

WEEK 6

TBI AND IMPULSIVITY: WHY IS STOPPING AND THINKING IMPORTANT?

GOALS/OBJECTIVES:

This treatment module contains information to allow the participants to better understand how their TBI is related to impulsivity issues. The primary goals of this week are for participants to:

- Better increase their ability to consider the outcomes of their behaviors before acting
- Identify various situations where they are at increased risk of behaving impulsively
- Aid participants in identifying specific factors that contribute to their impulsivity
- Provide psycho-education on how impulsivity is related to TBI
- Facilitate discussion with the participants about how being aware of their tendency to behave impulsively will assist them in future behaviors
- Practice skills for identifying the need to think through behaviors
- Assign homework which involves participants practicing the ability to stop and think, consistently, so as to develop a habit of doing so

TIME:

Allow 1.5 hours for the session.

NUMBER OF PARTICIPANTS:

A minimum of four participants is recommended.

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PREPARATION



VIDEO

Watch the following video:

<https://youtu.be/iyuz8lL1wq4>



PRINT HANDOUTS

- What Is Impulsivity After Brain Injury
- Tips and Suggestions for Caregivers
- Steps for Journaling About Impulsive Behavior
- Stop, Think, Plan, Do

These handouts can be found in the handout section for this week, the facilitator's guide will indicate when these should be referenced.



WRITE

Write the following group rules on the white board for reference for participants throughout the treatment group:

- **Confidentiality:** The information we discuss in this group is private, and members are expected to keep it that way.
- **Respect:** Give your attention and consideration to participants, and they will do the same for you. Examples include:
 - No talking over each other,
 - Pay attention to the person talking (listen, don't just wait for your turn to talk)
 - Encourage each other, etc.
- **Participation:** You are expected to take part in the discussion and contribute to this group. The pace of this group, however, may limit some participation. Let's briefly discuss one way that the group leader(s) can signal you when we need to wrap up discussion and move on.

Note: *If additional rules were agreed upon, be sure to include each additional rule during this review.*

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PREPARATION



WRITE

Write the following learning objectives on the white board for reference throughout the treatment group:

- Structure and topic
- Homework review
- Education about the relationship between impulsivity and TBI
- Ability to identify impulsivity, and how a history of TBI effects likelihood of impulsiveness
- Identification of factors influencing impulsiveness
- Structured 5-minute break for stress management technique
- Group activity emphasizing the use of Stop-Think-Act
- Quiet & Questions
- Wrap-Up

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ACTIVITIES



ESTABLISH GROUP RULES

5 MINUTES

Now we are going to review the rules that we will follow throughout the duration of this treatment group. If you have any questions about any of the group rules, I can help to clarify what is meant by that rule.

- 1. Confidentiality:** The information we discuss in this group is private, and members are expected to keep it that way. What is discussed in the group may be highly personal at times, and should not be discussed outside of the group.
- 2. Respect:** Give your attention and consideration to your fellow participants, and they will do the same for you. Examples of respectful behavior include:
 - Not talking over each other
 - Paying attention to the person talking (listen, don't just wait for your turn to talk)
 - Encouraging each other by responding to each other in a positive manner. Have the participants give other examples of how to show respect, and add those to the list as desired.
- 3. Participation:** You are expected to take part in the discussion and contribute to this group. The pace of this group, however, may limit some participation. Often individuals who have TBI struggle to stay on topic. Let's briefly discuss one way that the group leader(s) can signal you if you are off topic and/or when we need to wrap up discussion and move on.

Note: Ask the group participants what other rules they believe should be in place, and add them to the list if they are applicable and constructive rules that are agreed upon by most or all the group members. It may be helpful to write the group rules on the board, or to create a written list on a large sheet of paper that may be posted in the group room for easy reference. Be sure to communicate to participants the expectations you have for their behavior (for example, how you would like people to excuse themselves from the group if a break becomes necessary, how the group should handle conflicts among group members, etc.). Setting these specifics out ahead of time will help to avoid confusion when these situations inevitably occur.



DISCUSSION PROMPT

What other rules does the group want to establish?



ICE BREAKER AND INTRODUCTION

5-10 MINUTES

If incorporating new participants into the group, write the Icebreaker questions outlined in Group 1 on the white board so members can refer to them. One or both of the following Icebreaker questions should be utilized to warm up the group and build rapport. The facilitator should feel free to participate in the Icebreaker alongside the group members.

- What is something about you that other people would be surprised to learn?
- If you wrote a book about your life, what would it be called?

Review Take-Home Impressions Form

- During the past week, have you done anything differently because of what you learned in previous groups? If so, please describe what you did.
- Were you able to use your new strategies/skills in any way? Please describe your experience.



