Tips for Nurses: People with Disability - Communication

**What it is:** Here we refer to people with an intellectual or developmental disability or limited communication ability.

**Why it matters:** An increasing number of older people with an intellectual disability have co-morbid conditions or advanced illnesses requiring palliative care.

Language and communication skills vary between people with an intellectual disability hence care needs to be taken to understand each other as much as possible.

**What I need to know:** In some cases, people with an intellectual disability may be admitted to residential aged care because of:

- ageing carers or death of a family carer
- supported care, independent living or community services no longer meet care needs
- lack of appropriate local services or accommodation.

Older people with an intellectual disability:

- have high rates of illnesses like epilepsy, diabetes, and heart disease
- may have difficulty with communication, both in understanding and speaking
- are likely to experience premature ageing
- experience high rates of depression and dementia
- are likely to have difficulties with hearing, vision, mobility, and stamina
- may find that standard aged care or usual activity programs do not meet their needs
- may have difficulty accessing specific disability services in an aged care facility.

People with Down’s syndrome are at risk of developing Alzheimer’s disease at a younger age, hypothyroidism, loss of vision, loss of hearing, arthritis, instability of the neck joint leading to pain and spinal cord damage and in women, early menopause.

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**Actions**

**Always give** the person your full and complete attention and make sure you introduce yourself and let the person know why you are there. Do not talk over the person as though they are not there.

**Look** at the person and not the disability

**Establish** communication needs and preferences for the person. Ensure a communication assessment has been completed. A speech pathologist may be able to assist.

**Give** clear and simple information. Use language that fits with the person’s communication level.

**Use** pictures and diagrams to clarify explanations if this is an appropriate way to communicate with the person.

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**Tools**

Tools that may be useful include:

**Disability Distress Assessment Tool (DisDat)**

**Talking End of Life with people with disability (TEL)** – includes education modules and information on person-centred thinking tools to establish a better understanding of the person’s needs, likes, relationships and mood signals (https://www.caresearch.com.au/TEL/).
My reflections:

What could I do to better understand a person with intellectual disability?

Have I ever used childish language to speak with older people with intellectual disability?

My notes:

See related palliAGED Practice Tip Sheets:
- People with Specific Needs
- Person-Centred Care
- Talking about Dying

For references and the latest version of all the Tip Sheets visit www.palliaged.com.au/PracticeTipSheets

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