## Tips for Communicating with Patient with Intellectual Disabilities





## By Anita Lesko

- Presume competence. Approach the situation as if the patient can understand you. This is simply showing respect towards the individual
- Keep the number of healthcare providers in the room to a minimum
- Limit the amount of words you use
- Use key words that are specific to the situation. You may need to repeat and emphasize them
- Do not use figurative language (idiomatic expressions, sarcasm, etc.). People with intellectual disabilities may take things very literally
- Provide simple and straight-to-the-point instructions
- Accompany your words with simple gestures such as pointing
- Accompany your words with visual supports. This includes pictures showing a procedure like taking blood pressure, or a doctor listening to a patient's lungs with a stethoscope
- You might need to pause between words or short sentences to allow the
  patient time to process what you are saying. Be patient and allow the patient
  time to put his or her thoughts into words
- Recognize that patients with intellectual disabilities may have difficulty with self-report of symptoms of illness, injury, and pain. You need to ask the right questions, such as:
  - Does something feel different, weird, or uncomfortable?
  - o Is something bothering you?
  - o Can you show me where it is?
- Allow for alternative ways of communication other than verbal language. For example, a patient with intellectual disabilities might communicate using:
  - written communication (handwritten, typed, texting from a phone) sign language
  - o a tablet or other such device
- symbols, pictures with words
  - pointing/gesturing
  - o making sounds, crying
  - o facial expressions (frowning, etc.)

- hitting or hurting himself or herself
- hitting or hurting others
- Use multiple forms of communication to check for understanding. For example, be aware that some patients with intellectual disabilities may also have dysgraphia, a written expression disorder. This impacts the ability to write and spell without impacting the ability to read. This may present as difficulty learning how to write or having a hard time putting thoughts onto paper, even when the patient is able to orally explain his or her thoughts.

Anita Lesko is a nurse anesthetist and a champion for people living with autism spectrum disorder (ASD). Anita is an adult living with Asperger disorder who did not receive her diagnosis until she was 50 years old. To learn more about Anita's story and the resources she developed, please visit her website at: https://anitalesko.com.