

## Clinical Column: "Oversimplifying Validation" by Naomi Feil

Quoted in a Texas newspaper is a 55-year-old daughter: "Validation basically means you honor, acknowledge, and validate what the patient is seeing, saying and feeling." For example, continues the article, if the mother saw someone standing in the shadows when no one was there, the daughter would suggest they look together and find out what the person wanted.

The daughter interviewed did not understand two basic Validation principles: **First, we have many levels of awareness.** On a deep level of knowing, elders know the truth. The elder woman, seeing with her mind's eye, restores someone from the past to wrap up her unfinished relationship. At this moment, the elder may see a sister who has died.

The elder needs to talk to her sister, perhaps to vent a strong emotion that has lain dormant for 80 years. **Deep down, on another level of awareness, the elder knows that her sister is dead.** She buried her. Now, she restores her sister to finally express love, or jealousy or hate. **When the emotion has been expressed, and someone listens with empathy, it is relieved.**

The care giver who understands this Validation principle will never suggest looking for a person from the past. This will embarrass the elder who knows, deep down, that her sister is dead, but who needs to talk to her. The care giver, with empathy, will help the woman express her emotions, knowing that when emotions are expressed, they are relieved. The elder preparing to die, must mend broken relationships in order to die in peace.

The care giver, using Verbal Validation techniques, asks softly, "What does the person look like? Is she angry? Sad? What do you want to tell her ...?" This helps the elder in Resolution finally release deep emotions that have been trapped inside for a

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lifetime. Released, the emotions lessen, and after three or four weeks of Validation, the elder no longer sees the person from the past.

Other examples of oversimplification are: “Reality Orientation,” “Redirection” and “The Therapeutic Lie.” Using these techniques, the care giver assumes that the elder has simply forgotten that relatives have died, wants to be constantly reminded that they are dead, and the reason for restoring the person from the past is not important. Proponents of these techniques assume that the older person prefers present day activities such as bingo or musical entertainment. This care giver does not know that the elder has many levels of awareness, that the elder is not “mindless,” that the elder wants to restore the past to resolve it.

Since 1963, I have documented these levels of awareness in case recordings of nursing home residents and on movie film. Reality Orientation invites hostility and withdrawal. Frustrated, misunderstood, the elder stops speaking and withdraws inward. In spite of this reality, in a special issue, “The Brain Matters,” on November 10, 2000, USA TODAY quoted The American Academy of Neurology. These experts advised the care giver to “gently prod” (the disoriented person) by saying, “Remember? She died!”

Now, the elder is tongue-tied. Emotions that need to be expressed are once again swallowed. Diverted and redirected for a few moments, the elder soon returns to unfinished business. The disoriented elder keeps struggling to release emotions and continues to see people from the past, despite constant redirection or reminders that they are dead. But, no one listens. So, the elder retreats to the past.