



# Peer Specialists Fall 2020 Brain Injury Series

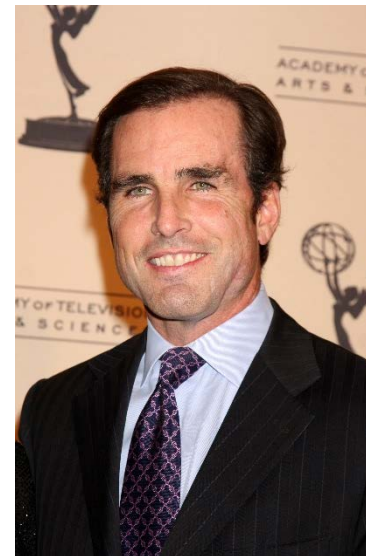
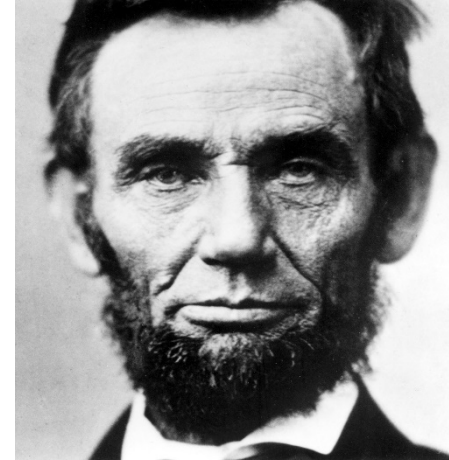
## Part I Brain Injury Overview

Martin Kerrigan & Anastasia Edmonston





# What do these people have in common?



# Why is it important for Peer Specialists to have a working understanding of brain injury? *why this series matters*

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- People who use drugs and alcohol often have a history of a brain injury
- People with a history of mental health challenges are often have a history of brain injury
- People who use drugs and alcohol are at a high risk of incurring a traumatic brain injury (falls, violence, accidents) AND those who use opioids are at high risk of acquired brain injury from overdose(s)

# Why is it important for Peer Specialists to have a working understanding of brain injury? *why this series matters*

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- Being brain injury informed is one tool professionals, advocates family members, friends can use in order to support people in a holistic and person centered way
- Being brain injury informed includes knowing where to obtain more information, tips and resources to help those who may be living with a hidden or not so hidden history of brain injury

# *TBI Overview*

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## **Introductions and Brainstorm**

# By the end of this training participants will:

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- Become familiar with types and causes of brain injury
- Understand who is impacted by brain injury
- Understand how living with a brain injury can impact physical, thinking and social/emotional health and well being

# Getting to Know You — Respond in the chat

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- Please state your name
- Where do you work and what is your role?

# Questions – please answer in the chat

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1. What do you know about Brain Injury
1. What do you *want* to know about Brain Injury



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**Poll Question: Have you ever supported an individual you know or suspect are living with a history of Brain Injury?**

**Yes**

**No**

# TBI vs. ABI

TBI Defined	ABI Defined
<b>Traumatic Brain Injury (TBI)</b> is an insult to the brain caused by an external physical force, such as a fall, motor vehicle accident, assault, sports-related incident, or improvised explosive device (IED) exposure	<b>Acquired Brain Injury (ABI)</b> is an insult to the brain that has occurred after birth, such as TBI, stroke, near suffocation, infections in the brain, or anoxia <b>and opioid overdose(s)</b>

**\*Both mechanisms of injury can result in a chronic disability that may get worse with age.**

# Acquired Brain Injury Secondary to Overdose

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**What is known and observed regarding the impact of opioid overdose and the brain:**

- Sudden loss of oxygen to the brain has the greatest effect on parts of the brain that are high oxygen users such as the hippocampus, basal ganglia and frontal region among others
- These areas of the brain are oxygen “hogs” and are critical to memory, learning and attending to new information, problem solving and the ability to manage our emotions and impulses — in other words, they are responsible for our adult thinking skills aka “executive functioning”

# Acquired Brain Injury Secondary to Overdose

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The ability to self-regulate is notably impacted by both Traumatic and Acquired Brain Injury When these critical areas are damaged, the functional manifestations can include:

**Lability, impulsivity, irritability, and apathy**

# ***An Overdose Can Lead to Brain Injury!***

While not every survived overdose leads to an acquired brain injury, researchers and clinicians are looking at the intersection of traumatic brain injury, problematic opioid use and opioid related overdose.

We will explore this more thoroughly next week.

# Brain Injury is a Chronic Condition!

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As more individuals thankfully survive brain injury, research is looking at the potential implications of aging with a history of brain injury.

“Injury to the brain can evolve into a lifelong health condition termed chronic brain injury (CBI). CBI impairs the brain and other organ systems and may persist or progress over an individual’s life span.”

