

# Relationships after brain injury



This booklet has been written for brain injury survivors and the people with whom they have relationships. It describes how relationships can be affected following brain injury, offers tips for managing relationships, and gives information on where to seek professional support from.

## ■ Relationships after brain injury

This e-booklet is an adaptation, created in August 2017, of the Headway print booklet *Relationships after brain injury* and may contain minor updates to the original version.

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Headway – the brain injury association  
Bradbury House, 190 Bagnall Road  
Old Basford, Nottingham NG6 8SF

**Authors:** Tamsin Ahmad, Publications and Research Manager, Headway – the brain injury association and Dr Giles Yeates, Clinical Neuropsychologist and Couples Therapist.

## acknowledgements



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# Introduction




**R**elationships are a very important and intimate part of life. They give us a sense of security and wellbeing, and contribute towards our sense of self-identity. It is often our closest relationships that provide the vital emotional and practical support needed when hardships are faced, such as when a brain injury occurs.

For some people, the **emotional**, **behavioural**, **physical** and **cognitive** changes after brain injury can have an impact on existing and future relationships. There are a number of ways in which this can happen and a number of different outcomes. Some relationships may strengthen, whereas others may become strained over time or even completely break down.

This booklet has been written to offer information and advice on this complicated and sensitive topic. It offers information on how relationships can be affected after brain injury, the impact this can have, and what can be done to help relationships that are strained. Useful organisations and sources of support are listed throughout the booklet, and a list of relevant contact details can be found **at the end**.


**Remember that you can ring the **Headway helpline** to discuss any of the issues in this booklet. The helpline can offer information and emotional support on different aspects of brain injury. To contact the helpline, call 0808 800 2244 or email [helpline@headway.org.uk](mailto:helpline@headway.org.uk).**

# What are relationships?



**A** relationship is a connection that people share with one another. When we think about the people we have relationships with, we often consider our immediate and personal relationships, such as those we have with our family and partners. However, a relationship is a connection that we have with anyone who is significant in our lives or who we see on a regular basis. We can therefore also have relationships with friends, work colleagues and neighbours.

