

# UNDERSTANDING COMMUNICATION

## Questions to Ask

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**This is an adaptation of the Handout from Session Four of the Cognitive Abilities and Intervention Strategies (CAIS) Educational Series.**

The CAIS Educational Series of five sessions can be found on the Michigan website called Improving MI Practices at <https://www.improvingmipractices.org>

The questions in this handout are some of the questions that are elaborated and more formally structured in the *Cognitive Abilities and Intervention Strategies (CAIS): Communication Questions to Ask* and the *CAIS: Communication Intervention Strategies* by S Weaverdyck, available on the above website.

In **this handout** are examples of many **questions** you can **informally ask yourself** about communication to better understand **how well your interactions** with a particular person **support this person's cognitive abilities**. These questions are based on **brain** functioning and **specific cognitive skills**. However, **you do not need to know anything** about the brain or cognition to ask them.

The questions are organized under general intervention concepts that address needs a person might frequently experience in most interactions.

A “**Yes**” answer suggests your interactions are currently **effective** in meeting this person's cognitive needs and relying on their cognitive strengths. The answers to these questions can **suggest changes** you can make in your communication strategies to help this particular person understand, respond, and feel comfortable with you.

These questions should be asked **frequently** since this person and interactions with this person might change over time or even day by day.

**Ask yourself** these questions. Do not ask the person you are observing or communicating with (that is, the person whose cognitive abilities you are trying to understand and support).

The questions are written for you to **ask about yourself**. So, you are asking yourself these questions about yourself and your interactions with this person.

The questions assume you are (perhaps as a care partner or caregiver or someone in another role) communicating with or assisting this person, so you are observing yourself while you communicate or assist. (If someone else is assisting instead, then you will observe whoever is assisting and ask yourself the questions about whoever is assisting and communicating with this person.)

More information about these questions is on the **last few pages** of this handout.

**A. RESPECT:** Look for ways I:

- **Show** respect for this person, both **verbally** and **nonverbally**
- Treat this person as an **adult**, both verbally and nonverbally

- **Express warmth and gentle friendliness** to this person (**show that I care** about this person), both verbally and nonverbally

1. Do I respect this person? (For example, do I understand this person enough to admire them? Am I free of feelings of impatience, irritation, embarrassment, or disgust?)
2. Do I treat this person as an adult in my words and facial expressions? (For example, do I avoid calling this person “dear” when I really don't know them?)
3. Do I offer normal adult objects and activities? (For example, do I avoid children's toys or children’s games? If I offer a doll because that seems to be one of the few things that calm and comfort this person, does the doll look like a real baby instead of a cartoonish toy? If I offer a stuffed animal for the same reason, does it look like a real kitten instead of a cartoonish toy?)
4. Do I avoid talking about this person in a condescending way? (For example, do I avoid saying “They are so cute together” or “She’s the little lady over there”?)
5. Do I avoid talking about this person in front of this person?
6. Are my voice, gestures, and movements gentle and kind, even when clear and firm?
7. Do I help this person save face and avoid embarrassment? (For example, do I avoid calling attention to their mistakes? Do I discreetly correct their mistakes without them noticing?)
8. Do I avoid scolding, shaming, or bossing this person?

## **B. EXPLANATION AND REASSURANCE:** Look for ways I:

- **Show reassurance** to this person
- **Clearly explain** events, requests, and the environment to this person

1. Do I give reassurance as often as necessary, both verbally and nonverbally?
2. Do I avoid giving this person information that would be distressing or embarrassing to them?
3. Do I give information or make a request only when this person is emotionally calm and ready to hear me? (So they do not need to feel emotion and think about my words at the same time?)
4. Do I give as much explanation as this person needs?
5. Do I repeat requests or explanations as often as necessary?
6. Are my explanations short, simple and clear?
7. Do I use few words, and short phrases and words?
8. Do I use concrete and familiar words?
9. Do I speak clearly and in a low pitch?
10. Do I talk as slowly as necessary, and with pauses to allow time for processing?
11. Do I wait to talk until there is no other noise?
12. Do I give a clear and honest answer to every question this person asks?
13. Do I answer questions as though this is the first time they were asked?
14. Do I avoid saying “no” and suggest alternatives instead?
15. Does the sound or tone of my voice help convey my meaning? (For example, is it obvious from the pitch of my voice at the end of a sentence that I have asked a question? Or is it obvious that I am trying to soothe by the gentle sound of my voice?)
16. Do my questions invite opinions or “yes” and “no” responses, rather than facts or information?
17. Do I let this person know how much time has passed and what time of day it is, when necessary?
18. Do I tell this person when a task is done?
19. Do I verbally prepare this person before touching any part of their body? (For example, by asking permission to touch or by telling them verbally? Do I know if they are comfortable with touch, and do I address their comfort level?)
20. Do I ask this person to move a part of their body rather than moving it myself?