**Source:** Galveston Brain Injury Conference 2010



# TBI: A Chronic Condition

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A longitudinal study of the TBI Model Systems cohort (N=6,913) found those who received inpatient rehabilitation at a specialized brain injury center have a reduced life expectancy:

- People were 2.23 times more likely to die than those of comparable age, sex, and race in the general population
- Reduced life expectancy of nine years
- People are at higher risk of dying from seizure (although this is relatively infrequent cause of death)
- External causes of death include: Fall, **accidental poisoning**, homicide, motor vehicle accident, and suicide



**What might it feel like to be living with a condition that makes it hard to follow directions?**

*Writing and processing exercise*

# Let's Discuss! (We will ask you to respond to each question, one at a time in the chat)

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- How did that feel?
- How do you think your **mood**, **self-confidence** and **self-esteem** would be affected if you had found you couldn't do things you had done for your whole adult life and done well and now you couldn't, *or* you could do those things, but it takes you a lot longer or you are now unable to do it?
- How do you think others might perceive your skills, knowledge and abilities after such a change in your competency? (especially if your brain injury left you with no obvious disability)

# Brain Injury Fast Facts

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- In 2013, 2.8 million Americans were treated in Emergency Departments (ED), hospitalized, or died as a result of a TBI.
- The brain reaches its adult weight of 3 pounds by the age of 12.
- The adult brain reaches cognitive maturity by the mid-20s.
- The last part of the brain to develop is the frontal lobe.

# Brain Injury Severity

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## Distribution of severity:

- **Mild injuries = 80 percent**  
**(Loss of consciousness (LOC) < 30 minutes, post traumatic amnesia (PTA) < 1 hour)**
- Moderate = 10–13 percent  
(LOC 30 minutes to 24 hours, PTA 1 to 24 hours)
- Severe = 7–10 percent  
(LOC >24 hours, PTA >24 hours)

## ***Beyond the Invisible*- documentary**

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**What does Traumatic Brain Injury (TBI) look like?**

*Beyond the Invisible* narrated by Lee Woodruff

<https://youtu.be/ePJgU2LFU-g>

\*Also found on [www.BrainLine.org](http://www.BrainLine.org)



# Let's Discuss: We will ask you to respond to each question, one at a time in the chat

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- Name one brain injury related challenge that Tracy is dealing with after his injury
- Name one brain injury related challenge that Brian is dealing with after his brain injury
- Name one brain injury related challenge that Eddie is dealing with after his brain injury

# Let's Discuss: We will ask you to respond to each question, one at a time in the chat

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- Name one challenge that Brian's wife Michelle is dealing with after her husband's brain injury
- Name one challenge Eddie's family is dealing with after their son's brain injury

# Lightning Round: Place your answer in Chat

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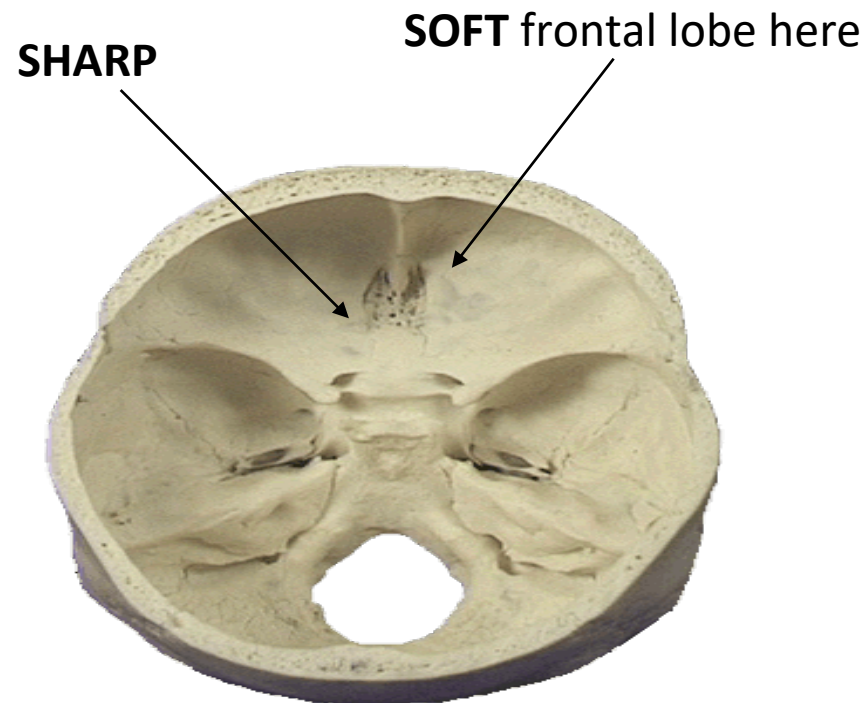
A brain injury can be caused by which of the following?

1. a concussion
2. an opioid overdose
3. an aneurysm
4. all of the above

# Brain Injury - The Skull

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Many of our adult thinking skills reside in the frontal lobe; the frontal lobe is very vulnerable to injury.