## How brain injury can affect relationships

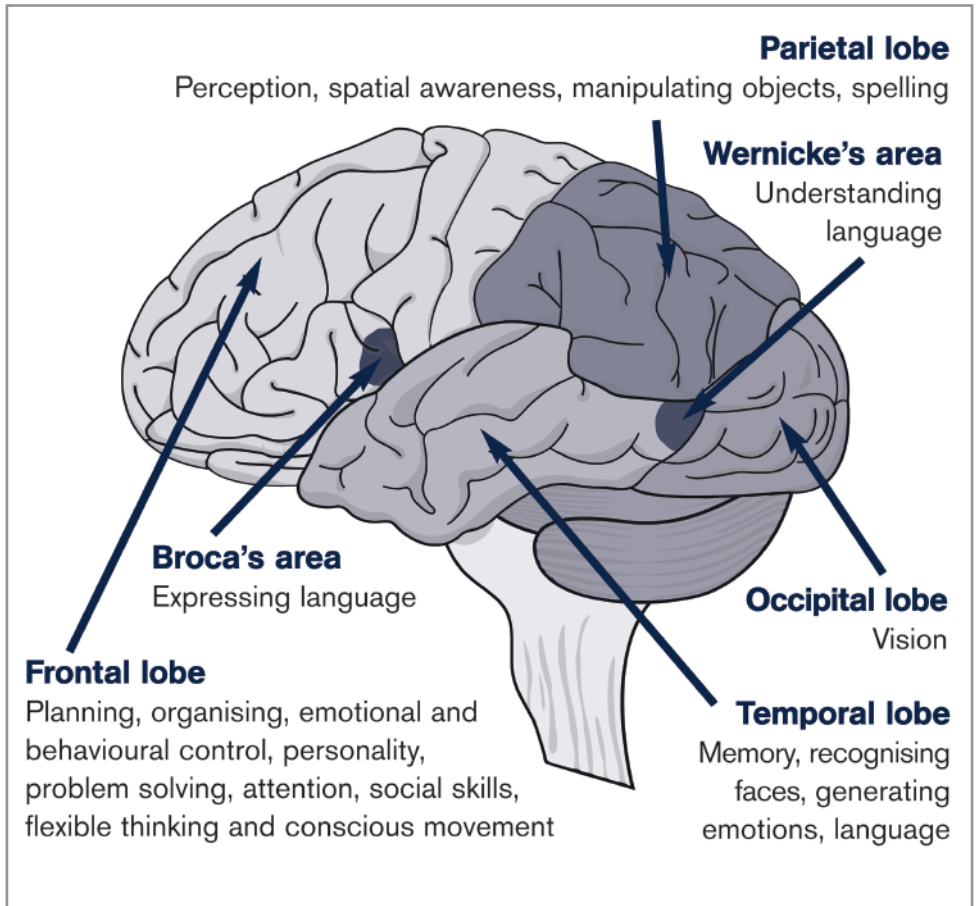


**O**ur brains are specialised in connecting with others through social relationships. There are a number of specific brain structures that are responsible for processing the emotional and social skills that form the basis of all relationships:

- The limbic system, insula and cingulate – this is a group of brain structures that are collectively responsible for generating and processing emotions of self and others.
- The frontal lobes – this part of the brain is responsible for managing emotions and behaviour through a number of cognitive (thinking) skills such as motivation, planning, making decisions and inhibiting behaviour, collectively known as the executive function. Parts of the frontal lobe are also involved in anticipating other people's emotions and monitoring one's own behaviour accordingly.

## ■ Relationships after brain injury

- The temporal lobes – parts of the temporal lobes are involved in thinking about things from another perspective, focusing on the same thing as others in a group situation, and keeping social rules and conventions in mind.
- The brainstem – this part of the brain is responsible for reflex emotions, including social reflexes such as smiling, as well as basic functions such as breathing and sleep/wake cycles.



When the parts of the brain that are responsible for processing emotions and behaviour are injured, the brain injury survivor may struggle with, or no longer have the skills that are needed to make relationships work successfully.

The injury itself is like a boulder crashing into a lake, and the impact on all relationships is like the ripple from the splash radiating out to involve many of those in the brain injury survivor's social network. These challenges can cause significant distress for both the survivor and the people with whom they have relationships, and may increase as time passes following the injury.

Emotional, behavioural, physical and cognitive effects can all have an impact on relationships. The following section describes in more detail how common effects of brain injury can affect relationships.

### **Emotional and behavioural effects**

Common emotional and behavioural effects of brain injury that can affect relationships include depression, mood swings, inappropriate emotions, problems with managing anger and lacking empathy.

#### **Depression**

A brain injury survivor experiencing depression may find it more difficult to engage in social situations; indeed, they may stop socialising altogether. Depression can also cause tiredness and lethargy, which may affect the survivor's interest in social activities, especially if fatigue is already an issue. Family, partners and friends may try to offer support, but this might be resisted,

causing relationships to become strained. Sexual relationships can also be affected, as the survivor may lose their interest in sex. More information on this topic is available in the Headway factsheet [\*Depression after brain injury\*](#).

### **Mood swings**

It might become difficult for people to maintain positive relationships with a brain injury survivor whose moods are unpredictable. The brain injury survivor themselves may find it frustrating when others are unable to understand how they are feeling, and this may cause further problems in relationships.

### **Inappropriate emotions**

Emotions that are inappropriate to the context may be displayed by some survivors, for instance laughing if they are told bad news. This can cause embarrassment in social situations and people may stop socialising with the survivor in order to avoid such situations. Partners and family members in particular may struggle if the survivor's display of inappropriate emotions occurs regularly and appears insensitive.

### **Managing anger**

Anger is often directed to those nearest to the survivor, such as family members and partners. This can have a serious impact on relationships, especially if the anger leads to recurring arguments. Families, partners and friends may become anxious about triggering the anger, and the survivor may in turn feel negatively about their loved ones during periods of anger outbursts. Children may become fearful of a parent who frequently becomes angry, especially if the parent did not have an angry temperament before their injury. More information on this topic is available in the Headway booklet [\*Managing anger after brain injury\*](#).



### **Lack of insight**

A brain injury survivor may no longer be able to understand and appropriately respond to how others are feeling, and their behaviour may seem distant. For example, the survivor may fail to recognise when a partner is upset and therefore not understand that they are expected to provide comfort and support. Or they may not realise that if they have upset a friend, the appropriate response would be to apologise. The survivor themselves may feel quite confused about what to do in these instances but choose to keep this confusion to themselves.

### **Physical effects**

Common physical effects of brain injury that can affect relationships include mobility problems, communication problems, sexual dysfunction, hormonal problems, pain, fatigue and facial injuries.

