

FACT SHEET:



ABIOS

Acquired Brain Injury Outreach Service

Category:
Behaviour

Audience:
Professional

**For more information
contact the Acquired
Brain Injury Outreach
Service (ABIOS)**

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ABIOS Neuropsychologist

Frequently Asked Questions About Behaviour

Introduction

The brain is involved in all aspects of personality and control of behaviour so any brain injury can cause ongoing changes in personality, mood and behaviour.

For some people, changes in personality and behaviour may be the only sign of a severe brain injury.



Common changes in behaviour include:

- Inflexibility and rigid thinking or behaviour
- Disinhibited or impulsive behaviour
- Difficulty initiating or starting everyday activities
- Irritability, anger and low frustration tolerance
- Lack of insight and reduced self-awareness of problems
- Lack of empathy or feeling for others
- Self-centredness or egocentricity

Not everyone who has had a brain injury will have behavioural changes, but severe brain injury can cause all of these changes.

Why does behaviour change?

Damage to some areas of the brain (frontal lobes, temporal lobes and the limbic system) can result in changes to the person's ability to be aware of, to control or to change their behaviour. This is because these areas are key for control of personality and behaviour.

What can I do about problems with behaviour ?

The best thing you can do is to get a good understanding of the person's brain injury, and get ideas about the strategies that will help them to manage their behaviour.

Ask for help from others who know about the brain injury and behaviour changes – this might include the person with ABI, family, Therapists, Psychiatrists, Psychologists or Clinical Neuropsychologists, or other brain injury specialists.

What are some strategies I can use to manage behaviour?

There are some strategies that will help manage, prevent and reduce challenging behaviour.

These include the following:

- Have a routine and provide as much structure as possible
- Have good communication – clear, direct, often – talk about issues, including behaviour and what to do about it
- Don't be vague – tell the person what behaviour you like/don't like
- Have clear limits/rules about behaviour – what you expect, what is appropriate or inappropriate
- Give the person feedback and information about their behaviour
- Be consistent in the way you manage behaviour
- Be positive – notice and encourage appropriate behaviour – people need at least twice as much positive feedback
- Take into account changes in thinking, understanding or memory
- Use redirection, distraction, and diversion to shift behaviour.

- Use strategies that defuse behaviour and help a person calm down – talk it through, change the topic, change the task.
- Use your sense of humour to defuse things and reduce tension and stress
- Get support for yourself and for the person with the brain injury.



How do I not take it personally when the person is irritable, uncooperative or difficult to get along with?

Try to not take the behaviour personally, even though at times you may feel frustrated, hurt, angry, upset or fearful.

Behaviours of concern can occur because of the brain injury and damage to particular parts of the brain and the person may always have some difficulty with awareness, control, and management of their behaviour.

The behaviour is not just directed at you – it would happen to anyone providing care (family, friends, or paid staff). It is important to tell yourself that these behaviours of concern may be due to the person's brain injury and not about you.

However, it is ok to feel the way that you do – coping with behaviour of concern can be hard.

Try to ignore as much unwanted behaviour as you can. Don't ignore the person – just the behaviour.

How can I manage stress?

- Get support from people around you - talk about ways to manage behaviour and cope better – talk to friends, family, or talk to a Counsellor or to a brain injury specialist.
- It may be helpful to talk about ideas to make things work better (try to keep it positive and focus on what you can do, not what you can't).
- Make sure you take the time to have regular breaks. It is important to make the time for your own relaxation and rest, so you have enough physical and emotional energy.

- If you are a carer or family member, keep in touch with your friends and other family, and keep up with your own hobbies and interests and take breaks.
- Find out about more about brain injury so you can understand any difficulties that the person may have.

Is there a cure for behaviour of concern?

There are no easy solutions for behaviour of concern after brain injury. Behaviour is caused by many complex factors (including the brain injury) and so a person with brain injury may have long term behavioural concerns. Intervention and management may help to improve support for the person, for family, and to assist in decreasing behaviour or in managing behaviour more effectively.

Be realistic:

Not all behaviour can be changed or prevented after a brain injury. There is no simple “cure” or “fix” for behaviour changes after a brain injury. A person may have a permanent “behavioural disability” because of the acquired brain injury.

Set goals that can be easily achieved, considering:

- the person
- the brain injury
- the resources and support available
- the environment the person is in
- an assessment of what changes are possible

Education and information about brain injury is available locally from:

Acquired Brain Injury Outreach Service (ABIOS) Ph: (07) 3176 9506

Synapse Ph: (07) 3137 7400

Brain Tumour Support—Cancer Council Queensland Ph: 131120

Carers Queensland Ph: 1800 242 636

Stroke Association of Queensland Ph: (07) 3844 8699

Resources

See other Acquired Brain Injury Outreach Service (ABIOS) Information sheets at <http://www.health.qld.gov.au/abios/>



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