EXPLAIN THE NATURE AND PACING OF THE GROUP

2-5 MINUTES

- Because we only have an hour and a half for each group meeting, it is important that we cover everything that is necessary.
- Today, I will guide you through several topics about TBI and impulsivity. The primary goals of this week will be to better increase your ability to consider the outcomes of your behaviors, identify various situations where you are at increased risk of behaving impulsively, and identify factors that contribute to your impulsivity.

- We will also learn how impulsivity is related to TBI, and discuss how being aware of your tendency to behave impulsively will assist you in future behaviors. Finally, we will practice skills for identifying the need to think through behaviors, and assign homework to begin practicing the ability to stop and think, consistently. Provide handouts for Week 6 (Appendix 2 – week 6 handouts).
- **Remember:** To get through all the material, I will be keeping us on point by giving reminders when that section’s time is almost up. If we are off-topic, I will redirect you to the relevant topic. If you would like to continue to discuss the topic that I redirected you from, please let me know after group so that we can discuss it at greater length. If necessary, we’ll use the signal we agreed upon earlier to wrap up discussions.

Do you have any questions before we begin?



HOMWORK REVIEW

5-10 MINUTES

During the previous week, you were asked to complete a personal anger management safety plan.

- How did it go?
- What were some challenges?
- Do you feel you were successful?
- Have you had the opportunity to use your safety plan this week?

Note: *If participants have not completed the previously assigned homework, please ask the following question:*

- *What led to your decision to not complete the assignment?*
- *What do you need to do for yourself this week to help you be able to complete the homework assignment?*

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CONTENT



INTRODUCE IMPULSIVITY AND GOALS FOR THIS MODULE

5-10 MINUTES

- **Briefly describe impulsive behaviors.** “Impulsive” means rash, quick, or hasty. An impulsive decision is one made very quickly, with little time given to consider the possible outcomes of that decision. (Examples: driving decisions made during road rage incidents, violent behaviors that occur during heated arguments, quick decisions made about financial matters...generally any decision made in “the heat of the moment” without stopping and thinking of the potential consequences, good or bad.).
- **Ask how TBI can affect impulsivity.** Facilitator should distribute “What Is Impulsivity After Brain Injury?” Handout (found in handouts section, see below). TBI can make it more difficult to resist giving in to impulsive thoughts and urges, particularly if the injury occurred to a part of your brain responsible for helping you to control those impulses. Brain injury can sometimes cause changes in your personality. Damage to specific areas of the brain, including the frontal lobe (which controls executive function) can impair impulse control.
- **Importantly, having a TBI does not mean that you are exempt from making responsible, well-thought-out decisions.** A brain that has been injured can be retrained, and so with practice, you will be able to learn to better control your impulses. The better you learn to control your impulses, the more likely you are to avoid unwanted personal and legal consequences in the future.
- **Discuss what the roles of executive functions are.** Executive Functions are a set of mental skills that help you get things done. These skills are controlled by an area of the brain called the frontal lobe. Executive function helps you: Manage time, pay attention, control behavior, and use humor.

- What are other factors that might make managing your impulses (or have made things) more difficult after your TBI?

If not brought up, prompt participants about:

- Substance abuse
- Environmental factors (noise, crowds, lighting, etc.)
- Person-centered situational factors (time of day, lack of sleep, hunger, etc.)
- Feel free to elaborate on other factors that the group may have identified individually or in previous groups.



IDENTIFICATION OF FACTORS THAT CONTRIBUTE TO IMPULSIVITY, AND STRATEGIES FOR IMPULSE CONTROL

5-10 MINUTES

Now that we have identified what impulsivity is and what it looks like to each of you, can you think of a time when your impulsivity may have affected your decision-making?

- Does anyone want to volunteer a situation?

Discuss these, and ask these follow up questions:

- What was the outcome of these situations?
- What factors may have contributed to the impulsivity in these scenarios?
 - How can identifying these factors be done in both here and in the community?
 - What do you think may have contributed to you not being able to stop-and-think before acting?

Now let's review some strategies for managing impulsivity.

Facilitator should draw attention to handout previously distributed. This document outlines some examples of impulsive behaviors, and some important strategies for managing impulsivity. (Facilitator may want to read the strategies aloud for the benefit of the group.)

This handout includes many examples of what impulsive behavior can look like.

- Do you recognize any of these behaviors in your own life? Ask participants to share specific examples, if they are comfortable doing so.
- Do you have any examples of a time that you were able to curb an impulse before it got the better of you?
- What strategies did you use in that instance to help you be successful at controlling your impulses?

