We all know a family member or friend who is having memory problems. Often, we don’t know how to help when someone is at a loss for words, repeats himself, forgets an appointment, or gets lost in a task. Sadly, some people pull away in their discomfort. There are many ways we can understand what’s happening and keep things on track without causing shame.

Some common tools are ones we all use: say making a grocery or to-do list. Routines and consistency are also critical; for example, the keys should always be kept on the same hook.

One thing you can do is give cues. These may be visual and/or auditory, and may even use other senses. For example, when I see my toothbrush I remember to brush my teeth. As a caregiver, I might say “Here’s your toothbrush, it’s time to brush.” A pianist may show no sign of communication, but know how to play Chopin nocturnes once seated at a keyboard, revealing deep physical memory.

If you’re living with someone with memory loss, you may need to write notes and put them in obvious places (don’t put metal in the microwave, haircut at 2 pm). It is much easier for a person with memory loss to see a cereal box, bowl and spoon left on the counter than to have to answer “did you eat breakfast?” or feel judged by “I see you forgot breakfast again.”

It’s also important to limit the cues so they’re not overwhelming or distracting, and you may need to limit quantities (as one friend found out when she put out a bowl of apples which were eaten in a day.) As much as possible, use a simple cue to get a task started, but encourage the person to complete it him/herself.

We also need to pay attention to clues, to assess the situation. Some of the early signs of memory loss include forgetting proper nouns, searching for words and having trouble with numbers. Take a look at the checking account statement and the check book and evidence that the bookkeeping system is breaking down (unpaid bills, unfiled paperwork). Have today’s pills been taken? Are the breakfast dishes in the sink? What’s in the fridge? Is the towel wet (post-shower)? These observations become more reliable than responses to questions like “did you take your medication?” and “did you shower this morning?” especially when the response to “today” could have been yesterday or last week.
Making observations also doesn’t create unanswerable or shaming questions; rather you take in critical information for assessing safety and concerns about decline. What does it tell you when you find a dent on the car, a bruise on a forehead, or soiled sheets hidden in a drawer?

Some time ago I was visiting friends and was offered tea. I observed that the host was having a hard time conversing and making tea at the same time. It was helpful to have cues like the whistling kettle to steer her back on track, and for me to ask, “would you like me to put the cookies on a plate?” We had a lovely visit without addressing memory loss directly.

A person with memory decline is often overwhelmed by making decisions but still wants to feel in charge of his or her life. Instead of asking “where do you want to go to lunch?” you can ask “do you want to go to A or B?” Rather than “what are you going to wear today?” try “do you want the blue or the green shirt?” and show both. Lay out a complete outfit with each item needed in the order it will be put on. And make sure the current outfit comes off first!

Paying attention to clues and using cues can help maintain an emotional balance, support optimal functioning longer, and help you identify concerns before they become crises. There are many helpful resources that go into more detail on these strategies. We can help you find them.

Susan W. Hoskins, LCSW