Helping Your Client Cope With Their Injury

Knowing your client has a brain injury does not change the legal situation that they are in. Fortunately, there are simple techniques you can build into supervision and skill building strategies to increase the likelihood of success and help them compensate for brain injury deficits.

Helpful Activities For Clients With Brain Injury

- Mindfulness
- Yoga
- Support Groups
- Journaling
- Exercise
- Adequate Rest
- Good Nutrition



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(Adapted with permission from
Brain Injury Association of Colorado)

(formerly the Colorado Brain Injury Program)



Brain Injury & Criminal Justice

This tip card helps professionals who work in criminal justice understand brain injury and...

- Criminal justice overlap
- Strategies for working with individuals with a brain injury in the criminal justice setting

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Think A Client Has A Brain Injury?

According to national data, 60% of inmates have a possible history of brain injury. Here's how you can go about confirming a brain injury:

1. **Medical documentation:** The gold standard for identifying a brain injury is medical documentation.
2. **Use of evidence-based screening tools:** If medical documentation does not exist, consider conducting a screen for lifetime history using a tool like the OSU TBI-ID. Go to **biane.org/brain-injury/screening-tool/** to learn more.

Important!

Refer to a specialist (e.g. neuropsychologist, licensed clinician, etc.) for a neuropsychological evaluation to determine deficits associated with brain injury.

Common Areas Of Impairment:

Short-term memory

Processing speed

Attention

Emotional regulation

Light or noise sensitivity

Impulsivity

Other Outcomes May Include:

Substance abuse

Mental health concerns

Suicidal ideation

Identifying Common Deficits and Management Tips

Attention Issues

Might look like: Fidgeting, squirming, getting off topic.

Tips
Reduce distractions • Keep instructions brief • Work on one thing at a time

Delayed Processing Speed

Might look like: Appearing confused, slow to respond, not following instructions.

Tips
Provide additional time to review information • Speak slowly, clearly • Check for understanding

Short Term Memory

Might look like: Can't remember details, disorganized, appears manipulative.

Tips
Provide written reminders of appointments, instructions • Stick to routine • Summarize discussions about expectations and remind for next steps

Sensory Motor Skills

Might look like: Appearing overwhelmed, emotional melt down, irritable.

Tips
Meet in quiet, calm environment • Schedule breaks • Encourage rest, hydration,nutrition • Rescheduling if sick or overly stressed

Language (Social Pragmatic)

Might look like: Inappropriate body language, getting in your space, oversharing.

Tips
Direct and concrete feedback • Role play to improve behaviors • Do not rely on body language

Language (Receptive)

Might look like: Withdrawal, appearing confused, struggle with abstract language.

Tips
Allow extra time to process • Ask if you need to repeat or rephrase • Instruct slowly and with one direction at a time

Expressive Language

Might look like: Not staying on topic, immature speech, lack of social etiquette.

Tips
Be patient • Compassionately give feedback • Allow extra time for them to respond

Initiation

Might look like: Appearing unmotivated, needing constant cueing, follower behavior.

Tips
Provide small, tangible steps • Help them get started • Encourage checklists and calendars

Reasoning

Might look like: Concrete thinking, difficulty learning from past experiences, struggles with open ended questions.

Tips
Teach step by step problem solving • Point out possible consequences, outcomes • Speak concretely

Mental Flexibility

Might look like: Perseverating, appear stubborn or argumentative, resistant.

Tips
Provide respectful feedback • Prepare for transitions • Assist developing alternative plans

Emotional/Behavioral

Might look like: Argumentative, melt down, over or under react to events.

Tips
Model and practice positive interactions • Suggest breaks when they appear overwhelmed

Let Us Help!

If you have a client who is in the community or returning to the community shortly, please refer them to the Brain Injury Association of Nebraska (BIA-NE). We will provide trainings, educational materials, and connections to services and support groups.

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