

**Apathy and Disorders of Drive Following Traumatic
Brain Injury**

Patient Information Booklet



Talis Consulting Limited

What are Apathy and Drive?



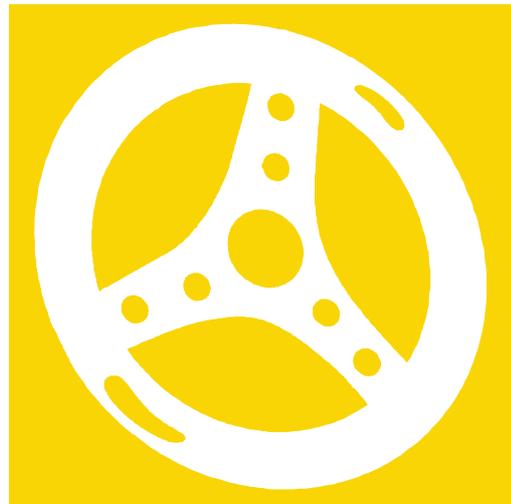
Apathy describes a disorder or diminished motivation, where there is a decrease in goal-directed activity. It is generally characterised by lessened activity, reduced initiative and lack concern about working towards and achieving goals. Apathy has multiple components, it encompasses reductions in:

- Goal-directed thoughts - *such as poor awareness of what goals need to be achieved, and poor planning and problem-solving abilities which are needed to obtain these goals.*
- Goal-directed emotions - *such as caring about achieving a goal, or feeling bad when the goal is not achieved.*
- Goal-directed behaviours - *such as going out and trying to achieve your goal.*

The concept of “drive” is used to describe a motivating force, which results from a combination of the cognitive, behavioural and emotional components; therefore a lack of apathy is a lack of “drive”.

However it can be hard to distinguish apathy from other disorders which can affect drive. Apathy describes a lack of motivation or drive which is not a result of a diminished level of consciousness, emotional distress or cognitive deficits.

For example, people who suffer from depression often show symptoms which are very similar to those with apathy; however whilst depression and apathy share common features, they may be differentiated. In depression the brain injured person is often concerned, worried and deliberately avoids or withdraws and does not enjoy activities. Those with apathy, however, are largely indifferent, or have a complete lack of concern.

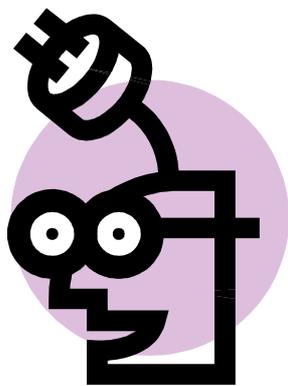
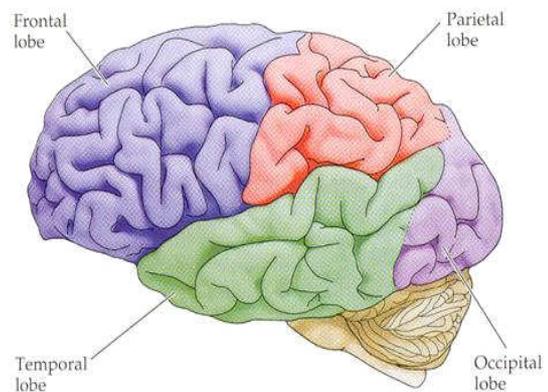


Why can a Head Injury cause Apathy and Diminished Drive?

Apathy and disorders of drive are often associated with injury to the frontal parts of the brain. These areas of the brain are responsible for the processing of reward, incentive and forward-planning, therefore there can be a reduction in goal-directed activity if they are damaged.

The frontal parts of the brain are unfortunately often the areas damaged during a head injury as the front of the skull has sharp ridges, and a blow to the head can cause the front of the brain to grind on these ridges.

