



## HELPFUL SUGGESTIONS IN RELATING TO YOUR FAMILY MEMBER WHO HAS A BRAIN INJURY (Revised in 1998)

### I. In the hospital

- A. Speak of familiar names, places, interests and experiences that the person has had in the past.

#### Talk about

- B. what is happening at home, your day at work, etc.
- C. Use familiar photos of family, friends, pets.
- D. Give the person things to hold or touch that are of different textures (like flannel, silk, ice).
- E. Take the person outside whenever possible.
- F. Have a few friends/family members visit regularly, but not a large group at one time.
- G. Play the radio for a while, at other times turn on the TV.
- H. Provide a calendar and clock (one without a sweeping second hand is best).

### II. Avoid frustration

Although stimulation is needed, too much can be frustrating. The person may be thinking in slow motion. Too many people talking at once may make it difficult for the person to think clearly. If his/her senses are overloaded he/she may short-circuit and 1) *shut down* or 2) *explode, cry or become combative*. If this happens, provide a quiet place to let the person rest.

### III. Keep conversation simple

Maintaining communications with the survivor of brain injury is important to the person. Although he/she may not be able to speak, he/she should be in a typical social setting as much as possible.

- A. Remember the person may be thinking in slow motion.
  - 1. Speak using short simple sentences as it may take him/her a longer time to process what is being said and how to respond.
  - 2. Give him/her enough time to respond.
  - 3. Present only one idea at a time.
- B. Try to include the person in *every* conversation.
  - 1. Do not talk over or down to him/her especially if he/she is an adult. He/she may become annoyed or frustrated, withdrawn or rebellious.
  - 2. Do not speak to him/her as if he/she were deaf (unless this was a pre-existing condition).
- C. Ask simple questions.
  - 1. Where is \_\_\_\_?
  - 2. Point to \_\_\_\_.
  - 3. Show me \_\_\_\_.
- D. Ask affirmative questions rather than negative ones. "Do you want a drink?" is better than, "don't you want a drink?"

- E. Do not ask questions that require the person to make a choice such as, “Do you want to stay up for awhile or would you like to go to bed?” Questions that require a yes or no answer may work better.
- F. Encourage the use of suitable greetings and social exchanges.
- G. Do not tease or encourage the person to respond in ways that are not acceptable for a setting.
- H. Allow the person to search for the word he/she wants. However, give him/her the word before he/she becomes completely frustrated or gets the wrong word. It is best that the person does not practice mistakes. People need success in order to continue to try. Sometimes it is better to change the subject rather than to pursue a response beyond the person’s frustration tolerance.
- I. Support and encourage speech efforts. For instance, if the person begins, “I want to...”, it helps to repeat the phrase since in searching for the next word he/she may have forgotten what he/she wanted to say.
- J. Ask the person to say the names of items in the room and say what he/she is doing.
- K. The person may repeat a word, phrase or do the same thing over and over. Avoid making an issue of this. Instead, get the person interested in something else. Do allow the person to express him/herself in a meaningful way.
- L. Although the person may have an inability to find a word to say what he/she means, remember that this does not mean that he/she has necessarily lost his/her intelligence or knowledge.
- M. Speak to the person as you would any other person.
- N. Do not force the person to speak. Such remarks as, “say it for them,” may upset or embarrass him/her.
- O. Do not ridicule or insist that the person give accurate responses, use correct pronunciation or *talk right*. The person is probably responding as best he/she can.
- P. Ask direct questions requiring “yes” or “no” answers rather than questions requiring complex answers. It is better to say, “Would you like to go to a movie tonight?” rather than, “What do you want to do?”
- Q. Encourage gestures and talking with hands whenever possible. Tell the person to describe or show you what he/she means. Frequently this will enable him/her to say the word.
- R. Be prepared for bizarre, inaccurate use of language and/or swearing.
  1. Such responses may be common for some survivors after brain injury.
  2. Accept this change without amusement or anger.
  3. Help him/her by providing the correct word without an emotional reaction.
- S. Realize that the person may not be able to understand or may misinterpret what others say.
- T. Do not act like you understand when you don’t. Politely ask the person to repeat themselves as many times as is needed.
- U. Do not talk for the person unless absolutely necessary.
- V. Do not use sarcasm or abstract jokes. He/she may take what you say literally. “I’ll be back in a minute”, to the person, may mean you will actually return in *one* minute.

**IV. Keep in touch with the real world.**

- A. Do not join in fantasies or repetitions by saying you see or hear things that he/she is imagining. However, do not scold the person if he/she talks about them. Instead say, “You may think you see Mom sitting in that chair, but I do not see her. She is at work right now.”

## **V. Attitudes**

- A.** Do not overwhelm the person with false optimism or empty words such as, “You will be all right, you’ll be back to work in no time.”
- B.** Do not compare his/her speech, language or physical abilities prior to his/her injury with his/her current condition. Look ahead, not back and help the person to do the same.
- C.** Do not laugh at the person.
  - 1.** Laugh with the person if appropriate.
  - 2.** Sometimes a person is not able to know what is really humorous.
  - 3.** Disregard the person’s laughter when the situation is not funny by not laughing yourself and ignoring it.
- D.** A person may laugh or cry easily. He/she may be embarrassed by the uncontrolled emotions. Suggest that he/she do something else until he/she is calm again.
- E.** The person may do things inconsistently.
  - 1.** Do not scold, tease or reprimand the person when he/she cannot do something even if you have seen him/her to do it previously.
  - 2.** This can be discouraging and may cause the person to lose interest in making an effort.
- F.** The person may be unable to control bowel and bladder functions. Do not scold him/her for this.
- G.** Avoid making the person feel guilty or like a baby for mistakes and accidents such as spilling something.
- H.** Remember that each person who has a brain injury is not exactly like another person who has a brain injury. It is important to not make comparisons.
- I.** Do not argue with the person. This is exhausting and may cause anger and resentment.
- J.** By our mannerisms, patience and attitude of acceptance, you are creating an air of calmness. Avoid direct expression like “relax!”
- K.** A person may not have good judgment after a brain injury.
- L.** Above all, maintain the person’s dignity by respecting him/her in spite of his/her changed abilities.

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