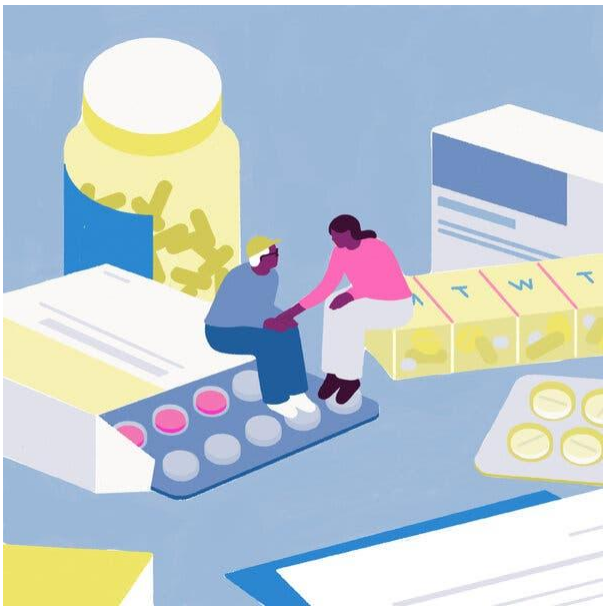
5 Conversations to Have With Your Aging Parents

Many families put these talks off. But having them now can lead to better care later.



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By Simar Bajaj Feb. 8, 2026

Americans are living longer, often juggling multiple chronic conditions. But many adult children don't really know what's going on with their parents' health — until after a fall, an ambulance ride or a hospital stay.

This lack of communication hurts everyone, said Dr. Louise Aronson, a geriatrician at University of California, San Francisco, and the author of "Elderhood." In an emergency, adult children may be at a loss about what

to do, clash with siblings and carry guilt long afterward over whether they made the right call. For parents, silence can mean that their wishes aren't understood and their children are needlessly put through the stress of guessing.

To avoid these scenarios, we asked experts what you need to learn about your aging parents before a crisis — and how to broach these difficult conversations.

"It feels like you're putting them through something hard, but it's avoiding something that is far, far worse," Dr. Aronson said.

Know their base line.

In an emergency, doctors only have a snapshot of your parent's health, so getting a sense of daily functioning can help them diagnose and treat your parents effectively.

First, ask about your parents' routines. Then ease into more specific questions around their mobility and cognition, said Dr. Sabrina Taldone, the chief of general internal medicine at University of Miami Health.

These can be sensitive topics, so ask for permission to discuss them and explain why you're asking: "Because I care about you and want to make sure I can support you in case of an emergency," Dr. Taldone said.

Sometimes it's best to talk around the issue. Instead of directly asking if they've fallen or are having memory problems, try asking if there are any situations they avoid (like stairs, long walks or driving at night) or if there's anything that used to feel easy that now takes more effort (like managing bills or keeping track of appointments).

And revisit these questions at least once a year, or after any major health event, like a hospitalization or surgery, Dr. Taldone said. This is especially important if you don't live nearby and aren't seeing gradual changes firsthand.

Ask about medical history.

Start by compiling a list of medications your parents are taking, along with their physicians' names and phone numbers, allergies and prior surgeries, said Dr. Namita

Seth Mohta, an assistant professor of medicine at Harvard Medical School and a former director at Ariadne Labs.

This list is particularly helpful in an emergency because it tells a doctor what underlying conditions the patient has, whether a drug might be contributing and which medications should be continued or avoided in the hospital, Dr. Mohta said.

If possible, note any supplements your parents are using or any prescription medications they're *not* taking regularly, whether because of cost, side effects or forgetfulness.

Also jot down their pharmacy name and number so that, in an emergency, a doctor can call to verify what drugs have been picked up, Dr. Mohta said. This is especially important if your parents prefer not to share their medication list with you.

You can keep all of this information as a file or photo on your phone, but it's also worth tucking a copy in your wallet in case your battery dies.

Clarify what matters most.

During a health crisis, there are countless choices that parents or adult children might need to make. While you can't anticipate every single one, discussing goals and values in advance can help parents feel more prepared for an emergency and keep adult children on the same page.

"It's not just about what you want at the end of your life," Dr. Mohta said, "it's about what you want your life to be like" as you get older.

Explore what brings your parents joy and meaning, their biggest worries, their priorities for medical treatment and what they want to avoid. For example, a parent might say that they want to maximize their time spent at home, that they want to do everything possible to survive or that they don't want to be kept alive by machines in the intensive care unit.

"In an emergency, you're rushing through the decisions — it's emotional," Dr. Mohta said. "This is a chance to reflect ahead of time."

You could also try treating this like a group activity — setting time during a family gathering and asking everyone to share what matters to them, Dr.

Mohta said. This can keep your parents from feeling singled out and, with advance notice, gives everyone time to prepare, rather than feeling ambushed.

Discuss their living environment.

A major reason that people end up in hospitals or care facilities is that there's a mismatch between their everyday abilities and home environment, Dr. Aronson said.

So, talk to your parents about making changes around the house to extend their independence. For example, as vision and balance worsen, it might help to remove loose rugs and clutter — and to install better lighting, a shower chair and handrails. A fall can lead to a hospitalization, a stint in rehab and even a move to a nursing home, so frame these adjustments as a way to help your parents stay in control of their daily lives.

It's also worth discussing where your parents will live long-term, Dr. Aronson said — not as a nudge to move but as a way to understand preferences. Would your parents want to stay home at almost any cost? Would they be open to downsizing? Would they consider bringing in help, moving in with family or trying assisted living?

Having these conversations early can help maximize your parents' options, since facility wait-lists can be long and some places can't accommodate more serious illness.

It's sometimes a negotiation, Dr. Aronson said: Adult children might prioritize safety, and parents might prioritize their independence. "The idea is to find something that offers a little bit of each," she said.

Name a point person.

When a parent is too sick to speak for themselves, loved ones may have to step in. But if the group isn't aligned or sure who's in charge, care can get delayed, messages can become muddled and a parent's wishes can get lost, Dr. Aronson said.

That's why adult children should explicitly ask their parents who will be responsible for medical decision-making — and make sure it's clear to everyone. Having this conversation is the bare minimum, Dr. Taldone said,

but it can also help to complete a living will and health care proxy form, which spells out wishes for medical care and formally designates one point person to make decisions during an emergency.

Remember, this isn't about picking a favorite, Dr. Taldone said, but choosing the person best positioned for the job. Consider someone who's nearby or closely involved, understands what the parent wants and can follow those wishes even when others disagree, she explained. In other words, it could be you or one of your siblings, but it could also be your parent's partner, close friend, brother or sister.

"Oftentimes, a family makes the decisions together, but there's one person at the end of the day who's responsible," Dr. Taldone said.

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