Apathy has also been linked to neurotransmitter disruption (neurotransmitters are chemicals which brain cells use to communicate between each other). Specifically the neurotransmitter dopamine is involved in processing reward. A head injury may cause disruption to the systems which produce dopamine, and this may cause feelings of apathy and a lack of motivation.

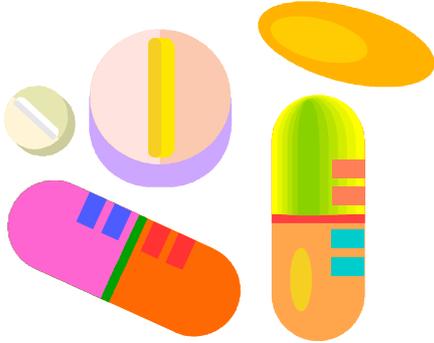


Following a head injury it is common for people to suffer problems with awareness and insight of their difficulties. For example someone with emotional problems following a head injury may be unaware of having a problem at all, and be surprised and confused as to how others react towards them. A lack of insight and awareness is relevant to apathy because those who are unaware of problems would not be expected to initiate goals to overcome them.

Moreover, if a person is setting a goal for themselves, accurate awareness of their abilities is necessary in order for the goal which they set to be realistic and achievable. If the goals you set are hard to achieve, then it is hard to see improvement in your situation. This can worsen apathy as you become disillusioned with setting goals, so therefore stop trying.

What can be Done to Help?

There are a number of interventions which have been proposed to help deal with apathy. Some have suggested that it can be treated with medicines, by administering antidepressants which enhance the role of dopamine in the brain.



Apathy has also been treated through Psychological Therapy. This can take the form of Cognitive Behavioural Therapy which involves problem-solving therapy, or goal-setting therapy. The therapies are designed to incorporate strategies to assist with goal-directed activity; such as planning

of stages, monitoring and executing activity.

Psychological Therapies may also help to teach you to use things in around you to help you achieve goals. This may be having a notepad where you write down your goals and all the stages you need to go through to achieve them; or it may be an alarm clock which you set for certain times to remind you to do something.

Finally, Psychological Therapy can help to teach you better awareness of your strengths and weaknesses following your head injury. For example, through memory exercises you can reveal which aspects of your memory are impaired, and to what extent they are impaired. Increasing awareness of your difficulties is important in overcoming apathy as it means that you can set appropriate

and realistic goals, which, when achieved, increase your motivation to pursue other goals.



How do I Set Goals?

One way to overcome apathy is to set goals. However it can be important to take some time to consider the best way to set your goals to help maximise the chances of you achieving them. This will help you to create a “workable goal” - something which is constructive and which you can take forward. It is not enough to have a vague wish, for example: “*I want a job*”. This wish must be developed and interpreted into clear and concise workable goals.

You may also be more likely to be motivated to achieve your goal if you set goals which lead to an increase in a positive state, rather than a decrease in a negative state. For example, instead of saying “*I want to have fewer angry outbursts*” try setting a goal of “*I want to stay calm more often in aggravating situations*”. The more positive goal means you can clearly see why you are setting the goal (i.e. to deal with aggravating situations better) and makes your progress seem more positive and reinforcing.

One way in which you can set workable goals is to use the SMART method. The SMART method means making sure all your goals are:

Specific - Work out exactly what it is you want. Instead of “*I want a job*” pick something specific you want to work on, for example “*I want to improve my memory abilities*”. It is a good idea to avoid language with any jargon, so your goal is clear and understandable. Therefore instead of saying “*memory abilities*”, you might want to say “*I want to be better at remembering to complete my tasks each day*”.

Measurable - This means that there must be some way in which you can tell if you are making progress, and some way to tell when your goal has been achieved.

If your goal is to remember to complete your tasks each day, if you could make this goal measurable by working out specifically the tasks you need to remember. For example to take your medication, to check your emails and reply to them, to take your post to the post box, and so on. Then you can record each day how many of those tasks you achieved. Then you will know that when you remember all of them, you have obtained your goal.

