

A Guide

To Working with Individuals with Brain Injury

Brain injury can be difficult to diagnose, but knowing how to identify and work with an individual who has sustained a brain injury can lead to a more productive relationship with them. This tip sheet is intended to offer information on screening for possible brain injury and provide strategies for engaging an individual in an appropriate plan of care.

What is a Brain Injury?

A brain injury is acquired through traumatic or non-traumatic results. A traumatic brain injury (TBI) is an alteration in brain function, caused by an external force, including falls. A non-traumatic brain injury is the result of an internal source, as from a stroke.

Symptoms

- Physical: Including Seizures, Headaches, Fatigue, Weakness & Paralysis
- Sensory: Including Impaired Coordination, Speech, Vision & Balance
- Cognitive: Including Impaired Reasoning or Memory, Slow Thought Process, Difficulty Making Decisions, Reading & Writing
- Social: Including Agitation, Impulsiveness, Emotional Instability & Lack of Initiative

Causes

- Motor Vehicle Crashes
- Assault/Violence
- Stroke/Aneurysm
- Exposure to Toxic Substances
- Sports/Recreation Accidents
- Shaken Baby Syndrome
- Lack of Oxygen (Anoxia)
- Falls
- Brain Tumor
- Infection

A Partnership Approach

After an individual has experienced brain injury, he or she may feel a loss of control in many aspects of life. They may feel inferior or unequal as a partner in the roles previously held. A partnership approach can be an effective way to negotiate solutions to thinking and behavior problems. One of the key steps in this process is to establish and maintain open communication. You can do this by:

- Discussing Performance and Expectations
- Providing Gentle, Realistic Comments About Behavior
- Identifying Success and Addressing Areas of Concern Directly and Without Delay

Screening Questions

If you know or suspect that someone has sustained a brain injury, use the following questions to determine if additional assistance is needed:

1. Was your head hit?
2. Were you choked, suffocated, shaken or strangled?
3. Did you lose consciousness or feel dazed or confused?
4. Are you having trouble concentrating, organizing or remembering things?
5. Are you experiencing emotional changes such as irritability, sadness or lack of motivation?
6. Are you experiencing headaches, vision and/or hearing problems or loss of balance?

For information on personalized information and referral assistance for clients and additional technical assistance for professionals including work with veterans, contact the Brain Injury Alliance of Nebraska at 402-423-2463 or peggy@biane.org. www.biane.org

Brain Injury Deficit Management Strategies

DEFICIT	PROBLEMS ARISING	MANAGEMENT STRATEGIES
	The person may...	You can...
Speed of Information Processing	<ul style="list-style-type: none"> • take longer to complete tasks • take longer to answer questions • be unable to keep track of lengthy conversations 	<ul style="list-style-type: none"> • make allowances and give the person extra time • present only one thing at a time • not interrupt or answer for the person • verify that the person is keeping up with the conversation
Fatigue	<ul style="list-style-type: none"> • tire quickly (physically & mentally) • have reduced tolerance/ability to cope • become irritable • have other problems exacerbated 	<ul style="list-style-type: none"> • encourage the person to take breaks • schedule more demanding or essential tasks when the person is at their best
Mental Tracking	<ul style="list-style-type: none"> • have difficulty following instructions • lose track of what they are thinking or doing • get information confused 	<ul style="list-style-type: none"> • keep activities short and uncomplicated • ask specific or direct questions • provide reminders of the next step or task
Memory	<ul style="list-style-type: none"> • have difficulty learning new things • be forgetful • lose items • have difficulty recalling what they've learned 	<ul style="list-style-type: none"> • repeat information as necessary • encourage use of external memory aids (journals, calendars, time tables, etc.) • maintain 'special places' for belongings • give reminders and prompts to assist recall
Attention	<ul style="list-style-type: none"> • appear not to listen and miss details • forget what people have said • have difficulties concentrating • be unable to cope with more than one thing at a time • be easily distracted • change the subject often or get bored 	<ul style="list-style-type: none"> • shorten instructions/activities so they can be completed • write down instructions accurately and in a way that can be easily understood later • encourage the person to engage in only one activity at a time • reduce external distractions • bring the person's focus back to current task
Problem Solving	<ul style="list-style-type: none"> • have difficulty working out solutions to problems • be unable to generate new ideas • have a disordered approach to problem solving 	<ul style="list-style-type: none"> • help identify an achievable outcome for the task; ensure there is a purpose • avoid giving open-ended tasks • assist the person to break a task down into smaller components (one thing at a time) • reduce the demands made upon the person
Communication	<ul style="list-style-type: none"> • have trouble initiating conversation • have trouble understanding non-verbal communication/body language; take statements literally 	<ul style="list-style-type: none"> • encourage participation by asking "What do you think about that?"; use open-ended statements such as "Tell me about..." • give verbal cues to communicate intent of conversation • use simple and direct language and avoid talking in abstract terms; avoid sarcasm
Planning & Organizing	<ul style="list-style-type: none"> • have difficulty preparing for a task • be unable to work out the steps involved • have problems with organizing thoughts and explaining things to others 	<ul style="list-style-type: none"> • provide a written structure or guideline outlining the steps in order • help develop a timetable (weekly, daily) to establish a routine of activities • encourage the person to take time/think before they speak
Reasoning	<ul style="list-style-type: none"> • have a rigid and concrete thinking style; take statements literally • are resistant to change • have simplistic understanding of emotions • show poor judgment and poor decision making skills 	<ul style="list-style-type: none"> • explain changes in routine in advance, giving reasons • avoid using emotional undertones • provide real-life examples when offering explanations
Self-Monitoring	<ul style="list-style-type: none"> • show poor adherence to rules • not realize they have made errors • 'hog' conversations; be verbose; keep talking when others are not interested • have a lower tolerance for frustrating situations 	<ul style="list-style-type: none"> • provide feedback promptly and in a respectful manner when errors occur • create and use signals to let them know when they are talking too much • encourage taking turns in conversations • gently redirect behavior to a different topic or activity