Elders’ Cares and Eldercare

In the normal course of life, individuals and families face the issues of aging and the elder’s increased needs for assistance due to waning strength and diminished ability to manage the activities of daily living. God has blessed today’s seniors with longer life, plus the so-called “baby boom” generation is already a few years into its eldest members’ reaching retirement age. More and more families face providing care for loved ones in the later years of life.

As borne out in the following collection of articles, there are many challenges and blessings to spousal and inter-generational care arrangements. The articles approach these matters from a caring Christian perspective that takes into consideration both the caregiver’s and the elder’s needs. Chief among these is the power of the gospel and the Word of God to support all generations. May these articles be a source of support and learning for all who face eldercare decisions and situations, along with their blessings and challenges.

The Elder’s Hope of Salvation

Age and adversity bring the believing elder a longing for heaven. An elder’s need to be assured with the gospel does not diminish. If anything, the need increases as the result of many unexpected, unwanted, or perplexing changes. The hope of salvation, which is the “anchor of the soul, both sure and steadfast” (Heb. 6:19), can at times be the only unchanging part of life for an elder believer, the one thing that stays the same. The greatest service that can be offered to the elder is to proclaim the gospel to him or her.

A Longing for Heaven

Many have experienced that “old age seldom comes alone.” It can bring with it illness, weariness, frailty, loneliness, futility, a sense of purposelessness, and much more. Many of our aged and beloved brothers and sisters in faith have not been permitted to escape such infirmities. Yet the adversities that often accompany the latter years of life are in many ways a time of preparation for departure from this life. They serve in cutting the ties to this life one by one. One then longs for the heavenly home. The believer has a promise of something better, “For we know that if our earthly house of this tabernacle were dissolved, we have a building of God, a house not made with hands, eternal in the heavens. For in this we groan, earnestly desiring to be clothed upon with our house which is from heaven” (2 Cor. 5:1,2).

How does God care for His own and prepare them for departure from this life? Can adversity and trial actually be a blessing? Can the wearing down of the body and mind serve a greater purpose? We find that God’s ways are not our ways in these matters. Caring for the elderly is a learning experience from both the temporal and spiritual points of view. It brings one face to face with such profound questions and the mortality that we all face. The caregiver becomes a student and must possess or learn compassion, love, patience, and empathy.

It Can Be Easy to Question

The elderly do face a wide range of issues. The loss of strength and slowing of cognitive abilities are almost universal experiences. Dementia is particularly trying for both the elder and the caregiver. The loss of mobility is devastating and can result in the need for assisted living or nursing home care. Personal dignity and the pride of life are beaten down.
Getting to services and enjoying congregation and family life diminishes. Being homebound slows life down to nearly a standstill. The lack of visitors and loneliness can become an additional and heavy burden. The elder may become depressed and tempted. Unanswerable questions arise, especially, “Why me?” or “Why my spouse?” or for the caregiver, “Why my father or mother?” All plead as the disciples did, “Lord, Increase our faith” (Luke 17:5). The abundant use of the gospel helps all to live day by day.

Love empowers elderly couples to endure much adversity. A definite tipping point is reached, however, when one’s spouse dies. The surviving spouse may then lose his or her purpose in life and the will to live weakens. The survivor feels like a “ship without a rudder” not knowing in which direction to go, neither being capable of steering in any direction. One might dread going home because of the silence. When such an important tie to this life is cut, a lonely elder can be heard asking, “Why does God still keep me here?”

God Gives Purpose to Elders, Too

Although it is important to recognize even the negative realities of aging it is also important to remember and focus on the positive. Encouraging an elder to recall and speak about the blessings of life may help him or her come out of despair and depression. In particular, looking at past photos of congregation or family events are good activities to do. The elder should also be reminded that they, too, are needed and can continue to serve in the work of the kingdom by praying in behalf of the servants of the Word and others who serve in various ways, as well as for all congregation members in distress.

