

Offices in
Suffolk and
Virginia Beach, Virginia
Tel: 757-399-7506
Fax: 757-397-1267
Web: www.oasthook.com



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INSIDE THIS ISSUE

- Two to Tango:
Using Positive
Communication
When Someone Has
Dementia (Part II)
- Ask Allie
- Distribution of This
Newsletter

Editor
Sandra L. Smith,
Certified Elder Law Attorney

TWO TO TANGO: USING POSITIVE COMMUNICATION WHEN SOMEONE HAS DEMENTIA (PART II) BY KIMBERLY JOHNKE, LSW

In Part I of our discussion, we discussed dementia as a form of brain deterioration, rather than simply a “memory problem.” This is because the kinds of complex cognitive, functional, and behavioral changes that occur in the individual with dementia are the result of organic changes to the brain that have far-reaching consequences on the relationship between the individual and the individual’s caregivers and loved ones. Simply put, dementia causes significant strain on a relationship.

Yet a 2009 study on people with Alzheimer’s disease and their caregivers published in *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences* suggests that a “close” relationship with caregivers affords individuals with dementia a significant edge over those lacking such a relationship. Specifically, these individuals show a noted retention of mind and brain function over time. The study, which was led by Johns Hopkins and Utah State University, revealed that Alzheimer’s patients with “close” spouses experienced the slowest rate of decline, similar to patients participating in clinical trials for FDA-approved Alzheimer’s drugs.

How can we achieve or maintain a “close” relationship with individuals suffering significant impairment to their ability to relate to others and a limited capacity for frustration?

According to noted dementia expert, Teepa Snow, we begin by remembering that “being right doesn’t necessarily translate into a good outcome for both of you.” The relationship, not the outcome of the encounter, is the critical component. So when you feel your blood pressure rising from frustration, keep your eyes on the prize. Ms. Snow offers some tips to guide you on executing a consistent, positive approach when communicating with a loved one with dementia:

- Pause at the edge of “public space.” (We each have a personal space bubble, which constitutes the 6 foot space around you; public space is outside of this range.)
- Gesture, then greet the person by name.
- Offer your hand and make eye contact. (Watch for a signal of permission to approach.)
- Approach slowly within the person’s visual range. (Remember that binocular vision condition experienced by people with dementia from Part I?)
- Shake hands and maintain hand-under-hand contact. (Tilt your handshake to the side.)
- Move your body to the side.
- Move so you match eye levels and remain mindful of personal space (being inside the bubble).
- Wait for an acknowledgment to proceed with conversation.

This approach is designed to maximize comfort and safety for individuals with dementia, while allowing these individuals to stay in physical contact and close connection. A gentle squeeze to the hand of these individuals when you need to achieve eye contact or before you ask a question will guide their attention back to you. During conversation, limit your words and increase your use of facial and other visual gestures. For instance, give examples by using objects in the environment (use gestures and point). Also, try holding your open hand (fingers extended) near your face and smile when you want to get their attention. This makes you “bigger” and more noticeable to those with limited field of vision. Look interested and maintain a happy voice, even in the face of frustration. Remember, individuals with dementia aren't trying to be difficult or obstinate; they simply may not understand or even see what it is that you are trying to get them to do. Keep in mind, however, that although individuals with dementia may smile, make small talk-like sounds and other gestures that seem to indicate they are agreeing with your expressed plans, they may react sharply when you try to institute your plan. This goes back to the “retain right” premise, where the side of the brain responsible for maintaining the “rhythm” of conversation remains intact, while the side controlling language comprehension dies. In other words, they maintain their social graces such as smiling politely, even though they may not understand what it is they are agreeing to.

Don't:

- Try to control the flow by correcting errors or lies.
- Try to stop the flow by rejecting topics, distracting the focus or making facial gestures that signal disappointment or disapproval.

Similarly, when individuals with limited language capacity are trying to communicate to you, try these tips to clarify their wishes or needs:

- Repeat the need exactly as expressed. This includes intentionally misusing a word to match their chosen word. This helps avoid frustration or embarrassment for the person who cannot find the correct word.

- Say, “Tell me more about it.”
- Ask, “Could you show me what you do with it?”

Perhaps the best example of this was a true story shared by Ms. Snow: After lunch one day, a gentleman with dementia asked her for a “tiny telephone pole that you stick in small places.” Teepa didn’t panic. Rather, she smiled, looked in his eyes, gently squeezed his hand and asked, “Could you show me what you do with it?” He proceeded to make a gesture similar to flossing his teeth. She handed him a toothpick and celebrated a successful encounter.

Using these positive communication techniques can reduce frustration for both the caregiver and the person with dementia, and foster a more rewarding personal relationship. Good luck!

Special thanks to dementia expert Teepa Snow for sharing her expertise and insights on communicating with people with dementia. Learn more about Teepa at www.teepasnow.com.

The attorneys at Oast & Hook assist families with their estate, financial, insurance, long-term care, veterans' benefits, and special needs planning issues.

Kimberly Johnke is a licensed social worker with more than 15 years of professional experience serving disabled and chronically ill individuals. In her role as Life Care Planning Specialist at Oast & Hook, Ms. Johnke provides individualized services to assist families throughout the life care planning process.

Ask Allie

O&H: Allie, we've heard an amazing story about a newly-adopted cat who saved his new parent's life. Please tell us about him.

Allie: Sure! Amy Jung and her son Ethan visited the Humane Society near their home in Sturgeon Bay, Wisconsin, on February 8th, and decided to adopt a 21-pound orange and white cat named Pudding. Pudding had been at the shelter since 2003. Amy and her son also adopted Pudding's friend Whimsy. That evening soon after going to bed, Amy started having a diabetic seizure in her sleep. Pudding sat on Amy's chest to try and wake her up. When that didn't work, he nipped and nudged her face until she briefly became conscious. Amy was able to call out to her son, but he couldn't hear her calls. Pudding ran into Ethan's room and pounced on the bed until Ethan woke up and was able to call for help. Amy believes she would not have made it through the night without Pudding's help. Pudding is being registered as a therapy animal, and he sits by Amy's feet and meows when he senses her blood sugar is low. Good job Pudding! What a great story. I like to share stories about animal heroes with our readers. Time to go and play . . . See you next week!

Distribution of This Newsletter

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