



Understanding Cognitive Abilities: Questions to Ask

Here are some questions to ask yourself to better understand a person's cognitive abilities. These questions are based on brain functioning and specific cognitive skills. However, you do not need to know anything about the brain or cognition to ask them.

The questions address the five phases of cognitive processing that everyone (healthy or not) must go through in order to understand and respond to other people and their environment. Asking yourself these questions can help you identify which phases and which cognitive abilities in each phase a particular person does well and which they have difficulty with, so you know when and how to help. In this way, you can individualize your assistance and support to this particular person and this particular situation.

A "Yes" answer suggests this person has mild or no difficulty performing a specific cognitive ability. The answers to these questions can suggest effective intervention strategies to help this person.

These questions should be asked frequently since this person might change over time including day by day.

Ask yourself these questions. Do not ask the person you are observing (that is, the person whose cognitive abilities you are trying to understand).

These are a few of the many questions that could be asked to better understand a person's cognitive abilities.

More information is on the last few pages of this handout.

1. Can this person receive information from the environment through their five senses (see, hear, feel, taste, smell)? (Sensory Phase)

A. How well do they SEE and HEAR me?

- 1) If they need glasses are they using them?
- 2) Are the glasses clean?
- 3) If they need a hearing aid are they using it?

4) Does the hearing aid need adjusting?

B. How do they FEEL or experience my touch? Do they:

- 1) Know I am touching a particular body part?
- 2) Feel comfortable with my touch, so that they feel no physical or emotional pain or discomfort when I touch them?
- 3) Feel my touch as soft or as hard as I think most people would feel it?
- 4) Feel the cloth, water, or surface as comfortable?
- 5) Feel the temperature the same as I think it would feel to most people?
- 6) Feel like the temperature is stable and not changing from one minute to the next?

2. Can this person recognize and understand the information received through the senses? (Comprehension/Perception Phase)

A. How well do they UNDERSTAND what they see and hear? Do they:

- 1) Know what an object is when they see it?
- 2) Recognize various colors?
- 3) Read and understand what they read?
- 4) Recognize pictures?
- 5) Recognize gestures?
- 6) Recognize what a word means when they hear it?

B. How well do they recognize WHERE an object, sound, or touch is? Do they:

- 1) Notice objects in all parts of their visual field?
- 2) Notice objects equally well in all parts of their visual field (that is, they don't have more difficulty noticing objects in some parts of their visual field than in others)?
- 3) Recognize how far away an object is from them?
- 4) Recognize where objects are relative to other objects?
- 5) Notice where in the room a sound is coming from?
- 6) Notice touch on all parts of their body?

3. Can this person categorize, organize, and use the information received? (Executive Phase)

A. How well do they recognize the IMPORTANCE of the information and use it to make decisions, solve problems, and organize plans? Do they:

- 1) Pay attention to a task, to an object, or to what I am saying?
- 2) Figure out what I mean, even if they can't hear or understand me very well?

- 3) Remember what they see, hear, or figure out?
- 4) Compare new information with other information learned before?
- 5) Easily shift from one activity to another?
- 6) Easily get started on a task or a response?
- 7) Know how much time has passed?
- 8) Recognize their own abilities, needs, desires, and mistakes?
- 9) Easily control their impulsive responses by censoring or delaying what they say or do?
- 10) Easily control their emotions and their expression of emotion?

4. Can this person's brain tell their body what to do? (Expressive Phase)

- A. How well does their brain COORDINATE their body parts to perform a task or to express a thought? Do they:
- 1) Easily produce words when speaking?
 - 2) Easily produce words when writing?
 - 3) Speak words as easily as they sing the words?
 - 4) Talk upon request as easily as they talk spontaneously (on their own)?
 - 5) Do tasks as easily upon request as they do spontaneously or automatically, when they don't think about the task or how to do it?
 - 6) Easily move a body part spontaneously (on their own)?
 - 7) Easily move a body part upon request?
 - 8) Easily build or construct something spontaneously (on their own)?
 - 9) Easily build or construct something upon request?
 - 10) Easily draw spontaneously (on their own)?
 - 11) Easily draw upon request?
 - 12) Easily spontaneously manipulate or move an object on their own when doing a task such as eating and dressing?
 - 13) Easily upon request manipulate or move an object when doing a task such as eating and dressing?