### **Mobility problems**

Mobility problems, such as [dizziness and balance problems](#), can make it difficult for people to socialise in crowded environments. The brain injury survivor may find that they are spending less time with friends than they did prior to their injury, and their social network may start to dwindle. A child's relationship with their brain injured parent may be affected if the parent is no longer able to engage in physical play with them, such as through sport. Mobility problems might make it more difficult for the brain injury survivor to engage in sexual activity with their partner or spouse; sex may therefore turn into an activity that needs to be planned, or even become impossible, taking away the spontaneity and enjoyment.

### **Communication problems**

We use communication to express how we are feeling about things, find out how others are feeling and discuss day-to-day things that we think are important. Some people develop problems with their speech or word retrieval after brain injury. Depending on the severity of the problem, families, partners and friends might find it difficult to understand the brain injury survivor, and more effort may be required to have basic conversations. For more information on this topic, see the Headway booklet *Coping with communication problems after brain injury*.

### **Sexual dysfunction**

Various effects of brain injury can result in sexual dysfunction; this is discussed in more detail in the section *Sex and sexuality*.

### **Hormonal problems**

Injury to the hypothalamus and/or pituitary gland of the brain can cause hormonal problems in some brain injury survivors. This can lead to a range of issues such as depression, sexual difficulties and mood swings, among other things, that may affect relationships. More information on this is available in the Headway factsheet *Hormonal imbalances after brain injury*.

### **Pain**

Pain can be experienced anywhere in the body following brain injury. It might be experienced occasionally, regularly or all the time. This can make it difficult for the brain injury survivor to engage in day-to-day activities. They may no longer enjoy activities or socialising with friends if they are in pain. Sexual activities may become altogether impossible. Family members and partners may find it distressing if they are not able to comfort the survivor with the sensation of touch.

### **Fatigue**

Brain injury survivors experiencing fatigue may struggle with committing to and attending social get-togethers, which may make them feel fatigued for hours or days afterwards. Family activities may need to be shortened, reorganised or rescheduled to accommodate the survivor's new routine. It might become difficult for the survivor to spend long periods of time with people, especially children who often demand high levels of energy. For more information on this topic, see the Headway booklet *Managing fatigue after brain injury*.

### **Facial injuries**

If a brain injury survivor has been in an accident, they may have visible injuries to the head or face. This could include scarring to the face, indents to the skull or facial disfigurements. Family members and partners may struggle with the change in physical appearance. Children may not understand why their parent looks different and might be frightened, depending on their age. If the facial injury is very apparent, it might become more difficult for the brain injury survivor to find a partner.

### **Cognitive effects**

Common cognitive effects of brain injury that can affect relationships are memory problems, problems with attention and concentration, executive dysfunction and lack of insight.

### **Memory problems**

Memory problems after brain injury may cause someone to forget key dates such as birthdays, or social commitments such as meeting a friend for lunch. Other people may misinterpret this forgetfulness as being neglectful. For example, friends who do not see the survivor regularly may not realise how memory

problems affect the survivor on a day-to-day basis. More information on this topic is available in the Headway booklet *Memory problems after brain injury*.

### **Attention and concentration**

It may be difficult for the brain injury survivor to attend to, or concentrate on things for sustained periods of time, for instance, following a conversation in which lots of people are involved and the topic is changing quite rapidly. This may appear to others as though the survivor is disinterested.

### **Executive dysfunction**


Executive dysfunction can make a brain injury survivor impulsive, unpredictable or unable to make appropriate decisions. This may affect their ability to socialise, as decisions about social behaviour are often complex, and many people rely on 'gut-feeling' and intuition to assess whether a behaviour is appropriate or inappropriate in a certain social situation. Without these skills, a brain injury survivor may struggle with social problem-solving. These issues are also likely to alter a person's personality and this may have an impact on existing or future relationships. Families, partners and friends may feel like the person is no longer who they once were and question whether they will ever be the same again. More information on this topic is available in the Headway factsheet *Executive dysfunction after brain injury*.

### **Lack of insight**

A brain injury survivor may not be aware of the changes that their brain injury has resulted in, including their social behaviour. This is not a case of denial, but rather the survivor does not recognise the change or does not attribute it to their injury. This can lead to frustration and arguments within the family network as the family

tries to explain the nature of the survivor's problems, while the survivor is unable to recognise it. More information on this can be found in the Headway factsheet *Lack of insight after brain injury*.