21. Do I verbally prepare this person before a part of their body moves? (For example, by asking them to move it, or for permission for me to move it, or by telling them before they or I move it?)
22. Do I nonverbally prepare this person before a part of their body moves? (For example, by touching a body part if they are comfortable with touch, before they or I move it?)
23. Do I watch and listen to this person closely and recognize when this person is distressed? Do I note the possibility this person has in the past or recently experienced emotional, physical, or sexual discomfort, pain, or trauma? Do I reassure this person with compassion and respect, move slowly and gently, or stop the interaction or task?

**C. BODY (NONVERBAL) LANGUAGE:** Look for ways I:

- **Use my body** to communicate with this person
- **Unintentionally communicate with my body**
- Address this person's **sensory and cognitive abilities** by how I **position and move my body**

1. Do I use my body enough to communicate with this person? (For example, do I use facial expressions and hand gestures with my words to help them understand?)
2. Is my body telling them what I want it to say? Do I avoid gestures or facial expressions that could be misinterpreted? (For example, do I raise my eyebrows rather than frown when I want to show concern?)
3. Do my body, face, eyes, and words all match? (For example, do I avoid moving quickly or with startling movements while using soothing words and smiling?)
4. Do I place myself so this person sees and notices me easily?
5. Do I change position only when necessary and move slowly, and only for short distances?
6. Am I at eye-level with this person when I interact with them? (For example, do I sit near them or kneel if their eyes are looking down?)
7. Do I make and keep eye contact with them, but only if they are comfortable with eye contact?
8. Do I touch this person while talking, but only if they are comfortable with my touch?
9. Do I model the task and cheerfulness for this person? (For example, do I do the task myself so they can see me while they are also doing the task? Am I upbeat and positive?)

**D. APPROACH:** Look for ways I:

- **Introduce** a topic, activity, or request in a way that helps this person feel **positive** about it
- Set an **upbeat, cheerful, relaxed, and comfortable emotional tone**
- **Prevent** anxiety, uncertainty, or frustration in this person

1. Do I converse with this person and build trust before mentioning a task such as bathing or getting dressed?
2. Do I avoid embarrassment about private activities? (For example, do I invite this person to use the toilet only when we are alone or when other people don't hear me?)
3. Do I avoid telling this person about the whole task, and instead mention only one step at a time if this person gets overwhelmed when the whole task is mentioned? (For example, instead of saying, "Let's take a shower", do I say "Let's walk to the bathroom"?)
4. Do I offer options they can understand, so they can make choices?
5. Do I suggest a refreshment or fun enticement to help them participate?

6. Do I rhythmically sing or march to a place, when appropriate to help this person walk and participate? (For example, do I use rhythm when I walk with them to the dining room or bathroom?)
7. Do I laugh, joke, and use humor in a concrete and emotionally supportive way?
8. Do I stay calm no matter what is happening? (For example, even when we are being silly together, or when this person is angry or frightened?)

**E. OBSERVATION:** Look for ways I notice and recognize:

- How this person is **feeling**
  - How well this person is **understanding**
  - What this person is **trying to express**
  - Evidence this person is going to be frustrated, anxious, angry, or **distressed**
  - Evidence this person may **act** in a way that is distressing to themselves or others
  - How to **best respond** to this person's feelings and behavior
1. Do I watch and listen to this person carefully for nonverbal and verbal feedback, so I can note how they are feeling, and can anticipate or respond to frustration, anxiety, or distress?
  2. Do I watch their whole body and notice changes that suggest confusion, anxiety, or something else they are feeling? (For example, do I watch for tightening leg muscles, clenching fists, facial grimaces, widening or rapid eye movements, brief frowns?)
  3. Do I watch this person's eyes when we talk?
  4. Does this person seem comfortable and relaxed?
  5. Is this person responding positively to what I am saying or doing?
  6. Does this person seem to understand me?
  7. Do I give this person enough time to absorb what I say and then enough time to respond?
  8. Do I change my own behavior or the environment in response to this person's reactions?