BREAK

5 MINUTES

Now we are going to take a five-minute break. During this break, we are going to practice a visualization stress management technique that you can use when you are feeling angry or stressed. Facilitator should read aloud:

Close your eyes and imagine that it is a warm spring day. You have gone on a hike and have stopped to relax in a beautiful spot next to a small stream. You are sitting on the soft grass next to the stream. It is a perfect day and the sounds of nature are all around you. You feel safe and at peace. You hear birds chirping, the stream bubbling, and feel a slight breeze blowing across your face. Take a moment, and take three deep breaths, in and out. Focus your mind on the sound of the stream, and on the sounds of the birds. Pay attention to how the breeze feels on your skin. Focus on the feel of your breath as it moves into your chest, and out again. Imagine the sun warming you as you sit next to the stream. Imagine that you can hear the stream gently moving past. Take five deep breaths slowly, in and out. When you are ready, imagine that you are getting up to walk away from the stream, and are leaving your worries and anxiety behind you. When you feel ready, take one more deep breath, open your eyes and come back to the room.

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GROUP ACTIVITY

IDENTIFYING IMPULSIVITY

10-15 MINUTES

We are going to read a vignette (or utilize a video clip if available, see links on next page if using video clips) where impulsiveness might be present. I want each of you to identify one instance of impulsivity that we discussed earlier in this group.

Vignette 1:

Stephanie and Carmen are at a shopping mall. They go into a store with nice perfumes laid out on various tables for customers to try. They know they can't afford the perfumes, but they want to look anyway and test some out. While in the store, Carmen sees a particularly beautiful perfume bottle and reaches out to test it. She sprays it, sniffs it, sighs happily, and reluctantly puts the bottle back down. Stephanie watches her, and when Carmen walks away, Stephanie decides to try to take the bottle out of the store with her. She thinks about how happy Carmen will be when she gives her the gift later on! Stephanie looks around to check if anyone is nearby, then quickly steps forward toward the table where the bottle sits...

Vignette 2:

Joe has been locked up in the county jail for five months, and misses his family. He looks forward to calling home when he can, even if it's only for a few minutes. He usually calls at around three, and his wife or mom is always around to answer the call. This time, though, Joe calls the home number but the phone only rings and rings before going to voicemail. He tries a couple of times, getting more upset each time he hears the voicemail message pick up. He cannot believe they're not answering! This is it- they have finally given up on him! At the sound of the beep, Joe begins yelling at the answering machine, questioning where his wife is and accusing her of doing things she should not be doing. He yells at his mom, too, accusing her of being in on it and of leaving him high and dry. He yells at the machine until his phone time runs out, and then slams the phone down. This startles the guys around him and earns him a lot of curious looks.

Two options are included here, but feel free to bring other clips that illustrate impulsivity (vignette included in appendices):

- <https://www.youtube.com/watch?v=Cxy88GeEAxg>
- <https://www.youtube.com/watch?v=Gq0jfzgvvrM>

Now let's take some time to pick apart these scenarios and talk about what could have been done better.

- First, what were some instances of impulsivity that you observed?
 - If participants struggle, allow for several minutes of discussion before providing examples (e.g., substance use)
 - What might the consequences of those impulsive actions been?
- Can you identify when the use of Stop-Think-Act could have helped?
 - How could that have changed the outcome of the scenario?

Facilitator should hand out the "Journaling on Impulsive Behavior" handout and the "Stop, Think, Plan, Do" handout (found below in handout section).

Review each section (read aloud, preferably) with the participants, noting how the handout emphasizes the Stop-Think-Plan-Do approach. You may want to outline these processes on the white board to ensure that the participants digest them. Suggest to participants that they get help from their support person and/or treatment provider the first time they engage in the journaling exercise, if necessary - it is ok to struggle with it, journaling is a challenging task, especially when one is inexperienced at it! Explain also that because this session is this is the last meeting of the group, this handout will not function as homework per se, but is something that participants may want to work on in their own time and share with their individual treatment provider.

Provide background by explaining the following to participants:

- What is the function of journaling?

Journaling is a method of organizing thoughts and experiences in such a way that they become clearer to us than when we only keep track of them in our minds. By writing down your experiences and thoughts, you make them easier for yourself and others to understand patterns, thinking errors, and powerful ideas that you may not have known were at play. In this exercise, laying out your symptoms and triggers, and your responses to them, is meant to highlight for you the areas in which you may want to focus your skills-based work going forward. It will also help you to see which areas you are doing well in so far! That's why it will be helpful to share the process and/or results of your journaling with your treatment provider, as a tool to help you both plan the next steps of your work on your TBI symptoms.

