

John Dickson (studio)

That's a funny moment from the Golden-Globe winning TV show, *The Kominsky Method*, starring Michael Douglas and Alan Arkin.

Douglas and Arkin played Sandy and Norman, two Hollywood success stories coping with the decline - physically and professionally - associated with growing old.

Together, they navigate a much younger world, while critiquing each other's journey to the final curtain call.

The Kominsky Method is one of those shows about growing older you can describe as ... funny because it's true (or at least that's what Director Mark tells me).

It's not the only Hollywood examination of growing older.

The Golden Girls, Grace and Frankie, Going in Style, The Bucket List, Last Vegas, Space Cowboys, The Best Exotic Marigold Hotel.

Each asks their audiences to believe that older people still have lots to give - or get - from life before they shuffle off this mortal coil.

But do we believe it?

There are plenty of signs we're trying to run away from aging or at least cover its signs.

The global cosmetics market is worth between 300-540 BILLION dollars in 2022, and it's expected to grow 3-7% each year until 2030.

We aim to train age away ... world-wide, adults aged 35 to 54 are the equal largest age group at the gym - 31% of an estimated 185 million gym memberships.

And, when all else fails, we turn to surgery... according to The International Society of Aesthetic Plastic Surgery, the most common cosmetic procedure for men (and the second most popular for women) is eyelid surgery.

And that's before we introduce the 'D' word - not death but dementia, which in our aging society is on a staggering rise.

The aging process is one of the most fundamental facts of our world, of our lives individually.

There's nothing we can do about it. So denial, avoidance, reversal just aren't options.

We need to find a better approach than closing our surgically enhanced eyes to growing old.

I'm a 55 year old John Dickson and this is Undeceptions.

Theme

John Dickson (studio)

When dementia makes a man aggressive and irritable, should he be treated like a naughty child?

If a woman can no longer dress herself or hold a conversation, is she any less valuable to society?

And if a person forgets their own name and story, are they any less human?

These are the sort of questions asked by Professor John Swinton.

Dr Swinton is at the University of Aberdeen in Scotland and is an internationally recognised expert in the fields of pastoral care and counseling, with a particular focus on the elderly and mental health.

He's got numerous books and scholarly articles under his belt, including Christianity and Disability ... Re-imagining personhood: dementia, culture and citizenship ... and Dementia: Living in the Memories of God.

John Dickson: John, thank you, uh, so much for joining us. Um, you are the founder of the Aberdeen University Center for Spirituality, health and Disability. Uh, I guess I want to ask, what on earth is that and what drew you to that work specifically?

John Swinton: That's a very good question. What on earth is that? Because university centers can mean all sorts of things, but basically it's a research center that focuses on, uh, the theology of disability, the relationship between spirituality and healthcare, uh, and mental health and theology. So these are the three kinda main areas that we focus in.

Um, but it's research, academic research, this. Designed for practice. So we do, and, and most of the work that we do is interdisciplinary. So we work with nurses, psychiatrists, psychologists, all sorts of different kinds of people to kinda get a sense of, um, what theology is, what theology means in these contexts, and how we can actually use theology to bring about a change of perspective within the area of health and social care.

Um, so that's what the, that's what the center is. Um, what all these different components are is a different question, but, uh, when maybe we

John Dickson: Yeah, sure. Um, I'm fascinated, um, and maybe some of my listeners in, uh, the Australian context will be fascinated that there would be a mainstream university. Like Aberdeen that has all this

creepy stuff like spirituality and theology as, as like a discipline. Uh, I thought, uh, Richard Dawkins told us that these are not real disciplines.

John Swinton: Yes, he did tell us that. But uh, he told us many things, and some are true and some are not so true. Uh, that's one of the not so true. Um, one of the beauties of, um, Aberdeen and indeed the, the, the university system in the UK is that, uh, theology or divinity really is one of the founding disciplines of the university, and it's survived over the years as something that's considered to be significant.

It's significant because intellectually it's, it's an, an, an interesting, important area to be thinking about. And in particular the humanities, uh, in relation to things like medicine, it's very, very important because it brings a dimension to medicine that's very important. So hence, for example, here we have a.

Humanities module that all medical students have to do. Um, that really brings 'em into concept with, uh, the humanities and a different way of thinking about what it means to be, uh, human. Um, but also one of the reasons why it's survived over time is because it's

successful. You know, a lot of people are still very interested in theology.

A lot of people are still very interested in spirituality and even within, uh, Uh, secular disciplines such as, uh, nursing and medicine, which is my area, the idea of spirituality coming into the conversation and more and more theology as well, is now kinda accepted as mainstream. And the reason it's mainstream is it pushes against.

A way of thinking about human beings as just biological creatures that have no meaning other than, as DOCman would say, to produce the genes and to produce themselves or reproduce themselves. That human beings are rich and deep and beautiful in many important ways. And I think, uh, culturally, if we forget that, we end up with.

Perhaps a culture like we have just now where human beings are downgraded in significant ways. So holding onto, uh, divinity within the academy is actually very important just for education, but also for culture.

John Dickson: Do you feel that there are particularly, uh, important spiritual questions that emerge from the topic we're talking about today? Aging.

John Swinton: Yeah, there are. I mean, if you think about, uh, spirituality, which is obviously it's a very diverse context, concept within society, but effectively, What spirituality does is tries to answer four key questions. Who am I? Where do I come from? Where am I going to and why? And these are questions that all of us ask implicitly or explicitly throughout our lives, you know, who are you?