# Types of relationships and how they are affected after brain injury

 This section offers information on how brain injury can have an impact on the different types of relationships that many people have in their day-to-day lives.

## Couple relationships

Relationships between partners are one of the most commonly affected types of relationships after brain injury. Both partners often feel a strong sense of commitment to the other, especially after a life-changing event has occurred, such as one partner sustaining a brain injury.

Couples usually spend a significant amount of time together, and so the brain injury survivor's partner is often aware of the effects of the injury, including 'hidden' effects. Further, in supporting brain injury survivors, partners often take on caring roles. This can lead to the boundaries between the roles of 'carer' and partner becoming blurred.

If the survivor's personality has changed, the partner may feel that they are no longer the person they originally chose to be in a relationship with, resulting in feelings of confusion, longing, sadness and loss. The survivor themselves may no longer feel the same way about the relationship as they did prior to the injury. However, enduring challenging experiences like this can also, with support, strengthen some couple relationships.

More information on this can be found in the Headway factsheet *Brain injury: a guide for couples*.

### Case study

*"Sheema and I had been married for just three months at the time of the incident.... My mood swings put enormous pressure on our marriage. The effects of my brain injury have been unbelievably tough on Sheema, but she has taken our vow of 'in sickness and in health' very seriously."*

Dave – to read more of Dave's story, visit the [My Story](#) section of the Headway website.

## Children

The reaction a child will have to their parent sustaining a brain injury will depend on a number of things such as the child's age (and their ability to understand the consequences of their parent's injury), their temperament, the type of relationship that they had with the parent prior to the injury, and the way in which the injury has affected the parent.

Relationships between some parents and their children may strengthen. Children can also offer a potential contribution to their parent's recovery, if supported in an appropriate manner. However, it can also be quite common for the child to feel distant and confused about the relationship, especially if the parent has changed.

More information on this can be found in the Headway booklet *Supporting children when a parent has had a brain injury*.

### Case study

*"I found it difficult to get through to him and his brain injury meant that he struggled to engage and connect with Katie. She saw her daddy's anger outbursts, and little things such as Warren not saying goodbye to Katie when he went out were difficult for a toddler to understand."*

Sarah – to read more of Sarah's story, visit the [My Story](#) section of the Headway website.

### Other family members

It is often family members, such as partners, parents and siblings, who spend the most time with the brain injury survivor in the early stages, for instance when the survivor is in hospital or when they first return home. These are often emotionally intense and difficult times for everyone, and experiences such as this can either strengthen or strain family relationships.

Family members may take on the role of caring for the survivor. This may lead to feelings of stress as the family member finds they are less able to spend time with friends or doing activities they enjoy. On the other hand, some families may enjoy being able to spend more time together than they did prior to the injury.

More information is available in the Headway factsheets *Brain injury: a guide for siblings* and *Brain injury: a guide for grandparents*.



### Case study

*“My mum hasn’t been the easiest person to deal with at times. It can be very challenging trying to adapt to new behaviours in the friend and mother you have known your entire life. She has been on Headway courses to help ‘manage challenging behaviour’ after such injuries, which have given us great tips to move forward and cope with unexpected changes to her personality. Many people don’t realise that it’s not just the individual person who is forced to adapt to life after brain injury.”*

Lauren – to read more of Lauren’s story, visit the [My Story](#) section of the Headway website.

### Friends

Many friends, unless they are very close friends or have visited the brain injury survivor in hospital, will have little understanding of the nature of brain injury and how this has affected the survivor. As a result, friends may make fewer allowances of the effects that the brain injury survivor experiences, especially if these are ‘hidden’. In social situations, friends may initially joke about the survivor’s brain injury or trivialise the effects of it from a lack of understanding, failing to recognise the impact this has on the survivor themselves.

It is unfortunately quite common for brain injury survivors to feel as though friends are drifting away. However, as with family members, some friendships may in fact strengthen, especially if a friend is sympathetic and willing to learn about brain injury.

More information is available in the Headway factsheet *Brain injury: a guide for friends*.

### Case study

*“Marie is my good friend and, though I had only known her for nine months when she sustained her brain injury, it doesn't seem like much to call her regularly to make sure that she always knows there is someone on hand to help her if she needs assistance.”*

Kathryn – to read more of Kathryn's story, visit the [My Story](#) section of the Headway website.

