

VALIDATION THERAPY

What is Validation Therapy?

Validation Therapy seeks to respect the resident's time frame and autonomy. It uses what, where, when and how questions to explore the meaning of all behavior. It avoids using "why" to not offend or raise the defenses of the confused resident. With reminiscence, the resident becomes more oriented.

Why is this therapy important?

The Baptist Home practices Validation Therapy, despite its requirement for additional staff time and education, to respect the resident regardless of his or her level of confusion. A confused resident can feel isolated or frustrated due to feelings of not connecting when trying to communicate. Validation Therapy allows staff to build trust and love to connect with residents in a time in their life when they struggle most to connect with others. The Baptist Home recognizes that this form of therapy is more demanding on staff which is why The Baptist Home works hard to ensure a high staff-to-resident ratio.

How can you learn more?

Visit www.thebaptisthome.org/resources for articles or contact The Baptist Home for possible seminar opportunities.

Principles of Validation

1. All people are unique and must be treated as individuals.
2. All people are valuable, no matter how disoriented they are.
3. There is a reason behind the behavior of disoriented old-old people.
4. Behavior in old-old age is not merely a function of anatomic changes in the brain, but reflects a combination of physical, social, and psychological changes that take place over the lifespan.
5. Old-old people cannot be forced to change their behaviors. Behaviors can be changed only if the person wants to change them.
6. Old-old people must be accepted nonjudgmentally.
7. Particular life tasks are associated with each stage of life.
8. When more recent memory fails, older adults try to restore balance to their lives by retrieving earlier memories. When eyesight fails, they use the mind's eye to see. When hearing goes, they listen to sounds from the past.
9. Painful feelings that are expressed, acknowledged, and validated by a trusted listener will diminish. Painful feelings that are ignored or suppressed will gain strength.
10. Empathy builds trust, reduces anxiety, and restores dignity.

Feil, Naomi. "Ten Principles of Validation." Validation Training Institute. 2008. Validation Training Institute, Inc. 26 March 2008

TECHNIQUES OF VALIDATION

Technique 1: Centering

To center, the caregiver focuses on his or her own breathing in order to expel as much anger and frustration as possible. By releasing this anger and frustration, caregivers open themselves up to the feelings of the people with whom they are trying to communicate. Since it is crucial to release one's own emotions in order to be able to listen empathetically to another person, all Validation sessions begin with this technique.

Centering takes about 3 minutes, and is pleasant and relaxing. To center yourself:

1. Focus on a spot about two (2) inches below your waist.
2. Inhale deeply through your nose, filling your body with air. Exhale through your mouth.
3. Stop all inner dialogue and devote all of your attention to your breathing.
4. Repeat this procedure slowly eight (8) times.

Technique 2: Using Non-threatening, Factual Words to Build Trust

People in Resolution do not want to understand their feelings. They are not interested in understanding why they behave the way they do. They retreat when confronted with their feelings. To communicate with them effectively, the caregiver must avoid asking questions that force them to face their emotions. Instead, the caregiver should focus on factual questions: who, what, when, where, and how. Caregivers should avoid asking disoriented older people "why" something happened or "why: they did what they did.

Technique 3: Rephrasing

People in Resolution often find comfort in hearing their own words spoken by someone else. To rephrase, the caregiver repeats the gist of what the person has said, using the same key words. The tone of the voice and the cadence of the speech should also be imitated. In responding to a woman who speaks quickly, the caregiver should speak quickly.

Technique 4: Using Polarity

The technique of polarity involves asking the person to think about the most extreme example of his or her complaint. By thinking about the worst case, the person being validated expresses his or her feelings more fully, thereby reducing their stress.

Technique 5: Imagining the Opposite

Imagining the opposite often leads to the recollection of a familiar solution to the problem, provided the old-old person trusts the validating caregiver. By prompting the old-old person to think about a situation in which the problem does not occur, the caregiver helps the individual recall how they dealt with a similar situation earlier in their life.

Technique 6: Reminiscing

Exploring the past can re-establish familiar coping methods that the disoriented person can tap into to survive present-day losses. By the time a person reaches old-old age, it is too late to learn new coping skills.

The validating caregiver can help the person retrieve old ways of handling stress. By using words such as "always" and "never," the caregiver can trigger earlier memories.

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Technique 7: Maintaining Genuine, Close Eye Contact

The very old person in Time Confusion and Repetitive Motion feels loved and secure when the nurturing caregiver shows affection through close eye contact. Even older people with impaired vision sense the concentrated focus of the validating caregiver who looks directly into their eyes. Time Confused people who wander, looking for a nurturing parent, often stop wandering when the Validating caregiver becomes a nurturing parent and Time Confused people feel safe and loved. Their anxiety is reduced. Often, they will become aware of present-day reality.