The wonders of technology also make possible listening to services from home via the Internet. If practicable the elder can request home services. Having a small communion service is possible at home or in a nursing home. It can be something to look forward to. If reading is still possible the elder can also find comfort in the Bible or Christian publications. The caregiver can also read to the elder. In general the caregiver can help to create an atmosphere of joy, hope, and thanksgiving.

A Great Promise

How is it possible that the righteous can endure suffering and adversity and finally overcome death itself? Scripture testifies that it is by faith, and that “these all died in faith, not having received the promises, but having seen them afar off, and were persuaded of them, and embraced them, and confessed that they were strangers and pilgrims on the earth. For they that say such things declare plainly that they seek a country” (Heb. 11:13,14).

Walt Lampi

Eldercare: Professional Insights, Scriptural Counsel

“How, Lo, I am with you always, even unto the end of the world” (Matt. 28:20). These words of Jesus are comforting to us as we journey through life. These words provide assurance and strength when we are faced with trials. There are certainly many trials that a believer will face throughout life.

We all know that many things change as we age. As family members age, they may need help managing chronic health conditions. Arthritis can make it hard to button clothing. Forgetfulness may cause a loved one to miss a medication
like insulin for diabetes. Weight and mobility issues cause safety concerns from common activities like getting in and out of the bathtub. Common chronic diseases like arthritis, diabetes, heart disease, cancer, congestive heart failure, or chronic obstructive pulmonary disease may limit the ability to remain independent due to excessive fatigue and activity-limiting symptoms. Often, the most troubling aging phenomenon is when health issues lead to the need for family caregiving, or eldercare.

Aging, Memory Loss and Dementia: Who Needs Care?
In normal aging, our bodies and brains slow down, though intelligence remains stable. We are less physically and mentally flexible, and we take more time to process information. One out of 10 older Americans will have physical limitations as a result of one or more chronic illnesses. Dependent life expectancy is defined as the period during which a person must rely on others for assistance with activities of daily living.

Memory changes occur, and it is common to have greater difficulty remembering names of people, places and other things as we age. In mild cognitive impairment, a person has problems with memory or other core brain functions. These problems are severe enough to be noticeable to other people and show up on tests of mental functions, but not serious enough to interfere with daily life.

Dementia is not a disease. It is a general term that describes a set of symptoms that may be caused by a number of different brain diseases. These symptoms involve mental decline severe enough to disrupt daily life and affect more than one of the following core brain functions: recent memory (the ability to learn and recall information), language (the ability to write or speak, or to understand written or spoken words), visuospatial function (the ability to understand and use symbols and maps, or to correctly judge where objects are), and executive function (the ability to plan, reason, problem solve, and focus on a task).

Alzheimer’s disease is the leading cause of dementia, accounting for 60–80 percent of cases. Alzheimer’s disease is a slow, progressive illness that damages nerve cells in the brain. Symptoms gradually get worse over time as more brain cells are destroyed. The first problem many people with Alzheimer’s disease notice is forgetfulness severe enough to affect their work, hobbies, or social life. Other common symptoms include mood changes, difficulty multi-tasking, misplacing things, repeating things, confusion, trouble organizing and expressing thoughts, and becoming disoriented or lost in familiar places.

Many experts consider vascular disease as the second most common cause of dementia, approximately 15–20 percent of cases. Vascular dementia occurs when clots block blood flow to parts of the brain, killing brain cells. Symptoms of vascular dementia vary widely, depending on the brain regions involved. Common symptoms include memory loss, difficulty focusing attention, and confusion. Changes may occur suddenly, or in steps, where a person has a sudden change, then stabilizes for a period of time. People who develop vascular dementia may have a history of high blood pressure, high cholesterol, heart disease, or diabetes.

It is very common for people to have both Alzheimer’s disease and vascular dementia at the same time. Evidence from brain autopsies indicates that brains of up to 45 percent of affected people have signs of both, classified as mixed dementia.

