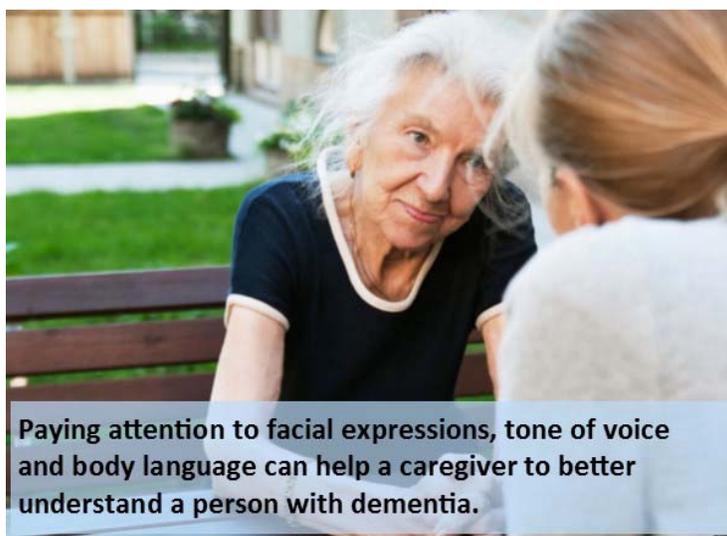


# Communicating With a Person Who Has Dementia



Paying attention to facial expressions, tone of voice and body language can help a caregiver to better understand a person with dementia.

## **Do's & Don'ts of Communicating with Someone Who Has Dementia**

**Jeannine Forrest, Ph.D, R.N.**

The word dementia indicates a progressive decline in various areas of brain functioning. These functions include, but are not limited to language, memory, judgement, insight, and planning. There are many different types of dementia, and dementia of the Alzheimer's type is the most prevalent in the U.S. Like a slow moving iceberg, changes in brain functioning take place in a persistent manner.

For meaningful communication to take place, it is essential that you become willing to be flexible and learn new strategies over time. These strategies are not intuitive.

**There are two communication styles to keep in mind:**

## 1) Communication with words, tone of voice and body language.

We are used to basic communications using words, tone of voice and body language. However, as dementia progresses an individual will experience difficulty with understanding and using words. In figuring out the message the person with dementia is trying to convey pay more attention to their tone of voice, facial expressions, and posture. Similarly, become more aware of your own tone of voice and non-verbal behaviors. People with dementia are excellent at absorbing positive and negative emotions conveyed with tone of voice and behavior. If you are stressed, angry or resentful, the person with dementia will readily absorb this negative energy and their demeanor will often mirror your behavior. This phenomenon underscores the importance of caring for oneself when you are a caregiver so that you maintain your energy, health and positive attitude.

## 2) Communication with the five senses

As the person moves from early through final stages, their communication changes from words and language to the use of senses - hearing, touching, smelling, seeing, tasting.

Spending time listening to favored music, kneading, baking and enjoying home-made bread, providing hand massages with scented lotion are all sensory techniques that may be helpful in communicating.



With these styles in mind, the following list of Do's and Don'ts will provide more guidance:

### **Do:**

- Eliminate or reduce back ground noise.
- Identify or introduce yourself first.
- Face the person at same level.
- Talk more slowly - allowing information to be received.
- If the person asks the same questions repeatedly respond as if it were the first time. The part of the brain that normally records or remembers what someone is saying no longer works properly; the

person with dementia cannot control this. Think of a loose lightbulb.

- Use distraction to change the conversation.
- Allow time for the person to answer a question.
- Provide a guess if word finding becomes difficult.
- Use dementia-sensitive or dignified language:
  - Say person WITH dementia instead of demented.
  - Say napkin instead of bib.
  - Say brief instead of diaper.
- Time travel - enjoy reliving past memories and stories that are shared.
- Focus on remaining abilities.
- Encourage rest periods throughout the day. As the brain becomes fatigued, the person is more prone to problems with communication, overstimulation and irritability. Short naps after breakfast and before dinner will help to counter these concerns.
- Stay calm and apologize if the person becomes irritated or upset. In many circumstances, you cannot "fix" the problem. Just say, "I am so sorry you feel this way."
- Show empathy and compassion.
- Appreciate the lessons that dementia can bring: patience, learning to live in the moment.
- Keep your sense of humor whenever possible.
- Find moments of joy.

