



# Building social skills

**Children and young people with a brain injury may have difficulty with the social skills that most of us take for granted.**

## About social skills

Young people learn their social skills from their day-to-day activities in the family, at school, at play, and in the various groups and clubs they may be part of.

A traumatic brain injury or similar brain disorder can cause children to interact in ways that aren't socially appropriate. This may include being tactless, poor at 'reading' social cues, talking too much, interrupting, or seeing the world only from their own point of view. Other social skills may be lacking - simple things such as using eye contact appropriately or they may be excessively friendly and accepting, hugging near-strangers and willing to trust and go with anybody.

They can be at risk of becoming socially isolated and cut off from friends and the normal things kids do together. Bullying or teasing can sometimes become a problem due to being impulsive and less able to judge social situations. Don't hesitate to contact the school if you suspect bullying.

## Some strategies

- Understand your child's strengths and weaknesses in social skills, cognition and language. Be prepared to alter some of the ways you do things.
- Think about how you feel when your child behaves in ways that are socially difficult. Becoming angry isn't helpful so recognize your frustration, embarrassment, or anger. Set specific rules and practice these skills many times, in a range of different situations.
- Don't draw attention to an inappropriate behaviour by reacting strongly to it. Always praise or reward the behaviours and skills you are trying to encourage.

- Think about when the difficulties happen. Often you can improve things substantially by adapting what you and your family do and when you do it.
- Try using 'problem solving' techniques (a simplified version if necessary) with your child to find ways around difficulties.
- Help your child to rebuild social networks and friendships by asking other children to your house, and talking to the school about building friendship networks.
- One strategy that has proved helpful for some young people is "stop, think, do". Use a traffic light image-red, amber, green-to help the young person stop before reacting.
- Help and encourage your child to get involved with other groups in the community.

## Getting help

Professional help and advice can be very valuable. Look for a professional who has expertise and experience in working with brain injury - ideally a neuropsychologist or clinical psychologist. If you can't find a psychologist, talk with other health professionals and/or parents to find out what might be available to you in your local area. Some schools and community health centres offer young people group training programs in social skills, and these programs can be of benefit to some young people with a brain injury.

## Thinking, feeling, behaving -other strategies

Young people with a brain injury often have difficulties that affect their thinking, their feelings, and their behaviour. The best results come when parents, teachers and health professionals understand these difficulties and work together on a program.



Measures to help a young person overcome their difficulties require lots of repetition, practice and reinforcement. The child may find it very difficult to carry that skill into a different situation - to 'generalize' it. It may have to be dealt with anew.

A memory aid is anything that can be used as a reminder such as a diary or notes.

A cue is a 'signal' like a hand gesture for someone to start or stop doing something.

A prompt is a reminder to do something, such as a note in a homework diary, a note on the fridge door - it can take many forms.

Role playing is a bit like taking a part in a play - the person gets a chance to practice how to behave in certain situations.

Behaviour management provides a system for 'rewarding' behaviours we want to encourage and not rewarding (or ignoring) those we want to discourage.

To generalize is to use appropriately, in a new situation, something the person has already learned in a different situation.

### **A problem solving approach**

'Problem solving' is a positive approach to dealing with difficulties; one that breaks the process into separate, manageable steps. A problem solving approach can:

- Help you and your child decide which problems should be tackled first.
- Provide you with something concrete and positive to do, when faced with a problem.

People who use problem solving regularly, for small, everyday problems, find that it becomes a way of thinking. The approach is detailed, and takes time and commitment from everyone involved.

There are six steps of problem solving:

#### **1. Define the problem**

Work with others to identify the main problem. If you can't agree on the main problem, negotiate a compromise. Pick one problem. Avoid being overwhelmed by trying to solve lots of related problems at once. Be specific. Try to separate facts (the description of the situation) from the issues these raise (why the situation feels like a problem).

#### **2. Brainstorm options**

Search for anything that might offer a solution. List on paper as many new options as possible, even silly ones - and don't make any judgements yet. Just write them down. Get ideas from solutions that have worked only in part, or not at all. Be specific about what a particular solution involves and get options for different aspects of the problem.

#### **3. Select what might work**

Eliminate options with less chance of working, and options that some people don't agree with. Give everyone involved a chance to comment. Try to pick the solution that will make the most difference now, or 'take the pressure off'. Try to understand the meaning of the behaviour. Be prepared to try an option for a while. Don't give up on it too quickly.

#### **4. Put a plan into action**

Many plans fail because people don't carry out their part or because there's no coordination. It's often easier if there's a written summary and one person takes responsibility for checking that everything is happening as agreed.

#### **5. Review what happened**

People often forget to reflect on how well a plan is going - sometimes because the problem 'disappears' but usually because everyone gets caught up in something else. Get the opinion of everyone involved and be as objective as possible about what's worked and what hasn't. Use this new information in future attempts to solve the problem. Acknowledge everyone's efforts.

#### **6. Keep going**

Most problems aren't neatly resolved, and new ones can spring up. Information from the first round of problem solving must be used to fine-tune solutions and solve other problems. Remember that problem solving skills must be learned and practiced.



### Keeping the communication lines open

Good communication skills are one of the greatest assets you and your family can have. Many aspects of communication can be disrupted by a brain injury. These are things we learn in all our interactions with other people, in the family, at school and elsewhere. A person with a brain injury may need special training to master some elements of these skills:

- Difficulty talking about things in a general or abstract way so use more concrete or descriptive terms
- Be prepared to ignore repetitions or wandering off the point, and gently redirect the conversation if it seems to be 'getting off the rails'
- Respond positively and sound interested when you are talking with the young person
- Stay calm - don't let yourself get angry or aggressive.

Speech pathologists, found in most public hospitals and community health centres or through school support services, can assist individuals with a brain injury and families with the development of communication skills after a brain injury.

### Attention and listening

The first requirement is that you focus your attention on the other person. This entails facing the other person from a comfortable distance, using the right amount of eye contact, and giving your time. Genuine interest in the other person is the best starting point.

### Responding and encouraging

Your responses show that you are listening and interested. For example, 'Uh huh', 'OK' or 'I see' all encourage the other person to go on talking. 'Reflective listening' goes beyond this - it involves repeating or rephrasing something the person has said, or summarising the main point.

### Open and closed questions

Open questions can encourage people to keep talking. Open questions invite the other person to provide more information - 'What did you do today?'

Closed questions, by contrast, generally have a single response - 'Do you like chocolate ice cream or vanilla?' They too have their place - sometimes we only want a brief response.

Young people with a brain injury may find closed questions easier to answer. If you are using closed questions, try giving a choice between alternatives ('Do you want tuna or cheese?') rather than asking a 'yes/no' question ('do you want to eat something?').

### 'I-statements'

It is important to be able to state your own point of view, without blaming or accusing the other person - particularly if you are concerned about something they are doing. The 'I-statement' tells others how you feel. For example: 'I get very worried when you're late', 'I get angry whenever I try to talk to you about your friends.' It gives the other person a chance to say 'I'm sorry' or 'I didn't realize you felt that way'.

In contrast, a 'you-statement' places responsibility on someone else. For example: 'You're so irresponsible', 'You make me lose my temper every time we talk.' A 'you-statement' often leaves the other person feeling attacked and they may get defensive.

### References and further information

Many thanks to Brain Foundation Victoria for permission to adapt their material for this fact sheet.