

Daughterhood The Podcast

Episode #24: Challenging Behaviors in Dementia and the Reasons Why with Judy Cornish, Founder of the DAWN Method

Resources: thedawnmethod.com

Books by Judy Cornish: Dementia with Dignity and The Dementia Handbook

Other reference books Judy recommends:

Gary Chapman, Ph.D Keeping Love Alive as Memories Fade <https://5lovelanguages.com/store/keeping-love-alive-as-memories-fade>

Dr Ellen Langer - Mindfulness - <https://www.amazon.com/Mindfulness-25th-anniversary-Merloyd-Lawrence/dp/0738217999>

Daniel Kahneman - Thinking Fast and Slow - <https://www.amazon.com/Thinking-Fast-Slow-Daniel-Kahneman/dp/0374533555>

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SPEAKERS

Rosanne, Judy Cornish

00:02

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and always consult your attorney for legal advice. And thank you for listening to the Whole Care Network.

Rosanne 00:43

Hello, and welcome to Daughterhood The Podcast. I am your host Rosanne Corcoran, daughter, hood circle leader and primary caregiver. Daughterhood is the creation of Anne Tumlinson who has worked on the frontlines in the healthcare field for many years, and has seen the multitude of challenges caregivers face. Our mission is to support and build confidence in women who are managing their parents care. Daughter hood is what happens when we put our lives on hold to take care of our parents. We recognize this care is too much for one person to handle alone. We want to help you see your efforts are not only good enough, they are actually heroic. Our podcast goal is to bring you some insight into navigating the healthcare system. provide resources for you as a caregiver as well as for you as a person and help you know that you don't have to endure this on your own. Join me in Daughterhood.

Rosanne 01:32

Caregivers have innumerable questions when it comes to dealing with challenging behaviors throughout the dementia journey. From everyday issues with eating and sleeping and wanting to go home to changes in personality and communication. Today I speak with Judy Cornish elder law attorney homecare provider and founder of the dawn method, a strength based person centered approach to dementia care, Judy shares not only her techniques on dealing with these behaviors, but also why they develop and how we as caregivers can learn to embrace, not what is lost. But what is left. I hope you enjoy our conversation.

Judy Cornish 02:09

When you start looking at dementia care. During the past decade, we've gone from saying okay, you can't change, you're going to go through this experience. And your children your skills are going to change. So we're going to change the environment to support you. And then in rather than looking at what's wrong with dementia with dementia is doing, we want to look at you, we want to treat you as the person you are as the person you continue to be. So so that's Person Centered Care, then a few years back, the Centers for Medicare and Medicaid adopted the term and formally in this country said that person centered care should be what we are providing to those who are experiencing dementia. For me, I look at you know, looking at that I am so thrilled that we're finally hearing about Person Centered Care on the level we are however, I still feel that it's good to be person centered, it's good to look to be more concerned about the person and then the disease. But how can we provide Person Centered Care if we don't understand the skills that person continues to use, not just the skills they're losing, but the skills they will continue to use. So we need we need to recognize the strengths in dementia. And so that's that's where my work is I want people to understand that there is strength based care, which is how you take Person Centered Care and put it into action.

Rosanne 03:43

And depending on which stage of dementia, you know, it's different. If you're in the mid stage, it's different than if you're hurtling towards the end stage. You know, it's a it's a completely different process because the mobility has changed the everything has changed.

Judy Cornish 03:59

Communication Medication skills have changed

Rosanne 04:01

Communication skills are are completely different.

Judy Cornish 04:04

Right. Yeah.

Rosanne 04:06

So you have to continually change with that. And I think I mean for for facility based. that's training.

Judy Cornish 04:15

Yeah, that's right. Training. Yeah.

Rosanne 04:18

And I you would hope that they would update their training methods and, and be able to train their people for in home caregivers, family caregivers. How do you keep up with that? Because what that's not like, you know, I hate to say we have things we have lots of things that we're juggling, but we've lots of things that we're juggling.

Judy Cornish 04:41

To be caring for someone who's experiencing dementia in the home, as well as having more than one generation to have children in the home as well as an elder who's experiencing dementia to have the adults have to carry on working and keeping the home functional and running. How do you meet all of those conflicting needs, you know, Rosanne, I have the greatest admiration for what you do, and are doing and have done.

Rosanne 05:08

Thank you. Thank you and I

Judy Cornish 05:10

You are super woman.

Rosanne 05:12

Judy I totally appreciate what you're saying. And, and there are, I mean, there are millions of us trying to do this. And it's, it's ridiculously hard because you always feel like you're failing somebody, somebody is being failed today. And it's a matter of who that's going to be right? And then what do you do with that? Where do you put that,

Judy Cornish 05:33

And at the end of the day, after you felt bad for failing the children, failing your husband failing your mom, then you get to the end of the day, and you've got two seconds to yourself, and you pick something up? And it's one of those messages, like on Facebook or saying, You're the caregiver, you have to take care of yourself first. And so it's like, oh, for goodness sakes, I can't do anything, right.

Rosanne 05:54

Yes.

Judy Cornish 05:54

But you know, the complexity, this, what you're you when you talk about it, because you start out in the early stages, you started out with somebody who can't retain information, but but our brains need information, our brains need to be able to write a story about what's going on. And that's what our rational thinking skills do for us, we we gather information from our surroundings, with our intuitive skills, and then we send that information over or some of it over to the rational thinking skills part of our brain. And it makes sense of what's going on. And then that tells us we're okay, everything's okay, I'm safe. So you go from the person at the start in the earliest stages of dementia, who needs to ask questions constantly, and you're getting repetitive questioning, you're getting someone who's following you around asking you and demanding to understand and yet unable to do so. And then fast forward, it might be months, it might be years of caregiving, and now you're dealing with somebody who cannot communicate with you. And you're looking at them and trying to read their needs and their desires, from their facial expressions from their body from their position you're trying to anticipate needs, and there's no ability to communicate. And that's just communication changes. You know, there's there's mobility changes. When we lose cognitive skills, it's just overwhelming what the caregiver has to grapple with over time.

Rosanne 07:24

Yes, but how do you do that? How are you the caregiver who is constantly being followed by your your mother, your father, your husband, whoever is following you, asking you all these questions, and you're losing your mind? How you with that? And how do you redirect that?