## Work colleagues

The people with whom we work often form an important social network in our lives. Some working relationships with colleagues may even develop into friendships, whereas others stay as professional relationships restricted to the workplace.

Colleagues directly involved with the survivor, such as managers, may well have an understanding about the survivor's injury, as it is likely that they will have been kept informed while the survivor was in hospital. However, it is unlikely that other colleagues will know as much detail unless the survivor had requested this information be passed on.

For brain injury survivors who find they cannot return to work after their injury, relationships with former colleagues may change. It may be that colleagues who are also friends continue to visit the survivor, but this might taper off over time. The changed circumstance of not seeing work colleagues on a regular basis can lead to feelings of social isolation and a loss of a familiar social network.

Those brain injury survivors who are able to return to work may have difficulties with maintaining appropriate social contact with colleagues. Colleagues may also struggle to understand and adapt to the survivor's new needs or pace of work, which may interfere with their working relationship. Supervisors and managers may not know how to respond to such challenges in a timely and productive way, especially if they are not educated in the effects of brain injury. These difficulties can often lead to losses of employment, demotion in roles and exclusion from work opportunities.


More information is available in the Headway factsheet *Brain injury: a guide for colleagues*.

### **Case study**

*"My colleagues felt helpless as they watched the person who had once been the most competent in the team struggle to answer their questions. Even today, communication continues to be one of my key challenges after brain injury."*

Kerry – to read more of Kerry's story, visit the [My Story](#) section of the Headway website.

# Impact of changed relationships




**T**he relationships described in the previous section are all affected by a brain injury to different degrees and in different ways. However, when any type of relationship is changed, this can commonly cause feelings of sadness, confusion, hurt and loneliness among everyone involved. In turn, the brain injury survivor may become withdrawn and socially isolated, and it might become more difficult for them to seek support. This might be more of an issue in some types of relationship than others; for instance, drifting away from a partner can be more distressing than drifting away from work colleagues. However, this will, of course, depend on the individual and their own relationships.

Some brain injury survivors may feel that their loved ones do not understand how they are feeling, which can cause them to become frustrated and distant. Conversely, families and friends of a brain injury survivor may also feel frustrated and helpless if they are unable to understand how the survivor is feeling and how they can help.

Both brain injury survivors and their partners, relatives and friends can be affected by a change in the relationship, and it's important that both feel able to access support accordingly. More information on this is available in the section *Professional support*.

# Role changes



**W**hen a brain injury survivor starts to adapt to life after their injury, they may find that they are no longer able to do things they once did prior to the injury. This can include working, driving, taking on household responsibilities or managing finances. It may be that someone else close to the survivor has to take such tasks on instead, such as a partner doing the weekly grocery shopping or a parent managing their finances.


The partner or relative may also have to provide care and support to the survivor. Taking on a caring role can be tiring and difficult, especially if the partner or relative is required to undertake tasks that are unfamiliar to them, with minimal or no external support. A long period of physical care for the survivor can make it particularly difficult for many partners to later return to a sexual relationship.

Brain injury survivors themselves may experience a change in self-worth due to the change in their role. It can be very difficult to come to terms with the fact that they need support with, or are no longer able to do the things that were once normal for them. They may also feel guilty that their partner or relative is required to take on new tasks that they previously did themselves.

The low self-esteem felt by the brain injury survivor and the increased stress experienced by partners or relatives can altogether lead to increased tension, affecting the relationship. Feelings of frustration can also be common if the survivor's independence is affected, for instance if they are unable to drive.

In such instances, it is important for both the brain injury survivor and their partner or relative to be able to openly communicate with one another and talk through any tensions or issues that arise. External support may also be helpful to adapt to role changes. For more suggestions, see the section *Tips for managing relationships*.

# New relationships



**A**lthough we are all born with a number of relationships in our lives, such as those we have with family members, we continue to develop new relationships across our lifetime, such as those we have with a partner. For some brain injury survivors, the prospect of meeting a future partner can be daunting. They may worry about how their injury will affect their chances of ‘meeting someone’, especially if they experience depression or low self-esteem. Survivors may also question whether they are obliged to tell new people in their life about their brain injury, or whether they should keep this information to themselves.

Despite these challenges, many people do go on to develop new relationships after brain injury. Taking your time with getting to know someone, going on a few initial dates, taking things at your own pace and seeking advice from close friends and family can help with forming new relationships.

