

Tips For Caregivers and Providers to Help with Difficult Behaviors After a Brain Injury or Damage to the Brain



Changes in behaviors are common. But they can be stressful for the **patient** and **everyone** caring for them. They also can be difficult to understand.

Difficult behaviors: Behaviors that make care for, and or participating in rehabilitation activities difficult. They may also be a risk for safety.

Staying calm, using a soft tone of voice, and assuring safety for the patient and caregivers is key.

Remember a brain injury causes difficult behaviors. It is not by the person's thoughtful intention.

For serious risk or unsafe behaviors talk with psychiatry over safety measures.

Common difficult behaviors after a brain injury

Agitation or aggression: People with brain injuries may feel overwhelmed more often and faster. This can lead to agitation. They get upset more easily than before this injury or for reasons that are not clear. Confusion, memory loss, or having a hard time talking makes them feel mad or not frustrated.

Patients with memory loss can get upset with the staff if they think they are not taking care of them. For example, they might not remember getting pain meds or help going to the restroom.

Angry outbursts or fits: People with brain injury can become more irritable or angry faster. This is because they can get confused or overwhelm with too much information. Angry fits are usually caused by environmental factors. For example, it can be changes in routines or new people. It can also be for internal factors like pain, discomfort, or difficulties communicating. They may feel like they are not understood.

Repetition or perseveration: People with brain injuries tend to say the same thing over and over again. They cannot seem to stop and repeat this behavior no matter the answer. This can get worse if caregivers get frustrated or argue with them about it. Distract them instead.

Quick, poor judgement or poor social behaviors: People with brain injuries might have problems with social rules and behaviors. This is due to lack of or poor impulse control. They do not have the ability to think, plan, or decide. They might say inappropriate or hurtful things.

Disinhibition or no self-control: People with brain injury may show sexual behaviors that are not appropriate. They might undress at inappropriate times and places. They might touch themselves in front of others. They might make explicit sexual comments in the wrong places and to the wrong people like a caregiver. They may also try to grab people.

Things that make difficult behaviors worse or more frequent

- Lack of structure or routine
- Constant changes in routines
- New environments
- Being bored
- Anxiety over new people
- Loud and or messy places
- Memory problems or loss
- Speech problems
- Pain or discomfort
- Poor sleep or trouble sleeping
- Long stays in the hospital
- Anxiety over important medical procedures

Tips to manage behaviors: Things that always help manage difficult behaviors.

- Remain as **calm** as you can. Manage **your own** frustration with the behavior. Try not to get upset or take the behavior personal. Speak slowly and in a soft tone.
- **Do not argue, challenge, or criticize** them. Try to reason when problems are happening. Do not lecture them.
- **Confirm their emotion** while correcting and redirecting. For example, saying “I know this makes you angry, we will try to make it better soon.”
- Step back and away from the person. **Keep safe.**
- **Be positive and reassuring.** Short sentences help.
 - It can help to consider the feelings that are causing the behavior.
- Set **predictable effects** that are short in duration. For example, you leave the room for a while or take their phone for an hour.

Things that help manage and decrease challenging behaviors

- Add structure to everyday. Create a routine for them.
- Give information to the patients on what they will do.
- Keep changes to a minimum.
- Turn volume of TV or put music low.
- Avoid noise areas.
- Use written reminders.
- Repeat the same answer in a calm manner.
- Introduce words or people again.
- Give simple directions
- Introducing different activities to the schedule.
- Play games, do art therapy, or read to the patient (if they cannot read).
- If you catch the patient doing well, praise positive behaviors (even if small).

Internal Only:

Compiled by Laura Bava PsyD, ABPP

CHLA Psychology

Sources:

Brain injury association of America: Managing Problem Behaviors: Tips for Families and Caregivers.

<https://biausa.org/public-affairs/media/managing-problem-behaviors-tips-for-families-and-caregivers>

Kansas University: Strategies for Assisting People with Traumatic Brain Injuries.

<https://rtcil.org/strategies-brain-injuries>

Family Caregiver Alliance: Coping with Behavior Problems after Brain Injury.

<https://www.caregiver.org/resource/coping-behavior-problems-after-brain-injury/>