Judy Cornish 07:40

To me, the thing that works the best, if you're dealing with that, if you've got somebody who's demanding information from you, you kind of want to prime the pump. So you know, they're at this stage, you know, they can't help it, you know, that brain needs information. So kind of beat them to the draw, and provide information all the time. And this I call it in my books, I call it chatter. And this is not mindless chatter that I'm talking about. And, and I know other dementia professionals will tell you that you should use fewer words, say less use simple words. Honestly, I don't think that helps. I think that backfires, and the person um, because our brains, although our skills change our brains don't be we still need to know what's going on, we still need a story. And so if you got somebody who's following and questioning everything you're doing, instead of being silent, or more silent, be more talkative, and use your rational skills and your memory to express what's going on. So you tell them the story of what's going on all the time. So it's almost like you're narrating what you're doing your narrative, right? Yeah. Because when we lose those rational skills, that little voice in your head that tells you what to expect next, or what we need to do next, it's gone. Or maybe it's intermittent. It's there sometimes and other times not. So, you know, with my clients, I would say, Oh, well, you know, it's time to get up. Oh, look, it's sunny out. It must be Oh, I think it's probably about 11 o'clock in the morning. Isn't it? Lovely? You know, today, it's gonna be sunny. Well, let's look out the window. I do I think, beautiful out today. Well, gosh, what shall we wear? And the poor client doesn't even get a chance to start feeling lost? Because she's got a narrator. And so I lead the person. Oh, well, I know you're going to want his bathroom first. And why don't you just go ahead and use the bathroom and I'll pick out some clothes for you. Because we know we need warm clothes today. And, and so I'm being that little voice in her hand that we need for our brains to feel safe and comfortable. And if you do that from the start from the beginning of the shift or from the first moment when you help them wake up, then they don't begin to feel that last panic. Oh my goodness, what's going on? What's going on? What's happening? What do I need to do? What am I forgetting?

Rosanne 10:09

And then what do you do? I have a friend whose mother calls her all the time all the time just goes like goes like for an hour just goes, how do you handle that? What do you do with that?

Judy Cornish 10:20

You need headphones, you need earbuds .

Rosanne 10:22

Okay

Judy Cornish 10:22

And you need your buds that you can wear around your neck or that you can have one in one year. And then you know, put attach it to your phone and heavier phone, you need a pocket so you can carry the phone without hanging up

Rosanne 10:32

Okay

Judy Cornish 10:32

And then daughter can carry on doing what she needs to do. Oh, right now Mom, I'm washing dishes. And you can chatter and have, you know, it's when when we're losing our memory, even a few moments. It's kind of this this principle of meeting the need before it arises or front loading the day with companionship, okay. So it's the same principle is when somebody must move out of their home into a care facility, I always tell the family that for the first three weeks, they're going to learn, they're going to learn that they've been abandoned, or they will learn that they have not been abandoned. And so for the first three weeks, family should just be there all the time, be there constantly, so that they learned that they have not been left. So you do the same thing in the morning, if your mum tends to do that. And you know, she wakes up at eight o'clock. You call her at 801. Hi, Mum, I just call I just wanted to talk with you. Are you busy? Can we talk for a little while it would be lovely to chat. You know what I'm doing today? What are you doing today?

Rosanne 11:37

It's all pre emptive.

Judy Cornish 11:38

It's pre emptive. And, you know, there's there is there was a book that was written by an author about the love languages, the five love languages,

Rosanne 11:47

The Five Love Languages, right? Yep.

Judy Cornish 11:50

And they went on, there's another book written for people who are experiencing dementia and how to recognize that individual the person's love language, and then meet their needs via that love language. And that is really helpful when you have you, especially with spouses. So like one of my one of my clients that she's the wife is, the caregiver spouse, and the husband was the the person who's

experiencing dementia, and his love language was time spent together. And when when his dementia started progressing, he got to the point where I couldn't have hurt his wife out of his sight for any more than about three seconds. And that is the three second now. That's our psychological conception of now. And when you lose all of your memory skills, your experience of life is in three second increments. And this gentleman he would be, they would be sitting in the living room, after breakfast, finishing their coffee, his wife would get up and say, Honey, I'll be right back. I just need to go down the hall. And you could count it 1000 2000 3000 he'd be on his feet, looking around thinking, where is she? She's gone. She's been gone forever. I have no clue where my wife is. And he would start searching for her. And that behavior, that constant search, where are you? Why? Where did you go? Why have you been gone? You left me that? I think came from that, that love language, you know, the way that the two of them express love? And was to spend time together?

Rosanne 13:28

But then what do you what do you do?

Judy Cornish 13:29

So what I would what I told her, I said the best thing you can do is you wake him up, wake him up from a nap, wake him up in the morning, no, let him sleep as long as possible. But be sure when he starts to stir, you wake him up, you hold his hands, you wake him up with hand pressure, and you wake him up with eye contact, and you be there when he wakes up. And then then you tell him how much you love him. And and make sure that you have you know, like, if you live in the three second now, and you you are at the dinner table with your loved one or you're in a room with your loved one and and they have no experience but the present. If you're not looking at them almost all the time, their experience is that you were ignoring them all the time. Right and that you have ignored them forever. And so so I told her you have to be pre emptive. So you have to begin his conscious experience with your presence with touch and with eye contact. And if you build that in the beginning of the day, then he will need less of it during those subsequent hours. Okay, it lessens the amount of contact you you're you're kind of like priming the pump, filling the need first. You can do this use the same principle when you want to give somebody more of a sense of control. I call it with the dog method. You help them and give them the opportunity to make lots of little decisions. is early in your day or your shift, and then that way later in the day, they won't feel the need to be in control as much. But you can do this with eye contact as well. And just making eye contact regularly and then and holding eye contact to give the message of love, love and acceptance rather than then avoidance or frustration,

Rosanne 15:23

Even with the three second variable even with that. You're so you're still you're still making that contact.

Judy Cornish 15:32

Yup,yup.

Rosanne 15:32

So then what what happens at, you know what you've done, the preemptive, you've done? Okay, well, we'll go back to the you call them call on the phone, you've done the pre emptive. And then an hour later, they call you back.