Greater professional support may also be required in order to use the same community resources as non-injured people to meet others, form romantic relationships, and find ways of meeting sexual needs. More information on this is available in the section *Professional support*.

## Meeting a new partner

Many people find that socialising can increase opportunities of meeting new people, and in doing so meeting a new partner. You could therefore look into joining local groups or clubs based on your interests to meet new people who share similar interests to you. If you don’t feel comfortable with meeting new people or being in a group, consider arranging smaller get-togethers where close friends can invite one or two of their friends along.

Another option could be to explore dating services in your local area. Dating services are very popular and used by many people, regardless of whether they have a disability or not.

Some people also find that online dating platforms are a good way to meet a potential partner, although there can be risks involved in 'meeting' people online and it may also be difficult to find someone with an understanding of brain injury. Professional support should be sought if appropriate to assist with this process and the risks of using such online services should be researched beforehand.

You could also consider joining a disability dating club or service, such as [Outsiders](#), which promotes dating opportunities for people with disabilities. For more information, see [Useful organisations](#).

### **Telling a new partner about your brain injury**

Some people may feel that they have to tell their new partner about their injury, but how much you choose to share or keep to yourself is a personal choice. You may not feel as though you are ready to disclose personal information about yourself in the early days of a new relationship, or that you do not yet trust the person enough to be open with them. This is okay, and you will be the best judge of how much is appropriate to share with your partner depending on the relationship that you have with them.

Being able to openly communicate with a partner is, however, often an indicator of a healthy relationship. It might also help the partner to know about your brain injury, as they may better understand and accommodate for the effects of your injury.



## New relationships and risks

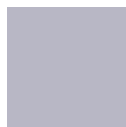
Romantic relationships are very personal decisions. The person we have a relationship with, and the intensity and dynamics of the relationship, are things that are decided between the people involved. The couple can usually come to a mutual agreement about how the relationship will work best for them. However, brain injury can sometimes result in the survivor having difficulties with making decisions. They may therefore be unable to identify risks to their safety or health when making choices about their relationship, including decisions about consenting to a sexual relationship. They may also be susceptible to influence and fail to recognise their own vulnerability in a new relationship.

Family and friends may wish to intervene in order to protect their loved one, but struggle to judge whether they have the right to do so. Arguments may arise if they confront this issue with the brain injury survivor. Open and honest communication, with evidence and examples might help the brain injury survivor to understand where and why there is an issue of concern.

Risks can work both ways; a brain injury survivor may be at risk, or their partner/family may be at risk, for example if the brain injury survivor has problems with managing their anger leading to violent outbursts where they become abusive.

**If you believe that someone is at risk of, or is being abused in a relationship, you should inform the local adult safeguarding team of your concerns. Details of safeguarding teams are available on local council websites. Alternatively, the [Headway helpline](https://www.headway.org.uk), available on 0808 800 2244 or [helpline@headway.org.uk](mailto:helpline@headway.org.uk), can provide information and support in this situation.**


## Sex and sexuality



**S**ex and sexuality is a very personal and sensitive subject for many people, as it relates to a very intimate and private aspect of our lives. It is often difficult for people to talk about sexual changes after brain injury, but these are very common and there is support available for them.

Headway has produced a separate booklet on this topic to provide information on the different sexual changes that can take place after brain injury, along with details of support services and treatments that can help. For more information, see the Headway booklet *Sex and sexuality after brain injury*.

# Tips for managing relationships



**T**his section has been written to offer advice and suggestions on how to manage relationships after brain injury. The following points are general tips that can be used to help manage a good relationship. However, do remember that different things will work for different people, especially in regards to relationships as these are very personal to each individual.

- **Try to keep communication open and honest.** Being able to effectively communicate with one another is an important part of relationships. If you are upset about something in particular, avoid bringing this up when you or the other person is feeling angry as this may lead to an argument. Instead, find a moment when you are feeling calm and you have sufficient time to allow a discussion to take place.
- **Share Headway information** to help one another with understanding the effects that brain injury has had on your lives. You can use Headway's booklets and factsheets to identify the common effects of brain injury, and browse through the tips listed in these for practical guidance on how to cope. To access all of Headway's publications, visit the [Headway website](#) or ring the [Headway helpline](#) on 0808 800 2244.
- **Make the effort, no matter how small, to show the other person that you care for them.** This could be through small gestures, such as telling someone how important they are to you or writing them a letter. However, don't be offended or upset if you are a partner, family member or friend of a brain injury survivor and they do not respond to your efforts; it may be that they are unaware of the meaning behind the gesture, or they are unable to express or understand their own emotions.


