Introduction

Starting a new school year brings many changes for students, teachers and parents. For the student with a brain injury, frustrations and uncertainties can accompany the excitement of being with friends and classmates again. Will classmates treat me differently now? Will the teacher know how to help me? What if I can’t keep up?

Not only do classmates, teachers, room assignments and books change, but the content and nature of schoolwork changes with each grade. As schoolwork becomes more complex with each passing year, the brain is challenged in new ways. For the student with a brain injury, the process of recovery and brain development is occurring simultaneously. It is over time that the long-term effects of a student’s brain injury become evident as learning becomes more complex and schoolwork is more challenging.

Begin with information

For a student with brain injury, when school starts, there is a lot going on. It is not surprising that educators, students and parents are not quite sure how to begin. The place for everyone to start is with information. Regardless of how long ago or recently the student was injured, information is the key to identifying, understanding and meeting his/her needs.

The following tips help parents and educators get started. Whenever possible, it is helpful to include the student in this process.

1. Set up a meeting with the parents and all of the student’s teachers and others involved in special education and related services.

2. Review medical and rehabilitation information about the severity of the student’s injury, current medications and side effects and ongoing therapies.

3. Review reports from specialists, including therapists and neuropsychologists, to understand which parts of the brain were injured and possible consequences for learning and behavior.
4. Have samples of the student’s work from the previous school year, including:
   - Effective instructional strategies
   - Compensatory strategies for memory, organization and planning
   - Techniques for managing behaviors
   - Adaptive devices
   - Schedule changes because of fatigue

5. Review what special services or supports were provided last year, what worked and what was not helpful. Make sure everyone has a clear understanding of the student’s strengths, difficulties and needs.

6. Set up a plan for regular feedback and communication between the educational team and parents. Do not wait for problems to develop.

7. Identify resources within and outside the school who can provide in-service training on brain injury as well as consultation.

8. Be flexible. Recovery is a continuous process that is constantly changing, especially in the first one to two years following brain injury. Goals and objectives need to be revised continually as the student’s needs and abilities change. The educational plan must be a flexible tool, not a fixed written document.

9. Prepare for transitions. Consistency and structure are very important for the student with a brain injury. Any change, no matter how small, needs careful preparation for the student to succeed.

10. Look ahead. Time passes and students grow up. The ultimate measure of a student’s education is preparation for adulthood. Do not wait until his/her senior year to think about what happens next. Transition planning for life after school must begin early, by age 14.
Communication and coordination

For students who are in middle, junior or high school, there must be constant communication and coordination among school staff and parents. With the frequent changes in classes and teachers in these grades, the student with a brain injury is at very high risk for failure or lowered grades. Just the logistics of moving between classes, figuring out a daily schedule and organizing books and homework assignments can create enormous challenges for the student who has difficulty with organizational skills, planning and memory. Unless teachers have a coordinated approach to help the student use compensatory strategies and cueing systems, the consistency and structure that is so necessary for this student will be lacking. If parents and educators do not work together to create a brain injury-friendly environment for this student, the student’s frustration is likely to increase and certainly his/her ability to succeed will be compromised.

Many of the teaching strategies that educators use for other students with special needs can be used for students with brain injuries. Students with brain injuries, however, may need additional time to learn how to use compensatory techniques and cueing systems effectively, particularly if they have difficulty with short-term memory or need more time to process information. Too often, compensatory techniques are not successful and the student fails again. The problem may not be with the student, but with the instruction and time allowed for the student to become proficient.

With each successive grade after elementary school, parents also become keenly aware that eligibility for special education services is limited by time as the student nears graduation and adulthood. This time limit forces decisions about job training, career choices, college and independent living. The involvement of the entire educational team in this process is critical for preparing the student and establishing linkages with adult services.

Parents and educators as partners

Parents have a special role and perspective. No one knows their child better. They not only have the comparison of their child before and after the injury, but they have seen their child progress through the various stages of medical care and rehabilitation. Parents are the link between various teachers, classes and schools. By including parents in the educational planning process, they can use their experience and knowledge to help educators design effective strategies for the classroom. For parents to help students with homework and support the efforts of teachers, they must be an integral part of the educational team. Only if parents and educators work together can there be an effective educational plan that will truly benefit the student.

Marilyn Lash, MSW, co-chairs BIA’s Special Interest Group on Children and Adolescents with Brain Injury. Bob Cluett is the survivor of a childhood brain injury.