FACT SHEET:



Category: Support for families

Audience: Professionals

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Tips for Working with Families:

Understanding Family Issues after Acquired Brain Injury

Introduction

Acquired brain injury (ABI) can have a significant impact on an individual, but it can also result in changes for all members of a person's family and community. For family members in a close relationship with the person with ABI, there can be a range of changes in roles, responsibilities and relationships.



Understand Each Family

Working with families of a person with an ABI requires awareness of family dynamics, roles and responsibilities, burden of care and carer fatigue.

Taking time to check the care families are providing, who is providing it, what informal and formal supports are in place, and how the family is coping (both as individuals and as a unit) is an important step in working with them.

Respect Knowledge and Skills

- Recognise and respect the knowledge, ability, resources, needs, skills and coping ability of each family member and their relationship with each other and the individual with ABI.
- Recognise and respect a carer's experience and understanding of a person with an ABIs strengths, abilities, impairments and limitations. The carer's close proximity and regular contact allows them to gain an accurate understanding of the problems that a person with ABI may have. They may be the only person with this level of understanding as other do not share the daily reality and burden of care that they do. Others may see the person but for only short periods, infrequently and/or at their best functioning or behaviour. They may not know (or appreciate) the cognitive, behavioural and emotional changes that have occurred.



Ask for Information

Ask for information, for feedback and for family input. Make sure you ask about what has been tried before, how long it was tried, who was involved and whether or not it worked, and why.

Page 1 of 3

Work Collaboratively with Family

- Think of the family as part of a team or partnership. When the person with ABI is comfortable to do so involve family in discussions, planning, and goal setting.
- Ask family members about the level of involvement or participation that they may want or need to have in planning support arrangements or activities.
- Involvement may change over time, so be flexible in expectations.

Involve Family

- You need to ask a person for permission to give information or feedback to family members, or to involve them in decisions and planning.
- Be sensitive in how you discuss this with the person with ABI and their family.
- If the person with ABI has capacity to make their own decisions (about personal matters, accommodation, finance, health etc), and does not want you to involve family, or to provide information to family, you must respect their confidentiality and privacy.

Have clear guidelines

- Establish clear guidelines with the person with ABI and their family about your working role as early as possible. This helps prevents unrealistic expectations of what you can achieve.
- It is essential to have firm, clearly communicated boundaries regarding what you can and cannot do.

Be consistent

- Be consistent in the way you communicate with family and in meeting their expectations.
- If you say you will do something, do it.
- If there is more than one person providing support or care, you need to discuss and agree on what each person will do.
- Work at the family's pace.
- Introduce new ideas or changes slowly.
 It is important to judge how quickly both
 the client and their family can cope with
 change and how much effort and
 energy will be required to make that
 change.
- Try to discuss concerns or worries that the family may have when you are introducing new activities or ideas.

 Try to put into place strategies, solutions or activities that you know are sustainable and practical for the person with ABI and their family. It will be disappointing and discouraging if you set up activities that cannot be sustained by the person with ABI without a lot of support or energy or involvement from family members. Remember also that families are generally there for the longterm. Workers and services may come and go.

Offer Support and Counselling

- Be aware that family members may also be dealing with emotional reactions and issues, including grief, sadness, anger, frustration, anxiety, or depression. This may be the case even many years after an injury has occurred.
- Make sure that family members are aware of support that they can receive (information, counselling, and respite) to help them to cope better.

Don't take family issues personally

- Try not to take it personally if family members are frustrated, angry, critical or difficult to communicate with.
- Try to keep things in perspective, and think about what you can change, and what you cannot.
- It is important to be aware of your own stress in working with individuals with ABI and their families. Working closely with people in their own homes demands good communication, relationship, negotiation, goal-setting and conflict management skills. You need to establish strategies to talk about these issues and your support and skill development needs. You could do this with a supervisor, other workers, or with a counsellor.



Resources for Working with Families

Working with people with acquired brain injury"

Module 12: Working with Families after Traumatic injury: An Introduction An online study module to support those who work with people with an ABI http://www.tbistafftraining.info/selfstudy/Module 12/12.0.html

Working with families following brain injury

https://synapse.org.au/understanding-brain-injury/living-with-brain-injury/

Alfano, D., Neilson, P., & Fink, M. (1994). Sources of stress in family members following head or spinal cord injury. Applied Neuropsychology, 1(1-2), 57-62.

Bowen, C., Yeates, G., & Palmer, S. (2010). *A relational approach to rehabilitation: Thinking about relationships after brain injury*. London, United Kingdom: Karnac Books.

Oddy, M. & Herbert, C. (2003). *Intervention with families following brain injury: Evidence-based practice*. Neuropsychological Rehabilitation, 13, 259-273.

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

Notes:









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