But when you, when you get to certain crisis points in life, they become really sharp. So when you, you know, for example, if you have a diagnosis of something, Thing like, um, cancer or dementia or something like that. Then these questions, who am I? Where do I come from? Where am I going to, and why? It becomes really sharp, because the things that you thought you were before, actually, it turns out that you're not, or at least you seem to be losing the things that you, you held onto as central to your life.

So finding ways of answering these questions becomes, uh, acutely, uh, important and in relation to aging. Um, uh, uh, there are certain crisis points just by the fact that you get old, one of which is, um, retirement. Because the way that people ask, answer these questions, who am I? Where do I come from?

Where am I going to and why? Within a kinda capitalist society like our own is through work. that work gives you your identity. And the problem with retirement is that, um, you wake up the next day. You're not the person you were the day before. And so you have an existential crisis, which very often leads to depression or frustration, all sorts of things.

And so the way that our society is structured actually means that spiritual questions at certain points in the aging process become deeply important. The question is, how do we answer them?

John Dickson (studio)

Demographically, our world is getting older.

The median (mid-point) age in the US rose from 35.3 in the year 2000 to 38.9 in 2022. It doesn't sound like much, but it has a massive result at the other end of life.

Worldwide, the average person can now expect to live beyond their 60s.

In fact, in 2020 the number of people 60 years and older outnumbered children younger than 5 years.

By 2030, one in six people in the world will be aged 60 years or older. And by 2050, the world's population of people over 60 will double to just over 2 billion.

Not surprisingly, aged care is becoming an increasingly large consumer of a nation's resources.

Members of the OECD spend an average of 1.5% of their Gross Domestic Product on just Long Term Care. In my home country of Australia, that's roughly \$22 billion dollars every year. And that's not accounting for medical, pharmaceutical or surgical care for the elderly.

Beyond the physical, John Swinton has been advocating - with success - for what he calls 'spiritual care'.

He's writes and lectures extensively on the topic, and he's been involved in creating an international tool for training professionals and volunteers to enhance the spiritual health of aging people.

Researcher AI will put a link to the course in the show notes.

So, society is beginning to throw a lot of resources at aging - but how are we coping with the idea itself?

John Dickson: Do you think we're getting better in the west or worse at thinking about and representing. The aging process.

John Swinton: My general sense is we're we're not getting any better because we're still, um, not facing up to the reality that we're mortal in that sense, nothing that kinda underpin some of the difficulties you have getting old. And so the, the questions that aging, uh, raises in relation to what our lives mean, what beauty is, what vitality means, what the future expectations of who you are means.

John Swinton: These are not really questions that are answered well because we're always looking

backwards. Uh, you know, even the simple, the simple act of, I dunno, dyeing your hair or. Or, or, you know, having Botox in your face is a push backwards a way that you think you should have been like, which means we're always avoiding the future and the reality that actually in the future, all of us will shift and change.

John Swinton: The question is, how can we manage that change effectively? And I think there's not enough guidance as to how we can age positively, even in the context of something as difficult as dementia. I think there's, there's not enough guidance given as to how we can live well. In complex situations.

OLD Trailer

John Dickson (studio)

Welcome to thriller director M. Night Shyamalan's idea of a nightmare setting: a beautiful beach where everyone grows ... old.

'Old', the film, is set in a swanky resort (not Florida) where the privileged can be dropped off on a pristine beach to enjoy it all by themselves. Only in this case it

turns out the tropical location is aging them at an alarming rate.

The film relies more on jump scares and make-up effects than plot and acting - Rotten Tomatoes gave it a rating of 50, and the audience score is roughly the same. Except for Director Mark who puts it in his top 3 films.

The film gets the point across: getting old (fast) is scary.

It's got a lot to do with how we see ourselves.

John Dickson: One term that, that you've mentioned, you're not, the only one to have mentioned it, is hyper individualism. Um, And the effect this has on our view of the human person. Can you describe what you mean by hyper individualism? I mean, it's, in a sense, it's self-explanatory, but what do you specifically mean and how does that, um, undermine what it is to be a person?

John Swinton: Well, hyper individualism is simply the, the, the way that we tend to think, or many of us tend to think that. We are who we are because of who we are. And so it's our own freedom and choice and autonomy that is important. And if you begin to lose

these things, then it becomes, uh, a challenge to who you are as a person and indeed who you may, perhaps who you are as a human being.

So hyper individualism means you may need other people for certain things, but you're not dependent on that way because you are who you are because of your biology, because of your psychology and the way you think and who you are. Whereas in reality, this is something that was brought to the fore very clearly through the pandemic, is that we're relational beings.

At an individual level. We're interconnected at a political level, a global level, and the idea that we are kinda hyper individualistic in that sense is simply not true, and it's palpable, not true. We may still hold onto that because the fact that something's not true doesn't mean to say that we don't.

We don't continue to believe it. In reality, we are. Persons in relationship, even in the way that our, our, our physiology grows and develops. You know, your, your brain requires other people in order for it to develop. You won't learn to speak unless somebody speaks to you, because that part of your brain that's

necessary for speak needs somebody to speak to you before it can function and go in such sense.

So even at a neurological and biological level, we are independent. So I think that the idea of individualism is deceptive.

John Dickson: And presumably, uh, compounds the problems of aging if we're separate from one another, that there is not that community that people really need toward the end.

John Swinton: right. That's exact, that's exactly right. And so because the older, and one of the sad things perhaps for all of us for different reasons is that the older you get, the smaller your social circle, it becomes,

You know, go back to the issue of retirement. You suddenly lose a lot of the people that were around you day by day by day.

