

A person-centred communication approach to working with older people who have dementia

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Abstract

Dementia is prevalent among the older population, especially people over 65 years and is characterised by deterioration in a person's cognitive abilities (National Health Service (NHS), 2017). The main signs and symptoms of dementia include loss of memory, impaired thinking and problem-solving skills, and difficulties with communication. Effective communication in the healthcare setting will ensure patient care is safe and enable support workers to understand the needs of the older person with dementia. Communication is a vital aspect of healthcare, making it essential for support workers to be aware of challenges that may hinder communication and to identify strategies to enable the person to communicate their needs for as long as possible.

Keywords

- Communication
- Dementia
- Older person
- Person-centred care
- Family involvement
- Challenges

Difficulty in communicating occurs in all types of dementia and may be one of the first signs of the disease process (Barnes and Surr, 2012). The level of difficulty varies from individual to individual and differs at different stages of dementia (Nazarko, 2015). Communication with older people with dementia can pose a particular challenge for support workers, as dementia impairs the ability of the individual to express their needs and to understand other people (Zembrzuski and Frazier-Rios, 2005). Dementia affects the individual's ability to understand what they hear or read, as the disorder affects the parts of the brain that are responsible for language and communication. Memory loss and the disruption of critical thinking processes inhibit the person's ability to present their ideas or thoughts in a rational way. Moreover, dementia, along with the ageing process, may weaken the person's visual and auditory senses (Williams, 2013).

Challenges to communicating with older people with dementia

Advancing age is the greatest risk factor for developing dementia (Chen et al, 2009). Support workers face challenges when communicating with older people with dementia, as the person's loss of memory disrupts the ability to recall or understand words and phrases. This reduced cognitive capacity and memory loss narrows the vocabulary and language ability of the person with dementia (Cattan, 2009), and they may lack the words and phrases needed to express their needs (Collier, 2014). In situations where the person lacks the appropriate word to express their thoughts, they may describe the particular thought in length or use a substitute word with a meaning similar to the intended word. This affects the ability of the person to provide understandable answers to questions asked by support workers and creates a language barrier that limits the communication process.

Communicating with people with dementia is a challenge as the decline in cognitive function affects the individual's ability to express themselves in a logical and coherent manner. The person may speak in a way that is confusing and the grammar used can be jumbled up (Rousseaux et al, 2010). The language deficit coupled with the reducing cognitive capacity, limit the ability of the person to organise their thoughts or express their feelings in a logical manner. Sometimes, people with dementia will repeat the same words or phrases over and over again and this can present as an obstacle to interactions (Vasse et al, 2010). This breakdown in communication can result in the person with dementia losing the ability to put into words their thoughts and feelings about the health care provided, potentially resulting in reduced satisfaction with the quality of care

Dementia is a progressive disease, leading to more frequent episodes of memory loss, affecting how people with dementia communicate. The person will have difficulty remembering people, instructions, activities, and recent events and be prone to losing their train of thought mid-conversation. The person may begin a sentence and halfway through they will forget what they were talking about, or just change the topic of conversation altogether. This loss of memory causes anxiety and confusion, as they may feel self-conscious about their inability to recognise faces, or remember the date, or a scheduled activity (Vasse et al, 2010). Support workers will need to

frequently remind the person about this information, which will affect the course of the communication.

A further challenge faced is that people with dementia exhibit a poor attention span, due to decreased concentration (Alzheimer's Association, 2016). This results in a reduced ability to focus on a specific task for an extended period, due to memory loss. The person also lacks the ability to create short-term memories, as the hippocampus is the first part of the brain to be affected, and it is responsible for helping people to make new memories, to make sense of what happens and to move memory from the short-term to long-term (Nazarko, 2015). The mind of a person with dementia will start to wander when an activity takes too long and they will be easily distracted by other activities taking place within the immediate environment (De Vries, 2013).

As the disease progresses, symptoms become more severe and can lead to problems with speech and understanding. Neurological damage can cause a disorder known as aphasia, which affects the communication abilities of the individual (Plotkin, 2011). Communication becomes less verbal and a person suffering from aphasia will also display difficulty in understanding written communication. They will begin to rely more on body language and tone of voice to understand what others are saying and to express their own feelings and needs. As a result, the person may need to communicate through gestures. However, this can create a communication barrier and lead to poor understanding or misinterpretation. Eventually, the person may feel misunderstood and isolated, which creates mistrust between the person and the caregiver, further complicating the communication process.