Judy Cornish 15:42

Yeah, make sure you got your venture run here so that you can carry on, you know, really what mums need is there is she needs more companionship and in a perfect world without the pandemic without isolate them. And you know, this, the isolation people are dealing with right now is killing us. It is killing people who are experiencing dementia at a horrific rate. And it's breaking everybody's heart, anybody who is experiencing this pandemic, with a loved one with dementia. But if if that dog or so I assume mum is living someplace nearby, if the daughter can, you know, use an mp3 player with mom's favorite music on it, something that you just start with, catch a television, a smart TV that you can play mom's favorite shows from back when, in my book dementia with dignity. The introduction is about Hazel, and Hazel, we couldn't figure out how to get Hazel to go to bed at night to go to sleep at night. And it turned out it was Mash, it was the music from Mash. So you know, this, that, that old programming the programming from back when we were that, that that will give you social stimulation, that social interaction that we need. So you can do that, you know, visits early in the day, rather than late in the day will help.

Rosanne 17:11

It's so hard because it's very proactive. as caregivers, we have to be proactive, but we're overwrought. And we're tired. And we're trying to figure all this out as we go along. And at the base of it all, is there still our loved ones that we're trying to care for. So there's always that level of grief and sadness that goes with all of this. And it's hard. And I think that's what adds to the, to the difficulty of this because you're trying, it's like learning a whole whole different code of everything

Judy Cornish 17:46

It is

Rosanne 17:47

And starting over every day

Judy Cornish 17:49

Every day. That's right,

Rosanne 17:51

Because what worked yesterday might not work today,

Judy Cornish 17:53

Might not work today. That's right. And there is no you know, that's what's so difficult is that you don't know which skills are going to disappear today.

Rosanne 18:01

No idea

Judy Cornish 18:02

And you don't know whether this level of memory or this ability to do these rational thinking skills, this type of attention skill is going to be there for a year. I mean, there are times with with people where we would just be we'd be thinking, oh my goodness, rational thinking is gone, the ability to redirect attention is gone. And so this person has a very skewed interpretation of what's true, and they can't let it go. Oh my goodness, we wish they could lose some memory. And yet, it's random. And so we use the caregiver as though you know, the home caregiver who's with a loved one at home. You don't ever get

to hit the ground, fully equipped, ready to live the day. You're always running on an empty tank. And it's cumulative on a Yeah, I, your superwoman. I mean anybody who is living who is a home caregiver, and it doesn't matter if you're caregiving from within the home or you're the primary care, contact from outside of the home, you're you are on the front lines and it is difficult, but you know, part part of a thing that is so hard for us in our culture is we are very comfortable gathering things and skills and ideas and people that we are not comfortable losing or letting go and on so many levels. I mean you could go right back to the language we speak we speak a Latin based language English, it is a language that is based on nouns. So we have subject verb object, we see the world is filled with objects and we the subject interact with those objects and there are other languages that are relationship based that are verb based languages and Latin based languages are not for based their material, their objects. So just by the way we view the world we view success as gathering. And, and allowing things to go away is not success for us. And we see, you know, we like with children, we have a word for childhood, we have a word for adulthood. And we look at the child and we say the child is playing and learning, and gathering skills and experience to grow up and be Fuller, and more capable as an adult. And then we look at adults, and we say, well, adults, adults are gathering skills and accomplishments and assets and taking care of children. And then we turn to our elders. And we say, oh, oh, they're broken adults, you know, she loses your keys all the time, he's not very good at taking care of the house anymore. Instead of being able to say these are this is elderhood. And elderhood is not the time for gathering any longer. elderhood is the time for being and sharing. And so all of that, you know, societal, we feel like we are failures, if we haven't gotten to the end of the day with something better. And that isn't really true. If we have gotten to the end of the day, and we have been able to look that person in the eye, just make eye contact, hold eye contact long enough to say, you know what, I just love you. I love you so much. That is success. And and lately I've been I've been thinking a lot about how we interact, like how we spend time. And I think it's the same principle that you you begin with with dementia, you begin with the person who is demanding information following you around and constantly repeating the same things over and over. And then towards the end of the path with dementia, you have a person who was silent. And and that's when our hearts begin breaking that we have lost them. Yes. That's when we start beating ourselves up saying why didn't I this? When I could why didn't I spend more time Why didn't I? But if you if you know, there's no way out, right? There's no way to escape this? No, it is going to be the what it is its path. Yes. And it's a path that will be personally tragic. But if we put aside gathering and start just being and find success in loving, then that will take some of the heartbreak away. I think once you have somebody you know talking about communication, once the person gets to the point where they can no longer tell you all these stories, because you know how it is that you're the same thing over and over and over again.

Rosanne 22:44

Absolutely.

Judy Cornish 22:45

Right. If I hear you tell me that story about that time we were at the lake one more time. You know, or if you tell me one more time about the time that you gave me a brand new pair of shoes, and I ruined them I was four. So we

Rosanne 23:01

But then that that evolves, and then they don't remember any of that

Judy Cornish 23:05

It's gone. Yeah,

Rosanne 23:06

It's gone.

Judy Cornish 23:07

But where does it continue to live? It lives on in me.