And then you're narrow to whatever friends you have at the golf club or at church or wherever you are. And then eventually, These people die off as well. And so you're, you're, you're gradually moving towards a situation where you're, you, you suddenly become an individual - that that's not the way that you want to be.

Which I think is one of the reasons why, um, things like depression and anxiety, uh, are so prevalent in elderly people because they don't have the, the, the social and psychological resources around them that can help 'em to feel part of something, a sense of belonging in that way.

John Dickson: And the mobility of modern society, of course, um, exacerbates this problem. I mean, for most of human history, the elderly. Lived up until their deaths, uh, in the home of the wider family unit. And what a joy that must have been toward the end, but we hardly do that anymore.

John Swinton: No, we don't do it enough. I mean, it also must have been quite difficult because if you have a small house, um, yeah. And you have seven people living in that house, one of whom is, is an elderly and, and struggling, uh, that would've been difficult. But there's something beautiful about the idea that you, you're no longer taken from your community.

You're always part of your community. And it's interesting

****CLIP: The Blue Zones****

John Dickson (studio)

That's the Netflix doco series, 'Blue Zones'.

'Blue Zones' - an expression coined by demographers Gianni Pes and Michel Poulain refers to geographic locations where the world's oldest people seem to be doing pretty well.

Their technical work was published as 'The Blue Zones: Areas of Exceptional Longevity Around The World', in the journal, 'Population and Development Review', back in 2005.

The region with the highest concentration of male centenarians - men who live over a hundred years is Sardinia's Nuoro Province.

Since then, bestselling author Dan Buettner, a National Geographic Fellow, ran with the idea of 'blue zones' and has identified four other locations - Okinawa, Nicoya, Icaria and Loma Linda . The elderly people in these places apparently have high levels of energy.

Buettner has built quite a business probing what helps these 100 year old men and women last so long and live such fruitful lives.

The science is ... apparently, isn't perfect. Okinawa, for example, doesn't actually have accurate records of age, because most of the records were lost during WWII.

But one interesting thing has to do with the factors identified as keys to aging well. There's a neat little ven diagram we'll put in the show notes. At the centre of the Venn are spiritual things like family and social engagement - as well as legumes (yes, peas, lentils, and the like!).

John Swinton: Um, I've been doing some work, uh, um, intercultural work recently on, on aging, and one of the things that's very clear in, in certain, uh, indigenous people, for example, that the idea of kinship is really, really important that you are part of, of, of, of a wider group and who you are is how you locate yourself within that wider group.

John Swinton: And, and the older you get, You don't lose yourself in that sense. You simply become part of

that community in a different way. And that's something I think that either we've lost and never had in, in cultures like our own, which tend to be so individualistic and so dependent on, or so, so, um, respectful of auto autonomy and freedom and doing your own thing.

John Dickson (studio)

We'll hear from someone in a bit who reckons our obsession with autonomy is what's driving the growing acceptance of euthanasia for the elderly and infirm.

And one great threat to autonomy is: dementia.

****BREAK****

****CLIP: The Father****

John Dickson (studio)

That's Sir Anthony Hopkins in the film *The Father* - a role that earned him the Academy Award for best actor. He was the oldest nominee ever to pick up an Oscar.

Hopkins' heart-rending performance highlights the plight of people living with dementia.

According to the World Health Organisation, there are currently more than 55 million people with dementia worldwide, and there are nearly 10 million new cases every year - the most common form being Alzheimers.

Dementia is currently the seventh leading cause of death and one of the major causes of disability and dependency among older people.

And those figures represent a hefty cost to our global communities.

In 2019, the calculated cost of caring for people with dementia for roughly five hours a day by family members and close friends topped \$1.3 TRILLION US dollars.

And women are the most affected, both directly and indirectly. Women experience more years shaped by dementia, and a higher mortality rate. But they also provide 70% of the hours of caring for other people with dementia.

John Dickson:-Can you, can you give us, um, a reasonably accurate definition of dementia? Um, it's more than just getting old and forgetful, right?

John Swinton: It is. Yes, it is. I mean, dementia is really, it's a umbrella term for a, a number of different conditions, um, and, and depend it effectively. It's it's brain damage that comes through aging or comes through some kind of trauma to, to the brain. Uh, and that'll manifest itself in different. Ways, depending on which part of the brain is, is affected.

So something like, um, Uh, frontal lobe dementia, you'll find yourself, uh, the frontal lobe that's part of your brain that kind of helps you to control your thoughts and your, your articulation of your thoughts. Like when that begins to break down, then people will say things and, and, and act in ways that they wouldn't normally do.

Something like vascular dementia, where over time if you don't get enough exercise or if you don't, if you badly, the blood vessels in your brain restrict, uh, you'll, you'll have memory loss and you'll have cognitive confusion, likewise, for Alzheimer's and so on and so forth. But the key thing is that it's, it's to do with, uh, some kind of degeneration of the brain that manifests itself in, uh, memory loss, cognitive problems, uh, unusual behavior, and, and so on and so forth.

John Dickson: And how does it relate to the other word you hear? Often, especially in, um, the us um, Alzheimer's, then, are they exactly the same thing, or is Alzheimer's a version of dementia or is dementia a version of Alzheimer's?

John Swinton: Uh, well, that's a good question. Um, there's lots of reasons why you would, you would answer that, different ways you'd answer that question. Alzheimer's is a form of dementia. I. It's a particular form that it's difficult because it, it, it's very destructive to the brain in a way that perhaps vascular dementia isn't always as destructive in that sense.

