A Social Worker's Case Study on Forgiveness in a Senior Care Facility: Reflections on Alzheimer's, Trauma, and the End of Life

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Abstract:

Typical symptoms also include depression, a distorted perception of reality, anxiety, paranoia, and disorientation in time and space. This is because the brain cannot cope with abnormal clusters of proteins that form during the disease. It cannot degrade them, so it tries to "store" them and gradually stops functioning properly. The public often perceives Alzheimer's disease as a normal part of aging, but that is a mistake. Although its occurrence is associated with age, it is not an automatic consequence of getting older. Ordinary forgetfulness or slight disorientation in old age does not necessarily indicate pathological changes in the brain. More than forty-six million people

worldwide suffer from the "disease of forgetting." In Slovakia, there are approximately sixty thousand diagnosed patients, and that number is increasing. The condition is increasingly affecting younger people, including those in their fifties.

Digital Dementia of Middle Age

Well-known Bratislava-based geriatrician Peter Belan has pointed to a new form of "digital dementia" among middle-aged individuals. Over the past twenty years, he has observed a decline in their ability to remember everyday things that people used to recall with ease. "Thanks to technology—especially mobile phones—we are becoming mentally lazy. Our cognitive skills are weakening, and we stop training our memory. I cannot yet estimate the consequences of this phenomenon, but I suspect it will result in a higher incidence of dementia in the coming decades," explains the doctor, who has more than fifty years of experience treating various forms of dementia. He adds, "Society is unfair when comparing young and old people. When a young person forgets something, it's called absent-mindedness. But when an older person forgets, people immediately suspect dementia."

Risk factors for the early onset of Alzheimer's include being overweight, obesity, diabetes, high blood pressure, and a sedentary lifestyle. On the other hand, protective factors—besides a healthy lifestyle—include personal success and life optimism. Genetics play a key role. Alzheimer's disease has a significant social impact. In the home environment, each affected person typically requires care from two people. In social service facilities in Slovakia—where around thirty thousand seniors live—about half of the residents suffer from Alzheimer's disease or a similar form of dementia. Some senior homes report up to two-thirds of clients with Alzheimer's. The real number of people affected by pathological "forgetfulness" is unknown. Often, the disease is only definitively confirmed by autopsy. An increasing number of experts are linking Alzheimer's directly to unresolved trauma.

A Desire to Die

Mrs. Jana was admitted to the senior care facility of the Evangelical Diaconia Center on Palisády Street in Bratislava on her 80th birthday—over ten years after she began forgetting and experiencing frequent disorientation. She had been a widow for fifteen years. Her two daughters brought her to the center. The whole family had good social standing and appeared happy and well-adjusted. "Learning a person's entire story from birth is part of the process of accepting a senior," explains social worker and director of the retirement home, Beáta Dobová.

Everything seemed fine. Jana had five children, all with university degrees and stable jobs. All of them described their mother as a caring and family-oriented woman. However, in recent years, she had started reacting to men with uncontrollable aggression as her memory faded and her disorientation grew. No male caregiver or maintenance worker could approach her without it ending in screaming. When a social worker asked her daughters about any past negative experiences their mother might have had with men, they both shook their heads, claiming she had lived a good life.

In her first months at the facility, Jana was still able to communicate, walk, and eat independently—until her condition suddenly began to deteriorate rapidly. She no longer recognized her own children, stopped speaking, and remained bedridden in a fetal position, needing to be fed through a syringe. This vegetative state, in which people usually pass away within weeks, lasted over two years for her. Something was preventing her from dying.

This unsettled Mrs. Dobová, who once again urged the family to have an open conversation about their mother's life. That's when a well-guarded family secret finally came to light. For forty years of marriage, Mrs. Jana had been brutally abused by her husband every night. By day, they appeared to be the perfect, deeply religious family. By night, it was hell at home. Jana lived two separate lives. According to her children, she never wanted to talk about the domestic violence. Her problems with mem-

ory and disorientation began shortly after her husband's death fifteen years earlier.

