

Traumatic Brain Injury (TBI)

Frequently Asked Questions - FAQ#5

For Caregivers and Professionals:

Practical Approaches to Dealing with Common Behavioral Issues Following a TBI

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Working with and caring for an individual with Traumatic Brain Injury (TBI) can be very challenging for family, caregivers and professionals. Although every brain injury differs in severity and outcomes are difficult to predict, many individuals with TBI experience common behavioral and emotional issues as a result of their injury. They may suffer diminished skills and capacity, loss of friends and social outlets and role changes within the family. Adapting to life-changing losses often leads to frustration and sadness.

Executive function impairment (caused by damage to the frontal and prefrontal regions of the brain) can cause a wide variety of cognitive difficulties including problems with concentration, organizational skills, planning, reading social cues, and understanding his or her surroundings in a meaningful way. Individuals with executive function impairment often have difficulty tolerating frustration and are easily over stimulated. They may become rigid in their schedules and interactions with others. This publication offers a number of suggestions to assist caregivers, professionals and, ultimately, people with TBI, in improving their social interactions and setting up an environment and strategies that promote healing and wellbeing.

General Approaches to Dealing with Problem Behaviors

Cognitive Therapy may be recommended to improve executive function skills. Individuals are taught problem solving, improved social skills, and other higher level activities. Caregivers can be trained to provide support and structure to work through issues with family members or patients, and can model effective skills on a regular basis.

Psychotherapy with a therapist trained and experienced in brain injury-related issues gives the individual an opportunity to discuss their feelings about the changes in their life, and identify some coping strategies. The therapy may be more directive than a usual therapeutic relationship, and may need to provide extra structure and feedback to keep discussions focused and goal oriented.

Behavioral Analysis can help to objectively define challenging behaviors, come up with interventions to decrease them, and promote positive alternatives to meet the individual's needs.

Medication may be prescribed to help to increase cognitive abilities and reduce anxiety, aggression, irritability and other behaviors that interfere with the person's capacity for positive social interaction. The prescribing doctor should have experience in working with patients with TBI.



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Observing/Treating Behaviors Related to Brain Injuries

A person with TBI may need extra support and structure to help them focus on their strengths and compensate for deficits. To achieve optimum results, caregivers, health professionals and social or case workers need to communicate on a regular basis, understand each other's language and use a team approach in working with the individual.

- Caregivers, therapists and the individual with TBI should clearly define and list all behaviors they want to decrease in severity or frequency. Identify behaviors that are priorities and establish specific, consistent plans to treat them. Document occurrences of target behavior and monitor treatment strategies for effectiveness. All efforts to move toward a positive, targeted behavior must be reinforced. Behaviors that are not being formally addressed should be handled in a neutral or non-threatening manner.
- It's important to notice what is going on just before or during the time a negative behavior is manifested. The individual may be attempting to communicate a need or desire, but in an inappropriate manner. Factors in the environment (e.g. noise, confusion, time of day) may be triggering the behavior. Being aware of such triggers can help the caregiver develop strategies to avoid the behavior in the future. Structuring a task more carefully, limiting time spent on a frustrating activity, and reviewing expectations before going out in public may help to reduce stress that triggers unwanted behavior. Role playing positive interactions before a trip into the community may be beneficial. Anticipate what problems could occur, and plan actions for dealing with things that could go wrong.
- Since many behavioral problems are related to the inability to plan, organize and solve problems, it's helpful to teach alternative behaviors that meet the needs of the individual with TBI, and are acceptable within the environment. Be patient; it takes time to teach and learn new skills. Keep approaches simple and agree upon gestures or facial expressions to serve as reminders. For example, the individual with TBI is taking a long time in conversation with a busy clerk, not picking up on the social cue. Agree ahead of time on a gesture you can make to discretely remind the individual of the expected behavior. Gestures can be more effective and less threatening than verbal prompts.
- Alternative behaviors must be simple and effective. If the person is acting out to stop treatment or an activity, teach the person to ask for a break instead of acting out, and give the break right away. You can increase time spent on that activity in the future. Provide reinforcement to the individual for using a more positive approach. You can set targets with the individual for the amount of time to be spent on a task before the person takes a break, and increase these targets over time.
- Individuals with TBI sometimes perseverate on the same topics of conversation many times a day. The topic should be given a brief period of attention, and then enthusiastically redirected to another conversation or activity. If he or she persists, you may want to schedule a specific time once or twice a day to discuss the topic. Remind the individual of the times when the topic is scheduled for discussion and redirect or ignore further statements about the issue.

