Brain Injury Training Manual

Disinhibition Session

NeuroTriage CIC















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Materials Required:

* Sign-in sheet
* Feedback sheets
* Flipchart and pens
* Power-point presentation
* Laptop
* Speakers
* Stroop Test sheet
* Alphabetti Forgetti game sheet
* Handouts:
  + Power-point slides

Welcome and Session Overview (5 minutes)

*Introduce facilitators, ask people’s names and hand around sign-in sheet.*

*Go over aims and overview of the session.*

Session Aims

* To gain an understanding of the term disinhibition.
* To gain knowledge about what causes disinhibition.
* To gain an understanding of the different ways that disinhibition can impact an individual and those around them.
* To gain an understanding of what services can do to help someone experiencing disinhibition.

Overview of the Session

* This is a one-hour long disinhibition training session.
* This aims to give you an overview of the different aspects of disinhibition, how this can impact people and how we can help.
* This will cover:
  + What is disinhibition?
  + What are the impacts of disinhibition?
  + How can services help someone experiencing disinhibition?
  + Resources and further sources of information.

*Does anyone have any questions before we get started?*

Introduction to Disinhibition (15 minutes)

What is disinhibition?

The term ‘disinhibition’ can be defined as a loss of inhibition. Inhibition is a process which prevents you from expressing your thoughts or acting out your impulses. Disinhibition, therefore, leads to a loss of control over our behaviours, resulting in behaviours which can be viewed as socially inappropriate.

There are many ways in which disinhibition can be experienced and can affect different types of behaviours, these include:

* Divulging personal information too freely.
  + I.e. over-sharing relationship details.
* Disturbing or unpredictable outbursts/ uncontrolled rage.
  + I.e. sudden aggressive outbursts.
* Making tactless comments/ inappropriate remarks.
  + I.e. commenting on someone’s weight/ appearance.
* Laughing inappropriately.
  + I.e. laughing when someone is upset.
* Over-familiarity.
  + I.e. Invasion of personal space.
* Sexually inappropriate comments/ advances/ behaviours.
  + I.e. inappropriate touching/ suggestive behaviours.
* Abusive or crude language.
  + I.e. making racist/ sexist comments.
* Unpredictable responses to similar situations.
  + I.e. not responding in a way that would be expected or how they have responded previously.

The area in our brain that is responsible for inhibiting our behaviour is the frontal lobe. This area be is responsible for our emotions, behaviour control and some aspects of memory. This part of the brain is used to make decisions, plan tasks, sequence events and inhibit our responses (i.e. decide whether something is socially appropriate or not). Therefore, any damage that occurs to this part of our brain can lead to disinhibition. This effect can be a long-term experience when resulting from a brain injury as opposed to a short-term effect due to alcohol/ drug intoxication.

Impacts of disinhibition

*What do you think the impacts of disinhibition may be on someone’s life? - Ask group members to shout out answers and add these to flipchart.*

Experiencing disinhibition can cause different impacts for an individual. It can affect different aspects of individual’s life such as:

* Relationships
* Self-esteem
* Social life
* Perceptions of others

*Introduce video clip on experiences of disinhibition resulting from brain injury:*

<https://www.youtube.com/watch?v=SA8RtXu-FIQ>

*Start at beginning and finish at 4.13*

*Discuss any reactions to the clip:*

* *Was she aware of her disinhibited responses?*
* *How did she feel about these?*
* *Was she aware of the impact these had on other people?*
* *Had this affected her in any of the aspects mentioned above?*

*Do you think it is just the individual themselves who is affected by disinhibition? - Ask group members to shout out answers and add these to flipchart.*

The effects of disinhibition are not limited to the individual experiencing them, but can extend to family members and carers too. Many carer’s and family members report feelings of embarrassment and shame because of disinhibited responses or behaviours, despite knowing that the individual cannot control their reactions.

This is often because of the way in which other people respond. If an individual says something or behaves inappropriately when out in public, it can be anxiety provoking for carers/ family members as they are unsure how the public will react to this.

*Due to a lack of awareness people often make assumptions with regards to disinhibited behaviour, such assumptions can include:*

* That the individual is under the influence of alcohol/ drugs.
* That the individual is inconsiderate or rude.
* That the individual is being belligerent.
* That the individual is trying to cause conflict/ start a fight.
* That the individual is deliberately being hurtful.
* That the individual is behaving this way on purpose.

Due to these assumptions, people can react in unhelpful ways. Some detrimental reactions from others include:

* Confrontation and conflict
  + I.e. someone becomes verbally or physically hostile to the individual.
* Laughing
  + I.e. openly pointing and laughing or behind the individual’s back.
* Bullying
  + I.e. name calling or intimidation.
* Taking advantage of the situation
  + I.e. recording a person’s behaviour to put online, requesting the person behave in a certain way or goading the individual.