Lewy Body Dementia occurs when abnormal deposits of proteins called “Lewy bodies” form inside nerve cells in the brain. However, Lewy bodies have been found in other brain diseases as well, including Parkinson’s disease. There are subtle differences in symptoms of Lewy Body Dementia and these include memory problems, poor judgment, movement
changes (stiffness, shuffling walk, problems with balance, falls, and lack of facial expression), excessive daytime drowsiness, visual hallucinations, and acting out dreams.

Gaining a better overall understanding of your family member’s physical chronic diseases, and/or Alzheimer’s disease and other dementias, and knowing what to expect as the disease progresses, can help you and your loved ones better face the challenges that come. One of the most difficult aspects of caring for a loved one with Alzheimer’s disease or other dementias is safely and effectively managing the difficult behaviors symptomatic of the disease. It is important to remember these troubling behaviors are manifestations of the disease process and not inherent in the person’s nature.

**Caregiving: a Mixed Blessing**

Caregivers are people who take care of other adults, most often parents or spouses, who are ill or disabled. Caring for another person takes a lot of time, effort, and work. Plus, most caregivers juggle caregiving with full-time jobs and/or parenting. In the process, caregivers put their own needs aside and can end up feeling angry, anxious, isolated, or sad. Caregivers for people with dementia symptoms are particularly vulnerable to burnout, resulting in depression and stress. Some physical symptoms that may indicate caregiving is causing too much strain on the caregiver are: sleeping problems, change in eating causing weight gain or loss, feeling tired and without energy most of the time, loss of interest in activities you used to enjoy such as visiting with friends, becoming easily irritated, angered, or saddened, and experiencing frequent headaches, stomach aches, or other physical problems.

It is important that caregivers take care of themselves. In the process, they will become better caregivers. It is helpful to explore community caregiving resources, ask for help and accept it when offered. It is also beneficial to stay in touch with friends and family. Social activities can help one feel connected and may reduce stress. It helps to prioritize, make lists, and establish a routine. Join a support group for caregivers in similar situations. Caregivers who work outside of the home should consider taking some time off, especially if feeling overwhelmed; it may help an overburdened one get back on track. Employees covered under the federal Family and Medical Leave Act may be able to take unpaid leave to care for relatives. Consider respite care, which gives family caregivers much-needed breaks. In the process, respite care reduces caregiver stress and helps caregivers keep loved ones at home for longer periods of time.

It is important to note that aside from feeling stress, many caregivers say their role has had positive effects on their lives. For example, caregivers report that caregiving has given them a sense of purpose. It has provided an opportunity to create positive memories and given a chance to heal the past. The work has increased their compassion, tolerance, and patience. They say that their role makes them feel useful, capable, and grateful that they are making a difference in the life of a loved one.

It is not easy to give care, or to receive it. Elders may feel weakness and a sense of loss in the trials of aging; so, too, do caregivers feel inadequate and possibly resentment in their role. God’s Word teaches us that our God is a good God. He knows the way and endeavor of every child. We desire to accept God’s will, even in this challenge of eldercare.

And he said unto me, “My grace is sufficient for thee: for my strength is made perfect in weakness. Most gladly therefore will I rather glory in my infirmities, that the power of Christ may rest upon me” (2 Cor. 12:9).

Jody Juntunen, RN, NP
Our Journey with Alzheimer’s Disease

My mother was diagnosed with Alzheimer’s disease in 2010. That same year she lost her beloved spouse of almost 60 years. A family decision was made that she would no longer live alone, so she also lost her home. What a challenge it was for her and her family through these drastic changes to find the joyful moments in life.

This story isn’t so different from other people suffering trials. We all have burdens to carry. Some are more visible; some are hidden. Though the body needs to travel the day-to-day path, God carries the believing one by faith. “Come unto me, all ye that labour and are heavy laden, and I will give you rest. Take my yoke upon you, and learn of me; for I am meek and lowly in heart: and ye shall find rest unto your souls. For my yoke is easy, and my burden is light” (Matt. 11:28–30). God sends angels to help and joys at unexpected moments. The first joy and help is an understanding spouse and family who strives to support and help.