Setting up the Environment to Increase Positive Relationships

Home/school/therapeutic environments should be structured, consistent, and predictable with limited distractions. Schedules, day planners, journals and check lists can be used to assist with initiation and completion of daily tasks. The individual should be involved in making decisions and setting schedules, with many opportunities to make choices and feel that he or she is an integral participant in the planning of day-to-day activities.

- Break down tasks into manageable small steps when introducing something new. Provide the necessary supports to be successful and then decrease assistance and prompts over time. Start with tasks that are easily mastered to build positive momentum.
- Plan in advance for changes to the routine whenever possible. Remind the individual of the schedule change shortly before it happens. Changes in routine can be difficult for individuals with TBI and are best handled delicately.
- Use statements of encouragement and positive reinforcement on a routine basis, rather than reminders of negative behavior. Provide rewards and positive verbal statements to promote desired behaviors frequently at first, and then spaced further apart as behavior consistently improves.
- Negative behavior, if not targeted as a priority, should be ignored or responded to in a neutral manner with the caregiver redirecting the conversation or activity as soon as possible. Not responding may be difficult, but it is an effective means of reducing unwanted behavior.
- Humor and joy should be used regularly in interactions, but avoid sarcasm if it tends to be misinterpreted.
- Don't take aggressive, irritable or inappropriate behavior personally. Remember that most negative behavior is related to the injury either directly or indirectly, and not due to character flaws or self centered preoccupations.
- When dealing with negative or impulsive behavior, don't respond immediately. Give the person time to try a different approach and reinforce any attempt on his or her part. If the behavior continues, the person may be reminded that he or she needs to try a different approach if you are to continue discussing the issue.
- Caregivers should attempt to remain calm at all times. If necessary, take some time away from the situation. When behavior improves, you can remind the individual that he or she would get a better response with a different approach. Model a more acceptable approach, if needed.
- Make use of "I" statements to decrease defensive responses. For instance, if the person is raising his or her voice, respond by saying, "I want to hear what you have to say but I have a hard time following you when you raise your voice." Use gestures to bring the tone down (e.g. lowering your hands in front of you). Continue when the person lowers his or her voice and provide praise for doing this.
- Be respectful and treat the person according to their age even if he or she is not acting that way.
- Start out each day as a new one. Don't bring up "old stuff". If a particular activity does not go well, don't get discouraged. After some reflection, or with assistance from another caregiver or professional, you may come up with a strategy to handle the situation with a better outcome next time. Limit time spent on activities or out in the community, and have a plan to escape from situations that are not working out.

Additional Strategies for Social Interactions

Long events or activities can trigger possible conflicts that may be avoided or diminished with some preparation. When planning to include the individual with TBI in a lengthy event, try to get a sense of how long he or she will be able to participate in the event before becoming impatient or bored. Based upon this information, plan to take a short walk, a ride, or run an errand to provide a break from the ongoing activity.

- If food is involved, and will not be served at the usual time in his or her schedule, discuss this beforehand and make suggestions for snacks and/or liquids that can be brought along as supplements.
- Try to follow the schedule for arrival and departure as planned. Check periodically to see that the person is still involved socially.
- Bring things to keep the person occupied (e.g. a quiet handheld game).
- If the individual has limited conversational skills, discuss appropriate current events or topics of interest beforehand. If they drift from the conversation, bring them back into the discussion at their level of competence.
- Keep initial events as brief as possible, and increase the amount of time based upon the success of previous social interactions.
- Offer rewards for events that turn out well (e.g. pick up a movie on the way home).

Individuals with TBI often lack the ability to read social cues. They may interrupt when someone is clearly busy, interrupt conversations, or persist in flirting when they've been given clear signals that they should stop. They may need reminders to look for certain feedback from others before starting or continuing conversations. Role playing may be practiced at a time when the individual is relaxed.

After interactions, give reinforcement in a neutral or supportive manner. Discuss the importance of responding to social cues in the development of friendships.

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