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The Difference Between Confrontational and Supportive Communication

PET and Aging:

PET Scan of 20-Year-Old Brain  PET Scan of 80-Year-Old Brain

PET and Aging: ADEAR, 2003

As we age, processing speed may slow, but we do not lose function in our brains, unless:

Something Goes Wrong with Our Brains
Four Truths About Dementia:

1. At least 2 parts of the brain are dying—one related to memory and another part
2. It is chronic – can't be fixed
3. It is progressive – it gets worse
4. It is terminal – it will kill, eventually

The person’s brain is dying

Positron Emission Tomography (PET)
Alzheimer’s Disease Progression vs. Normal Brains

G. Small, UCLA School of Medicine.
Dementia does not equal Alzheimer's does not equal Memory Problems
Essentials for Communication:

What Helps?
What Hurts?
What Matters Most?

Getting The Person to Do Something:

Form a relationship first, then work on task attempt!
Positive Physical Approach™
- Pause at edge of public space (6 feet)
- Greet with your open hand next to your face, smile
- Call the person by name, if possible
- Move your hand into handshake position
- Approach slowly and within visual range
- Move from a handshake to Hand-under-Hand®
- Shift into a Supportive Stance alongside them
- Get low by standing or kneeling, but don’t lean in
- Make a connection and wait for their response

Hand-under-Hand®:
Protects aging, thin, fragile, forearm skin

To Connect:
- Use the PPA™ to get started
- Make a visual connection:
  - Look interested and friendly
- Make a verbal connection:
  - Sound enthusiastic, keep responses short
- Make a physical connection:
  - Hold Hand-under-Hand®, or use flat open hand on forearm or knee
Then, Connect Emotionally:
- Make a connection
- Offer your name: “I’m (name) and you are...?”
- Offer a shared background: “I’m from (place) and you’re from...?”
- Offer a positive personal comment: “You look great in that!” or “I love that color on you.”

Connecting Emotionally:
- Identify common interest
- Say something nice about the person or their place
- Share something about yourself and encourage the person to share back
- Follow their lead and listen actively
- Use some of their words back to keep the flow going
- Remember it’s often the ‘first time’ for them, so expect repeats
- Use the phrase “Tell me about...”

To Communicate: Just Having a Conversation
- The more you know, the better it will go
- Take it slow and go with the flow
- Later in the disease:
  - Use props or objects
  - Consider parallel engagement at first: look at the ‘thing,’ be interested, share it
  - Talk less, wait longer, take turns
  - Cover, don’t confront when you aren’t getting their words and just enjoy the exchange
  - Use automatic speech and social patterns to start interactions
  - Keep words short and emphasize the visual
Then, Get it Going!
- Give simple and short Information
- Offer concrete choices
- Ask for help
- Ask the person to try
- Break the task down to single steps at a time

To Communicate When They’re Distressed:
First - Connect
Then - Use Supportive Communication
Finally – Move Together to Something New

Be a Detective, Not a Judge!
Try to figure out what is being communicated:
• Words
• Thoughts
• Actions
• Needs
• Beliefs
Don’t assume or presume
Don’t discount the message because of how it is delivered
Top Ten Unmet Needs:

Unmet Physical Needs:
- Hungry or thirsty
- Tired or over-energized
- Elimination: need to/did
- Temperature: too hot/cold
- In Pain!!!
  - Joints - skeleton
  - Inside systems (head, chest, gut, output)
  - Creases or folds of skin
  - Surfaces that contact other surfaces

Unmet Emotional Needs:
- Angry
- Sad
- Lonely
- Scared
- Bored

To Connect When They’re Distressed:
- Send visual signal of connection:
  - Look concerned
- Send a verbal signal of connection:
  - Use the right tone of voice
- Send a physical signal of connection:
  - Give a light squeeze or sandwich the hand
  - Offer an open palm on shoulder or back
  - Offer a hug if the person is seeking more contact

What is Supportive Communication?
- Repeat a few of their words with a question at the end
- Avoid confrontational questions
- Use just a few words
- Go slow
- Use examples
- Fill in the blanks
- Listen, then offer empathy:
  - “Sounds like...” or “Seems like...” or “Looks like...”
More Supportive Communication:

- Validate their emotions
- Early Stage: “It’s really (label emotion) to have this happen” or “I’m so sorry this is happening to you!”
- Mid Stage: Repeat their words with emotion:
  - Listen for added information, ideas, thoughts
  - Explore the new info by watching and listening
- Late Stage: Check out the whole body:
  - Face, posture, movement, gestures, touching, looking
  - Look for the need under the words or actions

Once You’re Connected and Communicating:

Move Forward:
- Add new words
- Move to a new place or location
- Add a new activity

Early Stage: Redirection
- Same subject, different focus

Later Stage: Distraction
- Different subject, unrelated but enjoyed

For All Communication:

If what you are trying is not working:
- Stop!
- Back off
- Think it through, then:
- Re-approach
- Try something slightly different
Do:
- Go with the flow
- Use supportive communication techniques
- Use objects and the environment
- Give examples
- Use gestures and pointing
- Acknowledge and accept emotions
- Use empathy and validation
- Use familiar phrases or known interests
- Respect values and beliefs and avoid the negative

Don't:
- Try to control the flow
- Give up reality orientation and big lies
- Do not correct errors
- Offer info if asked, monitoring the emotional state
- Try to stop the flow
- Don't reject topics
- Don't try to distract until you are well connected
- Keep visual cues positive

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