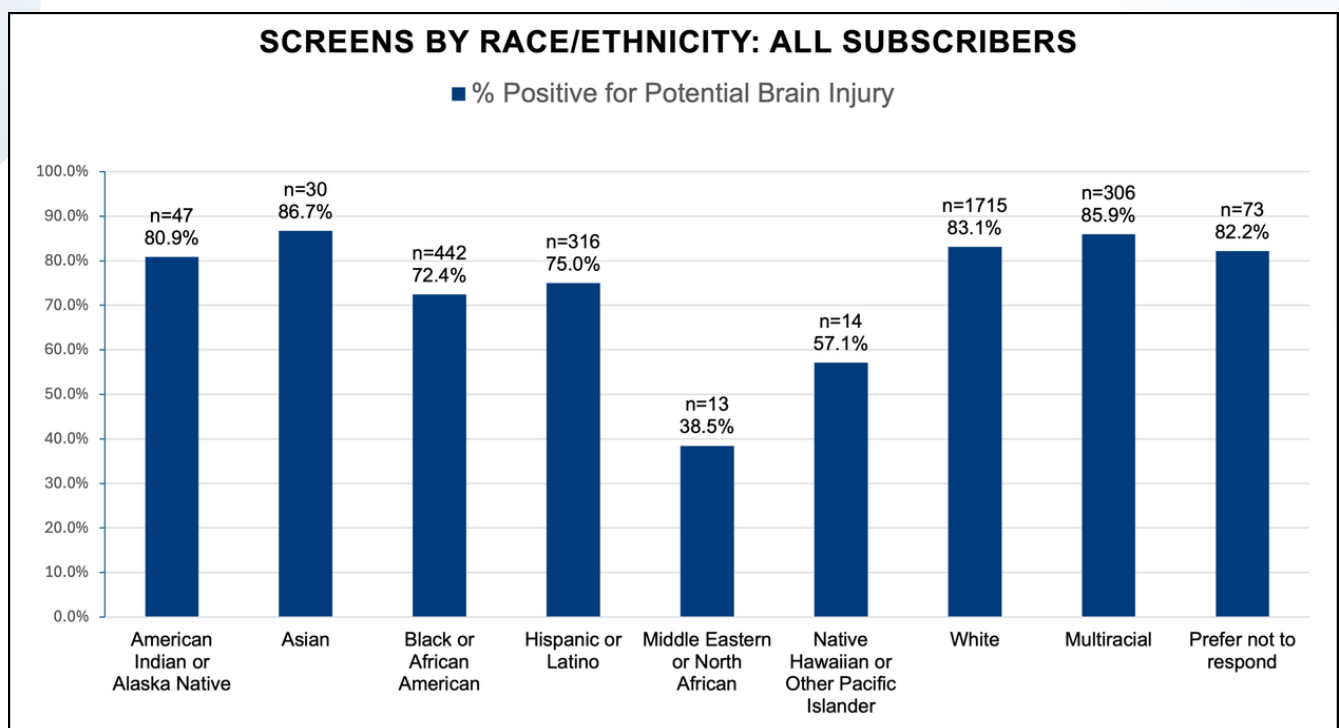
Suggested Strategies:

- **Prevention across the Life Span:** Ensure that prevention education is tailored to the needs of each age group.
- **Vocational Assistance:** As the highest positivity rates are shown within the prime working years for an adult, access to brain injury-informed vocational supports would be beneficial.

DEMOGRAPHIC ANALYSIS - RACE/ETHNICITY

Screening Results:

- Out of **47** screens for those who are **American Indian or Alaska Native**, a **80.9%** positivity rate was shown.
- Out of **30** screens for those who are **Asian**, a **86.7%** positivity rate was shown.
- Out of **442** screens for those who are **Black or African American**, a **72.4%** positivity rate was shown.
- Out of **316** screens for those who are **Hispanic or Latino**, a **75.0%** positivity rate was shown.
- Out of **13** screens for those who are **Middle Eastern or North African**, a **38.5%** positivity rate was shown.
- Out of **14** screens for those who are **Native Hawaiian or Other Pacific Islander**, a **57.1%** positivity rate was shown.
- Out of **1,715** screens for those who are **White**, a **83.1%** positivity rate was shown.
- Out of **306** screens for those who are **Multiracial**, a **85.9%** positivity rate was shown.
- Out of **73** screens for those who left **no response**, a **82.2%** positivity rate was shown.