It’s Important to Learn

When I first started caring for mom, I panicked. “Where is the book to deal with what is happening?” I took a class on Alzheimer’s and read books about it. Many difficult decisions were made in that first year. Educating oneself helps to communicate with family and others. A caregiver’s communiqués can be colored by the shock and distress of daily experiences. Family members can appreciate this and respond with love and understanding. Sometimes experiences are so surprising that if we didn’t laugh about them, we would cry. Yet through it all we wanted to maintain respect and love. It isn’t mom; it’s the disease. But sometimes it’s hard to maintain patience and love with the disease.

Respite Is Needed, Too

I was fortunate that mom was able to spend several months at a time with my brothers’ families. While mom was with us, I took a mental health class and art classes. I joined an Alzheimer’s support group. There, I could laugh and cry openly with people who understood. Mom and I joined a senior’s exercise group. Sometimes family took mom out to eat. Believing friends also took her out. We relied on home care services during mom’s last year with us. Sometimes family members stayed with her so we could get away. Our children and grandchildren came often, providing a distraction for mom and a chance for me to relax with family.

I received much support and love from dear believers at senior’s gatherings. We met in homes and listened to sermons. We visited during coffee. We weren’t getting out much anymore with mom and when we did, visits were cut short. These gatherings were peaceful times around God’s Word.

Family members who lived away came to visit, sometimes giving us a weekend away. They sent letters, cards, flowers, and phoned often. These moments brightened our day. It was good to be reminded to bless mom, even if it seemed she didn’t understand or respond.

A Need for Long Term Care

I began to realize that I was no longer giving the loving care I longed to give. It was time to let someone else help mom with her physical needs so I could provide love and comfort. This is an “ideal” statement. The decision didn’t come easily, and these months since Mom went into the nursing home have brought many tears for me. I trust that mom is in God’s care, but I worry that she’s lonely. It’s been hard to visit her in the nursing home when she still wants to come with me. I’m glad that she can still attend services with us, and she seems to enjoy Sunday afternoons in our home.
Mom always wants to go home, home to her mother. We understand that this isn’t a physical place, but a state of being—a place of comfort and peace. This is our goal on this journey that we would all reach this place of comfort and peace, our heavenly home.

Carol Simonson

A Positive Outlook Helps Esther Waaraniemi

Esther Waaraniemi is 94 years old and lives in Plymouth, Minn. with three stepdaughters and a granddaughter. For many years Esther lived in northern Minnesota with her husband John Waaraniemi, and after John passed away she lived alone in their apartment. About ten years ago she moved to Plymouth so she could live with family. In recent times, the blessing of living with family has come closer to Esther’s heart. We (Mara and Nora Waaraniemi) also spend time with and care for Grandma Esther during the weekdays when we’re not in school.

Esther has been able to enjoy having constant contact with family members because of her living situation. “I’m very comfortable with my family. They’re open to my needs and we get along well, including the dogs,” Esther says. Grandchildren and others come to visit Esther often. “It’s nice to have them come and know that I’m remembered. And they can preach the gospel.” Esther especially enjoys when grandchildren bring their own young children to visit. “I love to have them come. It’s so nice to see the new youngsters and know that both mother and babies are healthy,” she says.

When Esther isn’t up to going to church for services she’s able to listen online, or a minister sometimes visits her at home. When communion is brought to her at home, Esther reflects, “Communion is very refreshing and it gives me the feeling that I’m yet a believer.”

Esther has met aging with a positive attitude and by keeping her mind and days busy. She amazes her family with the amount of reading she does and her dedication to her daily crosswords. For many years before she married, Esther was a night nursing supervisor at St. Luke’s Hospital in Duluth. “Not very much is expected of me anymore,” she says. “If I make mistakes, people think ‘oh well.’ It doesn’t bother me to make mistakes sometimes. My memory can play tricks on me, and I don’t get around as much as I used to. Some days I don’t feel so good and I’d just as soon stay in bed, but that’s all right, too. We all get older, and there is nothing we can do to stop it, but to make the most of our health and enjoy our children and grandchildren. Most days are very enjoyable.”

