Aims and learning outcomes
This section builds on Section 8 "Communication Skills". It explores:
• how dementia can change the way a person communicates, and
• strategies that help effective communication.

At the end of this training session participants will be able to:
• recognise dementia related communication changes
• recognise the two way process of communication with people who have dementia
• apply effective strategies in communicating with people who have dementia.

Associated materials
• PowerPoint presentation: 11 Communication 2007.
• 11.1 Exercise: Whispers cards (preparation required).
• 11.5 Exercise: Communication
• 11.1 Handout: Communicating with a person with dementia.
• Assessment Task 6: The Need for Good Communication.
• Assessment Task 7: Maintaining Relationships.

Facilitator note:
Link this section with "8 Communication Skills" and take account of specific cultural mores about communication.

Each person with dementia is unique and there are many forms of dementia that affect the brain in different ways. Communication changes that occur as a result of dementia will vary from individual to individual.

Relate/link to earlier section on communication.

11.1 Communication changes
Some changes you may notice in the person with dementia include:
• difficulty in finding a word. A related word may be used instead of one that they cannot remember
• reduced vocabulary
• they may speak fluently, but not make sense
• they may not be able to understand what you are saying or only be able to grasp part of it
• reverting to a first language
• writing and reading skill may also deteriorate
• they may lose appropriate social or cultural communication processes e.g. they may interrupt or ignore a speaker or not respond when spoken to
• they may have difficulty expressing emotions appropriately.

Note that while some people may have difficulty expressing themselves, they may be able to understand everything that is said to them.

Causes of communication changes include:
• progressive memory loss
• difficulty processing information and difficulty understanding
• speech centre of the brain not working properly
• problems with hearing, poor sight, teeth/dentures
• damage to the brain causing changes such as repetition of statements or questions.

Changes can also be a reaction to:
• confusion, fatigue, fear or anxiety
• not remembering
• new places, situations, changes in routine or living in an unfamiliar environment
• making mistakes, fear of making mistakes, or not meeting the expectations of others.

11.1 Exercise: Whispers

Facilitator note
You will need to prepare cards with phrases prior to this exercise. Examples are provided but you may want to select others. One phrase is simple and one is long and complex. The second one will provide rich opportunity to discuss communication processes.

Purpose: To experience the consequences of simple and complex communication.

What is required
Have two cards prepared.
Card 1: A simple, short well-known phrase.

She sells sea shells by the sea shore

Card 2: A long complex statement.

There was never a scabby sheep in a flock that did not like to have a comrade

Explain to the group that for this activity they will all together represent the head of an individual (you may want the group in a circle or semi-circle for this activity).

Pick a person at one end of the row, group or semi-circle and tell them they are going to be the ear of that head. Tell the person on the other side of the group that they are going to be the mouth. Everyone else will be the brain cells of the head, connecting the ear to the mouth.

Give Card 1 (Simple phrase) to the person acting as the ear. Tell them to:
- read what is on the card without anyone else seeing it
- whisper what is written on the card to the person next to them
- no person can repeat the phrase to their neighbour, that is, they whisper it once and once only
- each person whispers what they heard to their neighbour until it reaches the person playing the mouth
- this person then says aloud what they have heard.

The phrase should be the same as, or very similar to, what is on the card. This is to be expected. The phrase is a familiar one and most people will have no trouble understanding and responding correctly to it.

Give Card 2 (Complex statement) to the ‘ear’ and repeat the process.

This time, when the ‘mouth’ speaks what has been whispered along the line it should bear little resemblance to what is written on the card.

Debrief

You may choose to write up responses on the board.
- How did you feel about doing the activity?
- Was the first phrase easier to understand than the second and if so why?
- How could we improve the situation?
- How can we apply this knowledge to situations when we are communicating with someone with dementia?

Points to cover

Stress that communication with a person who has dementia must be kept:
- Simple – but without patronising the person
- Valid – using what they know of the person to help
- Short – without confusing matters by asking too much at once.
11.2 Ways to assist in communicating with people who have dementia

The following simple and effective strategies that will assist in communicating with people who have dementia.

### TABLE 11.1 COMMUNICATING WITH A PERSON WITH DEMENTIA

**Caring attitude**
- People with dementia retain their feelings and emotions even though they may not be able to communicate with words:
- Use a calm, friendly, non-demanding approach to put the person at ease – don’t argue!
- Create an atmosphere of trust and comfort.
- Give the person your full attention.
- Position yourself where the person can see you.
- If it is appropriate, use eye contact or touch to keep the person’s attention and communicate feelings of warmth, possibly a hug.

**Ways of talking**
- Use the person’s preferred name.
- Speak slowly and clearly – go at the person’s pace.
- Keep sentences short and simple, focusing on one idea at a time.
- Be flexible and allow time for what you have said to be understood and wait for a response.
- Remain calm and talk in a gentle, matter-of-fact way.