5. Can this person's body physically respond to the instructions from their brain? (Motor Phase)

- A. How HEALTHY and strong is their body?
- 1) Is there full strength in every part of their body, that is, no weakness in any part such as legs, arms, hands, feet, tongue?
 - 2) Is any body part weaker on their left side than on their right side?
 - 3) Is any body part weaker on their right side than on their left side?
 - 4) Does each body part move immediately and easily?
 - 5) Does each body part have enough range of motion?
 - 6) Do they easily coordinate movements of various body parts?
 - 7) Do they walk across the room easily?

- 8) Is each body part free of pain when it moves?
- 9) Is each body part free of pain when it is not moving?

More about these Questions

This handout lists a few of the many questions you can ask yourself to discover what a person does well and not so well with respect to their cognitive abilities (that is, their ability to think, and to understand and respond to other people and their environment).

The questions are based on the cognitive abilities associated with specific parts of the brain. But you don't need to know anything about the brain or cognition to ask the questions and use the responses to consider how to help a person.

The questions and responses can help you better understand why a person performs a task more easily some times than other times, is distressed, or is acting in a way that is distressing to others.

They also help explain why some of **our own** behavior might be distressing to this person. Our behavior that might **unintentionally** cause distress could include our words, movements, or actions. For example, talking or moving too quickly or our continuing to use the word "shower" as we take a person's clothes off when this person doesn't understand what the word "shower" means could be so distressing to this person they might try to push us away.

While this handout focuses on the cognitive abilities, it is important to note that some tasks, interactions, and rooms or environments are more likely than others to trigger emotional distress for a person. This is especially true for a person who has in their past or recently experienced a sexual, physical, or emotional encounter that was uncomfortable or traumatic. Tasks, interactions, and rooms similar to where such encounters might have occurred for this person could easily cause distress for this person (for example, situations and places like bedrooms, bathrooms, shower rooms, or others that involve removing clothing or being touched or someone else having control over this person). It is important to stop an interaction or task, or help this person leave the room if this is the case. Watch and listen closely to notice how this person seems to be feeling. Moving slowly, gently, and with respect and compassion is important.

The questions listed here and your answers suggest support or intervention strategies that are individualized to this person and situation, that can make it easier for this person to communicate, to perform a task, and to feel comfortable and competent.

None of us has a perfect brain. Each of us (that is everyone, healthy or not) has our own unique set of cognitive abilities, our own set of cognitive skills we do well, and those we don't do so well; our own set of cognitive strengths and weaknesses. This means we each have our own set of cognitive needs.

Most of the time we are not conscious of our cognitive abilities or what our cognitive strengths and needs are. In fact, most of our thinking is not conscious at all. So we each know very little about our own cognitive abilities. That is partially why we can so easily unintentionally cause irritation or distress for someone whose set of cognitive strengths and weaknesses is different from our own. This occurs with anyone, even within our own families.

All of this is also true of someone with an unusual brain or a diagnosis of a brain disorder. Since a person with any brain disorder, including dementia, has their own unique set of cognitive strengths and needs at any given time, it is important to look closely at a particular person to discover what their strengths and needs might be, and how those strengths and needs might change in ways unique to this person over time and day to day.

The goal is to help a person feel genuinely comfortable and happy regardless of what they are doing, and for both of you to enjoy your time together. To do this you can explore which cognitive abilities are changed as a result of this person's brain changes, then how those changes in cognitive abilities are helping this person to grow and enjoy their life as well as how the cognitive changes are creating frustration, anxiety, or confusion for this person, and finally how you can help.

A person with significant cognitive needs usually works much harder to understand, communicate, use a space, or do a task than you or even they realize. Even for a person who does all of these well, making the communication, task, and environment easier for them can conserve their energy for more difficult or more pleasurable experiences, and can help prevent fatigue, confusion, and emotional irritation or distress.

