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Cognitive communication difficulties (CCD)

Information for patients, relatives and carers

This leaflet explains what CCD is, how it may affect you, and what help and support is available for patients with CCD.

What are cognitive communication difficulties?

Cognitive communication difficulties (CCD) are difficulties in communication that can result from changes in cognitive ('thinking') skills, rather than difficulties with speech or language.

If not recognised and supported, CCD can have a long-term impact on your everyday communication. This can affect relationships, returning to work or other activities, and your ability to live independently.

Cognitive communication skills include verbal and non-verbal features such as:

- Attention / concentration
- Memory
- Reasoning
- Planning and organisational skills
- Insight and awareness

A person with CCD may have difficulties with any or all of the above areas.

Common causes of CCD can include a **stroke, head injury, brain tumors** and **other neurological conditions.**

Signs and symptoms:

- Body language, facial expression or tone of voice may be reduced or not match the intended message (e.g. saying "hello" to family without smiling and/or waving, or sounding sarcastic when intending to sound genuine).

- Difficulties with conversations (e.g. difficulties taking turns in conversation, going off topic, making inappropriate comments, talking too much or too little).
- Difficulty listening, concentrating, remembering or understanding.
- Difficulty finding words and / or speaking in organised sentences.
- Reduced insight (i.e. reduced ability to recognise your own difficulties).

Some of the above can be features of a person's communication style before their stroke or brain injury.

A stroke or brain injury may introduce new communication difficulties or make pre-existing communication characteristics more pronounced.

Friends and family can help by…

- Minimising background noise and distractions.
- Checking that you have understood the person by feeding back what you think has been said.
- Being honest. Let the person know if you do not understand.
- Redirect the person if they are going off-topic in conversation (e.g. remind them of the topic of conversation).
- Help the person to monitor their communication to increase self-awareness
- Focus on one activity and/or topic of conversation at a time.

How can speech and language therapists help?

- Assessment of communication and language skills in 1:1 conversations and groups.
- Gathering a baseline from family or friends.
- Help to create a 'conversation contract' (i.e. strategies and prompts that you agree for others to use).

- Practical advice for improved communication in everyday, work and social situations.
- Techniques to aid successful communication.
- Reassurance and confidence-building.
- Education, advice and support for friends and family.
- Setting and measuring goals.

Sources of further support:

- **The Stroke Association** www.stroke.org.uk
- **Headway** https://www.headway.org.uk/

Contact us

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To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

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