Headway
the brain injury association

Insight impairment after brain injury

This publication explains how a brain injury can cause insight impairment, what the possible consequences of this can be, how a brain injury survivor with insight impairment can be supported and the legal frameworks that exist to protect them.

www.headway.org.uk
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Introduction

A brain injury can cause a range of physical, emotional, cognitive and behavioural effects. In some cases, a brain injury survivor may not consciously recognise that they have these effects. This is called ‘insight impairment’.

This publication explains how a brain injury can cause insight impairment, what the possible consequences of this can be, how a brain injury survivor with insight impairment can be supported and the legal frameworks that exist to protect them.

Words in **bold** are defined in a glossary at the end.

Remember that you can also get help for any of the issues covered in this publication from the nurse-led Headway helpline on 0808 800 2244 or helpline@headway.org.uk.

The information in this publication does not replace clinical guidance from medical professionals. You should always get advice from your GP or other suitably qualified professional for help with managing the effects of brain injury.

What is insight?

Insight is our ability to be aware of our own thoughts, and to use these to decide what we want to do, why we want to do it and how we are going to do it. This includes being aware of our own limitations, as well as being aware of social rules and how to behave around others.

Our ability to reflect on ourselves in this way is controlled by a complex network involving various parts of the brain and their connections.

One of the most important parts of the brain within this network is the **prefrontal cortex**. This area is responsible for many of our 'higher thinking skills', such as our ability to make decisions, plan activities and socialise. Unfortunately, because it is large and at the front of the brain, the prefrontal cortex is a common site of injury. Damage to it can affect various skills, including insight.

What does 'insight impairment' after brain injury mean?

A brain injury can cause a wide range of effects. In some cases, the brain injury survivor may fail to recognise that they

have these effects or may underestimate their impact, even when this is pointed out to them. This is called ‘insight impairment’, also known as anosognosia or ‘lacking insight’.

This is not a unique effect of brain injury. There are a number of other conditions that are also associated with impaired insight, such as schizophrenia, bipolar disorder and dementia.

It is important to understand that a brain injury survivor with impaired insight is not being stubborn about the impact of their injury. The lack of insight is due to genuine organic injury to the brain causing psychological and cognitive effects.

The survivor may lack insight for the direct effects of brain injury (such as memory problems), or for the impact of the brain injury (such as no longer being able to handle money safely).

The survivor may have insight for some effects of the injury, but not others. For example, a survivor with mobility problems may understand that they now need to use a wheelchair but fail to recognise that they also now have problems with controlling their anger.

Can impaired insight improve over time?

It is possible for impaired insight to improve over time.

Insight may be particularly impaired after the survivor has ‘woken up’ from a **coma** but can improve as they continue to recover.

Insight may also **fluctuate** so that there are moments when the survivor is aware of the impact of their injury and other times when they are not.

How does insight impairment affect people after brain injury?

Emotional impact

It can be upsetting, confusing or frustrating for brain injury survivors to be told that they have an issue that they cannot recognise. There may be a resistance to adapting their activity, such as being reluctant or refusing to use coping strategies. These issues may strain relationships, such as with families who are caring for the survivor or with therapists in rehabilitation settings.

Insight impairment not only affects the survivor themselves but also loved ones such as family members. Supporting someone with impaired insight can be difficult. Family members may experience their own mental health difficulties as a result of trying to cope.

It is important for anyone affected by brain injury who is experiencing difficulties with their mental health to reach out for help. Speak to your GP or contact mental health helplines such as Samaritans on 116 123.

You can also contact our nurse-led helpline if you want to talk about your feelings and experiences of brain injury. Contact our helpline on 0808 800 2244 or helpline@headway.org.uk.

Engaging with rehabilitation

Brain injury survivors with insight impairment who are having rehabilitation may not understand why they are being expected to undergo certain therapies or activities. They may not engage properly with the program or therapists, and this might interfere with their recovery.

Survivors might also overestimate their abilities due to being unaware of the full impact of their injury.

Part of a rehabilitation programme could be to try and help a survivor with regaining awareness of the impact of their injury. It is important for therapists and carers to manage this carefully, as it can be upsetting for the survivor to gradually gain insight into their injuries.

