Communication Tips for Working with Older Adults

We have consolidated information from a variety of sources (listed at the end of this document) regarding how to communicate effectively with older adults in a range of circumstances.

In General

**Reflect on your own assumptions.** Assess your own views of aging and older people and be conscious of how you use language when in the presence of older people. Avoid patronizing language.

**Pay attention to yourself.** Monitor your own reactions and be mindful of your nonverbal behaviors.

Adjusting to Hearing Loss

**Get the person’s attention.** Say the person’s name before beginning a conversation or, if needed, touch the listener’s hand, arm, or shoulder lightly. If the person can hear better in one ear, move to that side.

**Speak naturally.** Speak distinctly at a normal rate without exaggeration or shouting. Ask if the individual can hear you. If needed, adjust your pace to needs of the person you are speaking to. Use pauses to give the person time to process speech.

**Maintain eye contact.** Face the person with hearing loss and make eye contact to maximize nonverbal communication through facial expressions and body language. Keep your hands and other objects (e.g. papers) away from your face while talking. For those who may need to lip read, do not chew gum or eat. Be aware that beards or moustaches may impede lip reading. Avoid trying to exaggerate your mouth shape while talking.

**Rephrase rather than repeat.** If the listener has difficulty understanding a particular phrase or word, find a different way of saying it.

**Modify the environment.** Ask the person if you could turn off the radio or television. Move to a quiet space, if needed. Ask the person if they have hearing aids, and offer to get them if they aren’t wearing them. Converse where there is good lighting so that your face can be more easily seen. Avoid strong lighting coming from behind you, such as through a window. If possible, offer hearing amplifiers (Ohio’s nursing home interviewers carry these and find pretty amazing results).

Adjusting to Vision Loss

*The Sages in Every Setting project was funded by the Patient Centered Outcomes Research Institute through a Eugene Washington PCORI Engagement Award (2606-CJE).*
**Ask what they need.** Ask if they want assistance with anything and, if so, how you can help. It may help to research vision aids, such as magnifiers, so that you can understand how they help people.

**Use clear, verbal cues.** Introduce yourself; introduce others in the room. Give specific directions to indicate where you, others or objects are. If you need to touch the person or something nearby, let the person know what you are doing before you do it. Indicate when you are leaving.

**Speak at a normal volume.** Avoid speaking more loudly to explain something (a common urge when talking to someone with vision problems).

**Provide easy to see printed information.** Effective materials have a simple design with sharp contrast between text and background. In printed materials use a large font size, such as 16- or 18-point, with 1-inch margins and at least 1 ½ blank spaces between lines of text. When using a table, make it simple and easy to follow.

### Presenting to Older Audiences

**Face your audience.** Limit movement around the room as you talk to maximize eye contact, particularly if members of the audience have hearing difficulties.

**Minimize distractions.** Eliminate background noise or music and choose a location free from interruptions to accommodate those who have difficulty hearing. They may need to work harder to understand speech or decode information.

**Lower your pitch.** Lower your pitch without lowering your volume to accommodate those with hearing difficulties.

**Speak clearly.** Enunciate clearly and use pauses judiciously. Be conscious of your normal pace of speaking. If you tend to speak quickly, slow down.

**Use simple sentence structures.** Use simply constructed sentences without simplifying your vocabulary to accommodate potential age-associated changes in working memory.

**Ask your audience for feedback.** Early in the presentation ask if your audience can hear you. Tell them to give you a signal (e.g. raised hand) if they cannot hear you so that you can make adjustments throughout your presentation.

**Repeat any questions so the whole audience can hear.** If you receive a question from the audience, repeat it before answering it so the whole audience can hear it.

**Use large visual aids such as diagrams or pictures.** Visual aids reduce the need for complex verbal descriptions. Point to them as you are discussing them. Make them large and easy to see.
Keep the organization and design simple. Avoid busy backgrounds. Use clear short titles. Minimize the amount of text or bullets (5-7). Limit the number of photos or graphics to one per slide. Avoid layering pictures and text.

Make text easy to read. Maximize contrast. Avoid special effects such as shadowing or word art. Use easy to read fonts such as Arial or Tahoma with a minimum size of 24 points.

Use PowerPoint as an outline. Do not read word for word from the screen.

Describe key visuals. Verbally describe any important ideas that are conveyed in a graph, chart or photo to accommodate people with visual challenges.

Make handouts of key visuals. Large printed versions of key slides may be helpful (full page size).

Provide auditory cues for key transitions. If you are moving on to a new slide or topics, announce the transition clearly. For slides, you may include a sound cue (such as a “click” or “whoosh”) for people with severely limited vision.

Consider lighting needs. Provide room lighting that is appropriate for the presentation or activity (allows the audience to clearly see images on a screen vs. see a handout in front of them)

Communicating One on One

Face the individual. Place yourself at their level (for instance if they are seated) and turn towards the person.

Use clear sentence structures. Avoid long convoluted sentences or questions that contain multiple or confusing ideas, but use normal vocabulary (do not talk down).

Listen carefully and intentionally. Convey your interest and attention in what they have to say.

Ask one question at a time. Keep each question relatively brief and clear. If the person doesn’t hear or understand the question, repeat the question and/or substitute words with similar meaning.

Wait for a response. Allow for periods of silence or pauses. Someone may need time to formulate ideas or to decide how to respond to a negative experience.

Notice nonverbal cues. Silence accompanied by other behaviors can indicate that a person is uncomfortable with a question or a topic. If the person becomes uncomfortable or emotional, accept their response, validate its significant and show empathy. Wait to see if they want to continue.
Respect the need or desire to not share. Someone may choose to avoid topics or deny problems. Focus on what they want you to know and learn from that.

Redirect to the topic at hand. If the person brings up what appears to be an unrelated subject matter, respectfully ask for clarification of how that example or issue relates to the topic of the interview.

Fostering Discussion

Ask your audience for feedback at several points in time. Early in the presentation ask if your audience can hear you. Tell them to give you a signal (e.g. raised hand) if they cannot hear you so that you can make adjustments throughout your presentation. Periodically recap and ask for comments.

Restate information when needed. If you are not sure you fully understood what was said (by an individual or the group), restate it to validate what you heard. If needed, then ask a follow-up question to clarify meaning. Do not assume you know what was meant.

Sources

Communicating, Interviewing & Presenting


Peninsula Agency on Aging, Senior Services Coalition. Tips for Communicating Successfully with an Older Audience. (No date.) Accessed Feb 29 2016 at http://www.paaainc.org/wp-
Preparing a Research Summary


Diabetes UK. Writing a Good Lay Summary. 2017. Available at: https://www.diabetes.org.uk/Research/For-researchers/Apply-for-a-grant/General-guidelines-for-grant-applicants/Tips-on-writing-a-lay-summary/


U.S. Department of Health and Human Services Centers for Medicare & Medicaid Services. TOOLKIT for Making Written Material Clear and Effective. CMS Product No. 11476 September 2010
  • Section 4: Special topics for writing and design, Part 9: Things to know if your written material is for older adults Available at: https://www.cms.gov/outreach-and-education/outreach/writtenmaterialstoolkit/downloads/toolkitpart09.pdf

Examples of lay summaries

- Chrohn’s and colitis Foundation of America Patient Powered Research Network https://ccfa.med.unc.edu/research_completed_research
- Mid South Clinical Data Research Network https://midsouthcdrn.mc.vanderbilt.edu/research/