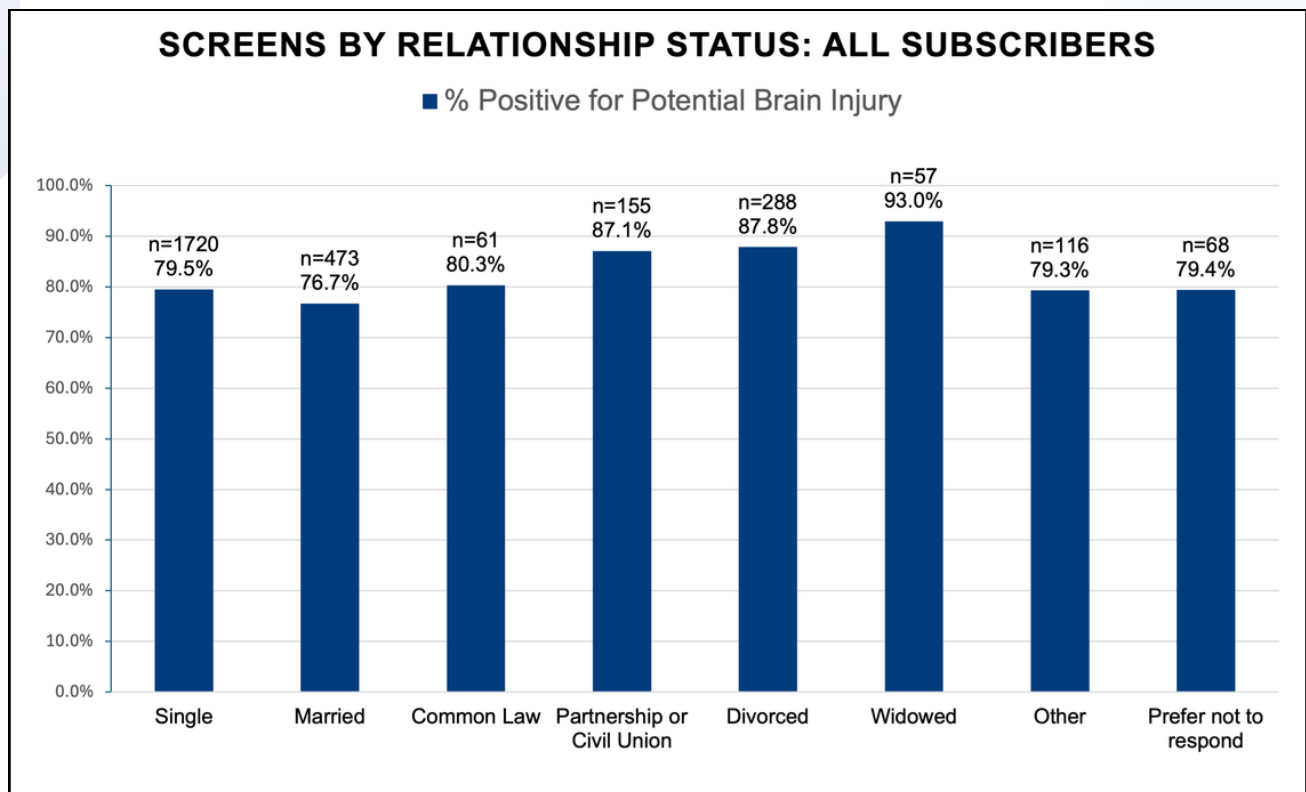
Suggested Strategies:

- **Linguistic & Cultural Adaptation:** Tailor support resources to align with the diverse cultural frameworks of the communities served.
- **Focused Advocacy:** Prioritize neuro-rehabilitative outreach for high-positivity populations to mitigate long-term health disparities.
- **Trust-Building Initiatives:** Partner with community organizations to improve screening participation and accuracy among underrepresented groups.