**Body language**
As people with dementia experience loss of ability to communicate with words, they will rely on non-verbal communication to understand what is being said to them.

**Body language includes:**
- gestures, such as pointing to show a direction
- facial expression, such as a smile
- giving full attention
- appropriate expressions such as a nod, a smile or a touch, such as holding their hand (if appropriate)
- position – be at the same level as the person, do not stand over them
- keeping a relaxed posture
- distance, that is, respecting personal space.

Use prompts or demonstrate what you are saying by actions such as sitting down – the person will often mirror your action.

Body language can be positive or negative – avoid negative body language such as frowning.

Look at the person’s body language – what does this tell you?

Ask a family or community member which forms of communication might work well.

**The right environment**
- Try to minimise distractions.
- Don’t interrupt or finish the person’s sentence.
- Allow time for a response.
- Validate the person’s feelings.
- Avoid competing noises such as the TV or radio, don’t shout over the top of other noise.
- Stay still and in the person’s line of vision while you are talking.
- Find out if the person has difficulty with sight/hearing/dentures so that you can accommodate their needs.
- Reinforce the person’s self esteem and trust with validation and encouragement.

**The right level of words**
- Speak to the person as an adult; do not treat them like a child.
- Avoid correcting or making the person say the right word.
- Ask questions that require a yes or no response.
- Use words that are familiar to the person.
- Remember that a person may lose the ability to use a language learned later in life.
- Use reassuring words and provide positive feedback.

**Facilitator note:**
These strategies will also assist in cross cultural communication – to avoid misunderstanding and put the person at ease.
Exercise 11.2: Ways of communicating

Purpose
To consider different approaches to communicating with a person who has dementia.

What is required
Two different scenarios can be read or role-played to demonstrate different approaches to communication.

Jill is a bright, bubbly worker who has come to take Annie to an art group.

Scenario 1
Jill rushes into Annie’s room. Without stopping she goes over to the window she says, “Hello love. I’m Jill. How are you today?” (As she opens the curtains and looks out of the window she continues to talk.) “It’s a hot day. What a bright dress you have on, but you will not need your cardigan. I’ve come to take you to the art group. Are you ready? Hurry up; you don’t want to be late.”

• What could Jill have done differently?

Scenario 2
Jill walks into Annie’s room, sits where Annie can see her and says. “Good morning Annie. I’m Jill”. (She pauses and smiles.) “How are you today?” (She waits for a response.) “Would you like to go to the art group?” (Again she allows time for a response.) “I’ll walk with you.” (Jill takes Annie’s hand and walks with her to the art group.)

• What strategies did Jill use in this scenario?

• Explain the difference between the two scenarios.

11.3 Communication techniques

Sometimes people with dementia will say things that you know are not true, e.g. they may say their mother is coming when you know that she is no longer alive. How we respond to such statements can have considerable consequences for the person with dementia.

Good communication responds to the feeling being expressed, and not just the words being used.

If a person with dementia asks for their mother, consider what they might be trying to express. What does ‘mother’ represent to them? Perhaps comfort, security, closeness and love. It may be that the person is missing these things (think of the emotional needs described earlier) and it is these feelings, or unmet needs that we need to respond to.

Communication strategies that assist people with dementia will:

• acknowledge their feelings
• allow the person to express distress (and provide them with support)
• provide verbal and/or non-verbal reassurance
• use reminiscence to connect with the person and enable them to feel worthwhile.

11.3.1 Reminiscence

All people possess memories or stories about, people events, times and things that are important to them. Reminiscence, or recalling memories is a natural process, a way of connecting to memories that takes on special significance for someone who has dementia. Reminiscence occurs in the present and connects to the past, enabling the person with dementia to experience a continuity of who they are.

Each person’s story is unique. Recalling pleasing and happy memories can have a calming effect. It can assist a person to feel worthwhile and successful rather than frustrated and disabled. However, not all memories are pleasant and some people may prefer not to visit the past – their wishes are to be respected. For Aboriginal and Torres Strait Islander people there may be particular traumatic life experiences that are recalled for individuals, and also whole communities, as a result of the history previously discussed in this training.

Be creative and use opportunities to elicit fond memories. Reminiscence can use many different types of communication senses, such as:

• verbal – talking about the past
• visual – looking at photographs or old pictures
• auditory – listening to music
• tactile – touching memorabilia such as a seed pod
• smell – familiar aromas
• taste – familiar foods.

It is important to be guided by a person’s response to different sensory stimulations and remember not to overload the person.

Reminiscence can be a natural part of interaction with someone who has dementia.
It can also be assisted by:

- a photo album or photo gallery on the wall
- a memory box, containing mementoes that have special meaning for a person, such as a piece of bark from their Land,
- the smell of eucalyptus (from leaves or eucalyptus oil)
- a poster or collage made up with familiar motifs, pictures.

