

Teaching Students with Acquired or Traumatic Brain Injuries and Concussions

Students acquire brain injuries at any age and with varying and unpredictable impact. A student who has had one head injury may be more susceptible to both receiving another head trauma and to increased effect from an additional head trauma. The level of trauma may be minimal or severe and still result in a serious brain injury. The impact of brain injuries may be wide ranging, resulting in headaches (sometimes severe) and affecting mobility, emotional lability, vision, and, most commonly, cognition and memory. Recovery, in regards to both period and impact, can be unpredictable. Having a brain injury can be very frustrating, even when it is not obvious, as the student can remember how easily they learned before the injury as opposed to after the injury. Some of the cognitive effects may involve concentration, abstract reasoning, memory, reading, attention or time management, problem solving and/or word finding. Extended recovery may contribute to or result in other concerns such as depression.

Some examples of possible accommodations that a student with an acquired/traumatic brain injury or a concussion may require include (but are not limited to):

- "Dear Professor Memos" verifying the need for accommodations
- Priority/early course registration
- Accommodated testing for in-class and online exams and quizzes
- Alternate format texts and handouts, including audio and electronic format
- Note-taking services and/or the use of an audio recorder for class lectures
- Regular advising meetings with an assigned D²A² advisor

The following are some considerations to keep in mind when working with students with acquired/traumatic brain injuries or concussions in the classroom:

- Some students will need to take a test over two days, to allow for reduction of headache(s) and/or re-focusing.
- Some students will do better with test items that require recognizing an answer rather than total recall.
- Some students will experience vision problems disallowing computer work or limiting the amount of time that the student can be exposed to computing tasks.
- If the student is an athlete, the IUP trainer and the local physician will provide specific guidance as to accommodations and medical needs and the D²A² director will work with faculty to provide these.
- Some students may need to rest between classes.

Additional Resources:

The Student with a Brain Injury: Achieving Goals for Higher Education (Brainline)	https://www.brainline.org/article/student-brain- injury-achieving-goals-higher-education
Instructional Strategies for Teaching Students with Traumatic Brain Injury/Acquired Brain Impairment (Ferris State University)	https://ferris.edu/HTMLS/colleges/university/di sability/faculty-staff/classroom- issues/traumatic-brain/TBI-ABI-strategy.htm
Teaching Strategies for Students with Brain Injuries (Brain Injury Association of America)	http://www.biaoregon.org/docetc/Resources/c hildren/teaching.strategies.for.students.with.br ain.injuries.pdf
Traumatic Brain Injuries (The University of Texas at Austin)	http://diversity.utexas.edu/disability/traumatic- brain-injuries/
Tips for Working with Students with Learning Disabilities, ADHD, or Traumatic Brain Injuries (The University of Texas at Austin)	http://diversity.utexas.edu/disability/tips-for- working-with-students-with-learning- disabilities-adhd-or-traumatic-brain-injuries/
Concussion in the Classroom (Upstate University Hospital)	http://www.upstate.edu/pmr/pdf/classroom.pdf