DEMOGRAPHIC ANALYSIS - RELATIONSHIP STATUS

Screening Results:

- Out of **1,720** screens of those who are **single**, a **79.5%** positivity rate was shown.
- Out of **473** screens of those who are **married**, a **76.7%** positivity rate was shown.
- Out of **61** screens of those who are in a **common law relationship**, a **80.3%** positivity rate was shown.
- Out of **155** screens of those who are in a **partnership or civil union**, a **87.1%** positivity rate was shown.
- Out of **288** screens of those who are **divorced**, a **87.8%** positivity rate was shown.
- Out of **57** screens of those who are **widowed**, a **93.0%** positivity rate was shown.
- Out of **116** screens of those who are in an **other** type of relationship, a **79.3%** positivity rate was shown.
- Out of **68** screens of those who left **no response**, a **79.4%** positivity rate was shown.



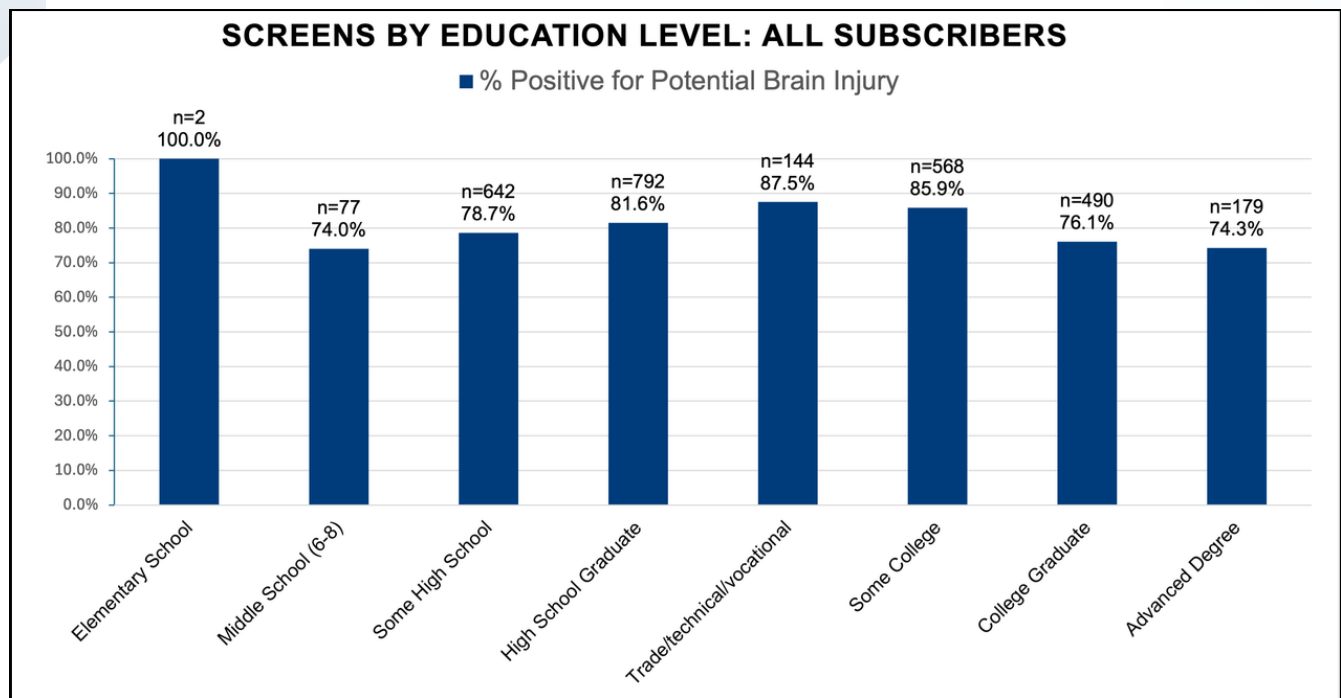
Suggested Strategies:

- **Assistance for Familial Support:** Supply educational materials to the partners of participants who have received positive screenings to avert caregiver fatigue and uphold relationship stability.
- **Community Connection:** Ensure that unpartnered participants have meaningful connections to peers and community supports as needed.

