



# IN TOUCH

HOSPICE OF THE VALLEY DEMENTIA NEWSLETTER

NOVEMBER 2008

## Overcoming Elderspeak: Show Respect to Enhance Dignity

### WHAT IS ELDEKSPEAK ANYWAY?

“How are we feeling today, honey?” “Sweetie, would you like a treat?” “Time for us to go potty, dear.”

It’s what parents might say to their 2-year-old. But all too often, baby talk comes out of our mouths when we’re talking to 82-year-olds. That’s called Elderspeak. Like baby talk, Elderspeak involves exaggerated intonation, elevated pitch and volume, repetitions, reduced rate and simplistic vocabulary and grammar. (Williams, 2006) When it’s directed to older adults, the patronizing patter is more likely to elicit irritation and anger than cooperation and a smile.

A recent *New York Times* article discussed studies at Yale University exploring negative outcomes associated with Elderspeak. When older adults are talked down to, they can actually experience functional health decline and lower rates of survival. Elderspeak conveys a negative attitude toward aging and may chip away at self-esteem, which contributes to depression, isolation and dependent behaviors. An Elderspeak expert noted that healthcare workers are often the greatest offenders.

While Elderspeak impacts all older adults, it has a particularly strong effect on people living in long-term care settings, including residents with dementia. Social interactions are vitally important to enhancing quality of life, but often are limited for those residing in long-term care facilities. Healthcare workers become an important source of social interactions, so they must be mindful of the impact of their conversations with patients.

Persons with mild to moderate dementia may react to Elderspeak with aggression, irritation or refusal to comply with a request. Condescending statements imply that the person is incapable of doing anything for him/herself. People who are aware of their diagnosis of Alzheimer’s disease and loss of cognition may be particularly upset if spoken to as if they are a baby. At a time when it is of utmost importance for caregivers to affirm personhood and celebrate residual abilities, Elderspeak robs the older adult’s dignity and conveys helplessness, ignorance and dependence.

### RECOGNIZING OUR OWN USE OF ELDEKSPEAK LEADS TO CHANGE

Many of us have unintentionally used phrases that fit the description of Elderspeak. We have spoken sincere terms of endearment to our older patients, unaware of the words’ potentially damaging effects. Now that we understand the insidious nature of seemingly benign phrases, let us mindfully elevate our communication style so we create social environments that optimize the well-being of those we serve.

Frequently, staff members in long-term care settings use communication that reinforces dependence rather than promotes independence. Consider the differences between the following statements. Instead of saying: “It’s time for us to get up now, honey,” try “Are you

ready to get up?” Instead of saying: “All right, sweetie, let’s get going to the dinner table,” ask: “Would you like to help set the dinner table?”

### References

Williams, K. (2006). Improving outcomes of nursing home interactions. *Research in nursing and health*, 29, 121-133.  
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