So it's, it's a form of, of dementia, but it's a form of dementia that culturally has become the, um, the main

way in which many people talk about dementia. So the two terms are conflated, um, but they're actually not the same.

John Dickson: Right. Do we think that dementia is becoming more common or are we just more aware of it in, uh, you know, in recent decades?

John Swinton: I think it's both actually. I mean, we are more aware of it but I think because people are, are, uh, living longer, seems to be uh, an increase in ongoing increase in, um, Uh, and dementia. So although dementia is not a natural product of aging, the older you get, the more likely and prone you are to having some kind of dementia experience in that sense. So I think worldwide it's, it is becoming a, a, a growing, uh, issue.

John Dickson (studio)

The loss of memory that usually comes with dementia can look very different for different people.

But memory is more than just a list of electrical impulses that bring information and skills to mind.

The ancient Greek playwright Aeschylus is credited as saying, "Memory is the mother of all wisdom" - because

it's our memory that holds all the information that forms the basis of a wise life.

The ancients saw memory as the mother of the Muses, too, the mother of creativity and the arts. This is because for the artist to be truly free in their craft - whether painting, poetry, or music - that has to be a great storehouse of learning, as Plutarch puts it, in the memory!

More existentially, memory provides the context for our lives. The great Roman statesman Cicero wrote, "The life of the dead is placed in the memory of the living." He's saying there's a sense in which we preserve our departed loved ones in our memory. It's a concept John Swinton picks up in his book *Dementia: Living in the Memories of God*. Even people without personal memory are remembered - and held in tact - not just by their loved ones but by the Creator of all things!

But I'm getting slightly ahead of myself.

I asked John: If I lose my memory, even my memory of my loved ones, to what extent am I still me? To what extent am I still a person?

And, amazingly, he told me the polls indicate that - precisely because of this - people are more afraid of dementia than they are of cancer ...

John Dickson: So my, my question is philosophical. If, if, if I lose my memory, even say the memory of my loved ones, to what extent am I still me? To what extent am I still a person?

John Swinton: Yeah. Well that, that's, that's the big fear that I think people have because if you look at the, uh, if you look at the, um, The polls, the reflect on these things. People are more afraid of cancer than they are of dementia.

And the reason for that is because you have sense that you, you lose yourself in that, in that sense. Um, well, there's a couple of things I, I would say is the first thing is the question is how well do you know yourself? You know, I, uh, think memory is a, is doesn't function in the way that we oftentimes think it functions. It's not like taking a picture. Memory is always constructed and always shifted and changing.

So think, think of my own story, you know, uh, Until I was 24, I think it must have been, I thought I was quite

a decent fellow, and maybe I was. But then at 24 I, I, I became a Christian and I discovered that I was actually a fallen sinner and, and that I was in need of redemption and all of these things. In other words, the memories that I had in myself before that were accurate for me, but actually not accurate for the way that.

The bigger picture is for, for all of us in different ways. So memory functions that way. So if we are deter, if who we are as determined by the things that we remember about ourselves, then we're always gonna be, it's gonna be fragile. It's gonna be, uh, uh, inaccurate in that sense. Because even, you know, think about, I'm always fascinated that the, the older you get, the less you know because you forget things like, but if you've ever had that experience where, Um, you're trying to remember something, right?

You remember, I'm trying to, and then eventually it comes to you and that's great. You think it's great. The next time you're trying to remember that thing, you will not go back to the original memory. You go back to the last time you remembered it, and each time you remember it, you have a different set of emotions, a different set of feelings.

So you actually remember it in a, in a completely different way. So the accumulation of memory is not just given more and more accurate, it's actually dependent your context and who you are. So, As a theologian, uh, my sense is that the way, best way is for us to think about that is to, uh, Recognize that our identity doesn't come from ourselves.

Our identity is who we are in Christ. And Paul says in Colossians that, uh, who are as hidden in Christ. So even the things that we know about ourselves are only partial, are only, are only, uh, are. There's still much more to learn about ourselves. My sense is that when you begin to forget things in, in, in the way that you're describing, that means it's a source of lament, a source of sadness, but it's not a source of existential loss because at the heart of our faith is this idea that we're held in God's memory, we're held in, in, in our, our being in Christ.

And we can be assured that even though we may forget everything that we think we know, God will never forget us.

FIVE MINUTE JESUS

Let's press 'pause'. I've got a five minute Jesus for you.

5th commandment: 5. Honour thy father and thy mother; that thy days may be long in the land which the Lord thy God giveth thee.

The word "honour" is Hebrew verb *kaved*, meaning "to be heavy."

Consider our parents "weighty."

Similar to *gravitas*, Latin for "heavy."

Kaved frequently used of "giving glory" to God (Isaiah 24:15; Psalm 22:24).

5th command asks we give deep—almost divine—respect to parents

For kids, this means 'obedience'

Implications for adult children, too

Means "support"

This is how Jesus read 5th C

Mark 7:8-13. You have let go of the commands of God and are holding on to human traditions.” 9 And he continued, “You have a fine way of setting aside the commands of God in order to observe your own traditions! 10 For Moses said, ‘Honor your father and mother,’ and, ‘Anyone who curses their father or mother is to be put to death.’ 11 But you say that if anyone declares that what might have been used to help their father or mother is Corban (that is, devoted to God)—12 then you no longer let them do anything for their father or mother. 13 Thus you nullify the word of God by your tradition that you have handed down. And you do many things like that.”