Social life and work

Brain injury survivors with impaired insight may struggle with returning to activities that involve others, such as work and socialising. Others may fail to understand the impact of brain injury, and this can be even harder to understand when the survivor themselves does not recognise the full impact of it. There may be misunderstandings over things such as the survivor's behaviour, for example if they have anger outbursts, but are unable to reflect on it or to explain it is because of their injury.

Risk and safeguarding concerns

Brain injury survivors who are unaware of their impairments may be at risk of harm to themselves or others. For example, a survivor with insight impairment may refuse to accept that their ability to drive safely has been affected by the injury. This may put them at risk of causing an accident on the road and hurting themselves or others.

It is a legal requirement to inform licensing authorities about a brain injury. Failure to do so can carry heavy penalties, as well as carrying the risk of harming someone. More guidance on this issue, as well as informing a licensing authority on a survivor's behalf, is available in our information on driving.

Survivors who have mobility issues or **hemiplegia/hemiparesis** may be at risk of falling if they are unaware of their physical limitations.

There may be **safeguarding** concerns for survivors with impaired insight. For example, a survivor may not understand that their cognitive impairment makes them a vulnerable target for financial abuse or **mate crime**.

For more guidance on safeguarding concerns that may affect brain injury survivors, as well as what to do in the event of someone being harmed, see our information on safeguarding.

There are legal frameworks that exist to protect someone with impaired insight. More information on this is available in the section *What legal systems protect someone with insight issues?*

How can brain injury survivors with insight impairment be supported?

While there is no formal therapy or cure to address insight impairment after brain injury, there are things that families and therapists can do to help a brain injury survivor to manage it and stay safe. This section offers guidance for families on how to support your loved one with insight impairment.

Encourage the survivor to get professional help

The professional that supports brain injury survivors with **cognitive** effects of their injury is called a **neuropsychologist**. The survivor may already have had support from a neuropsychologist through **rehabilitation**, but if they have not, or if they may benefit from further support, they can ask their GP about getting a referral to one or contact one privately.

While a neuropsychologist will not be able to 'treat' the impaired insight, they can help the survivor and their family to better understand and manage it. A neuropsychologist can also support with other cognitive effects of brain injury that may be associated with the insight impairment.

Education

A brain injury survivor may be unaware of the links between brain injury and their difficulties. Learning about brain injury and the various effects this can have may help the survivor to recognise how this has personally affected them. It is important to remember to manage this very carefully, as it can be upsetting for the survivor to gain insight into the impact of their injury.

Our website and downloadable publications offer tips for coping with many of the effects of brain injury. To access these and for more information, visit our website at www.headway.org.uk.

It can be helpful to educate others in the survivor's life about brain injury so that they can be more understanding of insight impairment. Be mindful about how much you choose to share and with whom, as insight impairment can put some survivors at risk of harm.

Be empathetic

It can be difficult to support someone with insight impairment, especially if they resist support. However, it is important to try to not get frustrated and to remember that the survivor is not being stubborn or simply denying their impairment.

Try to stay calm and empathetic when supporting the survivor. It is important to acknowledge their feelings. Remind them that you are trying to support them and keep them safe.

Try to avoid directly challenging them about their insight, as this can lead to conflict, disagreements and anger. If the survivor insists that they do not have an issue, let the conversation drop for the time being and come back to it when they are calmer.

If the survivor gets angry and you need guidance for coping with this, see our information on anger after brain injury, which contains guidance for family, friends and others.

Communicate effectively

Give the brain injury survivor time to talk about their feelings and concerns. Giving them the opportunity to reflect on their own experiences might make it easier for them to accept and adapt to changes in their life.

Do not discuss the survivor's insight issues if they are feeling tired, upset or angry. It will be easier to discuss things when they are feeling calmer.

Use clear and direct, but gentle language when explaining to the survivor about their insight. Try to use specific examples related to the situation you are in.

Modify tasks

If the survivor won't do important activities because of their insight impairment, try to modify these to make them more meaningful and achievable. For example, keep activities simple so that they are easier to complete. Try to relate them to the survivor's personal goals and plans. Break larger goals into smaller ones.

Provide frequent and non-critical feedback on their performance. Involve the survivor in rating their own performance and discuss any differences you may have with examples of what you have observed.

Ask for feedback from other people close to the survivor who also understand their brain injury, such as family and close friends.

Be risk aware

Be sensitive to any risks or dangers that the survivor may place themselves or others in as a result of their insight impairment. For example, if they are not aware of having a memory problem, they may be at risk of forgetting to lock doors before they leave home or leaving a cooker unattended.