**F. DISTRACTION:** Look for ways I:

- Use distraction or **diversion to help** this person
  - Compensate for or **reduce** inappropriate **distraction** with this person
1. Do I know when distraction or diversion is helpful with this person? (For example, when they repeatedly try to do something that is unsafe, or when they are performing a task that is easier to do when they aren't thinking about it?)
  2. When there is behavior or a situation that is distressing, do I use humor and diversion instead of demands, argument, shame, or instructions to address the behavior or situation?
  3. Do I avoid calling this person's attention to their behavior? (For example, do I avoid comments such as "What would your mother say if she heard you talk like that"?)
  4. Do I try to identify the feelings behind distressing words and behavior and then respond to the feelings, rather than simply to the words or behavior?
  5. During tasks, do I encourage this person to hold or use an item while I use a similar item? (For example, a comb while I comb their hair with another comb, or a wash cloth while I wash their arm with another wash cloth?)
  6. Do I get this person's attention before speaking, and keep it throughout our interaction?
  7. Do I reduce distraction such as noise and clutter around me when I am talking to this person?

**G. CONSISTENCY:** Look for ways I:

- Keep my **interactions** the **same** and **predictable** as much as possible
- Have only **one** care partner (caregiver) **at a time** interacting with this person

1. Does the same care partner help this person every day as much as possible?
2. Does this person know what to expect from me?
3. Do I use nearly the same words every time we do this task?
4. Do I position myself in the same spot every time we do this task?
5. Do I move my body in a similar way every time we do this task?
6. Is there only one care partner helping this person at a time?
7. If there are two or more care partners, is there only one care partner at a time that this person is noticing and paying attention to? (For example, are the other care partners quietly helping from behind this person, staying out of sight, and not talking?)

#### H. CHARACTERISTICS: Ask myself:

- **Am I the best one** to be helping this person with this task?
- Are there things **I can change about myself** to make this go more easily?
- Are there things **I cannot change** and therefore **must address** in some way?
- How do I **feel about this person** and about this **task**?

1. Does this person recognize me as myself and not someone else?
2. Does this person feel comfortable with me or with whoever they think I am?
3. Does this person trust me?
4. Is my gender comfortable and appropriate for this person?
5. Is this person comfortable with all of my characteristics? (For example, with my age, my size, my appearance, the sound of my voice, the language I use, my skin color, my ethnicity?)
6. Am I comfortable with this person right now and in general?
7. Am I comfortable doing this task with this person? (For example, am I comfortable seeing this person without clothes on or drooling while eating?)
8. Am I comfortable with their dependency?
9. Can I avoid letting my distress (such as my anger or sadness) about this person's behavior affect my ability to help?

#### I. ORGANIZATION: Look for ways I:

- **Organize my time, the task steps, and the task items**
- Am **efficient**, but appear **relaxed** and **calm** to this person
- **Focus more on this person** than on the task or product

1. Do I organize my time to avoid the need to rush through a task?
2. Do I plan the task steps ahead of time?
3. Do I do most of the task preparation out of this person's sight?
4. Do I stay out of this person's sight when I do those parts of the task this person is not directly involved in (so the task is less tiring, confusing, or distressing)? (For example, do I rinse out the wash cloth or put the toothpaste on the tooth brush where this person doesn't see or hear me doing it?)

5. Do I move quickly and quietly when I am out of this person's sight, but more slowly on the parts of the task where this person sees and hears me?
6. Do I focus more on this person and less on the task or product? (For example, do I focus more on ensuring this person is comfortable and content, than I do on getting the task done successfully or quickly?)

**J. PREVENTION:** Look for ways I:

- **Prevent distress, confusion, or anger**, rather than simply respond to them when they occur
1. Do I prevent distress or confusion? Do I prevent distress or confusion from escalating by addressing it immediately when it begins?
  2. Do I apologize or reassure immediately when I see them beginning to get angry or anxious?
  3. Do I notice subtle hesitations and try to gently coax or encourage this person when they are performing a task?

## MORE ABOUT THESE QUESTIONS

This handout lists examples of many **questions** you can **ASK YOURSELF** to discover how well **your interactions** with a particular person **meet** this person's **cognitive needs**, and how well your interactions rely on or **use this person's cognitive strengths**. The questions are based on specific brain functions and cognitive abilities. They focus on ways **your communication** strategies can make it **easier** or **harder** for this person to feel competent and comfortable, and to communicate and perform tasks.

These questions help you **individualize** your understanding and your **support strategies** to a particular person and situation.