Rosanne 23:12

Yes

Judy Cornish 23:12

I have now heard my loved one. Tell me that story. So many times. I know the words that she literally used. I know the phrases she habitually used. I know that story by heart, the way it lives inside of her heart, right. Okay, now, now is a new time. Now there's a different skill set. Now, I am the memory keeper. And so put aside your grief of what your loved one can no longer share with you. And instead we're the Memory Keepers. And now it's you know, I've seen this so often. You were the memory keeper. And so now you share. So now this is how you find success in a day. If you find a moment where you sit down with your loved one and you say, Oh, darling, go well, you know what, I just remembered something I just remembered when we did. And you tell the story. You tell the memory that they told you so many times. One of my dearest friends, my first client, and she was she was living this far to the end of you know, she was no longer verbal. She couldn't feed herself. She couldn't. She couldn't walk. And I would go to visit her and the caregivers would say, you know, Judy, she won't know who you are. Why you telling me this. I mean, I know who she is, you know, you think I don't know who she is. I can find her. And then they say Yeah, but you know, she can't talk and I think well so I can talk I can you know she, she can't she can't she can't and they're naming they're naming all these losses to me. And I think well, the loss that's the givens we you and I we all know there is going to be loss and there will be more loss. So that's not what I'm expecting. That's okay. And then I will sit down beside her and just sit and I'd be the memory keeper. I can never tell this about her without crying. But you know, she, she would be, you know, curled up in the bed. All their physical needs taken care of, but she's gone living somewhere inside. And I just sit down and I'd say, hey, Mary, you know who I am? I'm Judy. And you know who you are? You're my best friend. And and you and me, we have we've known each other. Oh, let me think how long has it been now, she I think it's been eight years we've known each other. And oh, my goodness, we had fun. You and me. We just we were neighbors. And you and I, we used to, and I would start telling her. And it would take, you know, take about 10 minutes. And at first and tell her what we did together and tell her like the favorite things that we enjoyed together. And then I'd say Oh, and I remember the stories you told me, You told me about your husband. And I would use her words and her phrases and the names of her her husband and I tell her that those favorite stories she told me all the time about their early marriage years. And kids you know, I would say, let's see you had let's let me think I think you had you had three kids. You had two daughters and a son. And this was their names. And you told me Oh, you know, you told me the funniest story, but your oldest daughter, and she did this and, and so it would go about 10 minutes. And she would start to wrestle in the bed. And I'd say can I hold your hand? And then, you know, and I would never just reach out and hug or grab. I'm asking permission, but she would come back to life she would at first she just kind of opened her eyes just momentarily sneak a look at me. Like she couldn't believe I was feel. Okay, who is that? And then pretty soon I hear a chuckle. And the more I told her her stories and the more I used her words, the more she would come back to life. And it came to the point where I would get I would get a

hug. And sometimes she would be comfortable. And you can do this and I you know, I've seen it. But so many times so many times, don't. Don't put your grief aside, you will grieve you will grieve. There's much to grieve that right now you've got a moment, at this moment in time. You don't need to grieve right now. Right now you can make eye contact, tell him tell her you love them and tell them one of their favorite memories. Right? If you can feel the person's heart in great now in the moment when you're when you see that need. That's really the only way to to improve.

Rosanne 27:27

It's beautiful. And I think that's the part that hangs people up. Because you're not going to have this conversation. You're not going to have your quote, typical conversation. How are you? What are you doing? How's things? That's gone?

Judy Cornish 27:42

That's gone. Yeah.

Rosanne 27:44

And you have to meet them where they are. But you have to put all of that extra stuff away. And that's the hard part, Judy, because you get to that point where I know there are times my mother doesn't know she's talking to me.

Judy Cornish 27:57

No, no,

Rosanne 27:58

She's whoever I am. She's okay with me. She doesn't want to run out of the room. Yeah. But she knows it's I know that she knows. She doesn't know that it's me,

Judy Cornish 28:08

Right

Rosanne 28:08

But that's okay. I just sit there. And I talked to her and you know, and then when I leave the room, I'm like, Oh, my God, she didn't even know it was me. But not in those moments.

Judy Cornish 28:17

Yeah.

Rosanne 28:18

Like you said, but it's hard to separate that out. Because that's, that's what leaves you swimming in grief. It's, it's that constant, you're in and you're out. And in those moments when you do make that connection, and it's like, oh, she's right there. And then. And then it's gone in a second. It's gone.

Judy Cornish 28:37

It's gone. Yeah. It's like the window shade goes back down.

Judy Cornish 28:40

The light turns out.

Rosanne 28:42

That's exactly right. And you can see it, you can see it. Yeah. And it's just it's it's, that's what makes it so much harder.

Judy Cornish 28:52

Yeah. But, you know, I think, I think I wish our education system in this country talked more about our skills. I wish we all learned about our different skills, that we have more skills we, you know, here we are reliving life unconscious, of how we're doing it, we could, you could laugh about saying, well, somebody has lost the ability to see. And we think it would be irrational and illogical and unkind to demand that they, you can't see Oh, here, I'm going to point and I'm going to tell you what direction to look, I will take your hand and turn your head so you are facing what I want you to look at, and I'll demand. So we see that that's unkind and illogical. It's ridiculous, but for for my loved one to recognize my face, my voice, my name that takes memory. And if I have lost the skill of memory, I have not harmed those who love me and whom I love. I have simply lost the skill of memory. I just don't have it anymore. And having lost it, I lose much. I lose a tremendous amount, if I cannot remember what has gone before. And one of the biggest things I lose is that if you tell me that you love me every three seconds, how am I ever going to know. And I would see my clients, I would be sitting having a wonderful time with this person. And then then somebody in the family, a daughter, maybe a son, husband, a wife walk into the room. And all of a sudden the beauty of that of my clients spirit, the person that they are that beautiful person that was interacting with me, we just just shut down evaporate. Two things would happen. The first thing that usually happened is the loved one walked into the room. But they didn't have that peaceful smile on their face that all as well. And instead, their face registered as soon as they came around the corner and make eye contact with their loved one. My client they would, they'd have that look of trepidation. Wonder, will she know me? Does she know me today? Is she here today or not here today. And that shut down my client who had been fully present, right up until that moment of seeing the face of somebody come into the room looking worried, or we come into the you know, because because we are grieving, we are heartbroken, everybody I loved from 2010 to my last client who just died, they are all there. And I worked with many people,

Rosanne 31:35

I'm sorry.

Judy Cornish 31:36

And that's a decade, you know, and I know it's harder when it's in your family, but when it's your spouse or your parent, or your child, but that is so painful to be with a person who is finding themselves free to be who they are with and without the skills they are with and without. And then when somebody else comes into their presence with guilt, or fear or worry on their face, and they shut down. That really is to me, it just breaks my heart. So our facial expression is everything when we walk into their presence if they are living in that respect. Now, if they're experiencing dementia with a smaller skill set?

Rosanne 32:19

Absolutely. I actually take a breath before I walk into my mother's room I do I take a breath. And I'm like, okay, shake it out. And then you go in?

Judy Cornish 32:27

Yes, exactly.

Rosanne 32:30

I leave it in the hallway, you have to leave it in the hallway

Judy Cornish 32:33

You have to or you, you, you unintentionally are giving somebody who has limited skills, a huge burden.

Rosanne 32:41

And it's not fair.

Judy Cornish 32:42

It's not fair. But it's not fair, you're going to reap, you know, and that's like with with my books, and with the Dawn Method, at least teach mood management first. And you know, I'll have people because it's different than the dementia relationship. As soon as dementia comes into the relationship, everything is different.