"The human mind searches for ways to cope with trauma. A person suppresses painful, unresolved experiences and gradually forgets, until they forget the whole world—and die," explained a physician in relation to how different forms of dementia may arise. The care workers began communicating with Jana more through touch, whispering into her ear, gentle caressing, and expressions of empathy—all techniques from the validation therapy approach developed by American social worker Naomi Feil. "After a few days, she began responding with her breath and coughing. She was in the fourth and final stage of dementia. We told her that life is hard, and that we need to forgive," explains the director of the facility. Within four weeks, Jana passed away peacefully.

What a Therapeutic Lie Can Do

Older people are physically and mentally fragile. They are like icebergs in the ocean—what we see is just the tip, while everything essential is hidden beneath the surface. This is true both for healthy seniors and for those who are disoriented, lost, and tucked away in their own world—a world they retreat to in search of memories, joys, and the past. The need to come to terms with different life stages—childhood, youth, middle age, marriage, parenting, work, and interpersonal relationships, which are often filled with crises and traumas—is a natural part of aging.

If a senior remains well-oriented in time and space, if their mind and memory still function, and if they are capable of reflecting on their life, naming experiences, evaluating them, and—most importantly—offering or asking for forgiveness, they have a great chance to live to a good old age. However, disoriented people, especially those in the middle stage of Alzheimer's disease onward, are locked in their inner world of memories, stories, and traumas. This world is hard to access from the outside. Yet, just like healthy seniors, they need to process their lives, give meaning to their life stages, come to terms with loss, and gradually let go of past certainties.

Seventy-eight-year-old Vladimír arrived at the social care facility on Bratislava's Palisády Street accompanied by his son. He had held high-ranking positions in Slovak healthcare all his life, which is why his name, like those of all the other residents of the Evangelical Diaconia Center, has been changed. He was disoriented and diagnosed with Alzheimer's disease in its early stage, when people can still use their intelligence to mask memory gaps and disorientation. For example, if he forgot whether he had already had lunch, he would go to the head nurse and ask what program he had left for the day.

Over his two-year stay at the facility, Vladimír progressed through the second and third stages of Alzheimer's, and then his condition suddenly worsened. He began bleeding from body openings without any apparent cause. Even the paramedics had never seen anything like it. The bedsheets were always soaked in blood. They were only ever able to help temporarily. Like Mrs. Jana, he couldn't die.

Vladimír's son visited him every day. During a conversation with a social worker, he revealed that Vladimír also had another son who had completely cut ties with their father years ago. He blamed him for the premature death of their mother. The bad relationship with his estranged son tormented Vladimír deeply. Despite the social worker's pleas, the angry son repeatedly refused to visit.

"We didn't know what to do—Vladimír was deeply troubled, so we decided to use a therapeutic lie," the social worker explains. "We told him his son had called, that he wanted to see him but couldn't come because he was abroad, and that everything was now okay between them." Vladimír began to cry—and died within a week. He experienced the feeling of forgiveness and reconciliation.

Unresolved Trauma

The staff of the Evangelical social care facility are trained to communicate with disoriented individuals suffering from various forms of dementia. As part of their program, they talk with clients about difficult life experiences and emphasize the importance of forgiveness—toward themselves, toward others, and, for those

who believe, even toward God. They all agree on one thing: the hardest form of forgiveness is forgiving God.

American social gerontologist Naomi Feil claims that if people are helped to process their traumas, it can slow down—or even stop—the accelerated progression of dementia. "A good outcome of working through a senior's trauma can be a good death. We are not a hospital where people are treated—we help people in the final and most difficult stage of life come to terms with this phase," explains the facility's head nurse, Marta Takáčová.