Avoiding offering material support to older parents breaks 5th command

Caring for elderly parents became important ministry of church

1 Timothy 5:3-8. Give proper recognition to those widows who are really in need. But if a widow has children or grandchildren, these should learn first of all to put their religion into practice by caring for their own family and so repaying their parents and grandparents, for this is pleasing to God. Give the

people these instructions, so that no one may be open to blame. Anyone who does not provide for their relatives, and especially for their own household, has denied the faith and is worse than an unbeliever.

Already by time of 1 Tim 5:3-8: church had established a system of care for elderly parents who didn't have family to care for them

Yes, it's a Xian duty to care for parent

But when that care is not present, the church steps in to support as it can

Greece & Rome had very little by way of philosophical reasoning

that guaranteed 'weightiness' of those who lacked social utility.

So, at one end of life, infanticide rife

At the other end, welfare for the aged and infirm non-existent.

Christianity changed all of that.

It inherited the OT theology of the ‘weightiness’ of all human beings, especially the elderly

And Xity opened up care facilities to Jew / non-Jew, believer / non-believer.

Basil the Great (AD 330-379) founded a healthcare centre in AD 360s

Basil’s “Poorhouse” (*Ptocheion*) employed live-in medical staff who cared for the sick, drawing on the best traditions of secular Greek medicine.

The “healthcare centre” included six separate departments: poor, homeless, foundlings, lepers, aged and infirm, the sick.

And so was *born a tradition* we now take for granted
... one we need now more than ever!

You can press ‘play’ now.

John Dickson: Uh, so John, it sounds like a lovely idea that, you know, people are safe in the memory of God, even if they don't have their own memories. Uh, but what good is that, or what sense can be made of that

for someone who's not a Christian believer? I mean, you've used highly theological language that that is appropriate, but is there anything here for someone who's not a believer?

John Swinton: I mean, I think that the, the way I would sort of, I dunno if translates the right way, but the way I would think about it is that applies to everybody in, in, in two ways. One, effectively, God loves everybody, so therefore the love of God is always available to you, uh, even though you're going through difficult times, that love is available to you, especially that, that full stop.

But the other thing I would say, the second thing I would say would be that, um, The lesson that we learn from that is that memory belongs not just to ourselves, but also to our community. And so when you forget something, the job of your community be that your family, your friends, whoever it is, is to hold your memory for you.

So within the Christian condition you would talk about the body of Christ has been a place where that would be ha would happen. But any community that loves and cares for that individual can hold their memory for them, can be that space where even though things are

changing sometimes radically, that your, your, your memory of that individual and your love for that individual continues and your desire to trans, trans, um, to your desire to communicate that love. Continues and what, 'cause no matter what stage we are on our dementia journey, people can appreciate love and can appreciate friendship and can appreciate people around them who, who care for them in that sense. And I think it's through that conduit that we get to that stage where, uh, it's, if like it's safe to be in, it's safe to advance into your domestic journey because there are people there that can, can hold you.

John Dickson: Yes. Is this what you meant when you wrote in an article in Christianity today, some years ago now, uh, one of the fundamental symptoms of dementia isn't forgetting, but being forgotten?

John Dickson: Can you explain that sentence to me?

John Swinton: Yes. So. One of the phenomenon that, that people experience a lot is the people begin to talk about them as if they're not there. So they'll say, well, he or she's not the person that they used to be, or I'd rather not visit them because they are, um, uh, I'd rather remember them the way, the way they were.

And all that language, distance from a distance you from the person and it's very quickly you forget that the person still is the person. And so while dementia is difficult 'cause you lose your memory, it's actually the fact that people forget about you. That brings about the most pain in that situation because your friends disappear very quickly, just as soon as you, there's lots of research to show this. Your friends have to be really quickly. As soon as you get a di, a diagnosis of dementia, nothing has to happen. But as soon as you have that diagnosis, because it's culturally stigmatized, people begin to distance themselves and you can tell that's through language and then language leads to practice.

READING

*Do not go gentle into that good night,
Old age should burn and rave at close of day;
Rage, rage against the dying of the light.*

*Though wise men at their end know dark is right,
Because their words had forked no lightning they
Do not go gentle into that good night.*

Good men, the last wave by, crying how bright

*Their frail deeds might have danced in a green bay,
Rage, rage against the dying of the light.*

*Wild men who caught and sang the sun in flight,
And learn, too late, they grieved it on its way,
Do not go gentle into that good night.*

*Grave men, near death, who see with blinding sight
Blind eyes could blaze like meteors and be gay,
Rage, rage against the dying of the light.*

*And you, my father, there on the sad height,
Curse, bless, me now with your fierce tears, I pray.
Do not go gentle into that good night.
Rage, rage against the dying of the light.*

John Dickson (studio)

The Welsh poet Dylan Thomas and his poem, *Do not go gentle into that good night* memorably records our discomfort with death. It's not specifically about dementia but it does address our anger over aging, and our struggle to hold on to memory.

Some modern poets have reflected on the ravages of dementia.

Glen Campbell sang about his own Alzheimers in his song, *I'm not going to miss you*.

Elvis Costello's *Veronica* is about an elderly woman who can barely remember who Veronica is.

And Ed Sheeran's *Afire Love* speaks of the pain of losing a grandfather who can no longer recognise his grandson.

These are hard burdens to carry. How do you carry them well?

