

# “When Behavior is More Than ‘Behavioral:’ Brain Injury and Psychiatric Co-Morbidity Through the Lens of Applied Behavior Analysis”

Friday, March 1, 2019 | 1:00-2:00pm



## Courtney Sand, MS, BCBA

Brain Injury Alliance of Iowa, Neuro Resource Facilitator

### About the Speaker

Courtney is a Board Certified Behavior Analyst with 17+ years of experience in the field of Applied Behavior Analysis at an autism program, school districts, a mental health clinic, and a Community-Based Neurobehavioral Rehabilitation Services program. Courtney is BIAIA's newest Neuro Resource Facilitator. Courtney has both professional and personal experience in brain injury. Her beloved grandpa recently passed away in December from his 2<sup>nd</sup> stroke and complications from ALS. The humbling experience provided Courtney with the unique perspective from “the other side of the door” as a family member and caregiver of an individual with a brain injury. Courtney is enthusiastic about helping spread awareness and education about brain injury, and supporting survivors of brain injury, their loved ones, and community stakeholders in accessing beneficial services to promote self-advocacy and progress toward their goals.

### Description

Brain injuries are often referred to as a “silent epidemic” because symptoms are not always immediately evident, and the general public has limited knowledge about the diagnosis, as well as its increased susceptibility to mental health diagnoses. My presentation focuses on brain injury and co-occurring mental illness as an “invisible disability,” as well as how engagement in challenging behavior should be analyzed and subsequently managed. An individual with a brain injury is often told that they “look fine,” which discredits their brain injury and its impact on their life. Consequently, engagement in challenging behavior is erroneously and all too often described as “behavioral, not brain injury,” and that he or she “knows what [they’re] doing” and “is in control of [their] behavior.” The co-occurrence of mental illness complicates the understanding of brain injury and its effect on behavior, adding another layer of mystery and misunderstanding. For a survivor of brain injury, especially one with a psychiatric diagnosis, the analysis of the maintaining function, or reason, behind their engagement in challenging behavior is often not afforded the same time and sensitivity and careful, person-centered analysis as an individual without a brain injury presenting in the same way. There is a need to change the way the world perceives brain injury by continuing to raise awareness and our response to this “silent epidemic.”

### Objectives

1. The participant will have an understanding of brain injury and psychiatric co-morbidity as an “invisible disability.”
2. The participant will be able to describe the A-B-C basic principles of Applied Behavior Analysis: antecedent, behavior, and consequence.
3. The participant will be able to identify and describe the 4 main functions of behavior of Applied Behavior Analysis: attention, tangibles, escape, and automatic reinforcement/sensory stimulation.
4. The participant will be able to identify and implement function-specific behavior management strategies.