These can be kept in an accessible place and used to trigger conversation. However, reminiscence may occur at any moment the person with dementia indicates – it is important to seize the moment.

11.3 Exercise: Discovering a person’s life story

**Purpose:** To identify ways of finding out about a person

**Facilitator note:**
You may like to prepare ahead for this exercise by having some example to show to participant, asking participants to bring examples that they have found successful or using this as a project for the group to design a resource that will be useful to use in the future.

**What is required?**
Explain to the participants that there are situations where you may not know a person who has dementia or have access to information about a person, for example, if the person with dementia is moved away from their Land and family. You may only have medical information about the person.

Ask the group the following questions:

How would you go about collecting information to include in a “memory box” or “life story book”?

How would you put this information together in a way that could be used to assist with reminiscence?

As you discover the person, their life history, their Land and family, their passions and the things they love to do you can put together an album or life story book.

For example:

You may find out that a person with dementia loved to go fishing. You could gather some pictures of fish and fishing rods, rivers or ponds, etc and compile a little album. Or you may put together a fishing tackle box with some fishing equipment. The book or the box could be left with the person so that anyone could use the items to stimulate memories or feelings and prompt reminiscence.

Reminiscence can:

- give a sense of safety and security through identity
- be used often and by different people.

11.3.2 Validation
Validation is a communication technique that empathises with the person’s feelings and reality. It is a technique that helps us to enter into the world of a person with dementia to accept their perception and orientate to their reality. It is important to listen and encourage, and not correct or contradict the person’s view of reality.

**Example:**
Bessie is an older woman who has dementia; she has ten adult children. It is late in the afternoon and she is walking about anxiously, looking for her children.

A common response would be:

“Bessie, your children are all grown up and they can look after themselves.”

This response denies Bessie’s feelings and reality. Her anxiety may escalate.

**Validation**

“Bessie, your children are very important to you. Would you like to sit down with me and chat about your children?”

The first statement validates Bessie’s feelings about her children. The second statement provides Bessie with the opportunity to talk about her feelings for her children and to be close and comfortable with another person. Bessie’s anxiety about her children may be an expression of an unmet need for attachment or comfort.

11.3.3 Reality orientation
This technique has been practised in many different ways over the years. It is best used as a passive 24-hour approach that brings a person gently to the present (rather than as a confronting approach). This can be done by guiding the person throughout the day and night to be aware of:

- who they are
- where they are
- the time and date.
Example – 24 hour reality orientation technique statements

Scenario 1:
- Good morning Jo, what a wet winter day it is. Listen to the rain on the roof.

Scenario 2:
- How quickly the day has gone. It's 5.50 in the afternoon and dinner is almost ready.

11.4 Exercise: Communication techniques

**Purpose:** To develop participants’ skills in using communication techniques.

**What is required?**
Prepare scenarios or role plays that are relevant to the participants and relate to each of the communication techniques above.

Engage participants in using each of the communication techniques.

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**Additional resource**

**ASSESSMENT TASK 6: THE NEED FOR GOOD COMMUNICATION**

What can you take away from this session? Please take a few minutes to consider the following:

- How might a person feel if they are unable to communicate their needs?
- What can you do to make communication easier for a person with dementia?
- How can you keep family and friends involved? How can you aid communication with family members?
- What one thing are you going to do to improve communication with the people who have dementia?

Communication also assists us to establish and maintain a relationship that takes into account the individual differences of the person and their family (for example, their cognitive ability, cultural background and language).

As a person with dementia loses verbal communication skills and their ability to initiate interaction with others reduces, it becomes the responsibility of others to support the maintenance of their sense of self and relationships with others. This process is illustrated in the diagrams below.

**Relationships**
![Figure 11.1 Relationships](image)

**Relationship changes**
![Figure 11.2 Relationship Changes](image)

**Relationship maintained**
![Figure 11.3 Relationship Maintained](image)
11.5 Exercise: Communication

**Purpose:** To explore how communication can affect trust and relationships.

**What is involved**

Explain the following scenario to the group.

**Scenario: Uncle Freddy**

Uncle Freddy had spent ten minutes yarning yo Harry about his old time stories as a stockman. Some of Uncle Freddy’s speech was jumbled, and his times and dates confusing, but he was happy as he told his stories. Jack came over and joined Uncle Freddy and Harry. Harry turned to Jack and said, “Gosh, old Freddy is getting confused, his story is all mixed up, he’s got it all wrong, his dementia is getting worse”.

**Discuss…**

- What messages did Harry’s statement send?
- Did it show respect for Uncle Freddy?
- Was it validating or undermining?
- Did it include or exclude Uncle Freddy?
- How might Uncle Freddy have felt?
- Would this type of communication assist in maintaining trust and relationship?

**ASSESSMENT TASK 7: MAINTAINING RELATIONSHIPS**

How would you find out about the important people or events in the life of a person with dementia and assist them to maintain their relationships?

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What cultural issues would you consider in having this conversation with the person?