# The Frontal Lobe

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**The frontal lobe** is the area of the brain responsible for our “executive skills,” or higher cognitive functions. These skills include:

- Problem solving
- Spontaneity
- Memory
- Language
- Motivation
- Judgment
- Impulse control
- Social and sexual behavior



# Frontal Lobe Injury Consequences

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- Frontal lobe injuries, even those that occur in childhood, can cause long term problems in thinking, responding and behaving
- It's important for peer specialists to know this since it can explain some of the current behaviors peer specialists may encounter.
- Signs of brain injury can look a lot like other behavioral health conditions



# The Frontal Lobe

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*“... What takes a little longer to develop are the connections between areas like the prefrontal cortex, that regulate thinking, and the limbic system, where emotions largely stem from, as well as biological drives you could call “the four F’s—fight, flight, feeding, and ffff... fooling around.”*

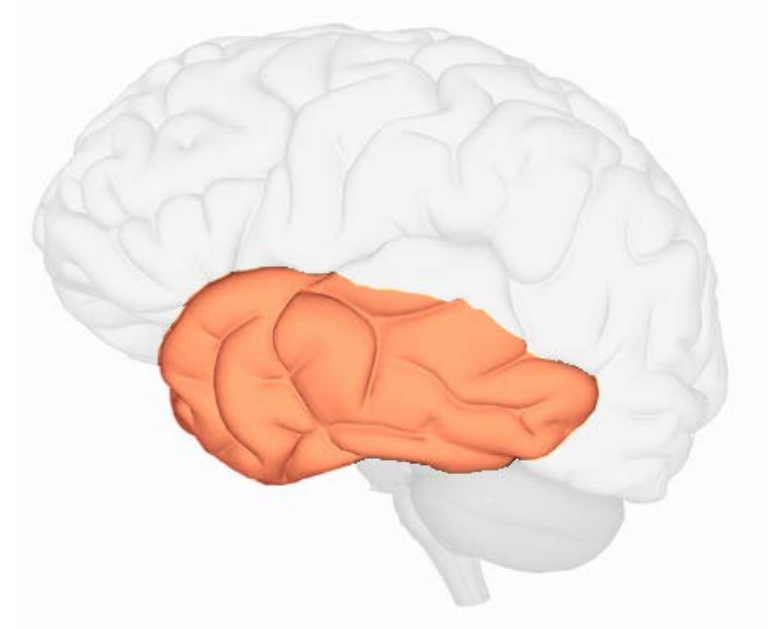
**Source:** James Griffin, the deputy chief of the National Institute of CCHD’s Child Development and Behavior Branch, quoted in Julie Beck’s 2016 article in The Atlantic entitled “When are You Really an Adult?” . <https://www.theatlantic.com/health/archive/2016/01/when-are-you-really-an-adult/422487/>

# The Temporal Lobe

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**The temporal lobe** plays a role in emotions and is also responsible for smelling, tasting, perception, memory, understanding music, **aggressiveness, and sexual behavior.**

The temporal lobe also contains the **language area** of the brain.



*Source: Adapted from Dr. Mary Pepping of the University of Idaho's presentation "The Human Brain: Anatomy, Functions, and Injury"*

# Brain Injury

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For peer support specialists, **the behavioral impact of damage to the frontal and temporal lobes can be a factor** during interactions with people who otherwise appear “normal.”

# TBI and ABI “Fingerprints”

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There are two other lobes in the brain, the occipital and the parietal lobes.

Our frontal lobe and the temporal lobes are key to managing behavior and emotions.

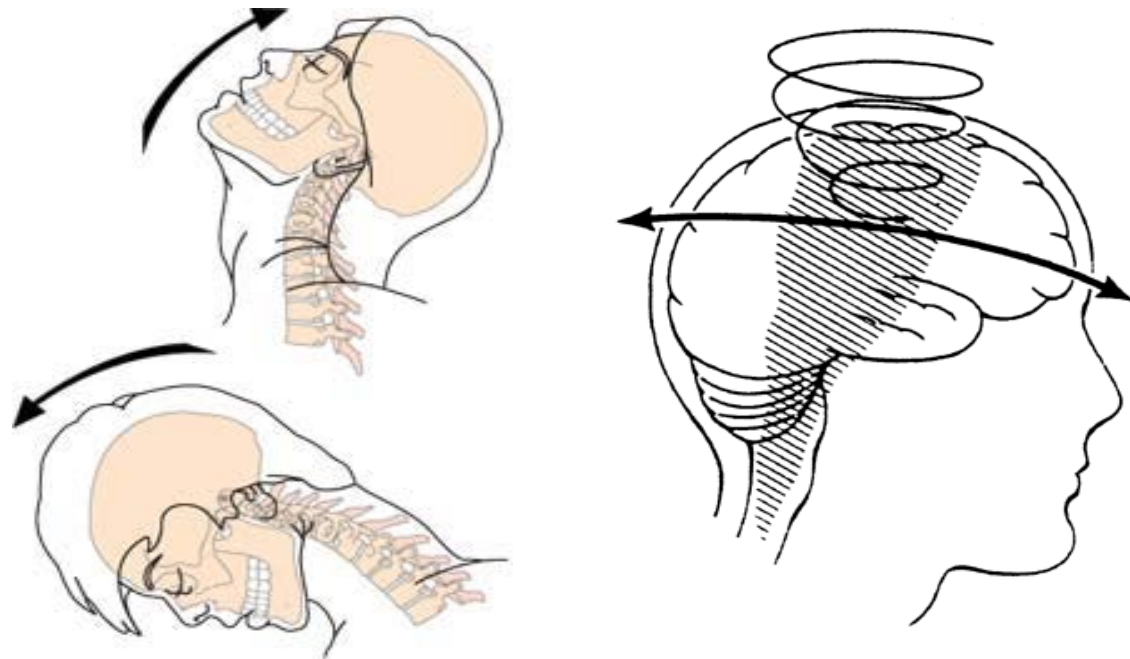
Thus, damage to these regions can contribute to mental health and/or addiction problems. Damage to these lobes due to a TBI from a car accident or from a serious overdose is considered the **“Fingerprint of Brain Injury.”**



