

Tutorial: Flexibility Versus Rigidity in Thinking and Behavior

(See also Tutorial on Perseveration)

WHAT IS RIGIDITY/INFLEXIBILITY?

Cognitive and emotional flexibility are included in most lists of executive or self-regulatory functions. Cognitive flexibility enables students to shift effortlessly from task to task at school, from topic to topic in conversation, from one role to another in games, and the like. Emotional flexibility enables students to experience the full range of emotion, like happiness, sadness, or anger, but be able to express them appropriately and then leave that emotional expression behind when it is time to move on.

Most individuals commonly report that changes in well established routines can be difficult to adjust to. For example, beginning a new job or having a first child frequently entail major changes in life routines that cause stress for anybody, despite the adequacy of their cognitive and emotional functioning. Similarly, most people report that there are some ways of thinking about things that are hard to change. It is possible for anybody to get stuck in a rut of doing things in a certain way or thinking in a certain way. When difficulties accepting change, making transitions, shifting thoughts, or moving on from an emotional state become so extreme that they interfere with everyday functioning, then the person is said to be inflexible to a clinically significant degree.

WHY IS RIGIDITY/INFLEXIBILITY IMPORTANT FOR SOME STUDENTS AFTER TBI?

Students with TBI or other neurological conditions sometimes demonstrate extreme forms of rigidity or inflexibility. Rigidity/inflexibility is often associated with damage to the frontal lobes, the most common site of injury in TBI. Therefore, some degree of inflexibility is common in students with TBI. This may manifest itself as difficulty (1) making transitions during the school day (e.g., from lunch or gym back to classroom work), (2) tolerating changes in schedules or everyday routines, (3) adjusting to changes in staff, (4) ending an intense emotional feeling, and the like. In extreme cases, a transition as apparently simple as from sitting to standing may be difficult and cause stress.

Related but not identical to inflexibility is the phenomenon of perseveration. Perseveration is a possible result of neurologic impairment and is characterized by continuation of the same behavior or thought or words or emotions after the reason for the behavior, thought, word, or emotion has passed or the thought or behavior is no longer appropriate to the situation. For example, a student may remain focused on a given emotional behavior state long after the reason for that state has been forgotten.

WHAT ARE THE MAIN THEMES IN INSTRUCTION AND SUPPORT FOR STUDENTS WHO ARE RIGID/INFLEXIBLE? (See also Tutorials on Transition Routines; Self-Regulation Routines; Perseveration)

Understanding: In every domain of functioning, step one is to understand the student and his or her strengths and needs. In the case of neurologically inflexible students, understanding is critical. In the absence of this understanding, staff and family will inevitably become frustrated and impatient with the student as he proceeds inflexibly through well established routines and rituals.

Procedures to Follow: Beyond understanding the nature of the problem, the following procedures may be helpful.

1. **Self-Regulation Routines:** Please see the tutorial on Self-Regulation Routines. Several of these routines are relevant for students who are inflexible, including the problem-solving script, big deal/little deal script, ready/not ready script, and others. The goal is to use simple everyday scripts of interaction to help the student internalize self-regulatory thoughts that can help during times of stress, including stressful transitions and changes.

2. Routines to Change Routines: “Flexibility Routines”: Students who are concrete thinkers, disorganized to some degree, and dependent on concrete routines usually have great difficulty when their routines are violated or need to be changed. Because these students are dependent on routines, they need routines to deal with changes in routines. This may sound paradoxical, but it is very important for these students. Well-designed routines for changing routines can include some of the following options, depending on the student’s level of concreteness and other abilities:

(a) Discuss the change or new routine well in advance of the change.

(b) Practice the new routines before actually implementing them.

(c) When the change is implemented, use behavioral momentum-building activities to help put the student in the best frame of mind for the change. [See [Tutorial on Positive Behavioral Momentum](#)]

(d) Sometimes specific “mantras”, or focused “self talk” strategies, are useful during stressful changes (e.g., “I don’t like change, but this will be OK.”)

3. Use of Concrete Organizers: Students who are inflexible often benefit from very concrete graphic organizers with clear visual displays. For example, they may have a photo sequence that represents their schedule in school. An upcoming change can then be represented by moving the pictures. When this is done in a very concrete way with the student, change may be easier to tolerate. [See [Tutorial on Graphic Organizers](#)]

4. Assurance That Some Routines Will Remain Unchanged: Students who have difficulty with change tend to be anxious students who take comfort in some favorite routines (e.g., watching the same video every day after school; following favored rituals around dressing, eating, and the like). If these favored routines are consistent with an orderly life at home or at school, they should be respected. If students are expected to deal with change in some domains, they function best when they have other domains in which they can be comforted by their favored routines.

5 Peer Support: When it is known in advance that there will be a change in routine, it may be well to pair the inflexible student with a peer who can help the inflexible student through the change.

6. Sense of Self and Acceptance of Change: It is useful to help a student develop a positive sense of self – possibly tied to some heroic figure who is famously flexible – that can help the student build better tolerance of change that can then mold into a positive sense of personal identity after injury. The student should be encouraged to say, “I can be a _____ kind of person” where the blank is filled in with, for example, a professional athlete who frequently changed teams or positions (if that is meaningful for the student).

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