

Understanding & Managing – Attention and Concentration



The Child Brain Injury Trust is a national charity supporting anyone affected by childhood acquired brain injury. The following information has been developed to help the reader understand more about brain injury and some of the associated issues. Every effort has been taken to ensure the information is accurate and up to date.

The following E-Learning sessions which families and some professionals can access free of charge may also be beneficial:

[Understanding and Managing Attention and Concentration](#)

[Understanding Childhood Acquired Brain Injury](#)

Understanding and Managing Attention and Concentration

What is **Attention and Concentration**?

- **Concentration** allows us to maintain our *attention over time*.
- **Attention** allows us to select and focus on what is *important*.
 - It is the process of concentrating on one thing.
 - We use these skills every day, often without really noticing them.
 - Sometimes we need to pay attention to two or more things at the one time
 - Sometimes a child may need to switch back and forth between activities quickly (e.g. copying work from the board and listening to a teacher explaining).

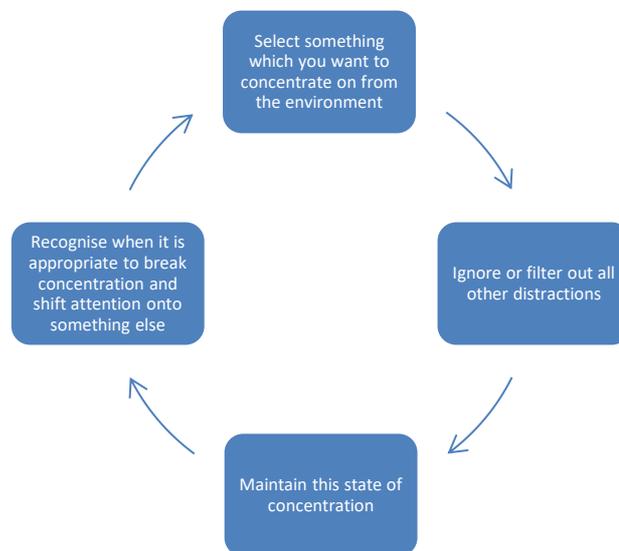
Attention and concentration difficulties can be formally identified by a neuropsychologist who can help develop ways to help each **individual child**.

Children with attention deficits as a result of an ABI can be distractible and may have greater difficulty in focusing their behaviour. Problems with concentration are a result of poor attention

- **Dividing attention can be difficult, children are likely to**
 - simplify what they think is required of them
 - produce a simplified response
 - find a way to opt out of a task or situation altogether.
- **Sustaining attention can also be difficult**
 - difficult to concentrate in a classroom with lots of noise/lots of visual distractions.
 - a child's ability to filter out relevant essential information from background noise determines how well they can really focus on the task

- If a child cannot filter information effectively their attention may be distracted by irrelevant factors so making learning processes much less efficient

To be able to focus and concentrate may sound like a simple process, but it is in fact quite complicated, to attend to something effectively you must:



There are different kinds of attention which we can use.

- **Selective attention**
 - where we must be constantly shifting whatever it is we are concentrating on, and we must prioritise which tasks receive our attention and when.
- **Sustained attention**
 - this involves concentrating at length on one particular task at hand and not getting distracted.
- **Divided attention**
 - this is where we need to be concentrating on two different things at once.

Pupils who had difficulties with attention and concentration prior to their injury are likely to experience an exacerbation in these, for example children with pre injury ADHD may have greater issues with attention and concentration post injury.¹

Typical manifestation of difficulties with Attention and Concentration

The way in which a child or young person's attention and concentration abilities may be affected will depend on the severity of their injury, and how much this aspect of executive functioning is impaired.