- **Remember that all relationships go through better times and worse times**, and it is normal to have moments or periods of difficulties and challenges in any relationship. Professional help should be sought if there are serious problems with the relationship on an ongoing basis. More information on this is available in the section *Professional support*.
- **Have regular ‘date nights’** where you set time aside to spend quality time together. This can depend on the brain injury survivor and the partner’s abilities, interests and practical arrangements (for instance, consider setting the date up somewhere familiar with low levels of mental stimulation). You may even wish to ‘dress up’ to turn it into a special occasion. Arrange child minding for young children so that there is no pressure on finishing the date night quickly.
- **Write letters to each other to explain how you are feeling.** This can be particularly useful after an argument, as people often speak without thinking during arguments and then feel remorseful afterwards once they have calmed down. Writing, on the other hand, allows the person to choose their words more carefully. If it is not possible for you to write a letter, consider using alternative methods that are easier such as typing on an adapted computer or creating an audio recording of you reading a message aloud.
- **Celebrate the good times that you have with the people you have relationships with.** You could even keep a scrap book of memories you share together, including dates of good occasions and photographs. Children in particular might find this an enjoyable activity to undertake.
- **Consider inviting other members of the family, or friends, into discussions.** Different perspectives offered through group discussions can sometimes make it easier for everyone

to honestly and openly talk about how they are feeling, and any issues that arise can be worked through together as a group rather than individually.

Sometimes people feel that they are obliged to stay in a relationship despite being unhappy, because they would otherwise feel guilty about leaving it. This is a very sensitive and personal situation for anyone to be in, but remember that break ups or divorces are common even when a person has not sustained a brain injury, and can therefore be a normal, although understandably upsetting and difficult part of life.

If you feel this is an issue, you should consider talking to your partner about how they feel in the first instance, as it might be possible to get help for the problems you are both having, for instance through marriage counselling or family therapy. It can also help to talk your feelings through with close friends and family.

# Professional support



In some instances it may be necessary to seek professional support for the relationship. There are different types of professional support that would be suitable in different circumstances. For instance, if the brain injury survivor needs support with managing the effects of their injury, it may be beneficial to seek the support of a Clinical Neuropsychologist.

Clinical Neuropsychologists can offer support with the emotional, behavioural and cognitive effects of a brain injury, and may therefore be able to support the brain injury survivor with such effects that are having an impact on their relationships.

Some Clinical Neuropsychologists also specialise in relationship problems, and may welcome both the brain injury survivor and the person (or people) with whom they are having relationship issues with to support sessions. However, such services are, unfortunately, difficult to find across the country. Nevertheless, it can still be useful to start off by seeking support from a Clinical Neuropsychologist. You can do so by asking your GP to provide a referral to local services, or alternatively you can search for local Clinical Neuropsychologists in your area using the [British Psychological Society's directory](#).

Other professional services, such as relationship counselling and family therapy, can also be useful although it is unlikely that they will have expertise in managing cases where brain injury is a main factor in the relationship problems. If you do undertake any other form of relationship support, do not be afraid to ask how much experience the therapist has in brain injury. If they do not have any experience, you might find it useful to share some information on

brain injury prior to the therapy sessions, for instance by offering them [Headway publications](#).

You can find local relationship counselling services in your area by speaking to your GP or using the [NHS Choices search function](#).

Relationship therapists or family therapists in your area can also be found on [www.itsgoodtotalk.org.uk](http://www.itsgoodtotalk.org.uk) or [www.psychotherapy.org.uk](http://www.psychotherapy.org.uk).

Details of other services that provide information and support with relationships are available in the [Useful organisations](#) section.

## Conclusion



**R**elationships are a very personal part of our lives and can commonly be affected by brain injury. This can be upsetting for both the brain injury survivor and the person or people with whom they have relationships with. There are ways in which relationships after brain injury can be improved, for instance through improving communication; however, different things work for different people and their relationships so it is important to try a few different strategies and see what works best. Professional support may also be required from therapists that are sensitive to the effects of brain injury.

It is hoped that the information in this booklet has helped you with understanding why and how relationships can be affected after brain injury, and how they can be improved. To discuss any of the issues in this booklet, or to get information, advice or emotional support on this topic, contact the [Headway helpline](https://www.headway.org.uk) on 0808 800 2244 or [helpline@headway.org.uk](mailto:helpline@headway.org.uk).



