

# Presidential Ponderings - March 2024

*I am continuing my theme of talking about change, but with a little bit of a twist this month. I recently learned that one of my “heroes” had passed away at the age of 91. I never met Dr. Naomi Feil, but her thoughts and insights greatly impacted my career in long term care. In the early 1980’s, Naomi authored a book about something she called ‘Validation Therapy’, and it was literally a game-changer for how we perceived and related to persons living with dementia.*

*Prior to Validation Therapy, the prevailing approach for dealing with persons who had dementia was something called “Reality Orientation”. Nursing homes would gather a small group of demented residents in an activities room, and subject them to 30 to 60 minutes of reality orientation. We would tell them what day, month and year it was, and ask them to repeat it back to us. We would also tell them where we were located, geographically, and also, who was President, what the weather was like, and what the next Holiday was on the calendar. The theory was that we could bring these “confused” people into the ‘correct reality’ by the blunt force of verbal repetition. It was a bad theory, and it did not work. They were not confused...they were living with an alternate reality due to the brain changes of dementia.*

*Naomi Feil taught us to validate our demented residents’ beliefs by encouraging us to enter their reality...not by forcing them to enter ours. For example, consider the oft-seen case of the 90 year old resident with dementia who is constantly searching for a (long-deceased) parent. Reality orientation would advocate for telling them that their parent is dead...thus triggering intense feelings of grief and mourning. Validation Therapy looks to redirect a resident’s anxiety by having caregivers ask gentle questions like “what was your parent’s name” and “tell me about some of the things you used to do with your parent”. This simple technique of redirection can go a long way in calming agitation, and in preventing the infliction of unintended emotional distress. Naomi also taught other helpful techniques, like matching the volume of the resident you are talking to; if the resident speaks softly, we should speak softly (and vice versa).*

*Naomi Feil’s theories and practices predated the first Green Houses by about 20 years, but they fit perfectly within the Green House Model. Both are highly respectful of person-centered care. Residents living with dementia are still fully-capable persons. They may perceive and relate to the world a little differently, by they still want and need physical touch, they crave mental stimulation, they enjoy good food and familiar music, and they appreciate going outside on a nice day.*



*Thanks Naomi. Rest in Peace.  
Jeff Shireman, President*