Jean Ireland

I think the family is paramount, actually. I think they're the most important thing of all. Because they give you continuity of self. And we all need continuity of self as we change and adapt. And you can go back to your family and get the support. They know your story best. And they can help you so much.

John Dickson (studio)

Jean Ireland is a pastoral carer for Baptist Care. She has spent the last 25 years caring for older people. She is also the author of multiple courses designed to train

volunteers and aged care staff to help people age meaningfully.

She says it begins with the family being present.

Jean Ireland

They reassure the resident or the person moving and they can make them feel far more comfortable. They can help them form friendships within the new venue that they're living or whatever. And they can take away the fear and the loneliness and mitigate a lot of the things that happen.

There's so much loss. When people move into care of any kind, and if their family are there regularly to support, and come in, and especially if they come and visit, and actually mix in themselves with the people that they're now, their loved ones now living with.

We had one lady who came in with dementia and she had many falls and her daughter in law and son used to come to visit every Wednesday and every Saturday morning and they were delightful people. Bubbly people themselves.

And the mum, um, would sit with them and a number of others in this little sitting room and they would read stories and take, say poetry and all that sort of thing and the residents, the other people that were living in the same environment would sit around too and they'd all get involved in this. And, um, the mum felt very important because her family were there to support them as well.

And they used to bring in treats and, um, little things to do. And the, actually the daughter in law was a, a, um, children's book writer. And they, she'd sometimes bring in her latest book and they'd all share that. And it was really lovely because they also form relationships with the staff. And everybody grew to love that family.

And, and the mother settled very quickly, despite a really severe dementia.

John Dickson (studio)

Jean says the alternative is hard to watch.

Jean Ireland

People will come and be dumped, literally dumped by their family because they have other commitments and can't do things. And I, I've seen people, one lady I remember when I was working in a different place, whose son, um, came up from Melbourne. Her husband died and she was unable to live at home by herself. And her, um, son came up from Melbourne. He packed up the house. He put, packed, took all the clothes out of her, her cupboard. She'd come from the hospital to us. And he dumped them on her bed and left her there. And sold the house and that was it.

Her grief was terrible. She took such a long time to settle in. She hated it. And she did eventually settle, but it was a very sad and long drawn out process for her.

John Dickson (studio)

The key, Jean says, isn't just spending time with them, it's valuing their story.

Jean Ireland

To have our story heard and valued is the most important thing that any of us can have when we get older. If people patiently and lovingly listen. And don't

correct or anything like that. They just accept what is your story. Um, it's, it's very validating of who you are and that you matter.

It tells you very clearly that you matter. You're still valuable. And so I think storytelling is very important. And also, with people with dementia, if you sit around and start playing music or talking stories, I sometimes just sit down and talk about, you know, what kind of lollies did you eat when you were a child?

Or where did you go for your holidays when you were little? And they come out with wonderful stories, and the sharing of the stories brings comfort. brings back memories and makes them feel valued and important.

I've seen people who have no, not verbal even, you know, they just say, blah, blah, blah or something because of their dementia. And I've seen them in church services that we have, little simple services, um, sing. And cry because of hymns, but they sing all the words of a hymn that they've known, a loved, familiar hymn.

They'll sing it perfectly, and you think, that's amazing, because it's there. It's there within them.

John Dickson (studio)

Jean says even patients with the most severe dementia still have much to offer those around them.

Jean Ireland

Absolutely. I absolutely think they have much to contribute and honestly and truthfully I absolutely love them because they have a wonderful, um, living in the here and now, uh, even though they can't remember what they did two minutes later, two minutes before previously, but, um, they're just delightfully honest.

They, they just see what is there and they comment on it. You know, I have one lady say to me once If they're eating too many baked potatoes, , something that you would not normally say. And I said, yes, that's true. And they're just delightful. And they, they, you know, if they wanna sing, they sing and all that sort of thing.

And they, they, some of the inhibitions that we, you know, socially discern and say, we won't, won't do that.

They've lost those and they just do it. And it's quite delightful.

John Dickson (studio)

In the West, our idea of aging meaningfully is tied up with our idea of personal autonomy - our ability to decide for ourselves and pursue those courses of action which will lead to our greatest happiness.

So we're only aging well so long as we retain that ability to choose our best life - something that is likely to decrease the older we get, and especially in cases of dementia.

And this in turn has led to some concerning developments in laws governing euthanasia.

A 2018 report into medical assistance in dying in Canada noted that the three most frequently mentioned end-of-life concerns were loss of autonomy (91%), decreasing ability to participate in activities that made life enjoyable (86%) and loss of dignity (71%).

In The Netherlands euthanasia has been legal for 15 years. Dutch law requires that individuals must be

suffering from unbearable or untreatable medical conditions before they can be granted access to a medically assisted death. But there is a very real debate going on about extending euthanasia laws to include cases of 'completed life' or 'tiredness of life'. See the show notes for an article on it.

The current rules have actually already been used to include cases of people suffering from dementia.

Some of you may remember Prof Charles Camosy, an ethicist from Fordham University - he spoke to us in episode 76, Against Euthanasia.