In her research and years of experience working with seniors, Feil found that when individuals carry unprocessed trauma through each stage of life and into old age—like a heavy backpack—these unresolved burdens can lead to a faster onset of disorientation and forgetfulness in later years. The inner turmoil, conflicts, and crises that are never resolved remain like unfinished tasks, accumulating until the final stage of life. At that point, people can no longer resolve them on their own.

Painful emotions that were once suppressed or ignored become more intense in old age. Seniors lack the strength to process them, and instead of experiencing a "blessed old age," they face memory loss and a quicker death. If we do not consciously deal with our problems, the unconscious eventually takes over. According to staff at social care facilities, disoriented people with dementia often have multiple life stages unresolved, not just one.

"We don't become disoriented if, at every stage of life, we find an effective way to process conflict," says Beáta Dobová. "For an aging person, Naomi Feil argues, it's easier to escape the most difficult final stage of life into gradual forgetfulness than to confront unprocessed trauma."

As we were leaving, we spent a little time with Iveta, an 86-year-old former clerk from Slovenská sporiteľňa bank, originally from Vranov nad Topľou, and Alena, an 89-year-old former waitress from Levoča. Both suffer from moderate Alzheimer's disease. Most of our questions were met with a smiling "I don't know." They said they weren't taking any medications, hadn't eaten yet, didn't know what time or day it was, and felt troubled by forgetting their grandchildren's names or the actors in TV shows.

They no longer really wanted to visit their children or grandchildren at home. They had found their home in the care facility, where they are looked after, talked to often, and loved. Sometimes, when they feel like going somewhere, they sit at a replica bus stop with printed arrival and departure times for trolleybuses number 203 and 207 that is located by the facility's exit. After a while, caregivers, nurses, or social workers come and sit with them, talk about their wishes, worries, and needs. Then the women usually get up and either go lie down or take part in one of the therapeutic activities.

The Nun Study

American social worker Naomi Feil built on findings from the well-known "Nun Study" led by neurologist David Snowdon. The study involved 678 nuns from the School Sisters of Notre Dame congregation, aged between 75 and 107 years. It sought to explore the connection between lifestyle factors and aging, with a special focus on Alzheimer's disease and dementia.

All the nuns kept diaries for over twenty years, which researchers were allowed to access, and they also agreed to post-mortem brain examinations. The study revealed a surprising finding: a large group of nuns whose autopsies confirmed brain damage typical of Alzheimer's disease had shown no signs of disorientation, memory loss, or other Alzheimer's symptoms during their lifetime. In contrast, another group of nuns—whose brains showed no pathological changes—had behaved in a disoriented manner and exhibited symptoms of dementia.

Based on the autopsy results and analysis of the diaries—where the women recorded their life attitudes and how they coped with personal suffering—Feil concluded that those who did not suppress their problems, but addressed them, talked about them, named them, and above all, practiced forgiveness, showed no symptoms of dementia, even when their brains were physically damaged. Conversely, nuns who did not work through their issues exhibited signs of confusion and disorientation, despite having healthy brains.

According to Dr. Belan, Alzheimer's disease is, in a way, nature's act of mercy toward humans. It helps them forget pain and trauma they are unable to resolve. "I've never seen a dementia patient suffer a breakdown or a sudden health collapse upon receiving tragic news, such as the death of a partner or child," the geriatrician explains. "There is sorrow, of course, but not a collapse. It points to the body's regulatory mechanisms, which protect people from further pain during major losses near the end of life. It filters everything heavy into forgetfulness. I have treated several people who survived concentration camps. Despite experiencing immense trauma, they lived full lives into their nineties or even past one hundred, with full mental clarity. What they had in common was that they were able to process that pain within themselves—even if they couldn't always talk about it."

In conversations with healthcare professionals, social workers, psychologists, and special educators across several senior care homes, one key word consistently surfaced when discussing dementia: forgiveness. This seemingly "simple" act is a vital key to a healthy mental life. It is a universal response to unresolved life issues within each of us.

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