Rehabilitation through Communication, Neuropsychology, Counseling, and Training (ReCoNeCT): Connecting students and student veterans impacted by mTBI with holistic interventions, skills, and support.

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ReCoNeCT
Rehabilitation through Communication, Neuropsychology, Counseling, & Training: Connecting students and student veterans impacted by mild traumatic brain injury (mTBI) with holistic interventions, skills, and support
Marley Niland

Mild Traumatic Brain Injury
- Glasgow Coma Score 13 – 15
- Loss of consciousness for less than 30 minutes
- Amnesia lasting lasting less than 24 hours
- No alteration of mental state at time of injury

Military Veterans
- 75,000 service members with confirmed TBI; 95% are mild (Cifu, O., 2010; Faul, et al., 2010; Summerall, 2015)
- $17 billion in mTBI costs per year (National Center for Injury Prevention and Control, 2003)
- 5-15% of mTBI survivors continue to have symptoms more than one year post injury (Cifu, O., 2015; Center, N.C.I.P., 2003)
- Most common cognitive deficits include: attention, recall, and executive functioning (EF) (Caplan et al., 2010; Cincerone & Kalmar, 1995)

College Students
- More than 1 million veterans are using post-secondary education benefits in the U.S. (va.gov, 2015; Veterans and College, 2014)
- Year 2001-2009: 62% increase in sports-related mTBI in youth and young adults (cdc.gov, 2015)

Significance
- 1.7 million TBIs in the U.S. each year; 80% are considered mild (Cifu, O., 2015; Faul, et al., 2010; Summerall, 2015)
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Methods
Interdisciplinary Approach
- Communicative Sciences and Disorders
- Counselor Education
- Education Leadership
- Neuropsychology

Participants
- Adults currently enrolled in Montana University System
- Diagnosed with mTBI or concussion
- At least 6 months post-injury
- Mental health screening with counselor (semi-structured interview)
- Scales of Cognitive and Communication Ability for Neurorehabilitation (SCCAN) administered by speech-language pathologist (Mimun & Holland, 2008)

Pre-Intervention Procedures
- Individualized cognitive-communication assessment
- Mental health and wellness
- Academic strengths and areas of concern
- Neuropsychological assessment as needed

Intervention
- Educational information including assessment results, mTBI effects on academia, and goal development
- Online module and homework
- Cognitive-communication therapy with SLP
- Individualized counseling

Post-Intervention
- Individualized comprehensive assessment
- Debrief progress
- Home programming
- Referrals, recommendations
- Post-intervention satisfaction survey

Specific Aims
Aim 1: Increase awareness of challenges and implement effective strategies. Lack of awareness can lead to frustration, anxiety, and depression.
Aim 2: Improve cognitive-communication skills
Aim 3: Reduce rural disparity of students across Montana with mTBI. Increase access with interdisciplinary telehealth service delivery model.

Jumpstart to rehabilitative and wellness services

<table>
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<tr>
<th>Week 1</th>
<th>Comprehensive pre-intervention interdisciplinary assessment</th>
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| Weeks 2 & 3 | Intervention
- 2 days per week in-person with interdisciplinary team
- 2 days per week using telehealth |
| Week 4 | Post-intervention assessment
- Debrief progress
- Home programming
- Referrals and recommendations |