

Accessing crisis intervention services after brain injury: A mixed methods study

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Purpose: To understand empirically the perceived barriers to accessing crisis intervention services for individuals with acquired brain injury. **Method:** This action research design encompassed two phases of mixed methods data collection and analysis. Phase one consisted of the electronic distribution of a survey comprised primarily of quantitative items, launched to a nonrandom sample of 226 providers with a response rate of 49% (n = 110). Phase two entailed seven focus group interviews with 25 participants, designed to add explanatory power to phase one results. **Results:** Quantitative results revealed an array of major barriers significant to persons with brain injury, such as funding for services, coexisting diagnoses, and limited self-advocacy. Organizationally specific barriers included funding for services, limited training and education, and systems resources (e.g., personnel). Adding depth and insight, qualitative findings triangulated with these results, also highlighting the prevalence of the funding barrier and pointing to additional barriers relative to the individual, the family, and external stigma. **Conclusions:** The need for convenient, cost-effective, and applicable training and education is paramount. Opportunities for interagency cross training and education, particularly around risk assessment, psychosocial adjustment symptoms, and the biomechanical causes of psychiatric symptoms may alleviate perceived disconnections, improve provider confidence, and mitigate crises. Developing interprofessional teams of providers to maximize access to services, either face-to-face or virtual, is integral. These perspectives highlight opportunities to improve access to services and to strengthen relationships across providers and agencies.