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**ABOUT SANDRA**

Sandra Stimson has experience as a corporate consultant, Corporate Trainer and National Speaker. Her experience is in long term care, as Activity Director, Director of Alzheimer's Units and Assistant Administrator of a 550 bed long term care county home. She is Co-founder of Pet Express Pet Therapy Club, is a Life Replay Specialist. Sandra implements dementia units nationwide. Sandra has written several books, Volunteer Management Essentials for Long Term Care and Pet Express Pet Therapy Program. Sandra has been a facilitator for Alzheimer's support groups and is the Awards Chair for the NJ Association of Activity Professionals. Sandra is the Executive Director of **National Council of Certified Dementia Practitioners**  
<http://www.nccdp.org>.

[Alternative Solutions in Long Term Care](#) offers resources for health care professionals in many areas of dementia care, care plans, Snoezelen products, dementia activity calendars, adult day care calendars, sensory calendars, reminisce videos for dementia, activity books, and dates to remember, party supplies, resources and links.



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## Pathways to the Past

by Sandra Stimson ADC, CALA, CDP  
Executive Director, [Alternative Solutions in Long Term Care](#)



### Religions, Spirituality and Dementia

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*"We are not human beings  
having a spiritual experience,  
but spiritual beings  
having a human experience"*  
Author Unknown

My colleague recently shared her story with me about how she often visited her aunt in a nursing home. Though the visits were pleasant, there was no verbal communication. On her last visit, she walked into her aunt's room, to find her singing the song, "This little light of mine, I'm gonna let it shine. This little Light of Mine I'm gonna let it shine." She realized her aunt was singing to the religious service that could be heard from the dining room. She quickly wheeled her aunt into the service. Her aunt either sang or hummed every song. My colleague said, "It was most moving and inspirational visit I ever had with my aunt. Now I plan all my visits around the religious services.

How do we know what they know? If we acknowledge with the disease process, that communication is affected, then how are the dementia clients able to tell the staff about their spiritual and religious needs? Because communication is lost, often times, residents living on a dementia unit are not included in the religious services especially those held off the unit. There are those who believe that the dementia resident would not benefit from attending spiritual and religious programs! This is a misconception. Probably the most important time in their spiritual life is when they have dementia, that spiritual programs and religious programs are an integral part of their "quality of life".

Spiritual assessments should be conducted with all residents and their families. Spiritual assessments may be ordered at [www.activitytherapy.com](http://www.activitytherapy.com) Even though they have dementia, conduct the spiritual assessment with the resident. Obtain as much information from the resident and then meet with the responsible party or family member. Spiritual assessments ask questions such as:  
How do you express your spirituality?  
What gives you strength or hope?

More emphasis needs to be placed on developing religious programs for the dementia unit and including all the residents, regardless of their cognition. There should not be a selection process where invitations are only extended to the "high functioning" dementia residents. All residents will be able to participate in spiritual and religious programs at their own level, either actively or passively. Some may sing and follow along with the song sheets while others may only hum or tap their finger.

The dementia unit services may need to be modified and adapted for this population. Often times, sermons may not work. But religious songs and music can be more beneficial because they are able to participate in some meaningful way. The songs books may need to be eliminated and substitute large poster board with the songs boldly printed. Always have musical props such as maracas or tambourines.

On Sundays, the Nursing Assistants could lead the religious service, especially if the service is gospel or uplifting songs. It's important to not use new age or contemporary religious songs but instead offer traditional songs from their past.

Try "neighboring" during religious services. Have the higher functioning resident's pair with someone who may need assistance with the Bible or song books. They can explain what is happening during the service.

There are all kinds of programs that are appropriate for dementia units and these include: Prayers, Communion, Rosary, Bible Studies, Reminisce Groups, Life Review Groups, Religious Services, Memorial services, Gospel & Music programs, Bell Choir, Youth Church Groups and Intergenerational programs such as Good Deeds Day. Always offer prayer before every meal.