Rosanne 33:02

Absolutely.

Judy Cornish 33:03

And it's the only relationship we ever have where the person, the other person does not have the ability to manage or choose mood. Forget about quantity. And think about quality. If you can get three seconds when your loved one is all they're looking you in the eye and the two of you are looking at each other saying we love each other with even just with your eyes and your words, if she's lost hers. That is success. That is quality. Quantity doesn't matter. You when you you know if you want to call and talk to your mom or your dad or your loved ones say hello. Tell them you know, Mom, I remember when you did this for my birthday, and you did this and this and this. It was my ninth birthday. And then this happened at that time. Oh, Mom, I just appreciate that so much. And I love you so much. And now it's your birthday. And I just want to tell you, happy birthday Mom, how much I love you. One minute is all it takes to deliver the message of love. Not 10 minute conversation with back and forth. How was your day? You know, how's your week?

Rosanne 34:07

Well, and I think it's hard for people because that's the that's the norm. That's the norm. That's how you've always interacted. But now that is going and it's hard for people to embrace that it's different. Yeah. But it just it like you said, Listen, this is it's only gonna keep going. It's progressive.

Judy Cornish 34:25

Right, the skills go. And and I think if we could just separate and see the difference between our loved ones person and our loved ones skills.

Rosanne 34:36

Yes.

Judy Cornish 34:37

I am me. It doesn't matter whether I be whether I lose my eyesight, I'm still me. It doesn't matter whether I lose my ability to walk. I'm still me and it doesn't matter if I lose my ability to recall the past.

I'm still me. And I just need other people to you know, maybe I need someone to To push a wheelchair for me, maybe I need someone to help me bathe. Or maybe I need someone to help me remember, you know, remember for me is what I actually need. So

Rosanne 35:11

Well, no. And you know, then when situations come up, like, like, let's play the I want to go home game,

Judy Cornish 35:18

Right, right. Yeah.

Rosanne 35:19

Judy.

Judy Cornish 35:22

Okay, but that game never goes away until the person is nonverbal. Why?

Rosanne 35:30

Tell me why.

Judy Cornish 35:31

Why? It's because that, you know, when somebody says I want to go home, huh, do not get confused by facts. Forget what home means to you what it means to them, where they once lived, what the address was, what it involve. It was a farm house outside of such and such a village town and they haven't lived there for 92 years. Well, here's what's really being said, When somebody says I want to go home, what they're really saying is, they're saying, honey, I have completely lost my ability to recognize anything familiar, because I've lost my memory. And so that chair right there that I have sat in for 35 years. And that, that, that bed with that bedding that has been mine now for 10 years, or, or this building where it that has been my home for as long as anybody can remember, I've had people who wants to go home, who've lived in that exact building for 56 years. Home means I want to feel at home, I want to feel that I am where I belong. I want that feeling of being wrapped up in everything that has always been the same. And so think of the heartbreak of not being able to recognize what is familiar. And and so what I do, you know, don't resist priming the pump again. And when somebody says I want to go home, please take me home, I'm leaving, I'm out of here right now I'm going, you say, oh home, I know, I wish I was home, you know what my favorite home is? Tell me about your favorite home? What's home for you? What is it like? And you you start to agree with them about the beauty of home. And if you do that, and you like the two of you together can just celebrate home. And then you can say, well, let's have a cup of tea. But both feel better if we have a cup of tea, or, you know, let's have cookies and milk that always makes me feel better. How about you? You know, because it's, it's not about location.

Rosanne 37:37

I know but Judy, I got to tell you at 3:50 in the morning, after after we start the I want to go home cha cha at nine o'clock, I do resort to saying we'll go in the morning

Judy Cornish 37:54

Oh totally

Rosanne 37:54

Just go to sleep.

Judy Cornish 37:56

Yeah, there's nothing, there's nothing wrong with that. There that should not you should not be feeling any guilt at all. Like when somebody has no memory skills or rational thinking skills or intention skills, you know, part of when dementia will take away your ability to direct your attention where you wish to put it, it will take away your ability to redirect your attention away from something that you wish to not be thinking about. And it takes away your ability to maintain your attention on things you wish to maintain it on. Wow. But it doesn't take away attention. As we well know. You know, when people cannot let go with this idea that they want to go home for hours. Never with dementia. Everything's later. You know things. Never say never.

Rosanne 38:46

Right? Right?

Judy Cornish 38:46

Never say you're not going home. So it's like oh, but mom, I'm so tired. I'm so tired. It's dark out. Let's do it. Let's do it tomorrow.

Rosanne 38:56

Well, and see the the other thing is the Oh, it's dark out. I don't care. Well, it's cold I don't care on my car's in the shop. I don't have a car, we'll walk. I mean, we I have it one after another after another

Judy Cornish 39:11

Ask for sympathy,

Rosanne 39:13

Ask for sympathy in what way?

Judy Cornish 39:14

If if you say you start out as cold out then that is without rational thinking. That's exactly the response you're gonna get. You're gonna get the contradictory,

Rosanne 39:25

Okay

Judy Cornish 39:25

Until later stages of tension, but right now you're gonna get this contradiction. It's like, that doesn't matter to me. My needs.

Rosanne 39:33

Yeah I don't care.

Judy Cornish 39:34

I don't care because the need to be at home is overwhelming. It's it's critical. It's the I need to feel safe. Yes. So you know, sympathy is mom that's out. Can I just come climb into bed with you? Because right now you know what? I feel. I'm just so so tired. If you can bring the you're capable and I'm not the