Charles Camosy

But then later as the dementia progressed, uh, they checked in with her again and, and they said, are you sure you don't wanna do this? And she said, no, you know, not yet. And they asked her again and she said, no, not yet. And then they asked her a third time and they said, no, not yet. And the, the medical team and her family were starting to get frustrated because they had decided this is what was in her best interest she had, she had requested earlier. And so their solution to

this problem was to essentially give her a sedative in her coffee, uh, and kill her without, um, her consent. And the, the, uh, doctor who the physician who was involved in this, um, was recently found not guilty relatively recent. I think it was last year was, was found not guilty of anything by, um, uh, by a Dutch court. So, uh, when, when something like that can happen, you seem to kind of slippage where we go from, again, my, my life, my autonomy, my body, my choice to a culture kind of deciding, well, you know, who would wanna live a life with later stage dementia? Well, it was this person, uh, who said that she didn't wanna die. Uh, but she was killed anyway.

John Dickson: So are you saying, uh, life should be preserved at all costs that there's an absolute duty to sustain life? Is that the tradition you're coming from?

Camosy: No. No, not at all, but making it clear that, uh, so-called vegetables are full human beings like you or you and me that prenatal human beings are human beings like you and me that, um, are grandparents or parents when they reach the later stage of dementia and lose their rationality and self-awareness like, at least as you and I have it - remain like you and me, it

doesn't follow at all that we just do everything we possibly can to keep them alive. It does follow, we don't aim at their deaths, I would say. So we, it does follow that we don't say it's time for you to die now.

John Dickson: Can you say something about how you feel euthanasia and the debates, uh, and changes in our view about euthanasia in the West have also changed our perception of aging and personhood.

John Swinton: Yeah, I think they have, and, and it's interesting that we we're talking about dementia, but certain places in, in Europe, Um, uh, as soon as you have a, a diagnosis of dementia, you can go to your general practitioner and ask to be euthanized. And if that doctor says no, then you can find one and eventually will be, um, even though there's no significant change at that moment in time.

So what's the problem? The problem is people are, Anticipating the future. And so you have a really negative view of the future, which then is translated into, well, dementia's worse than death, so therefore death seems to be the most appropriate way to think. Think about it. And so I think that I, that idea of.

Projecting negativity into aging and into things like dementia is fundamentally important, which I, which is why I think it's very important when we think about issues around euthanasia, to think about what we're doing now. In a time, not necessarily in a time of crisis, how are we understanding aging just now?

How are we creating images of positive aging that can at least enable people to have an informed choice and a positive, informed choice when it comes to whatever crisis point they, they come to? And there's really some really interesting research done by a guy called, uh, William Breitbart, who is a, a, a psychotherapist, uh, who focuses on.

Oncology at Sloan Kettering University in New York, and he noticed that people were coming to him asking him for physician assisted suicide. So people who were at the end of their lives were coming to him and asking him to take their lives. And so the way that he framed it was he thought, well, what's happening here is people are feeling.

They're meaning they have no meaning in their life, that they're a burden, that they have nothing to look forward to. Uh, and so he set up what he described as meaning

centered psychotherapy groups where people right at the end of their lives and in America, that means the last six or eight weeks of your life got together.

And discussed issues around spirituality. Spirituality had been a general search for meaning and purpose and value and hope, uh, and he discovered that at the end of that process, many people stopped asking the question because they discovered that they didn't have to think of themselves as a burden or as, as think of having no future, et cetera.

And so because they were given a slightly different perspective on the question. The ethical question shifted and changed because they no longer asked it in that sense. So I think there's something about creating a culture where we can talk about these things, where we can give different alternative understandings of what aging it is, and even aging as it relates to dementia.

And then at end of the day, people] will make their own choices if it's available to 'em. But at least it'll be an informed choice that recognizes that actually getting old is not so bad. And even getting dementia is not the way that we thought about it before.

John Dickson (Studio)

The Jewish scriptures - the Old Testament - often speak of old age as having honour and purpose.

"Is not wisdom found among the aged?" the book of Job says. "Does not long life bring understanding?"

And the Psalms speak of a spirituality of the elderly - a connection between the Creator, the older person, and the generations to follow.

READING (Psalm 71)

5 You have been my hope, Sovereign Lord,
my confidence since my youth.

6 From birth I have relied on you;
you brought me forth from my mother's womb.
I will ever praise you.

7 I have become a sign to many;
you are my strong refuge.

8 My mouth is filled with your praise,
declaring your splendor all day long.

9 Do not cast me away when I am old;

do not forsake me when my strength is gone.

...

15 My mouth will tell of your righteous deeds,
of your saving acts all day long—
though I know not how to relate them all.

16 I will come and proclaim your mighty acts, Sovereign
Lord;

I will proclaim your righteous deeds, yours alone.

17 Since my youth, God, you have taught me,
and to this day I declare your marvelous deeds.

18 Even when I am old and gray,

do not forsake me, my God,

till I declare your power to the next generation,
your mighty acts to all who are to come.

John Dickson: What are the key things Christian
Scripture teaches about aging?

John Swinton: Well, I think one of the first things and
basic things is, is that human beings are made in the
image of God.

I think that the, the doctrine of, uh, or the idea of the
image of God is very, very important.

Like so historically, there's lots of ways in which the image of God has. Has worked itself out. You know, sometimes it's, it's to do with, uh, our human beings in the same shape of God or our human beings, um, rational and intelligent the way that God is. But it seems to me that the most helpful in terms of age is what age, in the way of thinking about the image of God is that we're in relationship.

Human beings are in relation, something about the relationality of God that reflects itself in human relationships. You know, God walks with Adam in the, in the Garden of Eden. He doesn't walk with any other creature. There's something very beautiful about that. Uh, and the thing about recognizing that right at the beginning, That you're safe.