Studies have shown severe traumatic brain injury (TBI) is associated with reduced accuracy and slowed processing of information. Parental reports indicate some behavioural problems associated with attention and concentration and sleep issues complaints. Young children with severe TBI are at risk for severe, persisting attentional impairments. Children with mild and moderate TBI show better outcome, with pre-injury behaviour and age also predictive of attentional skills at 30 months post-injury.²

- Important clinical and educational implications
 - children with TBI, particularly those with more serious injuries, are **most vulnerable to attention deficits** in the acute stages post injury.
- Important that schools and families are aware of these limitations and structure expectations accordingly
 - gradual return to school
 - early stages of recovery, children should be provided with sufficient rest time
 - reduced expectations for tasks such as homework

Typical issues at home

- Inability to sit still; being restless and fidgety
 - E.g. playing with cutlery at meal times, flitting from one game/toy to another, unable to watch a TV programme for more than 15-20 minutes
- Easily overwhelmed sensory stimulation
 - Don't like loud noisy rooms – at family parties they may take themselves off somewhere quiet
- Difficulty completing demands/multiple activities
- May be asked to "go upstairs and get..." but only come back with one thing because they have not concentrated on what they needed to get (or struggle with memory issues)
- Adapting to change
- Easily bored
- Teenage years – changing part time jobs
- Impacts on social and emotional well-being of the family e.g. no longer able to attend and concentrate on a game for example Monopoly.
- Impacts on daily tasks e.g. dressing themselves. Carer has to prompt and aid child which places additional stress on the family.
- Impacts on behaviour – have a 'short fuse' due to frustrations

Typical issues at school

- Being easily distracted, for example by other children, nearby activities or objects.
- Difficulty following instructions
- Talking in class
- Easily overwhelmed by information

- Deciding what is important information
- Changing to different task
- Staying on task and completing work within time allocated
- Affect their ability to learn and remember information
- May affect self-esteem e.g. not completing a task prior to the lesson finishing. This may make them feel 'useless' or a 'failure'. In addition, this can be misinterpreted by peers and education professionals as 'lazy', 'not trying hard enough' etc.

Impact of friendships and social skills

- Unable to focus in a busy environment
- interrupting others
- changing the subject
- Being slower at processing and making sense of information
- Encourage them to withdraw from other people and avoid socialising
- Difficulty maintaining and creating new friendships.

Strategies to support attention and concentration issues

- Ask the child/young person what they want to achieve in respect of their difficulties with attention and concentration? It could be:
 - Read a chapter of their book
 - Finish a piece of craft work
 - Focus long enough to take an exam
 - Concentrate on a particular task for an entire lesson

General Strategies

- Limit the amount of information given to a child, and present one activity or idea at a time.
- Keep instructions brief, break them down or provide a written copy.
- When giving instructions, get the child's attention by calling their name and making eye contact.
- Meditating, deep breathing and other strategies for physical & mental relaxation such as coffee breaks or talking to friends
- Use varied styles of presentation to try to focus and sustain attention.

Strategies for School

- Schedule important and demanding activities early in the day or after a longer break
- Use short prompts and give brief cues, or structure them into short achievable blocks, providing a clear beginning and end.
- Allow time for regular breaks, and give the child errands that let them move around.

- Alternate activities between mentally demanding and less challenging or physical ones.
- Reinforce instructions with written cues or instructions on the black/whiteboard.
- Minimise potential distractions. Sit the child at the front of the class and keep their desk free of unnecessary material.
- Seat the child near the teacher or with children who will be good role models.
- Provide direct prompts to return to task and positively reinforce on-task behaviour.
- Simplify and reduce material on worksheets and on the black/whiteboard.
- Develop and stick to a daily classroom routine
- Use picture or cue cards as a reminder to focus attention
- Encourage pupils to ask for clarification when they have lost the thread of what they are supposed to be doing.
- For fidgeting behavior – provide stimulation e.g. shoe lace, or stress ball

¹Yeates, K.O., Armstrong, K., Janusz, J., Taylor, H.G., Wade, S., Stancin, T., et al. (2005). Long-term Attention Problems in Children with Traumatic Brain Injury. *Journal of the American Academy of Child and Adolescent Psychiatry*, 44, 574-584.

² [Anderson V](#), [Catroppa C](#), [Morse S](#), [Haritou F](#), [Rosenfeld J](#) (2005) Attentional and processing skills following traumatic brain injury in early childhood.

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