# Sustaining Injury

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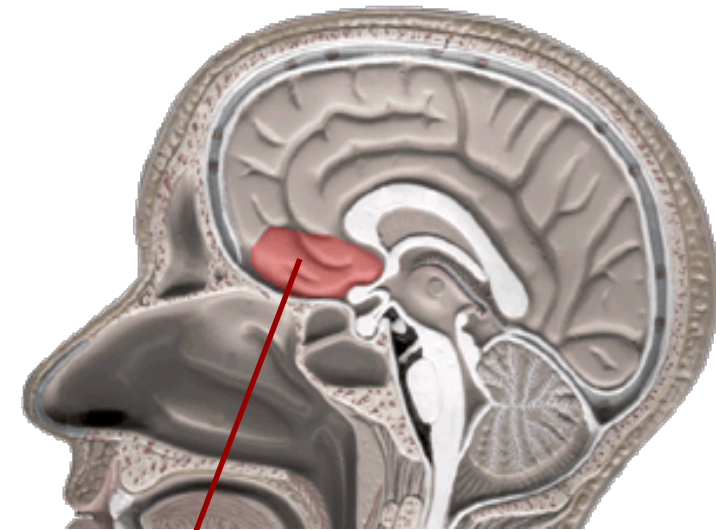
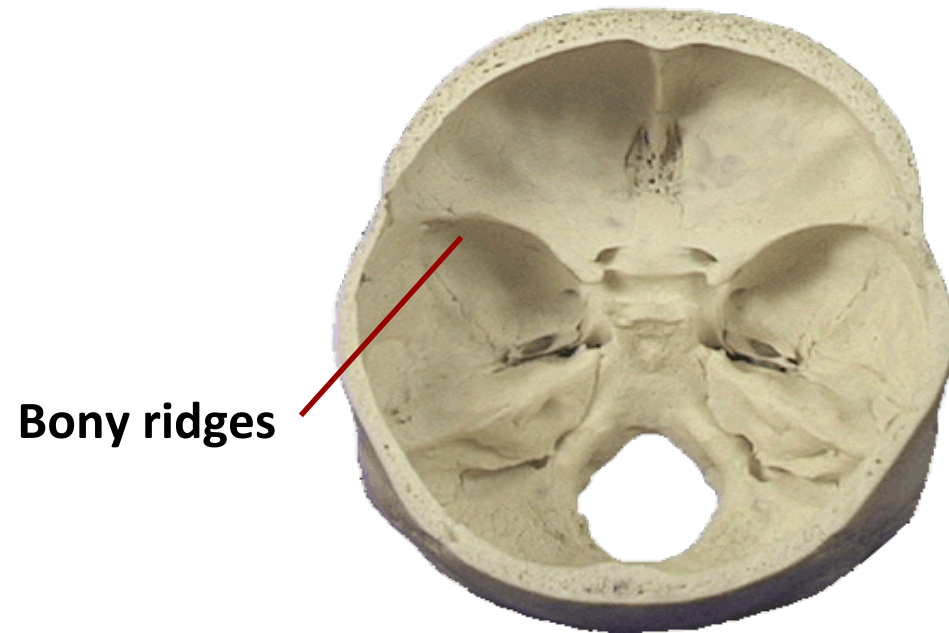
With a TBI from an external blow or force, the brain is set into motion along multiple axial planes.



Source: John Corrigan Ph.D., Ohio Valley Center 2014

# Interior Skull Surface

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Injury from contact with skull



# Recognizing Brain Injury

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Civilian risk factors for TBI include:

- **Males 2:1** more than female
- **Very young and very old** due to falls
- **Adolescents and young adults** due to intentional injuries (e.g., falls, unintentional poisoning, self-harm, assault and moving vehicle crashes)

# How big is the problem?

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According to the CDC up to 15% of “mild” TBIs result in long term consequences!

Source:cdc.org

# Recognizing Brain Injury

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Groups who may have multiple mild TBIs include:

- Athletes — especially boxers, football players, and hockey players
- Victims of intimate partner violence and childhood physical abuse
- People who misuse and abuse substances
- People who are homeless
- People with mental illness
- People in the criminal justice system

# Brain Injury by the Numbers

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## Among TBI-related deaths in 2014:

- Rates of TBI were higher for persons 75 years and older—*Why?*
- Falls were the leading cause of death for persons 65 and older
- Intentional self-harm was the leading cause of death for persons 25 to 64—*Why?*
- Motor vehicle crashes were the leading cause of death for persons ages 5 to 24
- Assaults were the leading cause of death for children ages 0 to 4

# Brain Injury by the Numbers

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## Among non-fatal TBI-related injuries in 2014:

- Rates of ED visits highest for those 75 and older and children 0 to 4
- Falls were the leading cause of TBI related ED visits for all but one age group
- Being struck by or against and object was the leading cause of TBI related ED visits for those 15 to 24
- Falls were the leading cause of hospitalization among children 0 to 14 and adults 45 and older
- Motor vehicle crashes were the leading cause of hospitalizations for adolescents and persons 14 to 44 years of age

# Common Physical Challenges after Brain Injury

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Injury-related problem	How it may affect a person functionally
Coordination	Unsteady gait, poor eye-hand coordination, slow or slurred speech, tremors, paralysis
Visual Deficits	Staring or poor eye contact, blurred or double vision, inability to follow an object with their eyes
Additional Physical Challenges	Seizures, deaf or hard of hearing, fatigue

# Common Cognitive Challenges after Brain Injury

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Injury-related problem	How it may affect a person functionally
Memory	Trouble following directions, providing requested information, making appointments
Processing (receptive)	Understanding what is being said and reading
Processing (expressive)	Trouble putting thoughts into words — tip of the tongue syndrome
Problem solving (related to frontal lobe and temporal tip injury)	Impulsive, easily frustrated, sexually disinhibited, verbally/physically combative, interpersonally inflexible, poorly organized

# Common Behavioral Challenges after Brain Injury

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Injury-related problem	How it may affect a person functionally
Depression	Flat affect, lack of initiation, sadness, irritability
Unawareness	Unable to take social cues from others
Confabulation	“Making up stories”
Perservation	Gets “stuck” on a topic of conversation or physical action
Anxiety	Can exacerbate other cognitive/behavioral problems



# Before we break, are there any questions about anything we have covered so far?

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# Break Time! Take 10 minutes to stretch etc.

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# Reduced or NO Awareness of the functional implications of injury imposed barriers

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For example, the injury has left the person with difficulty moving the right side of their body, they drag their right foot and their fingers can't grasp objects. Despite what seems to be an obvious disability, they insist they can drive without any accommodations or modifications to their car.

# Levels of Awareness

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- **Intellectual Awareness:** “My memory is so bad” but can’t link that awareness to using such strategies as keeping a calendar so appointment aren’t missed
- **Emergent Awareness:** Individual is able to recognize a problem when it is actually happening “Darn it, I knew I should have taken a picture of the parking space number” (as they are wandering around the parking garage)

# Levels of Awareness

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- **Anticipatory Awareness:** individual is able to anticipate a problem will occur and plan for the use of a particular strategy or compensation that will reduce the chances that a problem will occur, e.g., keep and refer to a calendar, take a picture of the parking space number and/or park in the same general area each time they go to the mall

# There are other clues that may indicate a person may be living with a history of brain injury

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- You may observe scars on an individual's forehead, neck, face
- The individual is unsteady on their feet, limps or drags one foot while walking, may use a cane, walker or wheelchair
- Speech is slurred
- Individual is wearing an eye patch, or they have what looks like a diamond cut lens in one side of their glasses
- The individual denies problems or challenges that are clear to others
- Individual seems to have difficulty making eye contact or looks like they are not paying attention to you