### **Don't:**

- Quiz or try to "test" someone's memory. This creates anxiety, frustration and embarrassment.
- Think that the person is lazy. The ability to start or plan an activity becomes compromised over time.
- Speak over or for the person with dementia.
- Ask abstract questions. Instead, give two choices at a time. Instead of saying what would you like to do today? (too vague) Ask: "Would you like to listen to music or walk outside?"
- Criticize or try to correct (think - what is more important, for you to be right or for the person to be happy?).
- Argue, try to rationalize or convince. Areas responsible for self-awareness and insight become compromised over time. You will never win.



## SASI Caregivers Trained in Communicating With A Person With Dementia

SASI caregivers receive more training than required by state licensure. Recently, Jeannine Forrest created and conducted specialized training for SASI caregivers. The six hours of training, Caring for Adults with Alzheimer's Disease (CAAD), was offered to all caregivers. CAAD training was made possible, in part, by grants from The Evanston Community Foundation and the Evanston Lighthouse Rotary Club Foundation.

### Resources

**Dementia Society of America**

[www.DementiaSociety.org](http://www.DementiaSociety.org)

1-844-DEMENTIA

**Alzheimer's Association**

<http://www.alz.org/>

24/7 Helpline: 1-800-272-3900

**Adult Day Care:**

**Council for Jewish Elderly**

<https://www.cje.net/supportive-resources/adult-day-services>

773-508-1000

**House Of Welcome at North Shore Senior Center**

<http://houseofwelcome.nssc.org/>

847-252-6250

**Medical****Cognitive Neurology and Alzheimer's Disease Center at NU  
Feinberg School of Medicine**

<http://www.brain.northwestern.edu/>

312-908-9339

**NorthShore University HealthSystem Memory Care  
program**

<http://www.northshore.org/neurological-institute/centers-and-programs/alzheimers-disease-and-memory-disorders-program/>

877-570-7020

**Rush Alzheimer's Disease Center at Rush University  
Medical Center**

<https://www.rush.edu/services/alzheimers-disease-center>

883-352-RUSH (7874)

**Meet Our Guest Author:  
Dr. Jeannine Forrest,  
Ph.D., R.N.**

Dr. Jeannine Forrest, Principal at [Through the Forrest](#), brings more than 30 years of research and experience in best practice management of care for people with dementia to families, nursing homes, hospices, and the corporate sector.

Dr. Forrest has focused her clinical practice, education, and research in the care of older adults in the areas of dementia, palliative and end-of-life care. She has served as a faculty member at the University of Illinois at Chicago and at Rush University, holds a Fellowship in the Institute of Medicine of Chicago, held Board positions for the Illinois Hospice & Palliative Care Organization and Chicago End-of-Life Care Coalition.

Additionally, Dr. Forrest has been a palliative consultant for the World Health Organization for programs in China, author of journal articles and book chapters on pain and geriatric related issues, and collaborated with the Alzheimer's Association studying outcomes of comfort focused care for residents with advanced dementia in nursing homes.

Dr. Forrest is on the Advisory Board of the [Dementia Society](#).

## Please give SASI your support.

As a nonprofit 501 (c)(3) SASI has a long tradition of providing quality homecare at affordable prices by well trained, fairly paid professional caregivers.

Sometimes the need for assistance is unplanned, unexpected and unbudgeted. Home care is not covered by Medicare or most private insurance.

Your donation can help to ensure that SASI continues to support the efforts of older adults to remain safely at home. Your donation can help a neighbor, friend or family member maintain their independence with quality, affordable home care.

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