BREAK

5 MINUTES

Let's take a quick five-minute break to stretch. During this break, I want you to think about what we have discussed today.

- *After break) Are there any questions you have about the material we have discussed today?*
- *I want you take notice of moments where you may be struggling with impulsivity. What was the outcome of the situation and what could have gone differently?*
- *If you find yourself using the skills, take the time to reflect on what helped you make rational decisions. How did you effectively stop-and-think, and then act? The more you practice stopping and thinking before acting, the more naturally it will come to you in a stressful moment!*



CLOSING DISCUSSION

10-15 MINUTES

- Review of overall course of TBI modules; participant views of what was most helpful; and participant suggestions. Use the following wrap-up questions as prompts for this closing discussion.
- What piece(s) of information did you find most helpful? Most interesting? Most surprising?

- What topics do you wish you had learned more about?
- What motivates you to face and overcome the challenges your TBI presents in your life? Please share these motivators with the group if you are comfortable doing so.
- What has been your biggest struggle with TBI symptoms?
- What helped you overcome that struggle? If you have not yet overcome it, what do you feel you need to do (in terms of strategies and approaches discussed in this group) to make progress towards your goal?
- What has been your greatest victory so far over the challenge your symptoms present?
- What role does belief in yourself play in your ability to overcome these challenges?
- What is one piece of knowledge or wisdom you would like to share with your fellow TBI group participants?

Facilitator should hand out “Tips and Suggestions for Caregivers” handout (found below in handout section) and instruct the participants to share same with their Support Person, if applicable. Facilitator should thank group members for participating, and may wish to include a personal farewell (such as good luck wishes) to group members as the group comes to a close. Invite group members to send each other off with well wishes if they desire.

WEEK 6

HANDOUTS

WHAT IS IMPULSIVITY AFTER BRAIN INJURY

TIPS AND SUGGESTIONS FOR CAREGIVERS

STEPS FOR JOURNALING ABOUT IMPULSIVE BEHAVIOR

STOP, THINK, PLAN, DO

WHAT IS IMPULSIVITY AFTER BRAIN INJURY?

Impulsive actions are those made without taking into account possible problems and not thinking about possible consequences.

While we can all be impulsive at times, impulsivity after brain injury is caused by damage to the brain, specifically the frontal lobe. The mechanisms that control our ability to stop and consider (and to filter what we pay attention to) are damaged, and often the damage is not repairable. It is important to remember the impulsive behavior you see is related to damage to the brain, and therefore:

- It is not deliberate
- It may not be apparent to the person themselves
- It is unlikely to go away
- It can fluctuate, particularly when a person is tired

WHAT DOES IMPULSIVITY LOOK LIKE?

As with most things about brain injury, impulsivity after brain injury will be different in each person. Mostly, it will involve the person doing or saying things without thinking first. Impulsivity after brain injury might include one or more of the following:

- Moving on to another task or activity before completing what is already started.
- Rushing into activities without planning first, and making lots of mistakes.
- Interrupting conversations and talking over others.
- Blurting out personal information about self or others without thinking.
- Making hurtful comments.
- Having trouble waiting and taking turns. Not waiting for your turn. Not patiently waiting in line. A student jumping in with answers in a classroom.
- Not recognizing that you have just finished: eating, drinking, or smoking, so you attempt to continue without stopping.
- It can seem like the need for 'instant gratification' – you want, and do, things now! It does not seem possible to wait.
- Buying things on impulse even when not affordable.
- Lashing out physically or verbally without thinking of the consequence.
- Sexually and socially, impulsivity may lead to promiscuous behavior. This can be a danger to the person at times, in terms of both physical and emotional health.
- Not being able to budget effectively and manage finances successfully.
- Ignoring safety rules, such as not looking for traffic before crossing the street.
- Undertaking tasks without first thinking about safety. Using something inappropriate to do a task because it is the first object you see.

TIPS AND SUGGESTIONS FOR CAREGIVERS

Agree on, and use a consistent approach that encourages thinking and waiting.

TEACHING “STOP + THINK + DO” AS FOLLOWS:

1. **STOP** – before doing or saying something
2. **THINK** – about what effect this will have and what would be the best strategy
3. **DO** – the action / behavior selected

IF AN IMPULSIVE BEHAVIOR OCCURS, STOP THE ACTION AND EXPLAIN WHY YOU STOPPED IT.