Mara Waaraniemi
Nora Waaraniemi

Working with Elders Has Many Rewards

For the past three years, I’ve been working in an elder care facility. This experience has taught me many things, such as not taking life into my own hands and being thankful for the home and family that God has blessed me with. Working with elders has many rewards, but there are also difficult times. Each person who comes to live at such a facility has his or her own story. It’s important to keep an open mind while working because we don’t know what each person has been
through in life. It helps if I imagine myself in their shoes, and try to look at things from their point of view. This helps especially when working with a more difficult person. It isn’t always easy to do this because we can become impatient when things aren’t going as expected.

Compassion and empathy are important to show to the people that you work with. For most of the residents going into these facilities, it’s all brand new to them. Many come with worries about whether or not they will receive good care. I have learned that first impressions are really big, so it’s important to show that you care from the moment you meet them. Another thing that helps me when I work is humor. I like to be able to joke around and laugh with the people that I work with, whether it be my coworkers or the residents. It makes work more enjoyable. However, humor doesn’t work for all people because some have a more serious personality. It’s important to get to know the residents before joking with them because they might get offended easily.

Before becoming a nursing assistant and working with elders, I didn’t know if I would be able to handle the job. The first day was intimidating—there were so many things I needed to remember. Throughout my time working as an aide in an eldercare facility, I have learned a lot from the residents and people that I work with. Elders have so many stories and experiences from their lifetime that we can learn from. It’s rewarding to see the impact that just one person can have on someone’s life.

Ashley Simonson

Help Loved Ones Cope with Infirmities

As parents and elders of our congregations age, some will lose their ability to communicate, hear, see, and move about freely. They may also lose driving privileges, may need to sell their home, and may be incapable of making decisions. Because of these changes, they may not be able to participate in family gatherings, and their ability to attend services, Bible class, and other gatherings may decrease.

Our responsibility as fellow believers is to accommodate these changes with patience and respect, both for what they are still capable of doing and their feeling of loss as they need to make these changes. As my parents have aged, no matter what their physical losses have been, living faith and hearing and believing the gospel is still the most important part of their lives.

Communication Helps

When a parent or loved one has Alzheimer’s or dementia, they may not be able to remember where they are, what day it is, or what they have done recently. This also affects their ability to carry on a conversation. It’s helpful to reminisce of previous events in their lives. Telling the event in story form, such as “I remember when…” continuing to tell the entire story, pausing now and then to see if they have a memory to share, can be an effective way to communicate. With current events, it’s best to tell them what has happened that day, for example, “Today is Sunday, and we went to church…” and continue with events as they happened. This lets them be part of the conversation without feeling inadequate because they can’t remember the details.

With physical losses, such as hearing or sight, we need to adapt our conversation or activities to accommodate. With hearing, it’s best if the room is as quiet as possible. Hearing aids pick up noises at the same level, which can make it hard
for them to pick your voice out of all the noise. It’s best if you make sure that they’re looking at you. Enunciate words clearly, as they often can make out what you’re saying even if they aren’t able to hear all the words. Patience is needed, as they may ask multiple times to repeat something.

With vision losses, the elder often enjoys being read to. They can enjoy even when the young grandchildren or great-grandchildren practice their reading with them. We’re fortunate that there are many ways for our elders to listen to Christian publications: music CDs, the audio *Voice of Zion*, and archived sermons. If the elder is unable to attend services, they’re often able to listen to live sermons online.

**Empathy Is Important**

When major decisions need to be made, the elder often needs much longer to think through these. Losing driving privileges might come suddenly, as a result of an illness or incident. We need to be empathetic as we discuss their options for attending services, Christian gatherings, doctor’s appointments, grocery shopping, and so on. Perhaps family can fulfill this, church members can take turns, or community-based options can be considered.

