During the last 40 years or so, we have gained sound knowledge about the possibilities and challenges people living with dementia, their relatives, and professional carers face when engaging in conversation. The findings about the linguistic challenges associated with the various forms of dementia have made great advances since the 1980s. But above all, knowledge about the interactional consequences and ways of coping with linguistic challenges has advanced tremendously. In the 1980s, a few researchers started to systematically investigate the interactional organization of conversations involving persons living with dementia, and from the early 2000s this research started to coalesce into a new, established research domain.

The research into the interactional organization of conversations involving persons living with dementia is an area that has tremendous clinical and practical consequences for all involved – the persons living with dementia, their significant others, as well as clinical staff. Studying the conversational challenges that people living with dementia and their relatives face also includes a study of the possible ways of successfully coping with these challenges. Thus, it becomes possible to learn from both people living with dementia and their relatives how it is possible to sustain and enhance relationships and personhood, and thus to promote social inclusion of people living with dementia. This knowledge needs to become part of the education of persons working professionally with people living with dementia, but also for relatives and persons with a dementia diagnosis.

A new volume from Palgrave – *Learning from the talk of persons with dementia: A practical guide to interaction and interactional research* edited by...
Trini Stickle – serves as a good example of how research on linguistic challenges in conversations can be translated into practical knowledge that can be used by clinicians and relatives.

The book consists of 12 chapters with a focus on specific issues or aspects of conversations. The authors are all experts in the dementia field, many with a background in language studies and some also in speech therapy.

This book is evidently designed to be used in teaching, either at university level or for further education of staff, but it can also be used by relatives. Every chapter starts with learning objectives, clearly stating what the reader is supposed to learn from the reading. All the chapters contain one or more ‘thinking point’ boxes – vignettes that serve as prompts for both further discussion and thought – or ‘activity’ boxes, suggesting exercises the reader can perform individually or in groups. Finally, all the chapters end with a ‘practical highlight’ box containing bullet points of the take-aways from the chapter. Thus, the pedagogical profile is clear and provides an organizational backbone for the book.

The book has three parts and an introductory chapter. In Chapter 1, Trini Stickle presents the aims of the book – to present research that can ‘bring to light certain conversational practices that may assist clinicians, caregivers, and family members in their interactions with people with dementia’ (p. 1). She also briefly introduces several approaches to the study of conversations, from discourse analysis, conversational analysis to ethnography and syntactic analysis.

The first part of the book serves as a background to the other chapters, introducing the dementia diagnosis and some important methodological and theoretical considerations. In Chapter 2, Cary J. Kohlenberg and Nathaniel J. Kohlenberg give a medical overview of the group of disorders resulting in dementia, and how linguistic and cognitive abilities are affected by the various disorders. A central argument is that dementia is a ‘conglomerate of symptoms involving one or more cognitive domains’ (p. 17). These symptoms have different causes and affect the brain in quite different ways. This chapter serves as a background for all the other chapters in the book.

In Chapter 3, Boyd H. Davis and Charlene Pope discuss how data about conversations involving persons living with dementia can be collected and used. They discuss different settings for collecting data, as well as protocols to follow, in a very practical manner. This chapter is followed by a chapter by Nicole Müller arguing why it is a good idea to collect and use interactional data instead of relying only on test data. Her argument is that interactional data better reflect how people living with dementia actually make use of their cognitive and linguistic abilities, and thus will afford a better understanding of the everyday effects of dementia.
Part II consists of seven chapters organized around what can be learned from social interactional research. In Chapter 5, Boyd Davis and Margaret Maclagan discuss what they call ‘pragmatic and discourse markers’ in dementia discourse; that is, how people living with dementia make use of small words such as ‘but’ or ‘so’ to deal – often very effectively – with linguistic challenges in conversations. In their conclusion, the authors point to the importance of the healthy participant learning to note and understand this kind of marker, in order to help support conversational participation. A similar phenomenon is discussed in Chapter 6 by Trini Stickle and Anja Wanner, who focus on syntactic errors in conversations involving persons living with dementia. They discuss various syntactic errors connected to different forms of dementia, and how healthy interlocutors can develop strategies that might facilitate conversation by responding in ways that support both personhood and a sense of self in the person living with dementia.

Facilitating conversations with a person living with dementia often involves supporting the person’s remaining abilities. How this can be done is something Lyndsay Lindley highlights in Chapter 7. In particular, she shows that persons living with dementia are very aware of conversational repair needs well into the advanced stages of dementia. This awareness makes it possible for the healthy participant to actively signal the need for repairs and – if necessary – to support repair work.

In Chapter 8, Adrienne R. Isaac and Heidi Hamilton use data from their investigation of guided tours at art museums specially designed for people living with dementia. They discuss how objects such as paintings – but also other mundane objects such as photos – can be used to anchor conversations. Building on research that indicates that persons living with dementia tend to be bound to the immediate physical and social ‘context’ in conversations, they argue that using physical objects may facilitate conversations. Mundane physical objects may serve as anchors for memories and knowledge, making it possible to start and conduct conversations, and enabling persons living with dementia to be creative participants.

In Chapter 9, Michael Sean Smith discusses one form of dementia that is rarely investigated from an interactional perspective, namely, frontotemporal dementia. He focuses on assessments, as these are important, serving as a relational glue in interaction. One of the main challenges for people living with frontotemporal dementia is interactional aligning, that is, orienting toward the same activities and responding to others’ actions. Healthy participants may find some help in being observant of this, and attempting to mitigate the troubles that might emerge as a result from not responding to, for instance, assessments.
As we know, dementia can result from a number of degenerative disorders besides Alzheimer’s disease, for instance, from Huntington’s disease. How people living with this disorder understand and cope with the consequences of the disease is discussed in Chapter 10 by Michael Halpin and Norann Richard.

Most people living with dementia will spend the final period of their lives in some kind of supported living. Most of these places are organized to be homelike at the same time as being institutions. Thus, one central feature of living in, for instance, nursing homes, is the relation between private and public spaces. In Chapter 11, Gunilla Jansson discusses a number of examples (for instance, around personal hygiene) where both staff and the residents need to acknowledge and negotiate private space in particular. This negotiation is obviously an intrinsic part of supported living for older persons.

Finally, the third and last part of the book consists of a summing-up chapter by Trini Stickle, where the reader is guided toward resources for further learning and development.

In conclusion, the book Learning from the talk of persons with dementia is a very good example of how research on the tiny details of interaction can help to develop interactional skills that serve to include people living with dementia in conversations in such a way that their personhood as well as their selves are acknowledged and supported. The book has a clear pedagogical organization and can easily be used in educational contexts, although some of the linguistic material might need some further introduction for students with no prior knowledge of linguistics. Hopefully, this book will be followed by others translating and communicating interactional research about people living with dementia to people who in different ways are engaged in conversations with people living with dementia.