**** WINTER NEWSLETTER ****

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CLINICAL COLUMN

Q WHEN DO YOU TOUCH SOMEONE? AND HOW?

A. Without stimulation, we vegetate. For stimulation, The Maloriented person does not turn to intimate relationships. Afraid of close encounters, the Maloriented old-old person will not change a life-time defense. Old hurts, suffered long ago, when the person was vulnerable, are burned in the body-mind. Maloriented keep solidly entrenched in their 24" kinesphere—that invisible bubble that protects us from exposure. In lieu of people, the Maloriented turn to tasks for stimulation. A genuine smile, a respectful voice-tone, a hand-shake from a safe distance is plenty of touching for the Maloriented.

In Time-Confusion and Repetitive-Motion, the 24" Kinesphere is gone. Increasing damage to nerve cells happens. Sensory cells no longer inform the brain of the body's condition. Time Confused lose self-awareness and awareness of others. They need touch for stimulation. For the Time-Confused, touch staves off withdrawal inward to Repetitive-Motion. For those in Repetitive Motion, non-verbal stimulation via touch, staves off Vegetation. Vegetation happens when stimulation goes and identity is lost.

The Time-Confused, to substitute for loss of outside stimulation, turn inward, drawing on past memories. ... "Previous stimulation of a group of nerve cells which has led to a state of satisfaction, increase its sensitivity to further stimulation of a like kind." (Zuckerman, 1950).

Through touching, the Validation® worker becomes a trusted, significant other. Where you touch and how much pressure you apply trigger memories of early secure and loving relationships. Imprinted indelibly, touch taps the well-remembered brain cicruits.

Touching fingers, hands, wrist or forearm seldom elicits response. Poor circulation can damage sensory acuity in the extremities.

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Touching the following areas in the face, shoulder, and upper arm can often achieve these VALIDATIONS goals: (1) increased attention span; (focus on the Validation worker, reduction of anxiety - pacing, moaning, repetitive motions) - increased speech, increased non-verbal interactions - singing, dancing, moving with the worker with increased mobility and muscle integration; (2) feelings of safety lessen the need to turn to the past, and the disoriented old-old person often spans many years with one touch:

- A. A circular motion with cupped hand, medium pressure on the shoulder taps memories of a trusted friend.
- B. Fingertips gently brushing the cheek, light pressure, tap memories of the mother.

 (Note: Charlotte Buhler writes of the infant-mother encounter when the infant' cheek is stimulated.)
- C. Fingers on the back of the head, above the soft-spot, in a circular motion with medium pressure tap father-memories.
- D. Fingertips, cupped, on the back of the neck, medium pressure, tap memories of children.
- E. The little finger side of the hand, gentle pressure on the jaw line above the nape of the neck, tap memories of a spouse.

There is no formula for working with humans. Each person is unique with unique personal memories. Apply different pressures for different people, touching different areas of the face, neck and shoulders to evoke interactions. Touching is always used with direct eye contact, a gentle, soft, low voice-tone, as the Validation worker moves to the rhythms of the disoriented old-old person in Time-Confusion and Repetitive-Motion.

ANSWER TO OPEN ENDED QUESTION OF LAST ISSUE

In my 33 years of working professionally with young-old(45-75) and old-old(80+) people, I have found a distinct difference in behavior between these populations, despite similarities in physical damage to brain tissue. Recent research (Sir Martin Roth, Harvard Researchers, Seltzer & Sherwin) find distinct differences in physical structures and brain chemistry between young elderly and old populations, who are called, Alzheimer's Diseased. The distinction is helpful in setting goals.

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Your 45 year old man diagnosed, Alzheimer's Disease, may often benefit from Validation, but do not expect him to improve with time. Do not expect him to assume social roles in the group, or become more verbal after six months of Validation. You can set these goals for the old-old. The younger "Alzheimer's" man may need mood-altering medications on occasion, but the old-old person will respond to the Validation Worker when he/she is very angry or very sad.

OPEN-ENDED QUESTION TO BE ANSWERED IN THE NEXT ISSUE

How can I convince other staff that Validation works?

NEWS: VALIDATION AROUND THE WORLD

Dr. Paul Fritz, The University of Toledo, Department of Communication, used a computer program in his Validation research. Results: ..."a significant increase in fluency levels and in lucidness..."

A new research project is underway with the Institute for Life Span Development and Gerontology, University of Akron. Project Directors are Dr. Harvey Sterns and CVT, Evelyn Sutton. Naomi is consulting. Rev. Tom Heinlein is leading the experimental group.

CVT's, Sue Bowman and Theresa Lester, U. of Southern Mississippi, School of Nursing, are preparing a special Video to promote Validation in their area.

Joy Goodwin, CVT, The Baptist Home, Mo., has completed training Dagny H. Pedersen, who has returned to Norway to teach Validation. Australian nurse, Johanna Campbell is planning a similar intensive training with Joy.The Validation Board is establishing criteria for VALIDATION CHAPTERS, as requested by Joy in her area. All certification and testing must be conducted by the Validation Institute in Cleveland.

EXERPT FROM A POEM BY MICHAEL GOODWIN Baptist Home

I brave each day in my world, a place from the past, Becomming older you begin seeing Why. Step into my world. See me!! Don't let your world become the past and pass you by.

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MESSAGE FROM THE PRESIDENT OF THE VALIDATION BOARD

Certification Director, Dr. Al Paolino, has analyzed our test scores. He found a good distribution spread: A range from 195-279. The mean score: 241. S.D.= 22.2.

ALERT: There is only one VALIDATION TRAINING INSTITUTE. Only those persons who have successfully past the tests prescribed and administered by the Validation Training Institute in Cleveland, Ohio, and have received a diploma signed by the same Validation Training Institute Board of Directors, can be called, Certified Validation Therapists.

Over 120 hospital staffs throughout Alberta, Canada, participated in Naomi's first teleconference throughout the month of January. In June, 1987, Naomi will conduct a second teleconference with personnel in Oklahoma.

Our next VALIDATION WORKSHOP at Breckenridge Village, Willoughby, Ohio, will be held on Wednesday, May 27, 1987. CEU's are available for all levels of staff. Write the Validation Institute for registration information.

Lita Kohn, President

1987 VALIDATION WORKSHOPS IN THE U.S. AND CANADA

February: Atlantic City, Michigan, Oklahoma City, Ohio, Florida March: New Brunswick, Boston (American Society on Aging), (Association for Gerontology in Higher Education), Kansas, Cleveland, Indianapolis, Virginia, San Antonio, Chicago (Governor's Conf. on Long Term Care), Pittsburgh, Edmonton.

April: Sudbury, North Carolina, Toronto, Ohio (Ohio Healthcare), Rochester, Vancouver, Alberta.

May: New Jersey, Toronto, Dayton, Pennsylvania, South Dakota, Kitchener. June: Ottawa, Toledo, Washington, D.C., Minnesota.

August-September-October-November: Maine, Wisconsin, Mississippi, Saskatchewan, Iowa, Hamilton, Pennsylvania, South Carolina, Florida.

The Editor welcomes suggestions, comments, and news about Validation.

Thanks for your membership in VTI. If you are not a current member, please join. \$35.00 dues @ two years helps pay student scholarships, the Newsletter, promotion and research. Mail tax deductible checks to the Fiscal Officer, Rosetta Paolino, at the above address.

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