The elder’s ability to make financial or healthcare decisions might become impaired. Signing papers to allow another to make financial and healthcare decisions when they’re no longer capable, selling their home, and moving in with family or into a facility for appropriate care, are other areas to be discussed. If families approach their loved one to discuss these before the need is present, it allows time to think and discuss these issues and pray for guidance. This also allows the loved one to express his or her wishes for what they would like when they’re no longer capable. It also gives direction to those left to make the decisions.

**Elders Need Our Prayers**

It’s important to acknowledge losses with empathy and patience when the elder laments about how his or her life has changed. We can encourage them that our Heavenly Father still has a purpose for them; often we others can learn from their wisdom and experiences. We need reminders that our elders have trials, that their journey of faith is not any easier, and that Satan finds ways to tempt them, too. Elders need our prayers and the gospel to encourage and uplift them.

A daughter

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**What Help Is Available?**

**We Don’t Walk Alone**

As believers, we do not walk alone in God’s kingdom. “And whether one member suffer, all the members suffer with it; or one member be honoured, all the members rejoice with it” (1 Cor. 12:26).

Preparing for a possible infirm stage of life can be complex and challenging as one does not know what the challenges are until they happen. One elder might have physical disabilities, another memory difficulties, or another financial limitations. How can a person prepare for these? There are several key components regarding how a person’s wishes can be fulfilled: psychological needs, financial resources, and legal considerations.

**Needs and Benefits**

Psychological needs include physical and emotional needs. What are some of your likes and dislikes? If you are unable to
continue to live on your own due to safety reasons or unable to take care of yourself, what type of care might you need? Take the time to share with trusted individuals what type of transitional care you might consider: living with family, other types of living situations, a retirement community, and so on.

Eldercare can be expensive, so knowing financial capabilities and available resources is helpful. Knowing the benefits that are available from Medicare, VA benefits, Long Term Care Insurance, and other assets for saving accounts can aid in making care decisions.

Legal rights, or preparing documents with an attorney who works with the elderly, will help your family or a trusted individual carry out your wishes if you become incompetent. Some of these documents include power of attorney forms, medical directives, and estate planning.

How Can Others Help?
What can families or trusted individuals do to help? Preserving the dignity of an elderly can sometimes be difficult for his or her family. Sometimes the children want to do things quickly and get something done; yet, this is not a fast process. With age, decision-making abilities also slow down. Sorting through the options first and then presenting the two or three best ones to the elder can simplify the process. Allow them to make decisions when possible.

Procrastination can become part of one’s life as energy levels decrease and completing tasks becomes more difficult. A challenge may be that the elder knows that he or she should move but is challenged with deciding what to do with personal belongings accumulated over the years. So the move is put off. Often younger generations seem so busy with their own lives or families that parents or older relatives don’t want to bother them or share burdens with them. Accepting these changes may be difficult for the individual as well as his or her family and friends.

Work Together
Children, or close young ones, let your parents or other elders know that you are there for them. To help them preserve their dignity it’s important to ask instead of tell them that they need help. If you notice them struggling with daily tasks, ask permission to help. Doing it together can make you both feel good; telling can bring on arguments and hard feelings.

Having open discussions about safety, preserving health with nutrition and exercise, and discussing financial needs makes the time of transition happier and less stressful.

Bernice Hillukka,
Professional Care Manager

Resources: https://www.agingcare.com

A Reversal of Roles
It is the reversal of roles, the helplessness I feel when dealing with health and other issues with my elderly parents that is the hardest. The child of once young and healthy parents who looked out for me, to being the caregiver is an eye opener. It doesn’t seem that it could happen so quickly.