The questions in this handout help you identify which cognitive abilities a person does well (their strengths) so you and this person can use and rely on those strengths. They also help you identify the cognitive abilities they don't do so well (their cognitive needs or weaknesses) so you and this person can consider ways to support or improve those cognitive abilities, or compensate for them.

The questions are organized under five major questions or steps which reflect the five cognitive phases every person (healthy or not) must go through in order to receive, organize, and respond to information from their environment. As you identify the phases and cognitive abilities this person does well and those they have difficulty with, you can know better when and how to help them.

The questions are meant to be asked through general observation, while you are communicating with a person, or while you are helping this person with a task. The answers to these questions can help you modify the task, the environment, or your communication strategies to accommodate this person's cognitive abilities and challenges. When you answer the questions while you are communicating with them or during a task, you can intervene immediately and respond to subtle changes that occur minute by minute in this person's cognitive abilities.

The questions in this handout are for you to **ask yourself**, NOT to ask the person you are observing.

The questions can be asked at any moment or more systematically at regular intervals to note changes in a person's abilities. They can also be asked when you notice a change in a person's abilities, behavior, or mood, or when you are assisting this person with a task, or when you are simply observing this person.

Nearly any situation, task, or interaction can be an opportunity to ask these questions and understand better a person's cognitive abilities. The situations and tasks can be concrete or abstract. They can include, for example, housekeeping chores, hygiene, leisure activities, decision making, or a conversation with a friend. But this person does not need to be doing a task when you ask these questions.

Anyone can ask these questions in any setting. They can be helpful to anyone with any level or type of relationship with this person.

They should be asked frequently enough to address changes in this person's needs, strengths and desires.

The "**Cognitive Abilities and Intervention Strategies (CAIS): Cognitive Abilities Questions to Ask**" presents these questions in more detail and in a more formal structure in two formats: a Yes/No response format and a Four Point response format. It also includes additional questions.

The "**Cognitive Abilities and Intervention Strategies (CAIS): Cognitive Intervention Strategies**" presents a variety of intervention strategies for each question in the "CAIS Cognitive Abilities Questions to Ask".

The CAIS consists of four parts, each with a list of questions and ideas of intervention strategies. The four parts are: 1) Cognitive Abilities, 2) Environment, 3) Communication, and 4) Task and Daily Routines. The questions in this handout are similar to the questions in the "CAIS Cognitive Abilities Questions to Ask" and the "CAIS Cognitive Intervention Strategies".

Answers to all of these questions can help determine which intervention or support strategies might be most effective in helping a person be happier and function more independently.

Understanding a person's physical and emotional status is also extremely important. The questions presented here focus only on cognition.

For more information

1. Improving MI Practices Website <https://www.improvingmipractices.org>
This website has this handout, updates, and many additional resources, including the Cognitive Abilities and Intervention Strategies (CAIS): Questions to Ask and CAIS: Intervention Strategies, CAIS Handouts (43 total), the CAIS Online Course, the entire curriculum for these five sessions of the CAIS Educational Series, and other CAIS Background Resources, as well as the Caring Sheets: Thoughts and Suggestions for Caring that are part of the Michigan Dementia Care Series.
2. Mace, N., Coons, D., Weaverdyck, SE. (2005) Teaching Dementia Care: Skill and Understanding. Baltimore, Md.: Johns Hopkins University Press.

Original Sources

3. Weaverdyck, S.E. (1990) "Neuropsychological Assessment as a Basis for Intervention in Dementia". Chapter 3 in N. Mace (Ed.) Dementia Care: Patient, Family, and Community. Baltimore, Md.: Johns Hopkins University Press.
4. Weaverdyck, S.E. (1991) "Assessment as a Basis for Intervention" and "Intervention to Address Dementia as a Cognitive Disorder". Chapters 12 & 13 in D. Coons (Ed.) Specialized Dementia Care Units. Baltimore, Md.: Johns Hopkins University Press.