DEMOGRAPHIC ANALYSIS - EDUCATION LEVEL

Screening Results:

- Out of **2** screens of those who completed **elementary school**, a **100.0%** positivity rate was shown.
- Out of **77** screens of those who completed **middle school**, a **74.0%** positivity rate was shown.
- Out of **642** screens of those who completed **some high school**, a **78.7%** positivity rate was shown.
- Out of **792** screens of those who are **high school graduates**, a **81.6%** positivity rate was shown.
- Out of **144** screens of those who completed a **trade, technical, or vocational school**, a **87.5%** positivity rate was shown.
- Out of **568** screens of those who completed **some college**, a **85.9%** positivity rate was shown.
- Out of **490** screens of those who are **college graduates**, a **76.1%** positivity rate was shown.
- Out of **179** screens of those who completed an **advanced degree**, a **74.3%** positivity rate was shown.



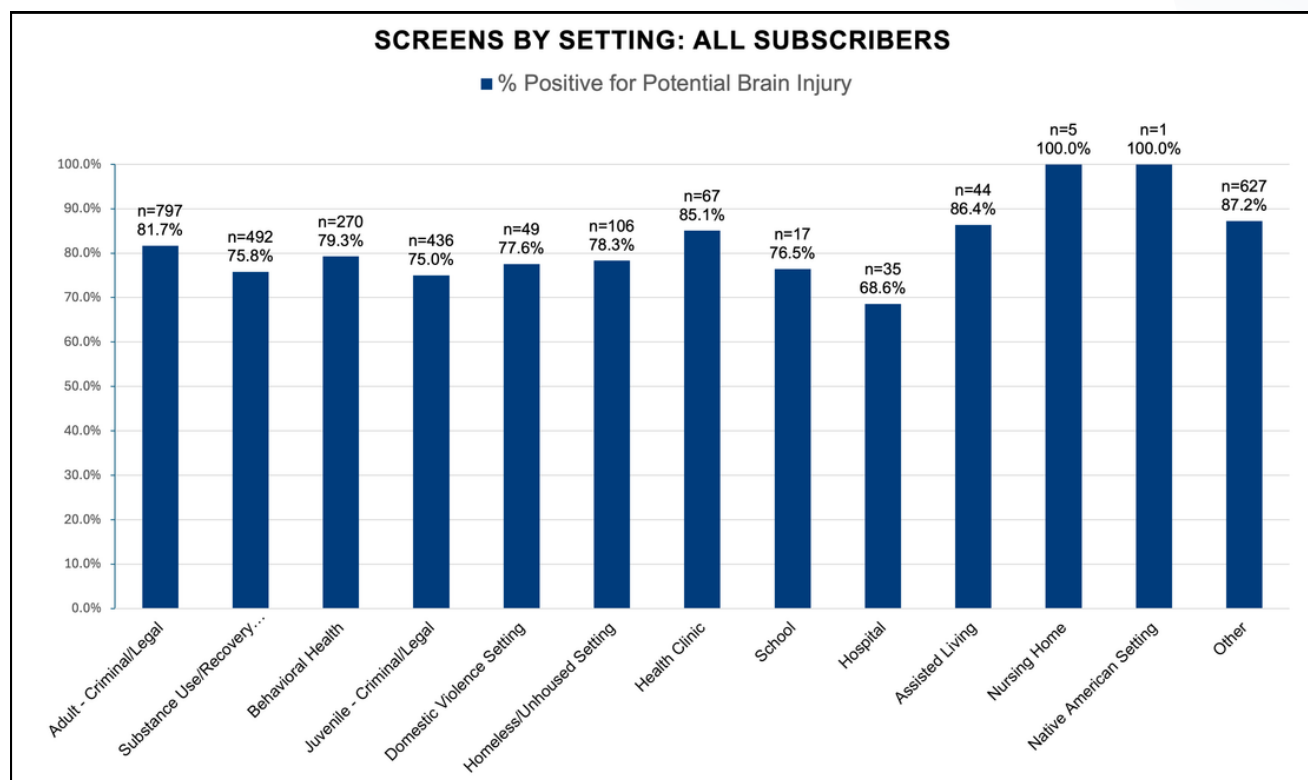
Suggested Strategy:

- **Accessibility of Brain Injury Resources:** Ensure the brain injury resource materials geared towards participants are appropriate for all reading-levels.

SETTING - AGGREGATE

Screening Results:

- Out of **797** screens in an **adult criminal legal** setting, a **81.7%** positivity rate was shown.
- Out of **492** screens in a **substance use/recovery** setting, a **75.8%** positivity rate was shown.
- Out of **270** screens in a **behavioral health** setting, a **79.3%** positivity rate was shown.
- Out of **436** screens in a **juvenile criminal legal** setting, a **75.0%** positivity rate was shown.
- Out of **49** screens in a **domestic violence** setting, a **77.6%** positivity rate was shown.
- Out of **106** screens in a **homeless/unhoused** setting, a **78.3%** positivity rate was shown.
- Out of **67** screens in a **health clinic** setting, a **85.1%** positivity rate was shown.
- Out of **17** screens in a **school** setting, a **76.5%** positivity rate was shown.
- Out of **35** screens in a **hospital** setting, a **68.6%** positivity rate was shown.
- Out of **44** screens in an **assisted living** setting, a **86.4%** positivity rate was shown.
- Out of **5** screens in a **nursing home** setting, a **100.0%** positivity rate was shown.
- Out of **1** screens in a **Native American** setting, a **100.0%** positivity rate was shown.
- Out of **627** screens in **other** types of settings, a **87.2%** positivity rate was shown.



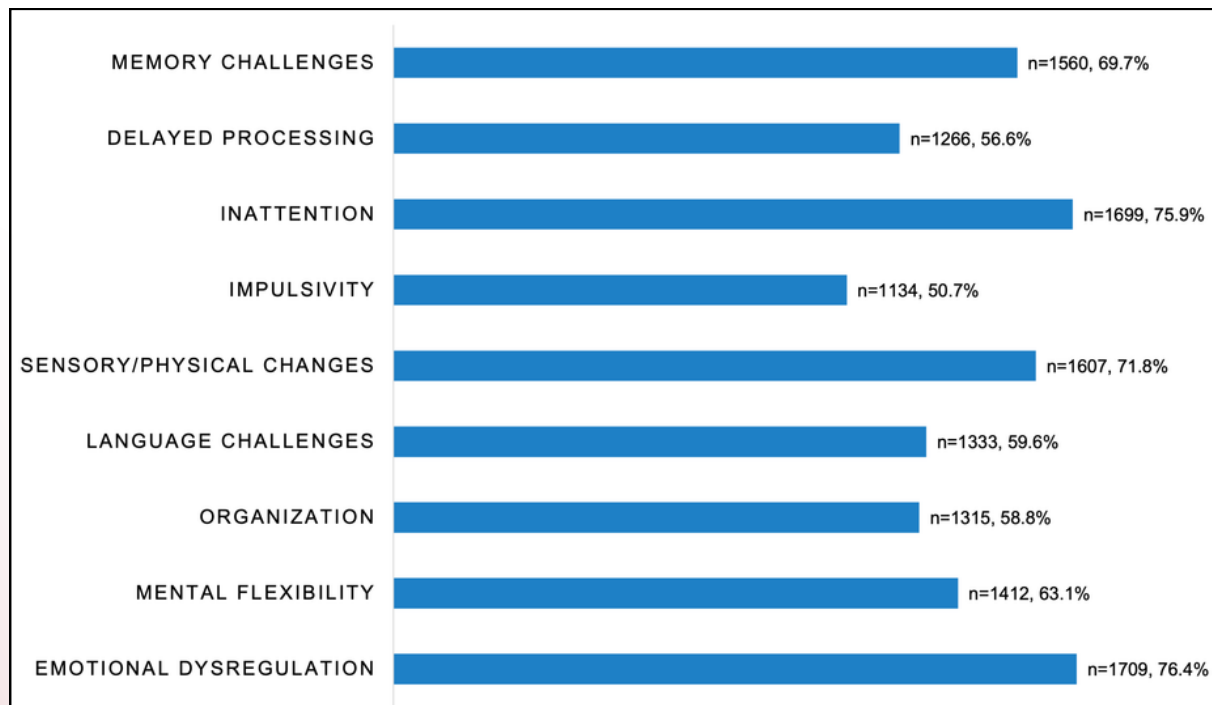
Suggested Strategies:

- **Systemic Integration:** Integrate brain injury-informed protocols into programmatic frameworks to accommodate challenges related to brain injury.
- **Staff Training:** Equip professionals in these settings with resources to recognize brain injury challenges ensuring that care plans consider the history of brain injury.

SYMPTOMS & CHALLENGES

Screening Results:

- Out of all positive screens, **1,560 (69.7%)** experience challenges with **memory**.
- Out of all positive screens, **1,266 (56.6%)** experience challenges with **delayed processing**.
- Out of all positive screens, **1,699 (75.9%)** experience challenges with **inattention**.
- Out of all positive screens, **1,134 (50.7%)** experience challenges with **impulsivity**.
- Out of all positive screens, **1,607 (71.8%)** experience challenges with **sensory or physical changes**.
- Out of all positive screens, **1,333 (59.6%)** experience challenges with **language**.
- Out of all positive screens, **1,315 (58.8%)** experience challenges with **organization**.
- Out of all positive screens, **1,412 (63.1%)** experience challenges with **mental flexibility**.
- Out of all positive screens, **1,709 (76.4%)** experience challenges with **emotional dysregulation**.



Suggested Strategies:

- **Cognitive Compensation Strategies:** Implement low-tech aids like visual schedules and alarm reminders to mitigate memory and attention challenges.
- **Sensory Environment Audits:** Reduce background noise and harsh lighting in high-traffic service areas to accommodate the **71.8%** of participants with sensory sensitivities.
- **Regulation-First Programming:** Prioritize emotional self-regulation skills as a prerequisite for more complex rehabilitative or vocational goals.

SYMPTOMS & CHALLENGES

The 2025 OBISSS data below indicate which particular challenge, in each of the nine domains assessed, was chosen the most by screening participants within the Symptom Questionnaire for Brain Injury that is a part of the OBISSS. Each participant that screens positive for a potential brain injury is asked to rate challenges on a scale of “I do not have this problem at all” to “I am extremely bothered by this problem.”

Challenge Area	Most Commonly Reported Symptom That is “Extremely Bothersome”
Memory Challenges	I forget what I have read.
Delayed Processing	I can remember only one or two steps of instructions or directions.
Inattention	I have a hard time concentrating in noisy environments.
Impulsivity	I say things without thinking.
Sensory/Physical Changes	I feel tired.
Language Challenges	I have a hard time finding the right word when speaking.
Organization	I have a hard time starting tasks.
Mental Flexibility	I have a hard time changing my mind when things change.
Emotional Dysregulation	I feel anxious.

