Summary:
CHAT alerts nursing home staff to the negative effects of elderspeak and significantly reduces its use in three one-hour sessions.

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Overview:
The CHAT intervention is based on the Communication Predicament of Aging Model (Ryan, et al., 1995) that describes how stereotypes of older adults as incompetent prompt younger persons to consistently alter their communication with older adults. The simplification and clarification strategies of elderspeak result in communication that sounds like baby talk and is perceived as demeaning and contributing to isolation, depression, and assumption of dependency (Kemper et al., 1994; Ryan et al., 1995).

CHAT involves nursing home staff in taking the older adult’s perspective, and guides self-evaluation of their own communication. This increases awareness of communication reduces use of elderspeak.

How it works:
The CHAT program adds a unique focus on guided practice of specific communication strategies that staff readily apply and monitor in practice. CHAT targets adult learners using applied strategies tailored to nursing home staff to improve specific aspects of elderspeak.

Brief lectures provide information followed by discussion and application exercises. Videos are used to illustrate features of elderspeak and to demonstrate how communication methods can alter messages to residents. Participants discuss the vignettes and reenact them, substituting effective strategies for those of elderspeak. Discussions facilitate group consensus and encourage participants to translate learned skills into practice.

Why it is better:
CHAT has demonstrated effectiveness in improving staff communication. Limiting the focus of CHAT to a single component intervention, as opposed to bundled interventions, permits evaluation of true effects (Conn, et al., 2001; Whittemore & Grey, 2002). Limiting content and complexity minimizes the burden to staff participants and their nursing home employers and increases the likelihood of skill enactment (Banazak et al., 2000).

Patents: Copyright
Inventor(s): Kristine Williams
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