parent will come back. If you have that talk, and you've done your bath, and you can't just fill her with the sense of love and belonging, so that she, she or her need to feel safe and and at home has been met. If she goes back to the same empty room, you're going to get the same response three seconds later, and without memory. So there has to be a change in this situation, like a warm and comforting smell. A warm and heavy blanket, that that you know, getting the person a heavy blanket, light music, a show on TV, somehow, you've got to change their immediate surroundings to get a different response when there's no memory. Okay, you can use catchphrases, and teach a person with a true experience experiential learning and repetition, you can teach that you can redirect. So if you have somebody who cannot let it go, you need to add something to the environment to the situation that will give them a different prompt. So go back to the bedroom with if it's in the middle of the night, go back to her bedroom with her and say, oh, we'll you know, Mom, let's do that in the morning. Because right now it's just cold and dark. I'm so tired. I'm afraid I would take a wrong turn. But here, you know, why don't why don't we put this blanket on the bed. And I'm going to put on a light. Let's play music quietly and just change the environment to you have to change something in that sensory stimulation. It's going to be smell a different color, a different amount of light, a different feeling. Maybe it's a stuffed animal that's just fun to cuddle. They you know, a weighted blanket. Music For some reason, I can't I can't tell you why I have no idea of why this works. But when somebody is experiencing dementia to hear music inside of your head is a totally different experience than listening to music in a room. Hmm. So one of my clients couldn't ever go to sleep. They would try to put her to bed at night and she'd say, no, not until mommy and daddy come kiss me tonight. She had Alzheimer's. So she believed that she, you know, her memory was a clean swipe. Like she thought she's like four or five, six years old. So I said to the caregivers, okay, fine. She needs she needs headphones. And then she needs we gave her like sleeping music. It was hymns. And it was the hams that made her feel loved and safe. And we put them the caregivers said okay, well here, let's put your headphones on. And you listen to your music until mommy and daddy come Kentucky into the meantime, I'm going to make sure your blankets on here, so you're not cold.

Rosanne 42:40

Wow.

Judy Cornish 42:41

And she would go to sleep. And that was the only way she could go to sleep was listening to her hands. But it had to be in your ear phone start out very carefully. So it's like, how does this work? This is new, you know? Like, I'm not sure mom, somebody gave me this, like, what do you think and you put it on your ear and you put it on her ear and the two of you are listening jointly. And then you say okay, here, you hold them for a bit, and you put it on her. And they The music is it's so freeing. There's there's something that just connects for them to where they will accept but but you have to share it to begin with. And earbuds generally won't work with the older generation now.

Rosanne 43:20

Well, because they're uncomfortable. And you know, it's like it they fall out. It's it's tough, and they can't tell you if it's comfortable or not comfortable. So that doesn't help. Yeah, that's fascinating.

Judy Cornish 43:31

Yeah. And just the big, the soft Apple headphones, they help.

Rosanne 43:35

Now what do you do with people who don't want to eat? It's the eating the drinking? They just won't do it?

Judy Cornish 43:40

Oh, yeah. Don't expect them to ask for help. Especially if it's a parent. Just like Hey, Mom, could you try this? Can you like, just tell me? Did I put enough salt in this? You can get one mouthful. Right? And if she says, we think so honey, wait for her to forget, give it a minute, and then go Oh, she could you try this just just like just tell me if I put enough salt in this. And she'll be like, yeah, I think you did. Okay. And then wait another minute, you get three bites in work with the memory loss.

Rosanne 44:15

Well in that and that's basically the whole I mean, that's it in a nutshell. meet them where they're at work with what you have, but you have to change your expectation and you have to leave what you've always gotten.

Judy Cornish 44:25

Yes

Rosanne 44:26

You've got to just throw that over your shoulder and go forward.

Judy Cornish 44:29

Right, right. It's a treasure hunt. You're you dementia is a treasure. You were I tell my staff, you're the beauty detective. The joy of being with a companion who is having fun is a meme that feeds our souls. So, so that it's a treasure hunt. You are you're you're looking you're searching for what is beautiful to that person. Somebody who wants to go home, you're searching for what makes them feel loved and safe and at home. Somebody who won't eat Then appeal to something else. If you want them to eat look for a way that they can help you, that's our need to be of value have something to offer and in a relationship, I think a lot of the time where people just get plain old cranky is because they have nothing they never get opportunities to give, to offer something or to give something of value. And as soon as you let somebody help, yeah, that is changes the dynamic, be needy, you know, be tired, right? Be honest. Yeah,

Rosanne 45:35

We all we all want a purpose.

Judy Cornish 45:37

Yeah. And I, one of my caregivers came up with a pitch. We have a client who she was just nervous, tense. And it was Christie that came up with this. And she said, Oh, we don't have any couples at all. Soon as I get there, I come in and I said, Oh, man, you don't marry what a day. I? Their traffic was terrible. Can I have a hug? I just really need a hug. Wow. And that's how we got this woman to accept hugs. But she was giving them she was helping us and she went from being tense, uptight and cranky. To to welcoming people who would show up that she could offer a hug and be of help.

Rosanne 46:21

How about that?

Judy Cornish 46:22

Yeah.

Rosanne 46:24

Well, and that was my other question. When they when when that dark when that dark comes? What do you I mean, because you don't know what to do. And it's, it's, it's the well. This is awful. You know, how do you and I think I told you that one time that she was, oh my goodness, she was not in a good mood. And I left and I changed my shirt, and came back. And I was like, hey! How you doing?!

Judy Cornish 46:49

That's just brilliant. See, you're working with memory loss that and and think, think about beauty. So what is it? What do we do to give ourselves a treat? One of my clients, it was tea. And it just broke my heart when I realized he had forgotten that it was tea. That made him feel better. That was his self healing. Another my clients, it was a hot bath, and it broke my heart and she forgot that it was hot baths that made her feel better. And so you know, when I figured that out with him, it was like, oh, man, what a day I'm having. Can we just not? Can we just stop and have a cup of tea? Would you like tea? And he didn't know what she was anymore. He didn't know what that word meant. But he sure knew what I was saying. He was reading all of my honest,

Rosanne 47:36

Emotions, face, yeah, yeah,

Judy Cornish 47:38

I Just need a cup of tea. I just need to sit. We just sit for a minute. Just relax together.

Rosanne 47:44

Yeah. And you flipped in?

Judy Cornish 47:46

Yeah, elf care. self care.

Rosanne 47:49

Hey, why not? And when when? Sometimes when they may get hooked on the I don't have enough money. I don't have enough clothes. I don't have enough. Where is my What? What is that from?

Judy Cornish 48:04

Right. That's lack rational thinking scope.

Rosanne 48:07

Okay, okay, so it just circles around.

Judy Cornish 48:10

It circles around. So like, you're going to use memory skills to fix it. And so he says, Oh, no, no, no, we can't do that. We don't have enough money. And then I say, oh, that used to be true. You're right. We used to have trouble. But remember you this happened yesterday. That happened the bank called it's all okay. Remember, you told me about that? We fixed it together?

