

It is Never Good to Lie to a Person Who Has Dementia

The Validation theory, developed by Naomi Feil, M.S.W., A.C.S.W., tells us that it is normal or age appropriate for the very old person to return to the past to resolve unfinished business or life struggles before they die. There are 11 principles on which Validation is based. Additionally, there are several theoretical assumptions from behavioral, analytical and humanistic psychologies that are the underpinnings of those principles.

The Validation principle that relates to being truthful to a person with dementia is, “People live on several levels of awareness, often at the same time”. The theoretical assumption that supports this is that. “There are several levels of consciousness.” (Sigmund Freud) This means that we do not lie to those with dementia because we know that on some level they know the truth.

A second principle: Human beings can see with the mind’s eye. (Penfield, 1950) The old person seeing with the mind’s eye, restores someone from their past to wrap up an unfinished relationship or to fulfill an unmet need. In the moment, the old person may see a mother who has died. The old person may need to talk to his mother, perhaps to vent a strong emotion that has lain dormant for some time or perhaps to simply feel nurtured, secure and loved again. Deep down on another level of awareness the old person knows that their loved one is dead.

Consider the following interaction with a Validation worker and 86-year-old gentlemen, which takes place in an assisted living dementia, care living center. He is found walking down the hallway, crying and asking various people if they have seen his mother. A Validation worker responds, “You miss your mother and want to see her?”

Resident: “I wish I could see her right now, where is she?”

V.W.: “Tell me about your mother what did she look like?” (The resident’s preferred sense is visual, encouraging the person to talk about their loved one using the visual sense.)

R. (crying): “She was beautiful and she was good to me. She took good care of me”.

V.W.: “What kinds of things did she do for you?” (asking factual questions: who, what, where, when, how)

R.: “She did everything, she took care of me and I need to see her now.”

V.W.: ” She took good care of you, what kinds of things did she do for you, was she a good cook?”

R.: (crying becomes much more intense) “You ask me if she was a good cook, she was a great cook but all she ever made was oatmeal. My father, the no good drunk, spent most of his pay

every week on booze and many times all she could fix for us was oatmeal. But she made the best oatmeal it was sweet and buttery and she knew how to make it many different ways.”

VW. (empathetically listening)

R.: “She took good care of us but he was no good. You must think I’m crazy, an 86 year old man looking for his mother. I know she’s gone.”

In this particular case the resident not only knew that his mother was dead but, after being Validated, verbalized it. Although the goal or intention of Validation is not to bring a person back to reality, this sometimes occurs. The most important outcome is that the person is helped to express his feelings and these feelings are acknowledged by an empathetic, trusted, caregiver.

The third Validation principle: “Painful feelings that are expressed, acknowledged and validated by a trusted listener will diminish. The old person feels relieved. His hurt and anxiety lessen. Painful feelings that are ignored or suppressed will gain strength.”

Validation teaches that we never lie to the person who has dementia because we need to establish their trust in order to Validate their feelings. When we lie we lose their trust because on some level they already know the truth.

Example: An 80 year old lady with early dementia is admitted to an assisted living dementia care facility. Her family tells her that she is going to stay there for a few days until they return from vacation and they will return to take her back home with them. This resident, although confused and forgetful, holds on to this statement and repeatedly asks the caregivers when her family is going to return to take her home. If the family had been instructed about Validation they would have been honest with their loved one and the admission, even though difficult, would go more smoothly because the person would be treated with honesty and respect.

Another example would be the resident who asks for his wife who is dead. Caregivers reply: “She’ll be here to see you later.” The resident may not remember much but he clings to that statement. Day after day, he asks: “When will my wife come back to me?” Caregivers continue to lie. In time he loses trust in the caregivers. He knows that what they say is not true. If the caregivers were trained in Validation they would encourage the resident to talk about his wife. They would match his emotion and encourage him to express his needs. They would accept the fact that there is a reason behind his behavior. He has not simply “forgotten his wife died.” He needs to grieve for her. He needs a trusted caregiver to help him resolve his unfinished business. A validating caregiver would accompany the resident throughout this process of resolution in an honest and empathetic manner. When the emotion is expressed and someone listens with empathy it is relieved. The old man no longer needs to search for his wife. He feels safe with the caregiver, whom he trusts. He always knew, on a deep level of awareness that his wife had died. He saw her in her grave. He can never forget that.

Naomi Feil, M.S.W., A.C.S.W.
Founder and Director in Chief
Validation Training Institute, Inc.