

## **Fireside Chat Series: Spirituality & Dementia**

### **Communicating Comfort**

Friday, October 26th, 2007 from 11:00 a.m. to 12:00 noon

#### Presenters:

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Sponsored by the Seniors Health  
Research Transfer Network (SHRTN):  
Alzheimer's Knowledge Exchange  
(AKE), Spiritual Care, and  
Communicative Access and Aphasia  
Communities of Practice



## **Themes**

- A time of sharing with others experienced in ministering to those with dementia and learning from their successful techniques and interventions.
- Ways to connect with and address spirituality into my interaction with residents living with dementia
- The importance of maintaining practices and different ways of expressing spirituality
- Written resources others have found helpful; tips for group work; tips for working outside your own faith tradition

## **Themes** *continued*

- Better approaches for multidisciplinary teams (e.g., nurse administrators who do not have the time to spend with residents developing this aspect of their care and lives - interested in tips to help make interactions more meaningful when connecting with residents)
- Addressing different faiths (e.g., core or essence of being regardless of ethnicity and religion, ways of reaching the inner core/soul and offering reassurance/comfort)

***What is communication?***

## **Communication Process**

- Sender of a message
- Receiver(s) of a message
- Understanding the message
- Type of Communication
- Value of Active Listening

## **Normal Aging and Communication**

**Mileage** – a good and bad thing

**Vision**

**Hearing**

**Internal Organs**

**Memory**

**Medications**

## What is Dementia?

**Dementia** is a set of symptoms, which includes loss of memory, understanding, and judgment

## Types of Dementia

- **Reversible**

Delirium

Depression

Other

- **Irreversible**

Alzheimer's  
Disease

Vascular  
Dementia

Frontal-  
Temporal  
Dementia

Mixed  
Dementia

Lewy Body  
Disease

## **Alzheimer's Disease Is...**

**Progressive**

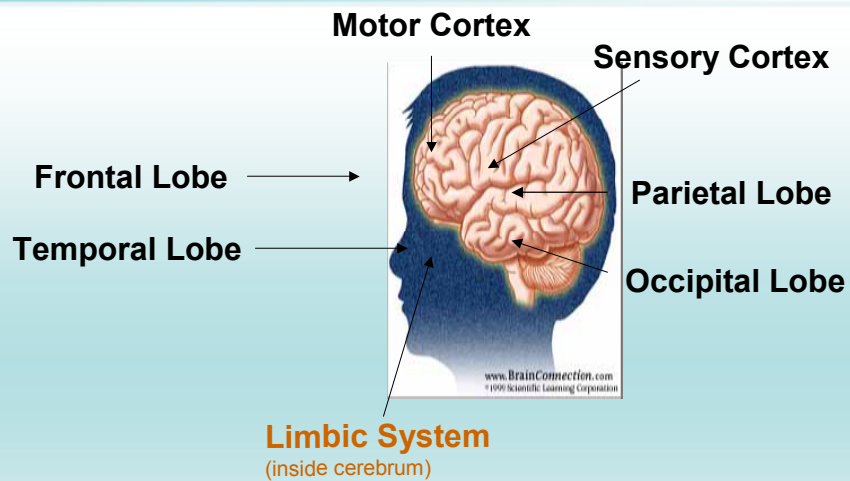
**Degenerative**

**Irreversible**

## **Behaviour as a form of Communication**

- **Responsive Behaviours are a form of communication – communicating unmet needs**
- **May or may not be result of disease process**
- **Important to build on remaining strengths**
- **Focus on the positive**

## Human Brain and Language



## Communication and Dementia

**Amnesia**

**Apraxia**

**Agnosia**

**Aphasia**

**Alexia**

**Agraphia**

## **Aphasia and Dementia**

### **Aphasia:**

- a loss of the ability to produce and/or comprehend language due to injury to brain areas specialized for these functions

### **Aphasia and Dementia**

- Progressive Aphasia
- Fronto-temporal Dementia
- Semantic Dementia

## **Understanding Aphasia**

### **Types of Aphasia:**

- Fluent/Expressive
- Nonfluent/Receptive
- 'Pure Aphasias': Alexia, Agraphia, Pure Word Deafness

### **Aphasia Treatment**

### **Communicative Access**

### **Communication Issues in Early Stage Dementia**

- subtle losses in vocabulary, reading & writing
- difficulties word finding
- comprehending abstract language (e.g., slang) difficulties on the telephone
- difficulties verbalizing ideas
- feelings of being outpaced or keeping up with conversation
- repetition of stories

### **Strategies in Early Stages**

- Learn the limits of persons memory and attention span
- Use simple and direct language
- Repeat messages frequently
- Allow resident to reminisce and express feelings
- Allow time for processing
- Encourage “talking it out”



## **Communication Issues in Middle Stage Dementia**

- less aware of communication difficulties
- increasing difficulties word finding
- further declines in vocabulary
- speech may become difficult to follow/unorganized
- rambling of speech
- use repetitive words or statements

## **Communication Issues in Middle Stage Dementia**

- getting stuck on words or thoughts (perseveration)
- poor choices with word order
- difficulties with grammar
- digressing in conversation
- comprehension of written language
- lower retention and understanding of what was read

## **Communication Issues in Middle Stage Dementia**

- communication problems more frequent and more severe
- difficulties apparent especially in stressful, unfamiliar and confusing situations
- more repetitious questions and statements
- socially, the ability to carry on a brief conversation is somewhat maintained. Brief encounters sometimes give a false sense of their abilities

## **Strategies in Middle Stages**

- use remaining strengths – many of the social aspects of language use persist – greetings, appropriate gestures, pleasant conversations
- develop a predictable daily routine
- label the environment
- break down instructions into steps
- use multiple means to convey message- don't forget body language!
- use clues available in the situation to guide your conversation
- structure questions (instead of leaving them open-ended)

### **Communication Issues in Late Stage Dementia**

- lose their ability to engage in verbal conversation due to severe losses in language and increasing difficulties with agnosia
- declines in gross and fine motor skills will also affect the persons physical ability to speak
- the person can completely lose the ability to vocalize and in the last few months can become mute

### **Strategies in Late Stages**

- continue to talk
- assume the resident can understand
- encourage attempts to communicate
- use non-verbal means of communicating
- remain aware of resident's comfort level

## **End-of-Life Changes and Considerations**



## **Additional Consideration**

- Capacity and Competency
- Cultural Considerations