

Traumatic Brain Injury (TBI)

Frequently Asked Questions - FAQ#4

Return to School for the Adult with a Brain Injury

By Nancy Carlson, Psy.D., L.P.

Reprinted with permission from the Brain Injury Association of Minnesota

As a college instructor, I have seen individuals with brain injury attend college with various levels of success. These students have been individuals obtaining their GED, furthering their education for employment purposes, or taking classes for the love of learning. Having a TBI does not necessarily prohibit an individual from learning. However, there are steps to take that enhance the individual's chances of success. Professionals working with these clients can help map out this plan and may help coordinate its implementation.

Neuropsychological testing is the first step. Success not only depends upon desire, but also ability. The student must be able to learn, retain and recall information. Some individuals have good verbal skills that mask their actual deficits. Other individuals may not recognize their deficits and deny the existence of any difficulties. The most accurate way to determine an individual's ability is through neuropsychological testing. This testing can examine ability to:

- Learn (verbal and visual material)
- Use repetition to enhance learning
- Use hands-on experiences to enhance learning
- Recall material learned
- Use cueing to enhance recall
- Pay attention and concentrate
- Reason
- Read and use math skills

The results of the neuropsychological testing should delineate whether the individual has sufficient skills to attend school or whether deficits can be compensated for. This is the groundwork for a successful experience.

Establishing a plan is the second step. Careful planning can often waylay unnecessary negative experiences. The following are some of the issues to address during this phase:



Helpline: 1-800-992-3442 • www.biaf.org

- What school will the individual attend? Consider accessibility using public transportation, complexity of the campus, size of the classes, and disability services available.
- How many classes will the individual take? Consider starting out with one easier class and building from there. Colleges often offer a class on how to study and this might be a good place to start.
- Where will the individual study? Hopefully this will be a place free from distractions.
- What can the individual's family or support system expect? Consider bringing in the immediate support system and brainstorming what to expect. What will change in the family's life? How will frustration be handled?

Involving the school of higher learning is the third step and certainly a part of the plan. Most schools have a Disabilities Center that can assist a person with brain injury and also help the school make accommodations. Accommodations can include:

- Note taking
- Tutoring
- Extra time when taking tests
- Taking tests in a less distracting environment
- Taping of lectures
- Books on tape for those who are sight-impaired
- Earphones for those who are hearing-impaired

The Disabilities Center will need proof of disability. The actual neuropsychological assessment could provide the TBI diagnosis, areas of impairment, and suggestions for compensation strategies.

Reassessing the plan is the fourth step. Individuals with brain injury often think in concrete terms of total success or total failure. They may have difficulty problem solving. Helping them reassess the plan and making changes where appropriate is an important role of the professional.

Individuals with TBI can return to school under the right circumstances. They must be able to compensate for deficits in areas utilized in a learning environment. A carefully thought out plan can then put structure on the education process and allow for utilization of the school's services. Let's help maximize the individual's chances of success as they move toward a greater level of independence.

Nancy Carlson, Psy.D., taught at Century College for six years and currently teaches in the College of Pharmacy at the U of M. She is the current Chairman of the Board for the Brain Injury Association of Minnesota. She works as a Psychologist in the Chronic Pain Program at Abbott Northwestern Hospital and also for Karol Neuropsychological Services & Consulting. She is a Consultant to Vinland Center.

Information copyrighted by authors listed and may not be photocopied for mass distribution.



Helpline: 1-800-992-3442 • www.biaf.org