Rosanne 48:32

Do you say remember? Or do you just say we did this?

Judy Cornish 48:36

I real I now yeah because that's, that's actually a really good little sub topic to say remember, is so habitual for us. Right And you get a question. That's habitual. That is normal conversational interaction. It's going to happen all the time. All right. What you do is you catch yourself saying remember we did yesterday, right? Especially if it's like your spouse, you know, this is just built in. Oh, but you you know, we took care. So you catch yourself saying remember, and then you carry on by answering your own question, for instance. Oh, but remember, yesterday, we talked we went to the bank yesterday, and we got that all sorted out. And it was that was so smart to you, you know, now you make it.

Rosanne 49:19

Okay, so it's not it's not the end of the sentence. It's not Don't you remember it? Oh, remember we went to

Judy Cornish 49:27

Yeah, and, and then you can follow that that up with remember? Oh, I remember when you did this, or you said that this is part of my chatter. Okay, this is this is adding information. So if somebody is concerned about something, that is not true, their version of reality due to lack of rational thinking and memory is inaccurate, and it's making them uncomfortable. Yes. So you don't correct them. You don't say you're wrong, or you're confused. You know, there's no No correction here, because they have, they have arrived at that conclusion, based on the skills they have. So you're not going to change their skill set this, they arrived at this conclusion about what's true, honestly, according to their skills, and some more information, okay?

Rosanne 50:20

So go with it and add another piece to make it work to make it work, for where you're at

Judy Cornish 50:26

To make it comfortable you all you want to do is make their reality comfortable.

Rosanne 50:31

But it also, it sounds very stage oriented, you could do that in the earlier stages, but not in the later stages, later stages, that's not going to fly.

Judy Cornish 50:42

No

Rosanne 50:42

So you have to you have to adjust your I don't want to say treatment, you have to adjust your interaction, your response, as it goes through. You have to adjust your responses to it.

Judy Cornish 50:56

Yeah

Rosanne 50:56

But you have to be aware of the changes.

Judy Cornish 50:58

You do.

Rosanne 50:59

Okay.

Judy Cornish 50:59

Yeah. Yeah. You know, it's it's far more difficult to deal with somebody who's losing skills than somebody who's gaining skills.

Rosanne 51:08

Absolutely.

Judy Cornish 51:08

Raising, raising children is not easy

Rosanne 51:11

Right.

Judy Cornish 51:12

But we all thought it was really difficult to deal with toddlers and teenagers until we began to deal with dementia. And then we realized that it actually is a lot harder to deal with losing skills.

Rosanne 51:23

Absolutely. And and what do you do with the person that's starting to lose the skills but doesn't realize it? And doesn't want the help? What do you how do you

Judy Cornish 51:32

That, I call it caregiving by stealth. And, you know, this is the person who's experiencing dementia, but they also have anosognosia. Anosognosia is when the person is unable to comprehend that they're losing skills, because the dementia is affecting that part of the brain that allows us to be self aware, or to have self knowledge. So that individual to me, when you when you begin working with somebody who's experiencing dementia, that's the primary question is this person able to perceive that they're losing skills, and are going to need help, if they can perceive that if they're, if they don't have anosognosia, you'll have somebody who is more fearful and more and grieving, as, as they should be, right? beginning to live with dementia, if the person is anosognosia, you're going to have somebody who's becoming paranoid and angry. Because if we can't be aware of the changes occurring, and that they're happening inside ourselves, therefore, everybody around you, is trying to trick you, right? Taking your stuff, losing your stuff, stealing, and trying to blame you. It's a totally different approach. Yeah, the person who has Anosognosia, we give them friends and their friends just kind of happened to be in the neighborhood, and happened to like doing the kind of same kind of things they do, you know, you really have to approach it differently. If the person has Anosognosia, you have to be extremely careful of, of their dignity and autonomy. Because if you push to provide care, they will push back and refuse even more care be more at risk.

Rosanne 53:21

So you really have to find that balance. And I would think that that also goes into the pseudo dementias. How do you know that it's not depression and anything else? But it's like, Where's that crossover? And how do you distinguish?

Judy Cornish 53:36

I'm always looking for skills.

Rosanne 53:37

Yeah,

Judy Cornish 53:37

You know because I've had a lot of a lot of quite a few times, I've had people referred to me, and, and I'll have a medical doctor saying this is depression, or this is dementia. And I'm looking at it and thinking, you know, I just I don't think so I'm not so sure, quite often, I've had people referred to me for care, people who are in their 90s. And honestly, this is a person who has not lost any skills at all, except they are tired. And so they are choosing they're like they're saying to everybody around them, not in so many words, that they're just saying, Go ahead, you make that decision, right. I really don't care. I'm, you know, I'm just fine with everybody else doing the thinking for me, everybody at the rescue, you can do the remembering for me, you can do the interacting personally, and you'll see people who become some people become crankier, and some people become more peaceful. And I think that's just how we choose to go through life.

Rosanne 54:39

Yeah, that's their temperament. Right? Yeah, I believe that.

Judy Cornish 54:43

Yeah. And then other times, other times, it's a younger person, but like, I'll see judgment or rational thinking skills clouded by other things like depression. So grief, that is so great. They're not engaging, but it's really it's a grief problem, not dementia.

Rosanne 55:04

And how do you distinguish who who distinguishes that? Because, you know, doctors may or may not even engage, it may not even think it's a big deal. It's fine. You know, there's a lot of misinformation. So who do you ask?

Judy Cornish 55:17

You know, if a family brings somebody to leave, and they want assistance, and they want care if I think that person is grieving, and doesn't have dementia, I meet the needs of the person. Right. You know, we just try to match them with a caregiver that know

Rosanne 55:34

Well, sure, but But what about the people that go to a medical doctor?

Judy Cornish 55:38

I know

Rosanne 55:38

And the doctor blows them off. Do you go to a neurologist? Do you do a Jerry could you see a geriatrician? Who do you see, because it is? It's not an easy process?

Judy Cornish 55:49

It's a horrible process. Mm hmm. I you know, I think the lack of training for medical professionals, particularly doctors is horrific.

Rosanne 56:00

Yes. Yes, I agree.