# Common Challenges after TBI

## Imagine How You Might Feel if...

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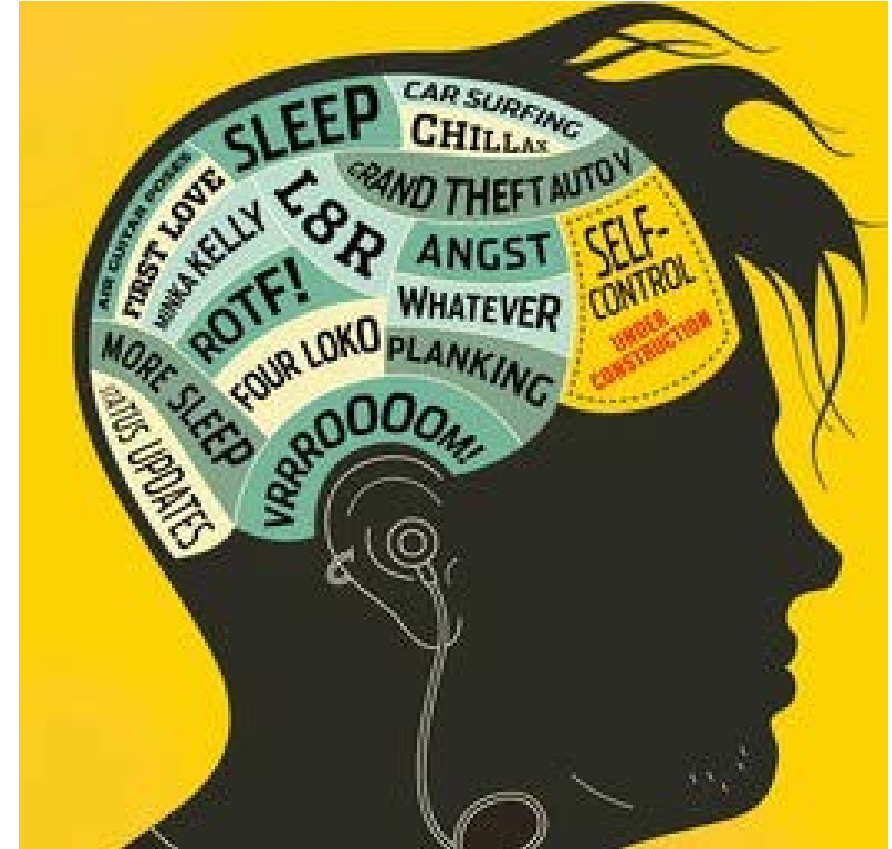
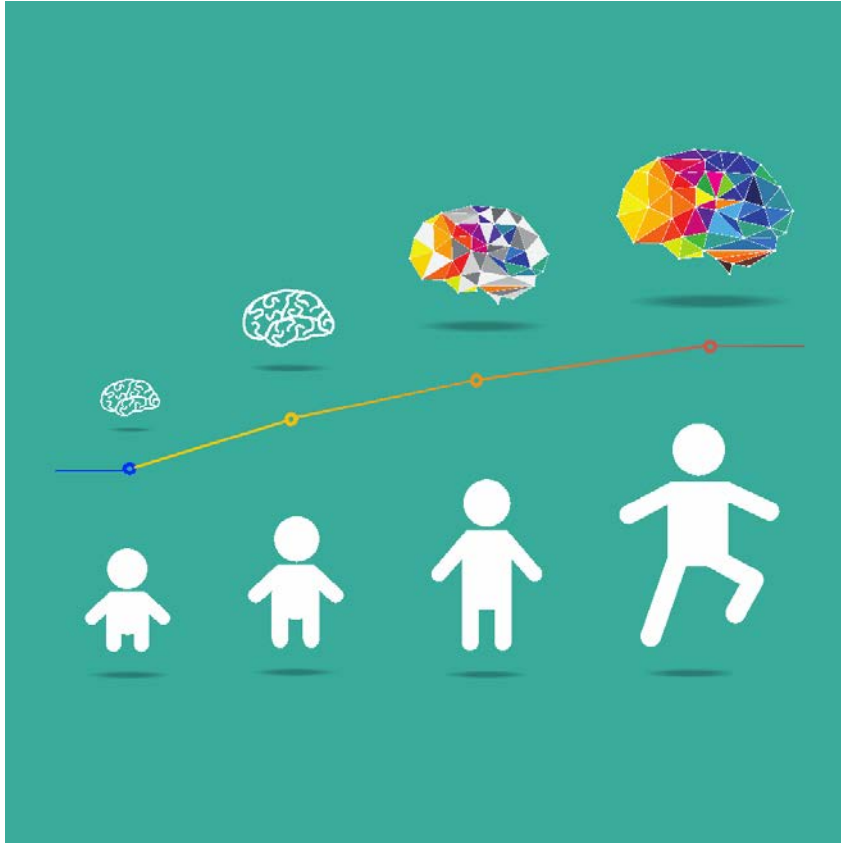
- You have no trouble remembering your childhood, but you can't remember; the last paragraph of that book you are trying to read, the conversation in the grocery store with your neighbor....only 5 minutes ago!
- You know what you want to say, but you can't pull the words together, and by the time you do, the moment has passed (conversation has moved on)
- Feel sad, depressed, irritable and/or more anxious more than usual
- The littlest thing makes so you angry you feel like screaming or throwing something (and when you are tired and frustrated, you do and your family walks on eggshells around you)

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**Next week we will explore childhood brain injury and subsequent behavioral health challenges and consequences in depth. Today we set the stage for that discussion...**



# Brain Injury: *Growing* into Brain Injury ...



# **“Consequences are particularly related to impulsivity and self-regulation”**

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John Corrigan Ph.D.

Remarks at the September 2018 National Association of State Head Injury Administrators conference, Des Moines Iowa, regarding the consequences of childhood brain injury.

# Brain Injury... What comes next?

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After an individual sustains a brain injury there are many factors that play into where that person goes and what happens to them, this includes if the individual and those around them are aware that they may have incurred a TBI (“just got his bell rung”). Some of these factors include:

- Severity
- Geographic location
- Funding/Insurance
- Personal/Family decisions
- Type of injury
- Availability of medical facilities/professionals/etc.

# So you survived a brain injury, now what?

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- Depending on many circumstances you may or may not get the necessary rehabilitation/services you require. These services may include:

- ☐ Vocational therapy
- ☐ Cognitive remediation
- ☐ Physical therapy
- ☐ Occupational therapy
- ☐ Transportation/mobility
- ☐ Access to assistive technology
- ☐ Special education
- ☐ Case management

# The reality is...

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## Services:

- ☐ Vocational therapy
- ☐ Cognitive remediation
- ☐ Physical therapy
- ☐ Occupational therapy
- ☐ Transportation/mobility
- ☐ Access to assistive technology
- ☐ Special Education
- ☐ Case Management

## Barriers:

- ☐ Funding/Insurance
- ☐ Regulations
- ☐ Willingness to ask for/seek help
- ☐ Limitations
- ☐ **Availability**
- ☐ **Awareness**

# Who works with individuals with brain injuries?

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- Physical Therapists
- Occupational Therapists
- Psychologists, Psychiatrists, Therapists
- Vocational Counselors
- Doctors, Nurses, and other Medical Professionals
- Teachers
- Probation and Parole officers
- Social Workers
- Police Officers
- Judges
- Crisis response professionals
- Prosecutors
- Addiction and Mental Health professionals

And...