# Useful organisations

**British Association for  
Behavioural and Cognitive  
Psychotherapies (BABCP)**

Tel: 0161 705 4304

Email: [babcp@babcp.com](mailto:babcp@babcp.com)

Web: [www.babcp.com](http://www.babcp.com)

**British Association for  
Counselling and Psychotherapy**

Tel: 01455 883 300

Email: [bacp@bacp.co.uk](mailto:bacp@bacp.co.uk)

Web: [www.bacp.co.uk](http://www.bacp.co.uk)

**British Psychological Society  
(BPS)**

Tel: 0116 254 9568

Email: [enquiries@bps.org.uk](mailto:enquiries@bps.org.uk)

Web: [www.bps.org.uk](http://www.bps.org.uk)

**College of Sexual and  
Relationship Therapists**

Tel: 020 8543 2707

Email: [info@cosrt.org.uk](mailto:info@cosrt.org.uk)

Web: [www.cosrt.org.uk](http://www.cosrt.org.uk)

**Counselling Directory**

Tel: 0844 8030 240

Web: [www.counselling-directory.org.uk](http://www.counselling-directory.org.uk)

**Disability Horizons**

Web:

[www.disabilityhorizons.com/  
category/relationships-and-sex/](http://www.disabilityhorizons.com/category/relationships-and-sex/)

**Family Lives**

Tel: 0808 800 2222

Web: [www.familylives.org.uk](http://www.familylives.org.uk)

**Find a Therapist – UK & Ireland  
Directory of Counselling and  
Psychotherapy**

Web: [www.cpdirectory.com](http://www.cpdirectory.com)

**Marriage Care**

Tel: 0800 389 3801

Web: [www.marriagecare.org.uk](http://www.marriagecare.org.uk)

**Relate – the relationship  
people**

Tel: 0300 100 1234

Email: [enquiries@relate.org.uk](mailto:enquiries@relate.org.uk)

Web: [www.relate.org.uk](http://www.relate.org.uk)

**SupportLine**

Tel: 01708 765 200

Email: [info@supportline.org.uk](mailto:info@supportline.org.uk)

Web: [www.supportline.org.uk](http://www.supportline.org.uk)

### **Outsiders**

Tel: 07410 544 318

Email: [info@outsiders.org.uk](mailto:info@outsiders.org.uk)

Web: [www.outsiders.org.uk](http://www.outsiders.org.uk)

### **The Pituitary Foundation**

Tel: 0845 450 0375

Email: [helpline@pituitary.org.uk](mailto:helpline@pituitary.org.uk)

Web: [www.pituitary.org.uk](http://www.pituitary.org.uk)

### **UK Council for Psychotherapy**


Tel: 020 7014 9955

Email: [info@ukcp.org.uk](mailto:info@ukcp.org.uk)

Web:

[www.psychotherapy.org.uk](http://www.psychotherapy.org.uk)

# About Headway



**H**eadway – the brain injury association is a charity set up to give help and support to people affected by brain injury.

A network of local Headway groups and branches throughout the UK offers a wide range of services including rehabilitation programmes, carer support, social re-integration, community outreach and respite care. The [Headway helpline](#) provides information, signposts to sources of support and rehabilitation services, and offers a listening ear to those experiencing problems. Other services provided by Headway include:

- Supporting and developing local [groups and branches](#)
  - Promoting understanding of brain injury and its effects
  - An award-winning range of [publications](#) on aspects of brain injury
  - Accreditation of UK care providers through the [Approved Provider scheme](#)
  - A comprehensive, award-winning [website](#)
  - [Campaigning](#) for measures that will reduce the incidence of brain injury
  - Providing grants from our [Emergency Fund](#) for families coping with financial difficulties
  - [Headway Acute Trauma Support \(HATS\) nurses](#) to support families with loved ones in hospital
- Freephone helpline: 0808 800 2244 (Monday–Friday, 9am–5pm)
  - Telephone: 0115 924 0800
  - Website: [www.headway.org.uk](http://www.headway.org.uk)
  - Fax: 0115 958 4446
  - Email: [helpline@headway.org.uk](mailto:helpline@headway.org.uk)



## Relationships after brain injury

This booklet has been written for brain injury survivors and the people with whom they have relationships. It describes how relationships can be affected following brain injury, offers tips for managing relationships, and gives information on where to seek professional support from.