That image never changes. If the image is intellect and reason, then actually the older we get, the less we are in the image of God. 'cause all of us begin to deteriorate cognitively. We get old, but relationality to think that we are human beings. Who have a relationship with one another, relationship with God that continues throughout our lives, I think gives us a firm foundation for aging and for the priorities of aging, which is to sustain these kinds of relationships, even through the shifts and changes,

uh, that go, we go through as we, as we get older. So with that as a foundation, I think that's really actually a very important aspect of aging well.

John Dickson (Studio)

We will all face age ... we will all face dementia, whether it be in our family, in the families of those we love or in ourselves.

And we all have a role to play in loving the aged.

John Dickson: What is your best advice for how to engage with a loved one who has dementia? Given that many listeners will know someone with dementia.

John Swinton: Well, there's a couple of things I would say. One, I think it's important, uh, always to give people the benefit of the doubt now, but that I simply mean that, uh, Not to be drawn into a very pessimistic view, whereby, whereby it's, it becomes almost impossible to see anything positive in the situation. So to keep your mind open and to take the possibility that, uh, uh, that, uh, The possibility of goodness in the midst of this difficult situation. And of course, you can't do that by

yourself. So what you need is friends around you who can support you, who can lament with you. And what I mean by that is you need to have a space to go to where you can really be honest about how difficult this situation. So give people in for the doubt, look for the positive, but recognize that within yourself.

There's a brokenness, there's a sadness. There's something that needs to be articulated to you, and you need people that will allow you to do that.

And the third thing, uh, is respite. So my mom's 99 just now. And, uh, she's a hundred next year. Uh, but you could have probably worked out for yourself. The, uh, She's still at home, but she needs a a lot of care.

And so we as a family, we somebody there every night and for most of the day. And it's great that we can do that 'cause we didn't want to put her into a home. But it is hard work. In fact, it's exhausting. And what I find is that, um, If I'm spending time with mom or if I'm living at my mom's house for a few days, whatever it is, if I can just get out for an hour, that's great.

So if a neighbor can come in and just let me go for a walk for an hour, I come back and I'm much better with her and I'm much more peaceful and I'm much more

comfortable and it's a good thing to do. So providing respite, even if it's for short periods of time, enables carers to care much more effectively.

So I think these three things are, are beginning points for, uh, uh, creating a context where care, which is really hard work, can be something that is, uh, manageable.

Buff Dickson: There was sort of just a gradual loss of the cues, the normal things that we take for granted. Um, so he lost a lot of that initiative to. to make even eventually simple decisions. What to wear or what was happening next. He'd always been a happy potterer. He and mum would, very much had their own interests and they were just companionable potterers.

And I remember mum saying he just sort of hovers and I suggest different things but he's just lost that, he was just a bit lost. And even simple things became harder and harder.

John Dickson (Studio)

That's my darling Buff talking about her dad, Harry, who died in 2020 after 5 years with dementia. He was a beautiful man - a scientist and a poet, a zealous

missionary and perhaps the most sensitive person I've ever known. It was a privilege to have him for so many years as my personal pastor and chief advisor.

John Dickson: He started to go, Walking and getting lost too, didn't he?

Buff Dickson: Yeah, I think he knew where he was wanted to be. But there were a couple of times when mum would bring me from work and I would just have to leave.

And I'd call the police and they would say, Oh, you have to fill out a missing persons report. And I'd be like, that. Um, and then eventually I'd get a call from them going, I'm here actually. He's with this lady and he was about to walk on the freeway. Um, and even as you are driving, you just don't know what you'll find. And it was, yeah, very frightening, occasionally.

John Dickson: So, um, he went into care for, how long was it?

John Dickson: Two years? Two years, yeah. Um, and there was marked decline, right? But, um, Tell me what you found hardest.

Buff Dickson: He had sort of mini strokes. He had, and that affected his ability to speak. And I think the loss of that was, was really hard because he was just so beautiful with words and language. And so, yeah, I miss that. You could still see it in his eyes. A lot of things were still in his eyes.

Sometimes when we were talking and he couldn't find the word and he'd sit there and you're never sure whether to help them, you know, I wasn't sure whether to help him, or whether that would be patronizing, or appear that I was impatient.

And I remember asking him once, Do you want me to help you find the word? Or are you okay if I just stand there watching you struggle to find it? And he said, Oh, maybe let me struggle for a little bit first, and then help me. And so we... He could talk about his condition and we could look at it scientifically as the disease it was.

John Dickson: You've worked in dementia, right, as well, um, and then, you know, had to have this very personal thing, um, um, what's the question? How did you? Christianly think about it. What, what thoughts gave you any comfort or balance?

Buff Dickson: Dad was always very sure that this life was not all there is. And he had a very strong faith in the new creation and in what would be. Next. And that helped him, so he did go into it with great courage. But

John Dickson: What helped you?

Buff Dickson: Oh, um, that. That I knew he was afraid at times. I found things he'd written researching ahead of time about the stages of dementia, and I knew he was afraid, and that he found some things horrific, but,

Spiritually, I think... With dementia you often think, Oh, people say, Oh, does he still know you? Does he know who you are? And I'd be like, I don't think that's, I haven't asked. And I wouldn't expect him to know my name, but I can tell most of the time he knows I know him. And he can tell he's loved. And you, I would just remind him of stories, and every now and then you'd Get a, um, a look perhaps that something was familiar, but mostly not.

But I think he just enjoyed the fact that he was known by us. And that was a comfort to me, was that he knew, he was known by God in that way. And known by us, and that's what makes us... It's important and



significant, even when we can't do as much as we used to or remember things.