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*Peer  
Specialists!!!*

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# **The Take Away — Never Say Never!**

**Even those many years post injury can benefit from brain-injury informed support and treatment!**



# Back to School...

One individual's return to "the real world" after a Traumatic Brain Injury (TBI)



## INDEX

Commentary.....4  
Classified.....5  
Comics/Crossword/Horoscope.....6

## WEATHER

Today: Sunny/low 80s  
Tonight: Clear/50s  
Tomorrow: Sunny/mid 70s

89<sup>th</sup> YEAR

MONDAY, SEPTEMBER 28, 1998

NO. 20

# The Diamondback

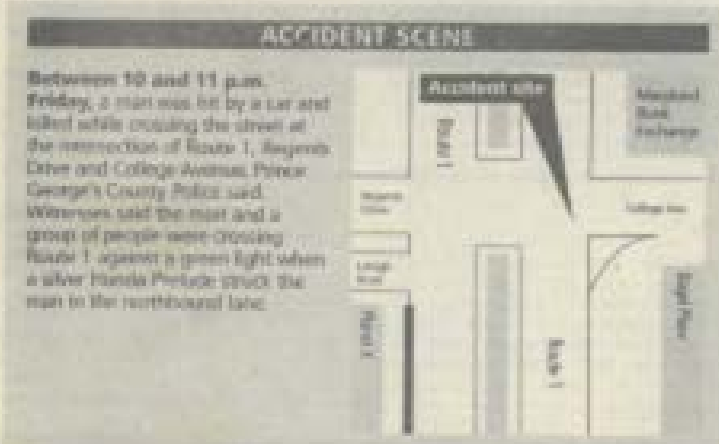
YOUR INDEPENDENT STUDENT NEWSPAPER ♦ UNIVERSITY OF MARYLAND, COLLEGE PARK

## SPORTS

The unranked Terrapin men's soccer team grabs a 3-2 overtime victory against No. 1 Duke at Ludwig Field.  
Page 8



# Man is killed crossing Route 1



## Accident: Witnesses say the victim and a group of people crossed the street against a green light.

By LISA PERRY  
Diamondback staff writer

A man was killed Friday night when a silver Honda Prelude traveling north on Route 1 struck him between 10 and 11 p.m., said Prince George's County Police spokesman Cpt. Diane Richardson. Witnesses said the victim was crossing Route 1 against a green light with a group of men from near Planet X to the area in front of the Bagel Place. Richardson said there was no

official police report on the accident yesterday afternoon, but did confirm the victim had died. She did not know if the man was a student. The Prince George's County Police Collision Analysis Unit is handling the investigation. No one from that unit could be reached for comment. "If we have a serious accident where we suspect someone may die, we call in the unit," Lt. Ed Burke said Friday night. "It's not handled by a regular beat officer."

Jamie King-Morris, a freshman

chemistry major at Prince George's Community College, was sitting on the stone wall near Planet X when the accident occurred.

"I will never get that sound out of my head," she said. "It sounded like two cars hitting each other."

King-Morris said she heard the scream of brakes before the impact. She said the driver of the vehicle then got out of the car, started screaming for help and waving his hands, then yelled for someone to call 911.

A Terrapin Station bartender

who saw the incident called 911 immediately.

George DeGennaro, a Terrapin Station bartender who was working the bar's outside door when the accident happened, said he went over to where the victim lay after he was hit.

"There was blood coming out of his mouth, his face ... there was blood everywhere," DeGennaro said.

Another Terrapin Station employee said he heard one of the people the

Please See ACCIDENT, Page 2

## Accident: Man is killed while crossing Route 1

Continued from Page 1

victim was crossing the intersection with say, "Oh my god! ... He just got hit," then the group ran away from the scene. He said the car that struck the man seemed to be traveling the same speed as the rest of traffic.

Witnesses said an ambulance and police arrived within minutes after the incident.

King-Morris and Shilo Lillis, a junior at Greenbelt's Eleanor Roosevelt High School who also saw the incident, said "There was a lot of commotion, a lot of fire

trucks."

"It looked like he [the victim] saw the car coming at the last minute, and by that time, he couldn't really do anything," said Mike Samuels, a sophomore undecided major at Montgomery College who was sitting outside the

Bagel Place when the accident happened. "It looked like his left leg was pretty much just hanging there when he was on the ground."

Police closed off the surrounding areas with flares and police tape.

## INDEX

Commentary .....	4
Classified .....	5
Comics/Crossword/Horoscope .....	6

## WEATHER

Today: Sunny/high 70s

Tonight: Cloudy/low 60s

Tomorrow: Showers/mid 70s

89<sup>TH</sup> YEAR

TUESDAY, SEPTEMBER 29, 1998

NO. 21

# The Diamondback

YOUR INDEPENDENT STUDENT NEWSPAPER ♦ UNIVERSITY OF MARYLAND, COLLEGE PARK

## SPORTS

The Terrapin volleyball team defeats American, 3-0, last night at Ritchie Coliseum. Page 9

# Student struck on Rt. 1 not dead

## Accident: A sophomore is in critical condition with head injuries.

By DANIELLE NEWMAN

Diamondback staff writer

The campus student who was hit by a car Friday night on Route 1 is not dead, contrary to information released Sunday by Prince George's County Police, said Cpl. Steven Markley.

