

INTERVENTIONS FOR A PERSON WITH RIGHT HEMISPHERIC BRAIN CHANGES

Suggestions for Helping a Person by Addressing Their Cognitive Changes

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TYPES OF CHANGES

A person with changes in the right hemisphere of their brain (due to a stroke, for example) may have difficulty with a variety of cognitive abilities. Various factors determine which cognitive abilities become more difficult, including which hemisphere of their brain is dominant. Hemispheric dominance is reflected in part by whether this person was born right or left handed.

Three types of many possible changes are briefly identified here, along with suggestions of interventions (support strategies) to try.

1. **Visuospatial:** This person may have difficulty noticing objects in all parts (but particularly in the left parts) of their visual field, accurately seeing how far away an object is from their own body, seeing where objects are relative to other objects, or knowing where all of their own body parts are. These difficulties in knowing where objects are may be subtle, so that even when a person can see the location of an object, they may be working very hard to do so. A person's ability to see where objects and people are may fluctuate or be unpredictable at any given moment.
2. **Emotional:** This person may have reduced control over their own emotions. They may get tearful or get angry and strike out unpredictably. The strength of their expression of emotion may not match the intensity with which they feel that emotion. For example, they may swear and strike out when they feel only mildly irritated. They may react emotionally, then later realize what they did and feel embarrassed or remorseful. They may also have difficulty recognizing emotions or empathizing with other people. There may be unexpected sexual behavior due to confusion or reduced control. They also may be less able to manage their own distress if they have a history of physical, emotional, or sexual discomfort, pain, or trauma.
3. **Left sided body changes:** The left side of this person's body may be weaker, less coordinated, less well controlled, or even paralyzed. They may also be particularly sensitive to touch on all parts of their body, but particularly on their left side. A gentle touch on this person's arm for example, may feel to this person like being hit, pins and needles, intense pain, intense heat or cold, or bugs crawling up their arm. Or this person may not feel any touch on their left side or even realize their left side exists. For example, if you touch their left arm, they may not know you are touching them. They may not recognize parts of their left side. If they see their left hand, for example, they may not know what it is or that it is theirs. They may forget their left side is weak or paralyzed. For example, they may try to walk when their left leg is paralyzed, and not understand why they can't walk.

INTERVENTION SUGGESTIONS

4. **See other CAIS Handouts**, particularly: “#29 Visual-Spatial Interventions”, “#27 Touch”, and “#28 Movement” for more specific intervention suggestions at <https://www.improvingmipractices.org>
5. **Avoid underestimating this person's difficulties** or expecting too much of this person. Accurately assess specifically what this person can and can't do easily. This person's cognitive difficulties

(especially visuospatial) can go unnoticed because this person may talk well, clearly, and reasonably.

6. A person usually does not know what difficulties they are having, so asking them questions about what they can and can't do may not be helpful. Instead of asking them questions, simply **try to make a task as easy as possible for them.**
7. **Help this person relax** and feel comfortable, especially while performing a task.
8. **Avoid taking this person's behavior or comments personally.** Remind yourself that they may be acting impulsively, may not believe what they are saying, or may not be thinking of you when they do or say something. Address the distress this person is feeling rather than focusing on their comments or behavior towards you.
9. **Remain calm and respond reassuringly** to this person's feelings regardless of how intensely they are expressed.
10. **Avoid embarrassing or scolding this person.** They may not be able to control what they say or do, but later (maybe even immediately after) they may recognize their error or misjudgment and feel embarrassment or remorse. Sometimes they won't feel remorse, even when they reflect later on what they said or did impulsively. Again, avoid chiding or embarrassing them.
11. **Be compassionate, patient, and tolerant.** Avoid thinking this person is acting as though they can't do something when they really can. For example, avoid thinking "She can do it when she wants to". Even when they talk easily and reasonably, performing a task is likely more difficult than you realize.
12. If you **return another time**, they may be able to function more easily. For example, they may be able to see the location of objects more easily, or the emotion they were expressing may have faded.
13. **Watch this person closely** to discern how they really feel, or how well they are seeing where objects, you, or other people are at this moment.
14. **Adjust your communication, the environment, and the task** to help them perform a task or to recognize where objects and people are more easily, or to compensate for their difficulties.
15. **Try to see from this person's perspective.** Watch for this person's reaction so you can notice how your touch feels to them, or if they are accurately seeing where objects and your body are. Watch for confusion or anxiety due to misinterpretation of a situation or of objects or your movements.
16. **Adapt your approach**, communication strategies, and movements in response to their reactions.
17. **Tell this person what you are doing** and going to do, especially when doing something on the weaker side of their body.
18. **Approach this person from their stronger side.** Stand and talk to them on their stronger side.
19. **Position this person** so their weaker side is facing the wall when sitting or lying in bed.
20. Have their **stronger side** face what is **important to them**, for example, the room, activities, radio, TV, other people they relate to. (Avoid overstimulation or distracting and confusing stimuli.)
21. **Hand objects** such as clothing, or place objects such as a plate with food, slightly **to their right**, or wherever they see best at this moment.
22. **Touch and move this person's stronger side** before touching or moving their weaker side.
23. When touching or moving this person's weaker side, **touch carefully** using suggestions from the "CAIS Handout #27 Touch". Avoid touching if they are uncomfortable with touch.
24. **Slow down.** Move slowly when approaching, touching, moving, or reaching toward this person.
25. **Reduce clutter and unnecessary objects and people** in the space around this person.
26. Have **only one person in this person's sight** when helping with a task. Try to have only one person assisting them at a time.
27. **Use contrast** to make objects stand out in the environment and from each other.
28. **Address** this person's **fatigue** with rests during a task or with quality sleep and rest in general. They may also get tired from sitting in an environment that has, for them, too much or too little stimulation.