Communicating with people with dementia.

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Reminiscence

It is important that the person with dementia is able to continue to talk about their lives because it is this narrative or self-story that preserves identity. People with dementia experience loss of cohesion and coherence in their conversation, so it is apparent they will require assistance in the production of their story.


Reminiscence in dementia

Rather than being an "aimless wandering of the mind" reminiscence is part of a wider process of reviewing one’s life which occurs in all older people, including those who are "adequately functioning".


Self identity in dementia

One theory is that the self identity can be preserved in people with dementia by virtue of the caregiver’s continued belief that the person still exists in self and mind even when the body’s functions become solely vegetative.


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Descriptive information
- MMSE
- ABCD – selected subtests

Pre-/Post-intervention
- Conversation analysis & strategies
- QOL-AD (Logsdon, 1999) & Communication quality of life
- Knowledge & Attitudes

Intervention
- Memory Book
- Training keyworker

 Memory book – based on personal reminiscence to preserve self identity

 Keyworker training - a conversation prescription based on the conversation analysis and observation of strategies to enhance communication demonstrated
George – Conversation Analysis

<table>
<thead>
<tr>
<th>Topic skills</th>
<th>Number of utterances</th>
<th>Conversation One</th>
<th>Conversation Two</th>
<th>Per min</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total reminiscence statements</td>
<td>37</td>
<td>3.7</td>
<td>56</td>
<td>4.6</td>
</tr>
<tr>
<td>On-topic statements which extended topic</td>
<td>93</td>
<td></td>
<td>108</td>
<td></td>
</tr>
<tr>
<td>Minimal statements to maintain topic</td>
<td>2</td>
<td></td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>Total novel on-topic statements</td>
<td>95</td>
<td>9.5</td>
<td>118</td>
<td>10.3</td>
</tr>
<tr>
<td>Total utterances which do not add to topic</td>
<td>15</td>
<td>1.5</td>
<td>19</td>
<td>1.6</td>
</tr>
</tbody>
</table>

Evie – Conversation Analysis

<table>
<thead>
<tr>
<th>Topic skills</th>
<th>Number of utterances</th>
<th>Conversation One</th>
<th>Conversation Two</th>
<th>Per min</th>
</tr>
</thead>
<tbody>
<tr>
<td>Novel reminiscence statements</td>
<td>26</td>
<td></td>
<td>22</td>
<td></td>
</tr>
<tr>
<td>Memory book statements (read aloud)</td>
<td>N/A</td>
<td></td>
<td>30</td>
<td></td>
</tr>
<tr>
<td>Total reminiscence statements</td>
<td>26</td>
<td></td>
<td>52</td>
<td></td>
</tr>
<tr>
<td>On-topic statements which extended topic</td>
<td>72</td>
<td></td>
<td>100</td>
<td></td>
</tr>
<tr>
<td>Minimal statements to maintain topic</td>
<td>1</td>
<td></td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>Total novel on-topic statements</td>
<td>73</td>
<td></td>
<td>110</td>
<td></td>
</tr>
</tbody>
</table>

Implications for practice

- Caregivers require training on effective means for using memory books with people with dementia, and that training needs to be individualized.
- People with moderate dementia are able to rate their quality of life including communication strengths and weaknesses.
- Successful conversations encourage maintenance of self identity through reminiscence.

The Memory Book – What do people with dementia think?

Evie

“Well it gives you a um tag to um put your memories on um and I think that’s important because we can’t remember everything and our memories are not ah faulty ...yes so that would be the main thing and of course the other thing is um as it would for anybody else ( ) if you have a family member who’s died like my father who’s died then you ( ) you know you can you your precious memories can go in those as well”.

George

“Great (.) I’ve shown it to other people (.) it’s good (.) it helps you to refer back to those days and make it ah really excellent (.) a lot better than you think”.

May

“It’s quite good I think. I think it’s interesting to some of the other of the people around and (.) may not have done it and they come back it’s quite interesting”.

I have been a keen gardener all my life.
Memory books help people with dementia tell their life stories.

Person centered care challenges us to implement memory books in an individualised manner (we are all different).

Conversations with caregivers can encourage maintenance of self identity through successful reminiscence.

Memory initiative – gives good directions for families to undertake an interview with their family member. The information could be used to help the person keep remising as memory fails, to help other caregivers better understand the person they are caring for. Toolkit can be downloaded for free.

Sample questions:
- What were you like as a child? Troublemaker? Studious? Social?
- What did you do for fun when you were young?
- Tell me about your sister/brother (insert name). What was (s)he like growing up?

StoryCorps website

www.storycorps.org

Communication change over time

Over time, people with Alzheimer’s disease
- Produce less content
- Lose words (reduction in vocabulary)
- Lose the story gist
- Lose story elements
- Have trouble recognising or sticking to the topic
- Need increasing help to co-construct stories
Conversation is an act of caring and can be 'therapeutic'. Taking a moment to engage a person in conversation helps them keep a sense of self or being a person. Making simple changes to how you converse can have a positive effect.

Key implications

- Think about the quality of conversations if time constraints mean you are unable to spend more time conversing. Little and often is fine.
- Your body language and facial expressions can convey 'calm, friendly and reassuring'. Consider what the other person's body language might be saying.
- Get the person's attention with their name or a touch, then speak slowly and clearly.
- One idea at a time, they may need extra cues and clues to follow the conversation.
- Focus on what the person can do.


**Three changes to improve communication**

- Leave longer pauses when interacting with older people in general and with people with Alzheimer’s disease in particular. Even relatively long pauses are not necessarily indicators of turn completion.
- Avoid asking factual questions about the person’s earlier life (What work did you do?). Instead, offer information for agreement (I think you were a typist when you were younger).
- Avoid asking wh-questions (Who came to see you this morning?). Tag questions (Your daughter came to see you this morning, didn’t she?) or so-comments (so, your daughter came to see you this morning) provide content that helps to stimulate memory.

**The Focused Approach (Ripich, 1995)**

- **Face to face**
  - Face them directly, use their name
  - Gain and maintain eye contact
  - Use touch when appropriate

- **Orient to topic**
  - Repeat key words several times
  - Repeat and rephrase sentences
  - Use nouns and specific names

- **Continue topic**
  - Maintain topic for as long as possible
  - Restate topic during the conversation
  - Indicate when you are introducing a new topic

- **Unstick blocks**
  - Repeat key words several times
  - Repeat and rephrase sentences
  - Use nouns and specific names

- **Structure**
  - Ask questions so that the person will be able to recognize and repeat a response
  - Provide two simple choices at a time

**Exchange ideas**

- A two way conversation
- Do not ask ‘test’ questions

**Direct, short, simple**

- Names not pronouns
- Subject first
- Hand signals, pictures, expressions

+ **Quilting**

- Listen for snippets of the story, build up the details
- Help piece the story together, reintroduce, repeat, add endings

**References**