- ✓ Give clear, consistent feedback each time about:
 - what was OK,
 - what should have happened,
 - and what needs to change.
 - as part of the feedback talk about the effect of impulsive actions for the person and on others.
- ✓ Agree on, and set, safety limits to protect the person you are with and yourself. Talk about those limits and how you will maintain them.
- ✓ Stay positive and calm. Easy to say, but harder to do, when someone does something sudden or unexpected.
- ✓ Reduce the opportunity to be impulsive with structure and planning.
 - Work and agree on the plan for daily routine and activities together.
 - Break activities and tasks into manageable steps.
- ✓ Be aware of safety both at home and in the community and remain vigilant about potential areas that might cause difficulty:
 - In the community: busy roads, shopping centers with excessive noise and distraction, unsafe areas or construction areas. If a child is prone to impulsive actions, you might walk on the road side of the child and stay close enough to be able to stop the child from sudden movement.
 - Look for areas in the home that create distractions, obstacles such as loose rugs, furniture or uneven areas that might be unsafe with sudden movement particularly if balance and stability are issues.
 - Be aware of items that might create a danger such as work tools, knives, and weapons. Remove them or supervise accordingly.
- ✓ Tailor the level of support to the situation. The more potentially dangerous a situation is, the more support and supervision may be needed.
- ✓ Practice strategies when there is not a risky situation to help slow down or reduce impulsive reactions.
- ✓ Support family, friends, and colleagues to understand and work to manage impulsive behavior.

STEPS FOR JOURNALING ABOUT IMPULSIVE BEHAVIOR

1 IDENTIFY YOUR BEHAVIOR AND TRIGGERS

Start by identifying the behavior or urge that you would like to address. Next, brainstorm triggers that lead you to the behavior. Triggers may include: people, places, situations, smells, events and times just to name a few. Take some time to journal and list your major triggers that prompt you to act impulsively.

2 REDUCE YOUR VULNERABILITIES

Although there are various types of vulnerabilities that lay the groundwork for problematic behaviors, the basic vulnerability factors are being hungry, angry, lonely, or tired. A helpful acronym to remember these four states is HALT. You can use HALT to remind you to take proactive steps towards decreasing or eliminating these vulnerability factors.

3 LIST THE CONSEQUENCES OF THE PROBLEM BEHAVIOR

List both the positive consequences that reinforce the behavior and the negative consequences of the problematic behavior.

4 SKILLS USED AND REQUIRED

Journal the skills you have already used and the additional skills that would be important for you to develop to help you utilize alternative strategies to the problematic behavior. Some skills include: mindfulness, emotion regulation skills, distress tolerance skills, thought regulation, interpersonal effectiveness skills, relaxation techniques, self-esteem development, assertiveness skills, etc.

5 BEHAVIOR ANALYSIS IN CHRONOLOGICAL ORDER

This is the last and most important step. It is recommended you give yourself 20-30 minutes to do this exercise so you can really become conscientiously aware of all the details involved in your behavioral cycle.

To begin, choose a specific and recent example in which the problematic behavior occurred. On a piece of paper write the problematic behavior at the top of the page and then draw a line vertically down the middle of the page (example on the following page).

On the left side of the page, you will write down in chronological order (the order in which they happened) every **(T)hought, (F)eeling, (E)vent, (BS) Body Sensations** and **(B)ehaviors** leading up to the problematic behavior, during the problematic behavior and post-behavior. You want this play-by-play to be as detailed as possible so you truly get a full snapshot of all the internal and external aspects that are involved in your impulsive behavior.

After you have completed the actual chain of events on the left hand side of the page, you will then write on the right hand side alternative thoughts, skills, tools, coping mechanisms, and effective behaviors you could incorporate the next time some of these similar thoughts, feelings, body sensations, behaviors and events occur.

For example, if you tend to have problems with anger your behavior analysis may look something like this...

PROBLEMATIC BEHAVIOR: Anger

(E) I woke up late	Practice Time Management Skills
(B) I was rushing	Take time to relax and meditate 5 min.
(BS) My heart was racing	Breathing exercise
(BS) Shortness of breath	
(T) "I am so irresponsible"	"I am learning & will plan better."
(E) mad, irritable, anxious	Image a happy or calm place in my mind
(B) don't eat breakfast and leave	Prepare a healthy snack the night before
(BS) tension in my shoulders	
(E) stuck in traffic	
(BS) tight fists	Progressive muscle relaxation
(T) "People are so rude"	State the facts to become objective
(E) rage, anger	Opposite emotion exercise
(B) Yell explosively as someone	Journal about what is upsetting me

STOP, THINK, PLAN, DO



STOP:

Stop what I am doing



THINK:

What do I need to do?

Do I have a checklist that I can use?



PLAN:

Plan the steps needed to finish the task

Fill out the checklist that I can use



DO:

Sit down and start working!