Offer other kinds of spiritual groups that require their input. Document their answers and place in facility newsletter. Some questions that could be presented to the group, could be:

- What color do you think of for happiness?
- What's the best advise you ever received?
- If you could give any gift in the world, what would you give me?
- What's something you would like to accomplish in your life time?

**These are some tips for the clergy visiting the dementia unit or dementia clients in their room.**

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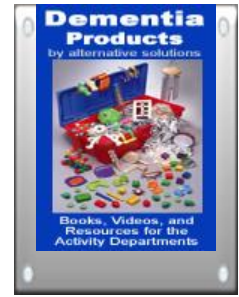


"Jesus entrusted the care of his mother to one of his disciples"  
John 19:25-27

1. If religion was important part of their life, they will still derive pleasure from pastoral visits.
2. They may still find comfort and peace in a place of worship or during worship services.
3. Get to know the staff and their names. Let the staff know your concerns. Compliment the staff as well.
4. Visit on a regular basis so the staff and residents can get to know you.
5. Always respect the schedule of the long term care setting. The best times to visit are when the residents are not tired. Recommended times are, 10:30, 11:00, 1:30 and 3:00. By late afternoon, the dementia client is tired.
6. Allow time for the client to express their feelings.
7. Assist the dementia client in developing new friends. Include other clients in your visit.
8. Be aware of agitation. If the client is becoming agitated, cut your visit. It is ok, if you only visit for a few minutes.
9. Vary your visit. Try other places within the community other than the resident's room. This provides pleasurable stimulation.
10. Bring your pet. But be sure to clear the pet with the Activity Director. You will need health certificates and shot record and follow local state regulations.
11. Bring comfort items such as sugarless charm pops, life like dolls, stuffed animals, activity aprons, Afghans, body pillows and soft music. Always clear all food items with the nursing staff.
12. If you are uncomfortable visiting due to cognition, try tuning on the music and just sitting quietly and or hold their hand.
13. Let them know you will be back.
14. It is ok to make jokes and laugh.
15. When you leave, don't say Goodbye. Just say you have to see the Nurse. Because if your going home, they may also want to go to their home as well.
16. Always reintroduce yourself in a non-demeaning way. "Hi, Mr. Smith. It's a gorgeous day at Golden Living Center. I'm Father Ryan and it's good to see you."
17. Always introduce to others around them.
18. Say the clients name often as they may have forgotten their own name.
19. Rather than using reality orientation, enter "their reality and live their truth." Reality orientation is beneficial for those who are cognitively intact. Recommended reading is "Creating Moments of Joy" and can be ordered through [www.activitytherapy.com](http://www.activitytherapy.com). An example would be; A resident asks "Where is my wife?" Always give a believable answer, such as your wife is at the grocery store, your wife is at the hair dresser. Even if the wife has passed away, enter their reality, because remember, each time you tell the person "the truth", they are experiencing raw grief as if it is the first time they have heard, "your wife has passed away."
20. Wear traditional attire that will help identify who you are. Wear vestments, collar, and robe and carry your bible, rosary, hymnal or visible symbols of your connection to the church.
21. Use short prayers during visits and songs from the past vs. Contemporary music they may not recognize.
22. It's OK to hug them. But remember, not everyone will welcome a hug.
23. Use rituals and smells such as incense, rosary and Bible.
24. Even as their memory fails, they will still derive pleasure from favorite hymns, sacraments, a stuffed lamb, traditional prayers, scripture readings and Holy cards.
25. Make sure residents have bibles and bibles on tapes, Guide posts and readers digest. Some may still be able to read.
26. Bring tapes of your sermon and your church weekly bulletin...
27. Encourage lay people from your church to volunteer at the facility.
28. Involve your church and youth choir.
29. Have a house warming party for the new residents.

Sources: Center for Health and Spirituality / Duke University  
Geriatric Care Newsletter "The memory impaired need activity."

For the resident remember---"I Forget--but I am not forgotten." Source Unknown  
- END



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