Talking with Loved Ones who Have Alzheimer's Disease: The Practice of Non-violent Communication

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Alzheimer's disease is a progressive and fatal brain disease. It is the most common form of dementia, accounting for nearly 50 to 70 percent of all dementia cases. Though all cases are unique, there are some common characteristics, including memory changes, impaired problem solving ability, difficulty completing everyday tasks, new problems with words, misplacing items, poor judgment, withdrawing from work/social activities, decreased judgment, and changes in mood or personality (Orange County Alzheimer's Association, http://www.alz.org/oc). Sadly, as many as 5.3 million people in the United States are currently living with Alzheimer's; it is the seventh leading cause of death.

Though there are several options for people who live with Alzheimer's disease, as well as numerous caregiving resources for their families, the present article is about how to communicate more effectively with someone who has dementia. This is essential given that it can otherwise be a very difficult, challenging and stressful experience for both the patient and the family members. According to the Alzheimer Association of Orange County, Alzheimer's disease can gradually diminish a person's ability to communicate, specifically, express thoughts and emotions, as well as impair one's ability to understand what others are saying. Difficulty finding the right words or inventing new words/phrases to describe familiar objects (e.g., "that thing that takes out tangles" to describe a comb), as well as difficulty organizing words logically (e.g., "I was making a sentence here go there" to describe having a conversation), as well as using curse words, speaking less often, or relying on non-verbal gestures, are all part of decreased communication skills.

The Alzheimer's Association suggests the following to enhance communication with a loved one who has Alzheimer's or another form of dementia:

- Let the person know you are listening and trying to understand what is being said.
- Keep good eye contact. Show the person that you care about what is being said.
- Let the person think about and describe whatever he or she wants to. Be careful not to interrupt.
- Avoid criticizing, correcting and arguing.
- If the person uses the wrong word or cannot find a word, try guessing the right one.

- If you don't understand what is being said, ask the person to point or gesture.
- Focus on the feelings, not the facts. Sometimes the emotions being expressed are more important than what is being said. Look for the feelings behind the words.
- Always approach the person from the front. Tell the person who you are.
- Call the person by name. It helps orient the person and gets his or her attention.
- Use short, simple words and sentences. Talk slowly and clearly.
- Ask one question at a time.
- Patiently wait for a response. A person may need extra time to process your request.
- Repeat information and questions. If the person doesn't respond, wait a moment. Then ask again.
- Avoid quizzing. Reminiscing can be healthy, but avoid asking, "Do you remember when...?"
- Give simple explanations. Avoid using logic and reason at great length. Give a complete response in a clear and concise way.

These suggestions are actually quite useful strategies when implemented, but they do take practice, especially when they may not be familiar or implicit. They are often hard to draw upon when under stress or frustrated (and they do require some sort of calmness and reason). All of these communication tools are part of a larger discussion related to family functioning and non-violent communication (NVC; Rosenberg, 1999). NVC, often referred to as compassionate communication, involves communication skills that foster compassion and empathy to meet the needs of all concerned in order to build more effective relationships. Broadly, it is about learning to not use language that places moralistic judgments ("The problem is that you're not trying hard enough"), classifies and judges ("She is so needy"), makes comparisons ("My friend's dad doesn't do that, why do you?"), and denies responsibility ("I hate being a caregiver but I do it because I am your wife").

Instead, we need to compassionately communicate with our loved ones, especially those with dementia. So, for example, instead of becoming angry that your mom thinks it is the month of April when it is really the month of May, and saying "Mom, you're wrong", state instead "Yes. Isn't April such a lovely month?" This sounds obvious, but again can be difficult to do when stressed and frustrated. Another example is if a loved one does not recall who you are. This is, unfortunately, a common experience among patients who have Alzheimer's disease and can be quite disappointing for the family member or friend. To maintain compassion, the goals are to focus on the emotion and not the facts or details. Instead of replying with, "No dad, I am not your college roommate. I am your son. You got your facts wrong", it is more effective to reply with "Yes dad. Didn't we have to so much fun back then in college?" There is no point in causing your loved one more agitation because he or she cannot recall facts; the focus

is NOT to prove the person wrong, but to SHARE a positive, loving moment and interconnect with them. In the end, that is all that really matters.

Orange County Alzheimer's Association, http://www.alz.org/oc/.

Rosenberg, M.B. (1999). Nonviolent communication…A language of compassion. PuddleDancer Press, CA.