Martin Kerrigan, an 18-year-old sophomore letters and sciences major from New Jersey, was in critical condition last night at Prince George's Hospital Center, a hospital employee said over the telephone.

Markley said the man was

crossing at Route 1 and College Avenue against a green light at 10:30 p.m. A car in the left northbound lane braked to avoid hitting Kerrigan, and a silver Honda Prelude swerved to the right lane, where there were no cars, to avoid hitting the first car.

The Honda hit Kerrigan in the right northbound lane traveling about 40 miles per hour, Markley said. Kerrigan sustained serious head injuries from the accident after colliding with the Honda's hood and windshield.

The driver of the Honda, James Bochnack, was charged with violations not related to the accident, Markley said, including driving with a suspended license and registration.

Markley said the driver was not under the influence of alcohol and has no campus affiliation. Markley did not know if Kerrigan had been drinking.

Witnesses saw Kerrigan and a group of people walking across Route 1 toward the Bagel Place.

Janie King-Morris, a Prince George's County Community

College student who saw the accident, said she heard the screech of brakes before the car hit Kerrigan.

She said the driver of the Honda got out of the car after he hit Kerrigan, began screaming and waving his hands and yelled for someone to call 911.

Witnesses said the ambulance arrived within minutes and took Kerrigan to the hospital.

George DeGennaro, a Terrapin Station bouncer who was working the bar's outside door when the accident happened, said he went over to where the

victim lay after he was hit.

"There was blood coming out of his mouth, his face ... there was blood everywhere," DeGennaro said.

Members of the Kappa Sigma fraternity, where Kerrigan is a boarder, said although they didn't get a chance to "really know Marty," their prayers are with him.

"We're all extremely sad about this," said Mike Margolius, an acquaintance of Kerrigan and Kappa Sigma president. "We hope everything works out for the best."

**PHOTO**  
Sophomore letters and sciences major Martin Kerrigan was hit by a car Friday night on Route 1.

**PHOTO** A silver Honda Prelude hit Kerrigan in the right northbound lane of Route 1 as he crossed toward the Bagel Place.

**PHOTO** Police said alcohol was not a factor and did not charge the driver with anything related to the accident.

**PHOTO** Kerrigan was in critical condition last night at the Prince George's Hospital Center.

# Return to School

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- Returned to college 4 months following TBI
- 2 months post in patient hospitalization
- Started off by taking 1 class at the local community college
- Followed that semester by taking a class over the summer
- The following fall, 11 months after injury, enrolled full time in school
- Pride/Ego played a huge role
- Difficulties with memory were a huge challenge
- Struggles were just as much, if not more, from **adjusting to life with a brain injury** as they were being a student with a brain injury!

# Struggles

- Thinking I could do school/life the way I always had and still get the same results
- Memory
- Trying to establish a new identity
- Learning who the “new you” is
- Coming to terms with the loss of old life
- Partying like I had prior to my injury
  - Substance abuse
  - Multiple arrests, legal trouble



# What happened

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- Life was a mess and hit “rock bottom”
- Consequences included legal system and substance abuse rehabilitation
- Admitting when I needed help and then reaching out and getting that help
- Long term sobriety has included 12 step program

# Recommendations for Professionals/Survivors (people living with brain injury as well as their family members and supporters)

- Help individuals educate others about brain injury, specifically about **THEIR** brain injury and how it affects them
- Encourage use disability support services, even if it just to know that they are there and to see what they can offer
- Likelihood of additional brain injuries rises exponentially
- Make learning/treatment as accessible as possible
- Find a brain injury support group, it is nice to know that you are not alone in this journey and that there are others facing similar things
- Know strengths! Know weaknesses! Know limits!

# Accept the challenge!



# Breakout Rooms- Teams develop questions to challenge each other's Brain Injury knowledge!

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Each team will come up with one “closed answer question,” for example:

“The sky is\_\_\_\_\_ when the sun is shining.” (correct answer is “blue”)

And one multiple choice question, for example:

“The Maryland State bird is the:

- a) Blue Bird
- b) Raven
- c) Oriole

(correct answer is “Oriole”)

**CHALLENGE  
ACCEPTED**

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Teams come back from the breakout rooms and will try to stump each other with the questions they have developed.

# Wrap Up

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- Questions
- Comments
- Any suggestions for us regarding a topic you would like us to cover related to brain injury in upcoming sessions?

# Part II: Who is Affected By Brain Injury

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Next week we will look at:

What are the systems and services where people living with brain injury are over represented? Here we will look at the implications for individuals who are engaged in mental health and addiction treatment programs, criminal justice and domestic violence and homeless systems who are living with a co-occurring brain injury. The link between suicide and brain injury will also be explored.

# Thank you!!!

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2020