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Cognitive Changes following Acquired Brain Injury (ABI) Advice for People with ABI, Family Members and Carers

Most people who sustain ABI experience changes to a range of cognitive (thinking) skills. Cognitive difficulties can range from mild to severe. Some people are very aware of and distressed by even slight changes to their thinking, whereas others may have very little awareness of major changes to their thinking that seem obvious to others. As with many of the effects of ABI, these symptoms can be invisible. It is important that the person with the ABI and their family members understand the nature of these cognitive difficulties and the best ways of managing them. Some examples of cognitive changes include:

- memory difficulties
- difficulty concentrating
- reduced frustration tolerance
- rigid or concrete thinking style
- difficulty understanding perspectives that are different to one's own
- difficulty understanding humour and inferences
- slowed speed of thinking
- difficulty perceiving and understanding emotions

Improvement of cognitive function can be rapid in the early weeks or months following an ABI, however for many people recovery is an ongoing process that spans across years. It is common for people to have permanent changes to aspects of their thinking, even though some improvement may occur over time.

Strategies can be used to reduce the impact of cognitive changes on a person's functioning. By developing strategies and using these effectively, people can find that they are less restricted by their cognitive difficulties.

If you, or a person you are supporting, are experiencing cognitive changes it may be helpful to:

- Discuss your observations with your GP or rehabilitation specialist; they may refer you on for further assessment and management of your cognitive skills
- Help the person with an ABI recognise and understand their cognitive limitations. This is often a difficult task as the brain injury itself can limit a person's insight or awareness of their cognitive limitations. It is important however that a person can recognise their difficulties if they are to effectively use strategies to deal with these issues.
- The best way of facilitating insight is a gentle yet direct approach. Do what you can to develop a positive relationship with the person, point out their strengths when appropriate. As you develop this rapport, it is more likely that they will take on feedback that is related to difficulties that they may be experiencing.
- When cognitive difficulties surface, point out what you have observed or experienced in a supportive, calm and non judgmental way. Try not to get into a battle about who is right or wrong, just communicate what you have noticed highlighting that it is your opinion rather than fact.
- Normalising difficulties can be a helpful part of the acceptance process. For example, you might acknowledge that we all forget things sometimes but that you notice it is happening to them a lot.
- If a person with ABI is unreceptive to this feedback, just state what you observed, reinforce that you care for the person and move on. It may be helpful to revisit this conversation when you notice cognitive difficulties impacting the person on a future occasion.
- It is also important to identify and focus on the person's cognitive strengths. These strengths can be used to develop strategies to compensate for any deficits. Also, highlighting these strengths is likely to boost the person's self esteem, which may mean that they are more willing to accept and address their difficulties. For example, if the person is good with technology, they may enjoy putting alarmed reminders into their mobile phone to help remember to do jobs such as putting the bins out.
- Once strengths and weaknesses have been identified, it is helpful to develop specific strategies to compensate for cognitive difficulties. These strategies can include using external prompts as reminders, such as the mobile phone in the above example, as well as calendars and diaries. Retraining the process of completing a complex task by breaking it down into its component steps, listing them and learning how to complete the task one step at a time,

can also be an effective strategy. Another strategy may involve making implicit social expectations explicit. For example, if a parent does not initiate play with a child, commencing a routine of play with the child for 10 minutes after each meal.

- Strategies that have been developed should be reviewed regularly and adapted to ensure that they are as beneficial as possible to the person with the ABI. What works should be kept, what is not helpful should be altered.

Support to develop and review cognitive strategies can be provided by rehabilitation staff such as speech pathologists, occupational therapists, psychologists and counsellors who have experience helping individuals with ABI.

This information sheet has been prepared by Life Supports Counselling Service. Life Supports Counselling Service provides specialist counselling for people affected by Acquired Brain Injury. If you would like to discuss your situation with a counsellor, please feel free to contact our office on **1300 73 50 30**.

For more information sheets on topics related to acquired brain injury please see www.lifesupports.com.au/acquired_brain_injury.htm