“The first time I noticed something the matter with your mom was when we were on our road trip to Florida,” dad explains. “When she insisted the wrong way was ‘right,’ I knew something was up. She was my map-reader—she never
steered me into a wrong turn before. Finally, she, too, realized she was wrong.” This was years before her official diagnosis.

Mom slipped slowly. Forgotten words, changes in behavior, the way she dressed. Finally, her family doctor tested her again and told us she had Alzheimer’s. Household tasks became difficult; ever the hostess, mom insisted on doing the dishes—many times we needed to rewash them discretely. At first she knitted and crocheted—the same pattern round doilies are a treasure from that time in her life. Slowly all this stopped. Her conversation skills also declined.

“I have lost my partner, my conversation companion,” dad lamented. “One day I was in the basement family room stoking the fire in the fireplace, when your mom came to me. She tapped me and asked, ‘Will you leave me because I’m like this?’ dad related. “Of course not!” he’d answered. It broke my heart to hear her fears, but it also gave insight into her world.

It was difficult for dad to have mom moved into a care facility. He had wanted to care for her himself, but she became too much for him to handle. Mom would sneak away from home while he was having a nap. Countless times we looked for her in the streets of their town.

Luckily, we had believing families nearby who helped. Mom was registered with the local police department, wore a bracelet, which helped locate her. The community at large was very helpful. A woman in the neighborhood behind mom and dad’s noticed mom wandering one day and stayed with her until we were able to locate her.

Mom was registered with the local heath unit and received care three times a week at home. This gave dad a bit of respite. Personal care workers came to stay with her so dad could do errands. They did light housework and bathed her. Mom was on a waiting list for a bed in the care facility for three years before dad was able to accept her being moved.

Acceptance Came

Mom has been in the home now for eight years. We celebrate her birthdays there; we spend Christmas Eve with her; and we’ve had services there. Her grandchildren and great-grandchildren come to see her, too. Mom is not hidden; she is enjoyed!

Dad’s lot has become mixed. Up until his recent hip replacement surgery he visited mom most days. His own routine eased his life, and ours. He cooked, baked, gardened to while away the long hours. Winter vacations in the warmth of southern climes were enjoyed with each of us siblings in turn.

Guilt over not doing enough, not knowing what is right to do, is tempered with trust that life will go as God plans. Thinking of many difficult situations I have realized that mom and dad have had to let us take steps without them—to school, jobs, marriage, moving away. They trusted that God would guide our way and keep us safe. It is our turn now to trust in God and His plans for them, and for us.

Eija Mikkola

Our Life Rests in God’s Hands

Dad got the call on a gray, rainy day in 2007. A room had become available for mom in the nearby nursing home. We had a few short hours to accept the room and move her in. I remember that day clearly. Nature seemed to be echoing my feelings.
Mom stayed in bed all day as I sorted through her clothes and other belongings trying to decide what items she would want and need. Mom and dad, years earlier, had walked past the nursing home that was being built near their home and talked and agreed that one day they would move there. It seemed that September day that mom knew her day had come, even though she might not have fully comprehended it.

The day felt empty and sad. I knew that the move was the best for mom’s safety and wellbeing, as well as for dad’s, as mom was becoming increasingly difficult to care for, but my heart was finding it difficult to accept.

Later in the afternoon mom finally got out of bed, and she and dad went to visit their granddaughter’s family, which included three little boys, a home full of life and activity. I thought…such a blessing to have family of all ages to share in life’s joys and sorrows.

The next morning was moving day. As I watched the residents being brought into the dining room wearing bibs, some drooling, wheelchair bound, helpless, my heart ached. It seemed that mom didn’t belong here! It was difficult to leave her; yet, I wanted to trust that God would continue to protect her and keep her as He had done until that day.

The first few days and weeks were difficult. Mom wanted and tried to leave. She didn’t sleep, but wandered aimlessly and was sad. The geriatrician came to visit her, trying to determine if she was depressed. I somehow found it odd that they couldn’t understand her mood. Of course she was down! She had just been moved from her home! It was difficult for dad as well. It was lonely at home; the house was so quiet.

