

FACT SHEET:



ABIOS

Acquired Brain Injury Outreach Service

Category:
Behaviour

Audience:
Person with an ABI

Cognitive and Behavioural Changes and Strategies



Introduction

After acquired brain injury, a person may have a many cognitive and behavioural changes that affect their ability to study, work, drive, and live independently and their social and family relationships. These are some simple and practical strategies to compensate for some of these changes in everyday life.

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

PH: (07) 3176 9506


Email: abios@health.qld.gov.au


Address: PO Box 6053, Buranda 4102


©The State of Queensland
(Queensland Health) 2021



Reviewed Feb 2021

For review Feb 2022
ABIOS Neuropsychologist

Cognitive or Behavioural change	What this means	Strategies
Memory and Learning 	<ul style="list-style-type: none">• Difficulty remembering ongoing events, information, instructions, misplacing objects, forgetting names, details of conversation, forget appointments• Difficulty learning new tasks or information• Difficulty learning new behaviour or skills• Memory impairments may be short term (recent information and events) or long term (for information or events over the lifetime)	<ul style="list-style-type: none">• Use memory aids wherever possible, such as a diary, calendar, notepads, reminders, timers or alarms• Try to make lists and keep them practical and easy to find• Keep information and important items (keys, wallet, address book etc) in the same place• Use prompts and reminders to help memory – checklists, signs, another person• Repeat information, especially instructions or new information

Cognitive or Behavioural change	What this means	Strategies
Planning and organisation	<ul style="list-style-type: none"> • May have difficulty planning ahead for activities • May be disorganised • May not think ahead or anticipate consequences of actions or choices 	<ul style="list-style-type: none"> • Structure and routine will help in organising daily activities & tasks • Use aids such as a diary, notebook, or lists to help plan activities and, appointments, and to remind about birthdays, social events • Set aside planning time each day or weekly • Make sure instructions are simple • Break down big tasks into small steps • Checklists are good for keeping on track
Reaction times and information processing	<ul style="list-style-type: none"> • May take longer to take in information, to think about things, make decisions, or to act • May have trouble in group activities or conversations e.g. keeping up 	<ul style="list-style-type: none"> • Allow extra time to process and understand new information or to finish a task • Plan for extra time for activities and tasks and set realistic goals • Allow more “thinking” time • Don’t rush or overload yourself
Initiation and Completing Activities	<ul style="list-style-type: none"> • Difficulty getting started with a task or activity • Difficulty with motivation and getting going with tasks and activities • May have difficulty following through once an activity is started at each new step or stage 	<ul style="list-style-type: none"> • Structure and routine will help in getting activities done • Use prompts to start and continue activities e.g. alarm clocks, mobile phones, visual reminders • Find a range of activities that are interesting to increase your motivation and interest • Help from someone else may help to get started and keep involved in an activity i.e. it’s more fun to do things with others than on your own
Awareness or insight about changes as the result of brain injury	<ul style="list-style-type: none"> • May not be aware of problems • May have trouble understanding changes and what to do about them • May not agree with others about impairments • May not be aware of other’s concerns 	<ul style="list-style-type: none"> • Find out information about brain injury, and how your brain injury has affected you • Ask for honest feedback from people you trust e.g. “Do you think I lose my temper more now ...?” • Talk to your rehabilitation coordinator or other professionals about strategies and idea

