

By Pamela Mellotte

The workshop at Holy Trinity Episcopal Church (Covina) on Saturday, May 22, provided broad perspectives on Alzheimer's disease, from the chemical physiology of the disorder to thought-provoking philosophical and spiritual implications. The event was chaired by the Rev. Judith Heffron, Rector of Holy Trinity, who provided the video, *Plain Talk about Alzheimer's Disease*. The invited speaker, Rev. Donald Koepke, director emeritus of the California Lutheran Homes Center for Spirituality and Aging, began the program with a brief video of the influential existentialist psychiatrist, Dr. Viktor Frankl, talking about what it means to be human. Together the two videos touched upon the world of concerns we have about this disease.

The crucible for the morning's exchange began with Frankl's contextualizing the "being" of his patients suffering psychoses within the overall human need for meaning and values. Frankl, whose



best known book is *The Search for Meaning* (1963), believed that "being" is the totality of existence, the "essence" of humanity. After the video, Koepke noted that Frankl's belief that humanity's innermost core always remains in relationship to God contrasts

completely with the prevalent American mindset epitomized in Rene Descartes' cogito ergo sum: "I think, therefore I am."

Koepke recalled that in his seminary days, being "created in the image of God" was linked to the ability of the human to reason. Frankl suggests that, like Job, all of humanity can be robbed of everything, including health and loved ones, and yet a human relationship with God continues to exist as long as there is breath: "The devil can take from Job everything that he has, but not who he is. I can have a high IQ. I may have the ability to talk, or to think, all of which might be taken away by disease, or by Alzheimer's or by Mephistopheles. But the core of the human, who that person is, can never be taken away. It is unassailable."

Bringing the idea home, Koepke described the final stage of Alzheimer's--the "Alzheimer's stare"--and the sense of friends and family that the person they knew has left them. The disappearance of the outward signs of personality in persons with AD (memory, integration of past experiences, a concern for the

future) does not mean that the person's internal core within has also died. Anecdotal evidence by both Rev. Heffron, regarding her late-husband, Patrick, and of Koepke about his late-father and a woman named Dorothy whom he chaplained pointed to evidence of a human core that can still be seen and touched in the late stage of the disease. We don't have to be able to relive the past and anticipate the future in conversation to achieve relationship. As Heffron put it, "there is a lot of effective communication that does not need words."

Specifics provided in the video *Plain Talk about Alzheimer's Disease* included the areas of cognition that are tested in diagnosing Alzheimer's and other dementias. It described many of the behaviors that are seen in the progression of the disease and suggestions were given to help in communicating with people with Alzheimer's. These included staying in the present with the person, joining their reality, empathizing with the emotions they are expressing and drawing on their early life experiences to relate to them.

Most of those attending the workshop came with personal experience of a loved one changed by Alzheimer's; they came to learn by sharing stories and insights, asking questions and finding common ground. The result was a candid and warm exchange that seemed to alter the perspectives of everyone in the room. Koepke reminded us that the church is a natural site for the dissemination of information about the disease because we believe that being human is more than cognition; being human is based on being loved by God. Thus the church has the opportunity for ministry to persons with the disease, as well as their families and caregivers.

*This is one congregation's first step towards an intentional ministry to those suffering from the effects of Alzheimer's disease. What are steps that your congregation has taken? What kind of help do you need for your congregation to be more effective in ministry to older adults? **To share your ideas email me here.***

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