Small Group Discussion (10 minutes)

*Ask group members to get into pairs or small groups to discuss their responses to the following questions: - 5 minutes*

* *How often do we inhibit our responses?*
* *What do we usually try to inhibit?*
* *Is it ever socially acceptable to not control our impulses/ responses?*
* *Do we ever find it difficult to inhibit our responses and why is this?*
* *Is there a boundary/ line that we establish for our responses and those which we accept from others? Does this line move/ change between different relationships (personal/ professional/ universal)?*
* *How would you feel if you did say the things that you usually inhibit – if your filter stopped working?*

*Then ask group to come together to feedback as a larger group. - 5 minutes*

*Prompts for questions:*

* *Frequently inhibiting responses*
  + *I.e. don’t always say what we’re really thinking*
* *Usually try to inhibit responses that may hurt other people or that will cause us embarrassment etc.* 
  + *I.e. when you tell your friend that they sounded great on karaoke!*
* *Yes – it is sometimes socially acceptable to say that we don’t want to control our impulses.*
  + *I.e. “I cannot wait for …” “I just couldn’t stop myself …” etc.*
* *Yes – sometimes it is difficult to inhibit our responses, usually when it is something we feel passionate about.* 
  + *I.e. when you really want to tell someone that they are doing something wrong as you know how to do it better.*
* *Most people have a boundary which they wouldn’t cross, however, this is different for different people and how much they will tolerate will depend on their individual characteristics/ circumstances. This can be changeable over time and with different relationships.*
  + *I.e. may be more willing to inhibit our responses/ accept other people’s disinhibited responses on some days more than others due to stress levels, tiredness, mood etc.*
* *Most commonly people would feel embarrassed, we don’t usually allow our inner most thoughts to be aired without a filter and if it does occur there is normally shame or guilt accompanied with this.*

How can we help with disinhibition? – 10 minutes

How should we respond?

*How do you think it would be helpful to respond to an individual who is experiencing disinhibition? - Ask group members to shout out answers and add these to flipchart.*

*The way in which we respond can make a big difference to someone who is experiencing disinhibition. By adapting our responses, we can reduce frustration, improve understanding and remove barriers that may be preventing someone from engaging with the service.*

*Some useful tips for responding to someone experiencing disinhibition include:*

* Being patient – allowing the individual time to reflect on what they have said and allowing them to make changes to their response.
* Being supportive – not laughing or making fun of their response/ behaviours.
* Being empathetic – how would you feel if you had said/ done what they had done and not been able to control it? Treat the individual as you would like to be treated in that situation.
* Explaining to the individual that what they have just said/ done was not appropriate but that you understand why they did it – especially when the behaviour/ comment has significance to the other person.
  + I.e. “I didn’t like what you just said as it made me feel uncomfortable, but I understand that you may not have been aware of this, could you please not say this again?”
* Trusted friends or family members could help by reminding individuals of what may be the most appropriate thing to do or say if they are struggling in social situations.
* It may help to mentally prepare an individual for social situations and to think about any difficult situations that have occurred before in similar environments to plan for these.

*How do you think the individual feels after they have said/ done something inappropriate? - Ask group members to shout out answers and add these to flipchart.*

* Most commonly individuals feel guilty afterwards – they are aware that they have upset/ hurt the other person but may not know why.
  + *Link back to video earlier where she was sorry for hurting people but she didn’t realise she was doing it.*
* The individual may not remember the content of what they said or why this was significant but they will remember the feelings. This could be the feelings of the other person they were speaking to or their feelings based on the response from that other person. Therefore, it is important to consider this responding to someone who is experiencing disinhibition.
* Empathy is key – how do you feel about what they have said/ done and how do you think they feel about what they have said/ done? By taking both viewpoints and finding a response that is appropriate to both then this is the best way to manage disinhibited behaviours.

Activity - 15 minutes

*Ask group members to get into pairs. Give out Stroop Test sheet to each group and ask them to take it in turns to try the test. - 5 minutes.*

*Give out the Alphabetti Forgetti game sheet and ask one group member to read the rules and then to take it in turns playing the game – 5 minutes. Once the pairs have finished then go through the answer sheet as a group.*

*Feedback to larger group – reflections on how they found the activities and how these relate to disinhibition. – 5 minutes.*

* *How difficult it can be to inhibit our responses, even when frontal lobe has no damage – how difficult must it be if this part of the brain has been injured?!?*

Summary and Close - 5 minutes

What we covered today

Today we have looked at:

* What is disinhibition?
* The impacts of disinhibition
* The experiences of disinhibition
* What we can do to help someone who is experiencing disinhibition.

Further Resources

Further sources of information:

* Headway website: <https://www.headway.org.uk/>
  + Information library: <https://www.headway.org.uk/about-brain-injury/individuals/information-library/>
  + Factsheet on executive dysfunctions: <https://www.headway.org.uk/media/2801/executive-dysfunction-after-brain-injury-factsheet.pdf>
* Brain Injury Toolbox Guide: <http://www.braininjurytoolbox.com/bi/Brain%20Injury%20101%20Guidebook.pdf>

Further sources of support:

* Health:
  + GP services
  + Adult Neuro/ Community Rehab Services
* Local Authority:
  + Social Services
  + Housing
* Carer’s Support:
  + Carer’s Trust

Questions

*Ask group members if they have any questions.*

Feedback

*Give out feedback questionnaires regarding today’s session and ask group members to provide feedback on what they found helpful/ unhelpful and ask if there is anything they would change. Highlight the importance of feedback as this is how training can be shaped and improved for future sessions.*

*Remind group of how this fits in with disinhibition – ask group to try not to inhibit their responses based on what they think we would want to hear, but to provide their honest opinions about today’s session.*

Session End