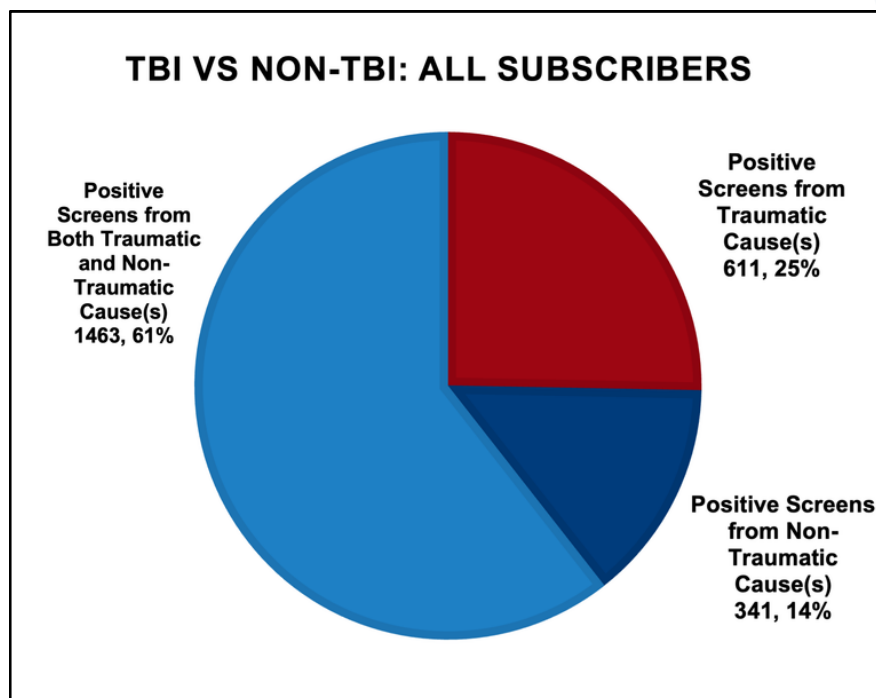
Suggested Strategies:

- **Person Centered Approach:** Professionals should consider asking the participant if there are certain compensatory strategies that they already utilize to assist with their most bothersome challenges.
- **Target Accommodations:** Professionals should consider prioritizing accommodations for the most bothersome challenges reported by each participant.

TBI VS NON-TBI

Screening Results:

- Out of all positive screens, **611 (25%)** were scored due to **traumatic** cause(s).
- Out of all positive screens, **341 (14%)** were scored due to **non-traumatic** cause(s).
- Out of all positive screens, **1,463 (61%)** were scored due to **both traumatic and non-traumatic** cause(s).



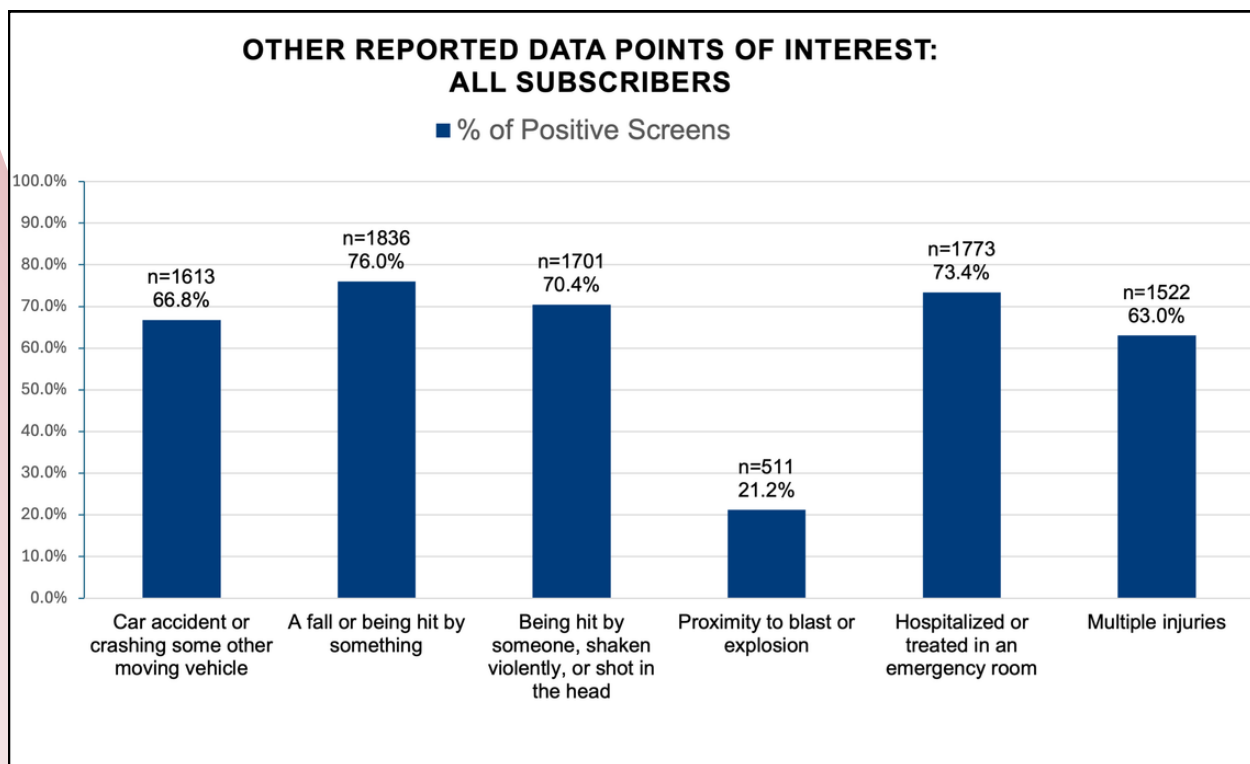
Suggested Strategy:

- **Dual-Track Screening:** Broaden intake protocols to specifically include non-traumatic incidents, such as near-fatal overdoses or strangulation.

OTHER DATA POINTS

Screening Results:

- Out of all positive screens, **1,613 (66.8%)** indicated experiencing a **car accident or crashing some other moving vehicle**.
- Out of all positive screens, **1,836 (76.0%)** indicated experiencing a **fall or being hit by something**.
- Out of all positive screens, **1,701 (70.4%)** indicated experiencing being **hit by someone, shaken violently, or being shot in the head**.
- Out of all positive screens, **511 (21.2%)** indicated experiencing being in **proximity to a blast or explosion**.
- Out of all positive screens, **1,773 (73.4%)** indicated being **hospitalized or treated in an emergency room**.
- Out of all positive screens, **1,522 (63.0%)** indicated sustaining **multiple injuries**.



Suggested Strategies:

- **Trauma-Informed Outreach:** Design specific supports for participants who screen positive for a potential brain injury as some mechanisms of injury can be associated with traumatic and/or complex events that require a trauma-informed approach.
- **Hospital-to-Home Continuity:** Bridge the gap between emergency room discharge and social services to ensure potential brain injury challenges are supported.

LOOKING AHEAD



Planning for 2026

The OBISSS experienced significant growth in 2025 with expanded implementation in existing subscribing states, the addition of five new subscribers, and the extension of support for subscribers and their screening partner. Looking in 2026, there exists more areas of potential growth for the OBISSS program.

1. **State and Organizational Expansion:**

- The OBISSS program seeks to expand to five additional subscribing states or programs and exponentially increase the number of participants screened to get resources to those who need additional supports.

2. **The OBISSS Subscribers' Guide:**

- The NASHIA OBISSS team is committed to creating a comprehensive guide for subscribers to assist in onboarding, implementation, and sustainability of their individual OBISSS programs.

3. **Subscriber Repository:**

- The NASHIA OBISSS team plans to build a subscriber repository, an easily accessible online location to house resources and information that are applicable to all subscribers, such as recordings of Subscribers' Forums, non-branded training and marketing assets, and notifications about system outages or upcoming changes.

4. **OBISSS Office Hours:**

- NASHIA is committed to continually improving access and efficiency to support from the OBISSS team. In 2026, NASHIA is to begin monthly scheduled drop-in meetings for OBISSS subscribers, their screening partners, their potential screening partners, and any potential new subscribers to talk to the OBISSS team and ask questions.

5. **Additional Reporting for ACL grantees:**

- NASHIA values the efforts of those subscribers who are also benefiting grantees of the Administration for Community Living (ACL) TBI State Partnership Program funds. Due to additional reporting requirements of the grantees related to screening, NASHIA is please to begin to offer subscribing grantees a customized report that will expedite their screening reporting to ACL.



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Questions for NASHIA?

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