Cognitive or Behavioural change	What this means	Strategies
Thinking and Reasoning	<ul style="list-style-type: none"> • Inability to generate ideas or thoughts • Difficulty doing or thinking about something from more than one point of view • Trouble shifting ideas or beliefs • Gets “stuck” on ideas, topics, or behaviour • Difficulty changing behaviour • May have trouble with comprehension and reasoning 	<ul style="list-style-type: none"> • Start with very small changes or compromises • Be prepared to think about or try a different idea or approach • Write down lots of different ideas and choices • Get suggestions from other people you trust and discuss options and benefits • Weigh up the “pros” and “cons” ideas
Ability to control and manage behaviour	<ul style="list-style-type: none"> • May act on impulse, before thinking through an idea or action • May not think about the consequences e.g. spending all money and having none left for bills • Saying things without thinking – may seem rude or abrupt or tactless to others • May express ideas or needs in inappropriate way, with inappropriate person or in the wrong situation 	<ul style="list-style-type: none"> • Use the technique “STOP – THINK – THEN DO” • Try to think ahead and plan for situations e.g. “what should I do when...?” • Ask for and think about feedback from other people • Think about what the “social rules” are in certain situations and what is “ok” or “not ok” • Watch for signs or cues from other people to judge how you are going
Emotional Changes	<ul style="list-style-type: none"> • Difficulty controlling emotions e.g. inappropriate crying or laughter 	<ul style="list-style-type: none"> • Try to distract yourself by thinking of something else, or change the activity • Encourage other people to ignore some of the laughing or crying until you gain control • Watch for factors such as over-stimulation, stress, and fatigue which can increase likelihood of the behaviour occurring • Distraction or relaxation techniques can help with these emotions but will need practice
Social Awareness and Empathy	<ul style="list-style-type: none"> • May have difficulty with empathy for others • May lack awareness of feelings and needs of others • May be more focussed on own needs • May be impatient and want things done immediately • May be demanding 	<ul style="list-style-type: none"> • Think about how others might feel and what they might want/need in situations • Work on your communication and relationship skills • Plan activities that build social and friendship relationships e.g. keeping in touch, remembering birthdays, asking people how they are going

Cognitive or Behavioural change	What this means	Strategies
<p>Sexuality and Behaviour</p>	<p>Expressing sexual needs and interests in an inappropriate manner or time, or with an inappropriate person</p> <ul style="list-style-type: none"> • Sexual comments or innuendo • Jokes • Inappropriate touching of others • Sexual propositions • Exhibitionism • Masturbation in public 	<ul style="list-style-type: none"> • People will need to give you very clear feedback if your behaviour is not appropriate for the circumstances • Discuss sexuality and any issues with an appropriate person e.g. GP, Psychologist, Social Worker, or with Family Planning • Keep sexuality a private matter
<p>Anger and Temper Control</p> 	<ul style="list-style-type: none"> • Irritability, crankiness • Temper outbursts • Less control of frustration levels and temper • Verbal aggression or physical aggression towards self or others e.g. hitting, kicking, punching, swearing, threats • Property damage 	<ul style="list-style-type: none"> • Try to accept feedback from others – this can be hard, but you might need it • Ask for support and help from other people in improving your ability to manage anger e.g. family, friends, professionals • Look at triggers or causes, for example, do you get irritable when you are tired or have too many things to do at once? • Remove yourself from anger provoking situations until you can calm down, or avoid them where possible • Avoid people who “wind you up” • Avoid drugs and alcohol and they reduce ability to control strong emotions like anger • Remain calm as much as possible – use relaxation and other strategies to help you calm down • Discuss different ways of managing irritability and temper with a professional
<p>Mood</p>	<p>Depression and anxiety can be experienced after a severe disability, and can also result from changes in circumstances e.g. loss of work, loss of independence, changes in relationships.</p> 	<ul style="list-style-type: none"> • Get good support from people around you e.g. family, friends, church etc and they know that support is needed • Find positive and rewarding activities • Link to professionals for specialist help e.g. GP, psychiatrist, psychologist

Cognitive or Behavioural change	What this means	Strategies
Independence	<ul style="list-style-type: none"> • May feel more socially isolated, lonely and or have fewer social relationships • Changes in leisure, social and work activities so less opportunity to see friends and family • May have less contact with friends from before the brain injury 	<ul style="list-style-type: none"> • Maintain links with as wide a range of people and activities as you can • Work on your skills in building relationships with other people • Keep involved in community and leisure interests and activities • Be prepared to join new activities or groups. Sometimes it is good to “give something a go”. • Aim for independence by trying things out with support, and then doing them on your own

Resources

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

