

# TO YOUR HEALTH

Volume 31 Number 4

April 2026

## Navigating the Uncomfortable

By Gwen Healy, Music Therapist (MT-BC)

Throughout our lives, we likely have been put in situations where people ask uncomfortable, insensitive, or intrusive questions. It can catch us off guard. We're not sure what to say, or how much information to divulge. It's awkward. We can feel the tension hanging in the air as they await our response.



There may be instances where the person asking or commenting has no idea they've brought up a sensitive topic. Most people have

good intentions. However, *intention* is not the same as *impact*. In other words, the intention behind a question or comment may have an unforeseen impact on the person receiving it.

So how do we contend with these uncomfortable questions? There is no one right answer. Our approach may depend on several factors, such as:

- Our relationship with that person
- Our location: in public or private?
- Time constraints: keep it brief or explain more in depth?
- What is our personal/emotional connection to the situation they are asking about?

As an example, let's say you're approached by an acquaintance in the dining room and they ask, "So when will you be getting around without that walker again?" You know you will have to use the walker indefinitely, but don't necessarily want to disclose that to this person.

First and foremost, pause before you answer. This will give you time to collect your thoughts and decide how you want to proceed.

Here are some responses to consider:

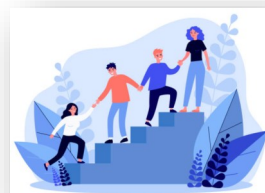
1. **Be vague.** "I'm not sure, we haven't figured that out yet."
2. **Use humor.** "Boy, I'd like to know that myself! Now I can't sneak up on anyone or they'll hear me coming."
3. **Set a soft boundary.** "I don't feel comfortable discussing that at the moment," or "I understand your curiosity, but I don't want to go into details."
4. **Keep it light.** "I like it, it helps me get around and I can accessorize it however I want."
5. **Mirror it back.** "I see you're using one too, it's helpful, isn't it?"
6. **Change the subject.** "I don't know, but the pasta is delicious tonight. Do you think they used a new recipe?"

We've all been in the position of either "asker" or "receiver" of these questions. Curiosity is a natural human tendency. It is natural to inquire about someone's health, spouse, children, etc. (In fact, some of us were probably taught that it's polite to ask about these things.)



But as we age, these topics may become sensitive. Topics that are generally safe are: the weather, sports, complimenting their outfit, a recent book or article you've read, programs/activities happening around the village, music, art, places you've traveled, what's made you smile recently, sharing fun facts or trivia, etc.

There is no foolproof method of knowing what may make someone uncomfortable, but we can all strive to be a little more sensitive and aware. You may have heard the adage,



"Be kind. Everyone you meet is fighting a battle you know nothing about."

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But in reality, it goes beyond kindness—it's consideration, it's empathy, it's emotional awareness. It's taking a moment to reflect and consider how you would

feel if the shoe were on the other foot. Support for one another can shine through in little ways. At the end of the day, everyone wants to feel seen and heard.

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*Sources: Navigating Intrusive Questions: How to Handle Uncomfortable Interactions with Grace, Emotional Intelligence Magazine*

*How to Avoid Unwanted Questions: 5 Smart Communication Strategies — GRAY PERSON*

## Spotlight on Social Work

By Maeve Lobo, LICSW



### From Clocks to Cognition

In the early 1900s, neurological researchers developed the Clock Drawing Test (CDT) to assess soldiers with apraxia, choosing the clock for the challenge of rendering it accurately. Decades later, in 1975, the Mini-Mental State Examination (MMSE) appeared, offering eleven questions administered in twelve to fifteen minutes. It became a clinical standard, though its reliance on formal education limited its usefulness for many adults.

The early 2000s brought the Mini-Cog, a brief three-minute test combining clock drawing with a three-word recall, designed to reduce education-related bias. By 2006, Saint Louis University, in partnership with the Veterans Administration, introduced the SLUMS (Saint Louis University Mental Status) exam. More sensitive to educational attainment and culturally equitable, SLUMS is free and available in multiple languages, expanding access to cognitive assessment.

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The Montreal Cognitive Assessment (MoCA), now used at CWV, was conceived by Canadian neurologist Ziad Nasreddine during a 1996 fellowship in Montreal. Recognized in 2005 and endorsed by the Alzheimer's Society, the MoCA is a screening—not diagnostic—tool, aimed at detecting mild cognitive decline rather than measuring intelligence. Administered in ten to fifteen minutes and scored out of thirty, it evaluates memory, visuospatial ability, attention, problem-solving, and language. Adaptations include a blind version and a simplified form for those with limited formal education.

Cognitive testing continues to evolve. With the F.D.A.'s 2025 approval of blood-based biomarkers and increasingly sophisticated A.I. analysis, the earliest traces of dementia may be detected long before symptoms appear. These advances offer promise—but they also raise profound ethical questions about how, and when, we choose to know.

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<https://www.slu.edu/medicine/internal-medicine/geriatric-medicine/aging-successfully>

<https://mocacognition.com/>

<https://linushealth.com/learn/history-of-the-clock-drawing-test>



Save the Date  
for the May Vaccine Clinic  
on **May 1st.**

Watch for more details  
to come in April.