Attainable- It is critical that the goal you set is achievable. This requires good awareness of your problems and your abilities. A Clinical Psychologist can help you to achieve this.



How do I Set Goals? (Continued)

Relevant - The goals you set must be relevant to what you want to achieve overall. For example, if your ambition is to get a job, then improving your memory abilities is relevant to helping you in this ambition, so this would be a good place to start.



Time-Bound - Your goal should be time bound. This means that you set yourself a deadline for when to achieve the goal. This deadline should be far enough in the future so you are not rushed into obtaining your goal, but close enough so that it gives you additional motivation to work hard and achieve your goal.



Therefore, using the SMART criteria you can transform a vague wish of *“I want a job”* into multiple incremental, workable goals, such as: *“I want to improve my ability to remember to do all my tasks each day (which are taking my medication, walking the dog... etc.), and I will achieve this goal by the 1st of November”*.

How Can I Help Myself?

As well as structured goal setting within Psychological Therapy, there are a number of simple things you can do to help you to overcome apathy and achieve more goals. Not all of these techniques are relevant to everyone, so it is important to take on board the advice which you feel would help you and tailor it to your own individual situation.

Use external compensation



External compensation means using something in the outside environment to help you to work on your goals. You might like to mark the goals you make onto a calendar to make them time-bound. If you have spend time working out incremental steps to help you achieve your goal, write these down too. You can then be sure you will not forget any step involved, and you can check off each step as you accomplish it.

Break down activities into small steps

It can be hard to motivate yourself when a task seems large and overwhelming. Therefore take time to break up a task into small steps and work through them systematically. For example if you must leave the house to go to the supermarket, start off concentrating on what you need to do now (e.g. find your shopping bag, write a shopping list) rather than just trying to pluck up the drive to launch into the task.



Ask others to be firm with you if you are not showing motivation

Sometimes it can be hard to motivate yourself. In these situations it may be beneficial to ask someone you trust to be firm with you on occasion. Tell them that instead of asking you to do something they should tell you to do something. Rather than saying “Do you want to...” try saying “We are going to...”.

Reward yourself when you take on activities of achieve goals

Reward and reinforcement are a big part of motivation, so make sure you reward yourself when you achieve your goals or when you take the initiative to take up activities. Rewards can be anything from your favourite food to allowing yourself an indulgence like a long relaxing bath or a shopping trip.

How Can I Help Myself? (Continued)

Engage in activities you enjoyed or were good at prior to your injury

You are more likely to feel motivated to pursue activities which you value. Therefore engage yourself in activities you enjoy or are good at, you are more likely to engage and get motivated by these sorts of activities.



Get in contact with a support group

It can be highly beneficial to meet people who are in a similar situation to yourself, they can help you to understand your own situation and give you advice on the best way to overcome your problems. Talk to your Clinical Psychologist if you think that this may be something you would benefit from.

Structure the day and get into a regular routine

The more structure and routine you have in your day then the less you need to rely on your own drive and motivation. If you fill your day with structured activities then this is a good way to keep you active and engaged.



Write down your goals and wishes and keep this bit of paper with you



Sometimes it can be hard to remember exactly why your spending the effort setting goals and engaging in activities. If this is the case for you, write down why you're tackling your apathy and lack of motivation, what do you hope to achieve? How will this better your life? What things will you be able to do which you weren't able to do before? Refer to this piece of paper whenever you feel that you are becoming de-motivated.

Useful Websites:

www.headway.org.uk

- A useful web site with much information about brain injury and rehabilitation in the UK.

www.birt.co.uk

- Another useful web site concerning brain injury, with downloadable leaflets about brain injury and its implications.

<http://www.projectsart.co.uk/pdf/smart-goals.pdf>

- A worksheet on the SMART goals, how to implement them and how they can help you.

<http://www.pickthebrain.com/blog/how-to-overcome-apathy-if-you-can-be-bothered/>

- A web site on apathy and how it can be overcome through setting the right kind of goals.