Communication challenges associated with the ageing process

The risk of hearing loss increases with age.

“Interacting with the person with a sense of respect and dignity is central to achieving person-centred dementia care”



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Dementia is characterised by deterioration in a person's cognitive abilities.

About one-third of the UK population aged between 60-70 years and three-quarters of the population aged over 70 years have a hearing loss (Deaf Aware, 2016). One of the main impacts of hearing loss is on the individual's ability to communicate with others, adding an additional obstacle when interacting with older people with dementia, as the person may fail to hear what is being said. The person may confuse words, and a communication breakdown is exacerbated, when a person with reduced hearing also has a language deficit, caused by loss of memory (Lin et al, 2011). The loss of hearing experienced by people with dementia often leads to miscommunication and can have a significant impact on everyday life, causing feelings of loneliness, frustration, and isolation, as the person may disengage from social contact, which can further affect communication (De Vries, 2013).

A further challenge that support workers may encounter when interacting with people with dementia is that many will have lost the ability to read or have limited writing skills, due to a reduced ability to coordinate hand and body movements (Clegg et al, 2013). Deteriorating vision can create a challenge to communication, as the person will have a reduced ability to

identify and interpret facial expressions, gestures or body language, which provide the background to conversations (Stiadle et al, 2014).

Behavioural and psychological symptoms in dementia

A person with dementia may display erratic and combative behaviour or lose an understanding of what is socially acceptable or unacceptable behaviour (Laputz, 2012). The person may use swear words, obscenities or behave aggressively. They may become restless or act in an aggressive manner, due to frustration with an occurrence, fear, loss of self-control or physical discomfort and can obstruct efforts by staff to communicate. Laputz (2012) suggested that people with dementia may develop paranoia and become withdrawn and less open to interactions with others.

Personality changes can also obstruct communication between support workers and the person with dementia. A common personality change is the onset of apathy and a lack of interest in ordinary activities such as conversations. Older people with dementia may also display a lack of sensitivity towards other people, which can hamper communication both with other people and support staff.



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Person-centred communication in dementia care

Definitions of person-centredness suggest that patients should be 'treated as persons' (Entwistle and Watt, 2013), viewing the patient in their own social world, respected and involved in their own care (Epstein and Street, 2011). Person-centred communication has been identified as central to achieving person-centred care (Scholl et al, 2014). The key points of person-centred dementia care are:

- Treating the person with dignity and respect
- Understanding their history, lifestyle, culture and preferences, including their likes, dislikes, hobbies and interests
- Looking at situations from the point of view of the person with dementia (Alzheimer's Society, 2017).

Gaining an understanding of a person in this way can help to establish a bond between a support worker and the older person with dementia.

Interacting with the person with a sense of respect and dignity is central to achieving person-centred dementia care. Despite the older person's loss of memory and erratic social behaviour, there is a need to attach a high level of respect for the life of the person (Alzheimer's Society, 2017). One reason for the failure of communication

between a support worker and an older person with dementia is that the support worker may try to talk down to the person. Such actions can create resentment, which in turn inhibits communication. Showing respect and treating the person with dignity improves the confidence of the person and creates a friendly environment where effective communication can be achieved (Hindle and Coates, 2011).

Cultural competence involves understanding and appreciating the culture of the people one interacts with (Truong et al, 2014), enabling caregivers to respect the beliefs and values held by the person with dementia (Williams, 2013). It is important to understand the beliefs of the person, as this provides an understanding of some of the actions and attitudes that the person may display. Being culturally competent will enable a support worker to interact with a person in a way that puts them at ease and

allows them to communicate more freely. Cultural respect allows the caregiver to understand how such beliefs may affect the communication choices of the older person with dementia, which ultimately improves communication.

