→ SPOTLIGHT

From politics to the playground:

Putting childhood-acquired brain injury on the timetable

Emily Bennett and Gemma Costello from the National Acquired Brain Injury Learning and Education Syndicate (N-ABLES) talk about developments in the political agenda and policy around ABI.

Acquired brain injury (ABI) is identified as the leading cause of death and disability in childhood, with an estimated 40,000 children or young people (CYP) presenting to UK hospitals each year – although the actual incidence is likely to be much higher. Recent estimates suggest that approximately one child in every classroom will have experienced some kind of brain injury by the time they leave school.

THE ULTIMATE PRICE OF ABI

Childhood ABI can impact on all aspects of a CYP's life. In the longer-term, young people whose ABI is poorly understood or misinterpreted, or whose newly acquired needs remain unmet, are at increased risk of adverse outcomes including mental health difficulties, poorer attendance, poorer educational outcomes and career prospects, increased rates of exclusion, and overrepresentation in the criminal justice system. In school, teachers may notice things such as behavioural issues, attention problems and difficulties processing and holding onto information. Despite this, teachers report having very little knowledge or experience of ABI.

WHY HAVE THE NEEDS OF CYP WITH ABI GONE UNNOTICED?

ABI is often referred to as a 'hidden disability'. This is particularly relevant in childhood, where children often make a good physical recovery, making those around them less alert to the broader impact of the injury. It took some time for studies to highlight the 'hidden' needs of ABI, and for there to be a better appreciation of the potential for an early injury to interact with both the child's development and environment over time. It is now recognised that some of the effects of the brain injury may not be noticed for many months or even years. The risk is, as needs emerge over time, they may not be connected back to the original injury when generating hypotheses around needs. With little training about brain injury and development in schools, if any, it is not surprising that teachers too can have trouble recognising the hidden or later-emerging difficulties associated with ABI.

A SHIFT IN PERSPECTIVE ...

Recent improvements in emergency and acute medicine, thankfully, mean many more individuals are now surviving an ABI. However, this has also resulted in a

BIO

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larger population of survivors, and a higher number of people requiring rehabilitation to optimise their recovery. There has also been a growing recognition that children with an ABI may not only need assistance throughout childhood, but can also face additional lifelong challenges, particularly if support is not in place early on. Despite this, and growing evidence of the cost-effectiveness of neurorehabilitation, investment in and development of rehabilitation services has remained inconsistent and limited, particularly for children.

IT'S TIME FOR CHANGE

In 2017, an All-Party Parliamentary Group on Acquired Brain Injury (APPG on ABI) was established to drive change and provide a voice for people who have experienced an ABI. The APPG has played an important role in raising issues surrounding ABI across health, social care and welfare, and in seeking improvements in support and services for people directly affected by ABI, their families and carers.

In October 2018, the APPG on ABI published a report, 'Acquired Brain Injury and Neurorehabilitation – Time for Change' (you can read the report at **https://bit.ly/2X6fual**). It called for immediate action to address the issues surrounding neurorehabilitation. The report recognised that much of a CYP's rehabilitation will take place in school. It reviewed the implications for CYP with ABI, highlighted key issues surrounding ABI and education, and made a number of recommendations. Since the release of the report, meetings have been held with key government ministers, and brain injury has been pushed up the agenda within health, education, and criminal justice departments.

One of the recommendations for education recognises that many CYP with ABI require individually tailored, collaborative and integrated support for the return to school, and throughout their education; a 'return-to-school' pathway plan is required, led and monitored by a named lead professional, to provide a consistent approach and support for the individual, their family and teachers.

BIO

Gemma Costello is Psychology Lead at The Children's Trust. She is a Specialist Educational Psychologist in Paediatric Neuropsychology working as part of a multi-disciplinary team, providing neuro-rehabilitation to children, young people and their families following acquired brain injury (ABI).

RE-BUILDING BRAINS: BACK TO THE CLASSROOM

On the back of the Time for Change report, a new group, N-ABLES, was formed. The group aims to drive forward the recommendations made in the report, and to support education settings to become more ABI aware. Teachers play a crucial role in building young brains, in nurturing development and in creating a learning-friendly environment in their classrooms. After ABI, these become even more fundamental, and teachers and schools make a huge contribution to a child's rehabilitation; supporting the essential relearning, and compensation for newly acquired needs. N-ABLES is now working with ministers, organisations and educators nationally to bring the political momentum about ABI back to the classroom, where it will really make a difference to CYP with an ABI, and the teachers working so hard to support them.

Left to right: Dr Gemma Costello, Educational Psychologist; Chloe Hayward, CEO of UKABIF; Chris Bryant, MP; Dr Emily Bennett, Consultant Clinical Psychologist

An ABI is any injury to the brain which has occurred following birth and a period of typical development. It includes traumatic brain injuries e.g. road traffic accident, fall or assault, and non-traumatic injuries related to illness or medical conditions.

WHAT CAN TEACHERS AND SCHOOLS DO TO INCREASE ABI AWARENESS AND PREPAREDNESS?

A great start would be to pose the following questions:

- Is there a school policy for ABI?
- Has the SENCO in your school received training on ABI?
- Are you aware of free online training and resources for teachers around ABI?
- Do you ask about possible ABI on point of entry to school?
- Do all school staff have a shared understanding of the needs of a child with ABI?
- Do you ask families to notify you of any illnesses/injuries that occur over school holidays so that you can monitor them?
- How are children and young people supported in their return to school after an ABI?