**You** are probably the **most significant factor** affecting **behavior**, the amount of **distress** and **fatigue** a person experiences, and how **easily** and **successfully** you can **assist a person**. These questions help explore why a person communicates or performs a task more easily some times than other times, is distressed, or is acting in a way that is distressing to others, as well as why **OUR OWN** behavior might be **unintentionally** distressing to this person. They also **suggest intervention** or support **strategies**.

While this handout focuses on the cognitive abilities, some interactions are more likely than others to trigger **emotional distress** for a person. This is especially true for a person who has in their past or recently experienced a sexual, physical, or emotional encounter that was uncomfortable, painful, or traumatic. For example, interactions or situations that involve removing clothing or being touched or someone else having control over this person, or even being in a room similar to where such encounters happened to this person, could easily cause distress. It is important to stop an interaction or task or help this person leave the room if this is the case. Watch and listen closely to this person to notice how they are feeling or responding to your words, movements, and actions. Moving slowly, gently, and with respect and compassion is important.

A person with many cognitive needs usually **works** much **harder** to communicate or do a task or parts of a task than you or even they realize. Even for a person who communicates or performs a task well, **making communication** and the **task easier** for them can **conserve their energy** for more difficult or more pleasurable tasks and conversations, and can help **prevent fatigue, confusion, and emotional distress or irritation**.

The questions in this handout are for you to **ASK YOURSELF ABOUT YOURSELF**, NOT to ask the person you are observing or assisting. These questions assume you are assisting this person. If someone else is assisting instead and you are simply observing, then you ask yourself the questions about whoever is assisting.

**Anyone can ask** these questions in **any setting** in **any situation**. They can be asked during **any task** or **not during a task**. They can be helpful to anyone with any level or type of relationship with a person.

They should be asked **frequently** enough to address changes in this person's needs, strengths, and desires.

The "**Cognitive Abilities and Intervention Strategies (CAIS): Communication Questions to Ask**" presents these questions in more detail and in a more formal structure in two formats: a Yes/No response format and a Four Point response format. It also includes additional questions.

The "**Cognitive Abilities and Intervention Strategies (CAIS): Communication Intervention Strategies**" presents a variety of intervention or support strategies for each question in the "CAIS Communication Questions to Ask".

The CAIS consists of **four parts**, each with a list of questions and ideas of intervention strategies. The four parts are: 1) Cognitive Abilities, 2) Environment, 3) Communication, and 4) Task and Daily Routines.

The questions are meant to be **asked while you are interacting** with a particular person or helping them with a task. They might also be useful with regard to **general observation** of this person. The answers to these questions can help you **adapt** or **change your communication** strategies, the environment, or the task to accommodate this person's specific cognitive abilities and challenges. When you answer the questions during an interaction, you can **intervene immediately** and respond to subtle changes that occur minute by minute in this person's cognitive abilities.

These questions apply to **any task** (for example, housekeeping chores, hygiene, leisure activities, decision making, a visit with a friend) in **any setting**.

Answers to all of these questions can help determine which intervention or support strategies might be most effective in helping a person be **happier** and function more **independently**.

### **For more information**

1. The Michigan website called Improving MI Practices at <https://www.improvingmipractices.org>  
This website has updates and many additional handouts and resources, including **all of these CAIS Handouts** (43 total), the entire **CAIS Educational Series**, the Cognitive Abilities and Intervention Strategies (CAIS): **Questions to Ask** and the **CAIS: Intervention Strategies**, **CAIS Background Resources**, and the **CAIS Online Course**, as well as the **Caring Sheets**: Thoughts and Suggestions for Caring that are a part of the Michigan Dementia Care series.
2. Mace, N., Coons, D., Weaverdyck, SE. (2005) Teaching Dementia Care: Skill and Understanding. Baltimore, Md.: Johns Hopkins University Press.

### **Original Sources**

3. Weaverdyck, S.E. (1990) "Neuropsychological Assessment as a Basis for Intervention in Dementia". Chapter 3 in N. Mace (Ed.) Dementia Care: Patient, Family, and Community. Baltimore, Md.: Johns Hopkins University Press.
4. Weaverdyck, S.E. (1991) "Assessment as a Basis for Intervention" and "Intervention to Address Dementia as a Cognitive Disorder". Chapters 12 & 13 in D. Coons (Ed.) Specialized Dementia Care Units. Baltimore, Md.: Johns Hopkins University Press.