Technique 8: Using Ambiguity

Time Confused people often use words that have no meaning to others. They often communicate nonverbally, in ways that are difficult to understand. By using ambiguity, caregivers can often communicate with the Time Confused even when they don't understand what is being said. The words "he," "she," "it," "someone," fill in for the non-dictionary words. Time Confused people keep communicating and withdrawal into Vegetation is prevented.

Technique 9: Using a Clear, Low, Loving Tone of Voice

Harsh tones cause disoriented people to become angry or to withdraw. High, soft tones are difficult for older adults to hear. It is important to speak in a clear, low nurturing tone of voice. Often, a nurturing voice triggers memories of loved ones and reduces stress.

Technique 10: Observing and Matching the Person's Motions and Emotions (Mirroring)

People in Time Confusion and Repetitive Motion often express their emotions without inhibition. To communicate, it is important to take stock of their physical characteristics and the ways in which they move. The caregivers should observe their eyes, facial muscles, breathing, changes in color, chin, lower lip, hands, stomach, position in the chair, position of the feet, and the general tone of their muscles to match these postures. When the person being validated paces, the caregiver paces.

When the person being validated breathes heavily, the caregiver breathes heavily. Done with empathy, mirroring can be effective in helping to create trust. It allows the caregiver to enter the emotional world of the Time Confused person and to build a verbal and nonverbal relationship.

Mirroring the sometimes bizarre motions of disoriented people can be an upsetting experience for the caregivers and not all caregivers will want to try this technique. Only caregivers who are truly willing to enter the world of people in Repetitive Motion should attempt this technique.

Technique 11: Linking Behavior with the Unmet Need

People need to be loved and nurtured, to be active and engaged, and to express their deep emotions to someone who listens with empathy. When the old-old person pounds, or paces, or rubs, or pats, the validating caregiver links the behavior to one of their human needs - love, usefulness (restoration of movements associated with work), or the need to express raw emotions.

Technique 12: Identifying and Using the Preferred Sense

Most people have a preferred sense. For some people, that sense is vision, for others it is the sense of smell, for yet others it is the sense of touch. Knowing a person's preferred sense is one

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way of building trust, since it enables the caregiver to speak the person's language, to step into the person's world.

To discover which sense a person prefers, the caregiver needs to listen and observe carefully, to try to key in on what the person is saying or trying to say. One technique for determining which sense a person favors is to ask that the person think about and describe an experience from the past. The first sense the person uses often reveals the person's preferred sense.

Technique 13: Touching

Touching is a technique that is usually not appropriate for Mal oriented people, but is often effective with people in Time Confusion. The Time Confused have lost their defenses and often have poor vision and hearing. Cut off from visual and auditory stimuli, they need to feel the presence of another human being. They have lost track of clock time and are often unable to recognize people. They no longer distinguish between people they have know all of their lives and people they have never met before. The validating caregiver can instantly become a loved person since the people in Time Confusion can incorporate strangers into their world.

People in Repetitive Motion are no longer aware of where they are. They are encapsulated in their own space. To communicate with them, the caregiver must enter their world and touch them in the same way a loved one touched them. To use touch with a Tim Confused person, the caregiver should approach the person from the front, since approaching from the back or side may startle the person.

Pleasant memories of early childhood are often evoked through touch. With people in Repetitive Motion, the validating caregiver can often establish an immediate intimate relationship by using the following techniques:

- Use the finger tips in a light, circular motion on the upper cheek.
- Use the finger tips in a circular motion with a moderate amount of pressure on the back of the head.
- Use the outside of the hand, placing the little finger on the ear lobe, curving along the chin with both hands, with a soft stroking motion downward along the neck.
- Use cupped fingers on the back of the neck with both hands in a small circular motion.
- Use both hands to rub the shoulders and upper back.

Touching another human being is an intimate act and caregivers - both professionals and families - must always respect that some people, even when their controls are damaged, may not want to be touched. Any sign of resistance to physical contact should indicate to the caregiver that touching is not appropriate. The personal space of all people, whether they are disoriented or not, must always be respected.

Technique 14: Using Music

When words have gone, familiar early learned melodies return.

Stored forever in the brain's circuits, early learning, reinforced through the years, remains. People in Repetitive Motion who no longer retain the ability to speak can often sing a lullaby from beginning to end.

People in Repetitive Motion will often say a few words after singing a familiar song. Music energizes people in Time Confusion and Repetitive Motion.