Social communication changes - following ABI

Cognitive difficulties may arise after an acquired brain injury, in areas such as memory, attention, problem solving, planning, organisation, judgment and/or perception. These difficulties often affect communication, personality and behaviour, and may mean that you act differently – and sometimes inappropriately, in social situations.

The new behaviours may have an impact on your:

- **Verbal (social) communication skills**, such as the words that you say or write
- **Non-verbal (social) communication skills**, such as using limited eye contact, reduced body gestures, showing poor awareness of a conversation breakdown, or having reduced facial expression.

Sometimes it can be combination of both.

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**Changes you may experience**...

- Talking too much or too little
- Reduced eye contact
- Limited facial expression
- Difficulty initiating a conversation
- Difficulty maintaining a conversation
- Reduced turn-taking in conversation
- Reduced awareness and/or sensitivity to the person you are talking with
- Difficulty perceiving personal space
- Reduced awareness of different behaviours and interactions
- Excessive swearing
- Reduced tolerance – quick to express anger or yell at someone
- Inappropriate sexual comments or jokes

The following cognitive impairments can contribute to social communication difficulties...

**Poor attention or concentration can lead to:**

- Problems staying on topic
- Difficulty resisting distraction during conversation
- Problems keeping track of what other people are saying

**Poor memory can lead to:**

- Repeating oneself when talking
- Losing track of the conversation topic
- Mixing up instructions or messages

**Poor executive functioning can lead to:**

- Having trouble starting conversations
- Interrupting others
- Poorly organised speech
- Excessive talking

**Poor social cognition can lead to:**

- Poor use of feedback from others
- Difficulty taking someone else’s perspective
- Difficulty understanding sarcasm

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*Social Communication after Traumatic Brain Injury (TBI): A Guide for Professionals – Margaret A. Struchen, Ph.D*

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**What is going wrong?**

Being able to modify your communication according to your environment (E.g. at home, in a café, at work) and according to the person you are communicating with (E.g. partner, child, employer, doctor) are key aspects of appropriate social communication. It is a complex skill-set, and is necessary to fulfilling successful roles and relationships.

It is this difficulty modifying communication that is often impaired after an acquired brain injury (particularly in traumatic brain injury). You may experience social isolation due to difficulty establishing and maintaining friendships, finding employment, and / or identifying leisure activities. Changes in social communication can also be challenging for family / carers.

**What can be done?**

It is accepted that impaired social skills have far-reaching effects on community participation for a person with an acquired brain injury, and so a variety of approaches have been developed to address these difficulties.

The key health professional involved in this area is the Speech Pathologist; however other health professionals have knowledge in this area (e.g. Neuropsychologist).

If you think you require assistance in this area, speak with your treating health professional.

Further information on Cognitive communication can obtained in the factsheet titled *Cognitive – communication strategy table* as well as in the ‘Behaviour Management’ section on the ABIOS website.