Be aware of new people in the survivor's life who may appear to be influencing their decisions in a harmful way, as this could be a safeguarding concern.

For more guidance on safeguarding concerns that may affect brain injury survivors, as well as what to do in the event of someone being harmed, see our information on safeguarding.

Consider requesting a needs assessment

If you think that the brain injury survivor needs help with **activities of daily living**, they may benefit from having a **needs assessment** to identify how their local social services can help. More information on this, including how to apply is available from the NHS website at www.nhs.uk/social-care-and-support/introduction-to-care-and-support.

What legal systems protect someone at risk from insight impairment?

There are two main pieces of legislation that exist to help or protect people with impaired insight who are at risk in some

way: The Mental Capacity Act (2005) and The Mental Health Act (2007).

Mental Capacity Act (2005)

The Mental Capacity Act (2005) provides a framework to make decisions on behalf of people who are clearly not able to make decisions for themselves. This particularly applies to decisions about where to live and financial decisions.

People with insight impairment after brain injury may not have the **mental capacity** to make these decisions, as they are unable to reflect on and understand exactly how their injury has affected them. The MCA sets down how capacity is assessed and who can make decisions on their behalf in their 'best interests'.

For further information on the Mental Capacity Act, see our information on mental capacity, or visit the Office of the Public Guardian website at www.publicguardian.gov.uk.

Mental Health Act (2007)

The Mental Health Act (2007) details how a person can be detained against their wishes if their behaviour leads to significant risks to themselves or others.

The person has to be shown to have some kind of mental disorder (this includes the types of behavioural changes that occur as a result of brain injury), for it to be severe enough to warrant detention for an assessment, and for it to be in "*the interests of the person's health, safety or the protection of others*". It also has to be shown that the person would not willingly accept treatment. In cases of impaired insight after brain injury, this is commonly that the survivor does not understand that there is a problem.

Further information on the Mental Health Act is available on the NHS' website at www.nhs.uk/mental-health/social-care-and-your-rights/mental-health-and-the-law/mental-health-act/.

Conclusion

We hope that this information has helped you to better understand insight impairment after brain injury, including how you can help your loved one to cope with this issue.

For further information and support, contact our nurse-led helpline on 0808 800 2244 or helpline@headway.org.uk.

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Glossary

Activities of daily living – personal, self-care tasks that are generally completed everyday such as washing, dressing, toileting and eating. After brain injury, people may need support with completing these activities.

Anosognosia – being unaware or underestimating the impairments caused by brain injury or other neurological condition.

Cognitive – skills related to learning, remembering and thinking, such as memory, decision making and multi-tasking.

Coma – a state of complete unconsciousness for longer than 6 hours in which a person looks like they are asleep but they cannot be woken up, does not respond to stimuli (such as light or sound), does not voluntarily move and does not have a normal sleep-wake cycle.

Fluctuate – regularly changing. After brain injury, some effects such as fatigue or mental capacity may fluctuate so that they are more problematic at some moments than others.

Hemiplegia/hemiparesis – weakness or paralysis on one or both sides of the body.

Mate crime – a form of abuse in which a vulnerable person is exploited or abused by someone who the person considers to be their friend.

Mental capacity – the ability to understand information and use it to make decisions.

Needs assessment - an assessment conducted by social services to identify what support needs someone has.

Neuropsychologist – psychologists who are specially trained to assess and treat people with neurological conditions, including brain injuries. Neuropsychologists are listed on the British Psychological Society's Specialist Register of Clinical Neuropsychologists (SRCN).

Prefrontal cortex – an area at the front of the brain responsible for many of our 'higher thinking skills', such as our ability to make decisions, plan activities and socialise.

Rehabilitation – a programme of therapies designed to help people with regaining lost skills due to illness, with the aim of minimising disability.

Safeguarding – policies and procedures that exist to protect vulnerable people.

We hope that this has been a helpful resource. Please consider sharing your feedback with us by scanning the QR code or by visiting our publication feedback survey https://uk.surveymonkey.com/r/hwpublications.

Learn more and support our work at www.headway.org.uk/get-involved.

This information was last reviewed in 2023.

We're here to listen.

If you need support, or have a question about brain injury, contact our free nurse-led helpline:

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helpline@headway.org.uk

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