Communication with older people with dementia can be improved by providing a comfortable environment (Reed et al, 2012). When communicating with the person, it is essential to hold the conversation in a quiet environment, which will eliminate or reduce any anxiety the person may be feeling, allowing them to communicate more freely (De Vries, 2013). Holding conversations in a quiet environment removes any distractions that may compete for the person's attention, as older people with dementia are easily distracted or prone to losing concentration. Distractions such as televisions or radios should be switched off during attempts to speak with a person with dementia. In a relaxed environment, communication will be more effective, as the person will be more likely to concentrate on the conversation.

Verbal communication

Communication is most effective if carried out in a simple way. This involves using simple words or sentences and phrases that the person can understand without creating confusion. When a response is required, the question should be framed in such a way that the person can provide a straight 'yes' or 'no' answer. Open-ended questions or questions with multiple options can create confusion. When providing instructions, it should be one step at a time, to allow the person time to process and understand the information. It is important to eliminate the use of technical or medical terms, jargon or slang (Hingle and Robinson, 2009).

However, it is important to communicate in a way that does not degrade the older person. The use of 'elder speak' is degrading and should be

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discouraged when communicating with older people (Williams, 2013).

When communicating with a person with dementia it is essential to know if they have a hearing loss, in order to provide appropriate support. The level of loudness that a person is comfortable with should be ascertained by caregivers, by gradually increasing their speaking volume to a point where the person can clearly understand the spoken words (Williams, 2013). Eliminating any background noises also enhances a person's hearing ability and the use of high-pitched sounds is discouraged, as such high frequencies can be irritating. If the person wears a hearing aid, the volume levels should be set to a level that is comfortable for the person and a check made to ensure that the battery is charged.

Non-verbal communication

The use of gestures can aid communication by breaking down language and social barriers. The gestures should be simple and show the desired action or point to visual aids that illustrate the action (Meiner, 2015). Body language should be open and sincere to establish trust during communication with the older person with dementia. Maintaining eye contact enables the attention in the communication to be sustained and allows caregivers to see the expressiveness of a person's eyes (Hingle and Robinson, 2009).

The person with dementia must also be given plenty of opportunity to express himself or herself through non-verbal communication.

Effective listening skills are essential when communicating with people with dementia. Listening attentively puts the person at ease and allows them to be more expressive during the conversation as they recognise the attention of the other person. Gestures such as nodding and establishing eye contact assure the person with dementia that the caregiver is invested in the conversation (Reed et al, 2012). The person may consider it rude if they are interrupted too frequently but it is also important to seek clarification after the person has finished speaking. When the person struggles to remember a word or phrase, the support worker can assist them. Listening can help to understand the language capabilities of the person,



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as well as the body language used by the person when in a specific mood.

Partnership working with family members

Partnership working with family members is vital, as they have the best understanding of the person (Hingle and Robinson, 2009). This understanding of the person's behaviour and mannerisms by family members can be especially useful when communication is challenging. The involvement of family members helps to facilitate a person-centred communication approach that can be an effective way of preventing and managing behavioural and psychological symptoms of dementia (Alzheimer's Society, 2017). The National Institute on Ageing (NIA) (2011) suggested that involving family members lessens the anxiety and paranoia displayed by a person with dementia, making the person more relaxed, and open to communication. This partnership between caregivers and the older person's family not only improves the quality of care but also gives the person with dementia the confidence to express themselves.

Conclusion

Dementia is a complex disorder affecting the brain; it can result in a loss of memory, cognitive ability and communication difficulties. Dementia can affect an individual's ability to speak,

think or understand some words or phrases. Older people with dementia may have a diminishing ability to express themselves, speak in a coherent manner, or display a low attention span and be easily distracted during a conversation. These changes can pose significant communication challenges for support workers. To enable effective communication, a person-centred communication approach is essential and the person's family should be involved in their care. An older person with dementia should be treated with dignity and respect for the person they are. An understanding of the person's life history is vital, along with the use of listening skills, and verbal and non verbal communication skills. **BJHCA**

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Key points

- Dementia affects a person's ability to communicate
- Loss of hearing or vision may limit an older person's ability to communicate
- A person-centred communication approach to care is best
- Verbal and non-verbal communication skills are needed
- The involvement of family members is vital

Reflective questions for your continuing professional development (CPD)

- What is the greatest risk factor for developing dementia?
- Identify three key strategies to enable a person with dementia to communicate their needs
- Discuss with a colleague the ways to provide a person-centred communication approach to care