



Helping Students with Brain Injury

Behavioral and personality changes often present the greatest challenges for the student after a brain injury. These changes are seen not only in moderate and severe injuries, but also in mild ones. If a student had any preexisting psychological or emotional problems, it is likely that a brain injury will exacerbate those problems. The same is true for those students with a previous psychiatric history. Special attention and support is crucial during recovery, treatment, and school reentry for these students.

The following are sample strategies you can use. It is important to remember that all brain injuries are unique and that all students have different strengths and weaknesses, therefore different strategies may or may not work depending on the student, the class, and the time of day, among other factors. It is important to remain flexible in trying different strategies until you find one that works for that student, and to always keep in mind the ultimate goal of moving students towards independence. Once you have found a strategy that works use it consistently and share it with others who work with that student.

| Difficulty with... | Strategy/Accommodation | Example |
|---|--|---|
| Reduced self-control (difficulty with frustrating tolerance, regulating mood, disinhibition, impulsivity) | <ul style="list-style-type: none"> ➤ Subtly cue the student as to what is expected ➤ Always be clear and consistent in directions and all communications ➤ Use redirection or refocusing away from the cause of the anger or frustration; shift the student's thinking to another area ➤ Break tasks down into smaller parts to reduce frustration | <ul style="list-style-type: none"> ➤ Dave calls out of turn and has difficulty remaining in his seat. ➤ Nancy is frustrated at not understanding the assignment and knocks over her crayons on the floor. ➤ A student accidentally bumps Sue in the hallway and she yells at the student to watch where they are going. ➤ Dave is frequently sent to the principal's office for getting into fights with classmates. ➤ Dave's teacher instructs the class to raise their hands if they know the answer, making eye contact with Dave when providing this reminder ➤ The teacher read all directions slowly, making eye contact with Nancy. ➤ Nancy is offered other tasks to switch to when the student gets frustrated with one subject. ➤ Nancy is given each part of a test separately on different sheets of paper. |

- Avoid a confrontational approach; that only makes the student more upset
 - Act as a model for controlled behavior
 - Give immediate feedback about positive and negative behaviors
 - Offer alternatives to problems that have been the cause of excessive agitation
 - Encourage ongoing communication among all staff so student has a consistent approach
 - Set clear and concise limits
 - Help student identify a quiet place when breaks are needed
- Ask Sue what she thinks the issue is, rather than telling her.
 - Express to Sue your feelings and how you modified your behavior
 - Immediately following Sue's outburst her teacher pulls her aside to discuss her behavior; Sue's teacher follows up with her social skills teacher also.
 - Discuss with Dave what made him angry and walk through other options for him to problem solve a situation that is making him angry.
 - Sue's teachers, school psychologist and parents have an email chain so that if there is an issue, all can be notified.
 - Dave is consistently reminded of the consequences for fighting with other students.
 - Dave has a pass to go to the nurse's office when he feels he is losing control of his anger.

Lack of self-awareness

- Lisa does not understand why her classmates laugh when she tells the boy next to her in class that she loves him.
 - Carl seems unaffected when his friend gets upset with him.
 - Bob does not understand why his extra points are being taken away after acting out.
- Use videotaping and/or role playing to teach appropriate behaviors and provide corrective feedback
 - Write down rules to help the student remember them
 - Provide opportunities for academic and social success
- Lisa role plays in her social skills class. In addition, the school psychologist reinforces appropriate ways to express emotion and problem solving different social scenarios.
 - Bob has a laminated sheet of rules in the front of every folder and notebook.
 - Dave is told thank you for remembering to raise your hand. Bob is praised for remaining attentive during reading time.

Adapting the strategies for the IEP



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The IEP focuses on academic and/or functional areas affected in the school setting, with the goal of establishing measurable academic and/or functional goals. These goals include benchmark or short-term objectives, as well as criteria for measuring and evaluating the objective. It also includes modifications and supplementary aids, including assistive technology devices and services. As there have been numerous advancements in technology in recent years an assistive technology evaluation should be a consideration for all areas of impairment, including physical and cognitive impairments. *It is important to keep in mind that the IEP should be a fluid document, re-assessed regularly and able to be modified if strategies being utilized are not having the desired effect.*

Example:

Academic and/or Functional Area: Behavioral

Annual Measurable Academic and/or Functional Goal: Remains in seat for 30 minutes with self-checks every 5 minutes by June 15.

Benchmark or Short-Term Objectives: Remains in seat for 15 minutes with cueing every 5 minutes by November 15.

Criteria: Teacher and teacher aide assessment.

Evaluation: 3 out of 5 trials/observations.

Modification/Supplementary Aid: Thera-band and a wedge seat cushion.

Academic and/or Functional Area: _____

Annual Measurable Academic and/or Functional Goal: _____

Benchmark or Short-Term Objectives: _____

Criteria: _____

Evaluation: _____

Modification/Supplementary Aid: _____



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