

PRACTICE TIPS FOR COMMUNICATING WITH OLDER PERSONS

Hearing Impaired

- Do not mistake hearing loss for mental confusion or dementia.
- Do not assume hearing impairment, but be alert for signs such as bending of the head, lack of expression when listening, inattentiveness, or inappropriate responses.
- Speak clearly and enunciate clearly.
- Recognize that persons with hearing loss or hearing aids often have trouble discerning sounds in noisy environments. Screen out background noise (e.g., TV, radio, traffic, air conditioners, car motors, etc.). Close doors to the room in which you are speaking with an older person, if possible, to screen out other voices and noises.
- Face the older person so he or she can see your face, especially your lips, for visual cues.
- Do not obscure your mouth with your hands, with a pen, or other items when you are speaking. (Note: A mustache may make it difficult for a hearing impaired person to follow conversation since the mustache can hide your lips.)
- Position yourself so the light is above or shining toward you.
- Get the person's attention before you begin to speak by addressing him or her by name, shaking the person's hand, or by touching him or her on the shoulder.
- Do not smoke or chew gum.
- Use your hands and facial expressions to emphasize what you say.
- Speak in a low pitch, especially if your voice is high.
- Speak at a moderate rate. Speak slowly and allow time between sentences. Be careful not to overarticulate, as it distorts your lips.
- Do not drop volume at the end of a sentence.
- Do not shout. This creates a booming effect and makes it harder to hear.
- Do not make important points in passing. Rephrase them. Paraphrase or repeat the client's own statements to check for accurate communication and to involve the client.
- Provide written summaries and follow-up material.
- Ask the client for feedback.

Vision Impaired

- Increase lighting.
- Use good lighting without a glare on your face or on reading surfaces. Light should be above or shining toward you.
- Do not seat the older person facing an uncurtained window where glare may be a problem.
- Allow ample time for reading printed materials. Use verbal reinforcement, or read aloud when appropriate.
- Use sharp color contrasts in printed materials.
- Move or cover glare-causing objects such as mirrors, vinyl, glass tabletops, and even glossy magazines that receive light from an intense light source.
- When putting things in writing:
 - Be sure papers have ample white space. Consider double-spacing.
 - Consider line length in printed materials: optimum line length is just over four inches, with six inches maximum

- Use large print with clean serif typeface. Twelve-point type (about one-sixth of an inch high) is recommended for older persons (14 point for persons with visual impairments). Avoid using all capital letters and avoid italic type.
- Simplify language
- Organize content
- Avoid acronyms
- Break information into small pieces.

Mental Confusion or Impairment

- If an older person seems confused, speak slower and break down the information into short segments.
- Use paraphrasing to check accuracy, allowing the older person to consider the meaning of what was said.
- Recognize that each person is an individual.
- Recognize that there may be temporary changes in mental status – either improved or diminished.
- Recognize that temporary conditions may offer a misleading appearance of impaired intellectual functioning, such as depression due to age-related losses and grieving, poor nutrition, thyroid insufficiency, medication-related problems (including incorrectly prescribed medication, overmedication, and drug interactions), sight or hearing loss, physical hesitancy or tremors, and changing locations or topics too rapidly.
- If you suspect the older person is suffering from malnutrition, depression, or drug reaction, suggest appropriate referrals. Encourage older people to go to the same pharmacist for all medicine so drug interactions can be screened.

Age-Related Losses

- Develop trust and confidences with the older person, taking extra time as needed.
- Talk directly to the older person, not past him or her to other family members.
- Listen for emotional undercurrents in the older person's explanations, and consider how they might bear on the advice given or the way it is given.
- Recognize older persons' need for control and autonomy. Emphasize options that build on this need, and encourage the person to play as great a part as possible in any decision or plan. Call upon the older person's experience.
- Address the person as Mr., Miss, or Mrs. unless you have a longstanding, informal relationship.
- Don't help too much.
- Explain options and their consequences clearly so the older person is informed, has realistic expectations, and can make a knowing choice.
- Understand that older people may be psychologically and emotionally different from younger persons and may make choices based on different values.

(Adapted from: Wood, E., & Straight, A. K. (1995). *Effective Counseling of Older Clients: The Attorney-Client Relationship*. Washington, DC: American Bar Association.