Relational Care

	Relational Care	Validation
Definition	A broad and concrete approach to care for the elderly person with loss of psychological autonomy (Alzheimer's disease or related). This approach considers care for the elderly person with loss of psychological autonomy from a triple perspective: behavioral, affective and cognitive.	This method of communication is based on building a relationship with older adults with cognitive decline. The aim is to accompany them while acknowledging ("validate") the emotions and needs being expressed, whether they still have the ability to speak or not.
Concept of humankind	Holistic vision of population and care that integrates aspects: -behavioral (develop appropriate channels for communication) -Emotional (recognizing the person's emotional and emotional life regardless of the means of expression) -Cognitive (understanding cerebral aging)	Holistic vision of people: physical, psychological and social factors are all critical to how people age and if they become Mal or disoriented.
Goals	For the older adult: Maintain a relational life; Increase your communication skills For the intervener Accompany the elderly person in what he/she displays in "incomprehensible" behaviors. Develop relational support in a team environment Better experience the sometimes difficult relationship with the elderly person To have more satisfaction in this work.	For the older adult: Increased verbal and non-verbal communication; Increased feelings of well-being and self-worth; Expression of emotions and being actively listened to with empathy leads to less anxiety and stress; Their process of resolving old issues is continually 'validated' Validation prevents isolation and loneliness which prevents withdrawal inward to vegetation. For the caregiver (professional or layperson): Less burnout More joy and energy Feeling more capable of handling difficult situations For family caregivers: Improve communication with relatives living with dementia;

		(Re)build a positive relationship; Older adults can stay in their own homes longer; Less burnout
Basic Theory	Holistic vision. Both the elderly person and the caregiver are part of a personal and social history and representations of aging, including cerebral aging. Taking this context into account is essential for the development of a positive relationship in "caring".	Based on 3 Main Elements: - The Attitude based on empathy. - Tailored communication techniques, - Principles developed by Naomi Feil in reference to human beings psychophysical and social developmental theories. She refers to humanistic authors such as E. Erikson, C. Rogers, J. Piaget, S. Freud, C.G. Jung, A. Maslow
Targeted population	Older adults who are often physically or psychologically dependent, accompanied by teams either in institutions or at home.	Older adults with cognitive losses; those diagnosed with 'late onset Alzheimer's disease. Aspects of Validation (the validating attitude and some techniques) can be used with many different populations.
Techniques used	Prerequisite: empathetic attitude Explore with the person his or her life history through the genosociogram Communication techniques from NLP and Validation: verbal and nonverbal techniques Development of institutional relationships from adult to adult. (systemic analysis, transactional analysis)	Individual Validation: - Prerequisites: centering, finding a trust-building physical position (eye contact and using an adult to adult voice tone. - Verbal techniques include: asking open questions and exploring the needs and emotions being expressed by the other person. - Non-verbal techniques include: anchored touch, singing songs familiar to the client, saying the emotion with emotion, mirroring the repetitive movements. Group Validation: 4-8 disoriented older adults form a weekly group that explore issues relevant to the group members using a fixed agenda, seating order and social roles.
Developers	Association for the Promotion of Validation for Older Persons (APVAPA) 1991 This training is the result of the reflection of a multidisciplinary working group, whose members are all clinically involved in the elderly person's approach: nurses, physiotherapists, occupational	Naomi Feil Method created 1960s-1970s; first published in 1982. Over the course of 50 years, 2000 Naomi Feil Workshops have been held worldwide. At an average of 200 people per workshop, that's 400,000 individuals who have experienced Validation from its founder.

	therapists, geriatricians, psychiatrists, psychologists, social workers, communication consultants	Validation is now further developed by 17 Masters who comprise the Education Committee of the Validation Training Institute. They also mentor over 430 Validation Teachers offering training in 12 countries with the support of 23 Authorized Validation Organizations. These organizations have certified over 925 group leaders and 6,500 workers.
Training	Training in 3 steps: - Module 1 (3 days): How I develop the relationship in the tasks of accompanying the elderly person (Me - communication techniques - theory) - Module 2 (2 days): How to develop a team project in Relational Care: develop your relational skills with colleagues, hierarchy, and family Module 3 (1 day after 4 to 6 months): Where is the Relational Care project in the team for the different members? To become a trainer in Relational Care: - Participate in the training (3 days + 2 days + 1 day) as a participant Participate in the training as a cofacilitator, supervised by an experienced trainer Be positively evaluated by the experienced trainer - Participate in APVAPA trainers' intervision meetings	Workshops/Presentations: Offer an introduction to the method and a few basic skills Basic courses: (2-6 days) Offer integration of basic attitude skills and a few techniques Targeted courses, seminars and workshops (1-3 days) Offers an introduction to the method and some basic skills based on the needs of: Family caregivers Facility managers Volunteers Fire, police and ambulance workers Home healthcare workers and as requested
Certification Courses		Level 1, Worker course: (certified) (10 days spread out over an average of 9 months) Offers integration of basic attitude skills and all individual Validation skills Level 2, Group Practitioner course: (certified) (6 days spread out over an average of 9 months) Offers further integration of individual Validation skills and adds Group Validation skills Level 3, Validation Presenter course: (certified) (5-6 days spread out over a minimum of 2 months) Offers presentation skills and deepening of theoretical and pedagogic knowledge

as applied to teaching Validation.

Level 4, Validation Teacher
Successfully co-teaching a Level 1 course with an experienced teacher leads to Teacher certification

Level 5, Validation Master
Validation Teachers with a minimum of 5 years experience of teaching all certification levels may apply for this certification. Validation Masters become members of the VTI Education
Committee and are responsible for the integral development of the Validation method contents and teaching materials.
Masters are authorized to teach Level 3

courses.