Judy Cornish 56:02

And there there is a paucity of good medical expertise. For those who are beginning to experience various types of dementia. Mostly, I think you're just going to get frustrated. And I think you just if you love somebody, and you're worried about their cognitive abilities, changing, read my books and learn to recognize our human skill set, our cognitive skills, learn to recognize rational thinking and intuitive thinking, learn to recognize the difference between our remembering stuff experiential self, learn to understand the different types of attention and what happens when somebody loses the ability to direct their own attention, learn about the mindlessness tools, learn because the, you know, really to become more aware of our own cognitive skills enriches our own lives. It makes us better people, it makes us more comfortable people are comfortable with ourselves. It equips us to be the caregiver of somebody else who's losing these skills or some of these skills.

Rosanne 57:05

Yes.

Judy Cornish 57:06

And I think we just can't turn to the medical profession in this country, and expect help. Really, really good help. All the time, no matter where we are. It's just not available. So we equip ourselves.

Rosanne 57:20

No, I totally agree with you. And I always think it's that if you have that feeling that something's wrong, something's probably wrong. And you need to just keep, you just need to keep going. Even, it's harder, because you don't want it to you don't want that feeling to be right. You don't want this to be happening. So you go to the doctor, and they go, Oh, you're not to worry about it. My I had one doctor say, unless she gets lost when she's out you don't have to worry about it. And I thought, What are you insane?

Judy Cornish 57:47

I've taken clients, so many times, I've taken clients to their GP. And the GP says, she's totally fine. You guys are after her money.

Rosanne 57:55

Oh, my God.

Judy Cornish 57:57

Oh, please. Oh, please. Yeah, if you spent more than three minutes in the same room with this individual, you would see what we see.

Rosanne 58:05

Right.

Judy Cornish 58:06

If you were to actually just spend one hour with this individual, you would know the depth of the skills lost.

Rosanne 58:14

Yes.

Judy Cornish 58:15

And the risk this person is living with,

Rosanne 58:17

Yes

Judy Cornish 58:17

And their ability to keep themselves safe. So I almost feel like getting going to a GP to get a diagnosis you with the mini mental. If you were an elementary school teacher, you will Ace that thing for years, you know?

Rosanne 58:31

Yeah. I, I think you just you have to follow your gut. And you have to, you have to actually acknowledge what you're seeing. And

Judy Cornish 58:40

Yeah

Rosanne 58:40

What? And that, I guess that would be my my question is What advice would you give to somebody who's who's starting to see changes, and doesn't know what to do and doesn't really want to see the changes? What advice would you give to that person, the daughter, the son, the husband, the wife to go forward? What would be the first thing that you would tell them to do? Or, or a set of things that you would tell them to do?

Judy Cornish 59:09

Honestly, I am this sounds terrible, but I'd say please read my books.

Rosanne 59:13

Okay.

Judy Cornish 59:14

Because because what you're what you what you're afraid you're seeing is a loved one whose cognitive skills are changing. That's not medical brain.

Rosanne 59:25

Right? Right.

Judy Cornish 59:26

You be honest with yourself. You're seeing somebody who's making bad decisions when they didn't used to, you're seeing somebody who's getting focused on silly things and unable to let them go. You're seeing somebody who doesn't remember what you know, they used to know and they ought to know, that's not medical, those are cognitive skills. So if you're loved one is going to lose skills you need to learn what skills do we have as human beings, because it's not taught in school. We do not learn about our cognitive skills in school. You can't go to college. To learn about it, you can't go to medical school and learn about it. It's it's really not something that's addressed by our modern education. And so if your loved one is going to go through these changes to their ability to use specific cognitive skills, and you want to help, and you want to walk that journey with them, you will have to learn about these skills. Because if you, if you don't understand what they're no longer using, you won't be able to capitalize on helping them use what they are using. You know, if you don't understand that their intuitive thinking skills, equip them to read, every nuance in your tone, is the most fleeting expression across your face. They're reacting to that you when you need awareness of the importance of that. And if you don't understand the difference between seeing, being able to follow a sequence to prioritize ideas and actions or to recognize cause and effect, you'll think your loved one is being difficult when you'll try to explain things to them. And you'll just irritate them and embarrass.

Rosanne 1:01:02

Right.

Judy Cornish 1:01:03

If you don't understand what anosognosia the inability you won't be able to understand when they keep saying I'm fine. I don't need any help to stay out of my house.

Rosanne 1:01:13

Right. Right. And then the kids go, well, forget it. I'm not going. I'm not gonna do anything. She just yells at me.

Judy Cornish 1:01:18

Yeah, right. Right. Yeah. Yeah. So I, you know, I just I

Rosanne 1:01:23

Be informed

Judy Cornish 1:01:24

Be informed. Yeah, yeah, these are cognitive changes, and they're irreversible. your loved one is walking a new path. If you want to join them, you need to understand what's happening to them. So, and, and you know, on the flip side of all of that, is, once you understand the skills you're using, you can make it beautiful, not all the time. But you can you can bring in those moments of beauty and really, when you think about it, when you look back over over I look back over 60 years of life and, and friends and family and loved ones and companionship. Do you remember great long hours of time?

Rosanne 1:02:05

No.

Judy Cornish 1:02:06

You remember very specific, beautiful moments that that stay with you from these are moments from decades. So give up quantity and start and start focusing on quality. There's still quality, there's still beauty to be had as you walk forward with dementia.

Rosanne 1:02:24

A big thank you to Judy Cornish for being my guest today. For more information about Judy, visit theDawnmethod.com. I hope you enjoyed our podcast today. Head over to daughterhood.org and click on the podcast section for show notes including the full transcript and links to any resources and information from today's episode. You can also find us on the Whole Care Network as well as anywhere you listen to your podcasts. We are also on Facebook, Twitter, and Instagram at [daughter hood the podcast](https://www.instagram.com/daughterhoodpodcast). Feel free to leave me a message and let me know what issues you may be facing and would like to hear more about or even if you just want to say hi, I'd love to hear from you. Also a very special thank you to Susan row for our theme music, the instrumental version of her beautiful song *mamas eyes*, from her album *lessons in love* that you can find on the iTunes Store. I hope you found what you were looking for today, information, inspiration, or even just a little company. This is Rosanne Corcoran. I hope you join me next time in *daughterhood*.