In October, the staff at the nursing home told us to all stay away for a weekend. During that time, they moved her into a new room. This change seemed for the better. It became easier for dad and the rest of the family when we saw that she was finally settling in. I also realized that mom was not in prison; we could take her out visiting, to services, perhaps to the mall. I also realized that mom didn’t necessarily want to do the things that I thought she wanted to do. This understanding helped me a lot.

It’s now been eight years that mom has lived in this home. Life is back to a new normal. Mom is well taken care of. It’s not perfect, but neither would it be perfect if she lived at home in her condition. I enjoy visiting her. She’s calm and peaceful, and although she’s not able to speak, we’re sure that she recognizes us. It’s evident from her demeanor that she enjoys listening to our conversations, to services online, and to songs of Zion. She looks intently in my eyes when I say evening prayers with her. And, as with all believers, she needs to hear the gospel, assured and comforted that her sins are forgiven in Jesus’ name and blood.

Dad visits mom every evening and helps with her feedings and other care. “Mom has taken care of our family and me for years; it’s now my turn to care for her,” he has said. It’s comforting that our life rests in God’s hands.

Hilkka Mikkola

Caring for My Loved One

Caring for an aging loved one for a prolonged period can be challenging. Nevertheless, the experience can also provide learning and a sense of helpful blessing from our Heavenly Father.

My husband experienced several years of declining health. It was hard for him as well as me to see him lose his independence and ability to pursue normal activities. Besides not finding pleasure in daily activities, his deteriorating
vision and hearing resulted in a loss of enthusiasm for reading and listening to sermons and music. His loss of mobility and problems with bodily functions were distressing to him. Especially after several small strokes and a number of falls, he sometimes behaved in ways that he would never have before. These behaviors and unusual expectations were upsetting to me. I felt guilty for not having more patience. Yet, it was comforting that he always asked for forgiveness when he realized what was happening.

During these difficult times I found it necessary and a blessing to rely on prayer and God’s blessings of strength and ability to do what I could. Visits and prayers of believing friends were most helpful. Regular visits by speaker brothers to give communion and encouragement of God’s Word were greatly appreciated.

Being placed in a nursing home was the most difficult thing for my husband to accept. Again, I felt guilty; but I was no longer able to care for him at home as he became weaker and needed more care. He often expressed his desire to be relieved from his miseries and to be taken to the heavenly home for which he longed. He knew that the promise of a much better life awaited him. He frequently asked us also to pray that the time would come soon. Even after becoming delirious and agitated at the end of his life, he was able to ask to hear the gospel and express his love for us a final time. When he died, my first reaction was to thank God for hearing his prayer. Although I felt the pain of parting and the deep loss of communication, I thought of the many happy years with which God had so richly blessed us. I was thankful for the gift of faith and forgiveness. The remembrances, support, and love of the believers was beyond measure.

A wife of many years

“How Are You Doing?”

Megan Anderson, a Minneapolis congregation fourth grader, a while back noticed that fellow believer Reino Wuollet wasn’t at services. She asked her mother about it and then sent this note to him, along with her school picture. Reino and his wife Betty spoke about how much this kind gesture meant to them. “I couldn’t believe that a young girl would remember this old man!” Reino said. “I want to go to church…I just can’t make it there!”

The Blessings Were Abundant

It has been almost twenty years ago that we cared for our mom with Alzheimer’s. In the first stages of her disease, the changes were slow. In fact, some days I thought that she was just fine. Later, the changes became very noticeable. Simple everyday tasks became hard for her to do. This is when it became so hard for me to believe this was really my mom. How could one who knew how to do so much, all of a sudden be able to do so little? I cried about it to my husband Ken, and he taught me a good lesson. He taught me to laugh with my mom. It was hard at first, but slowly I learned, and it was a good benefit.

So many times I prayed my mom would get better, but as we studied Alzheimer’s, we learned there is no cure. The stages only get harder. As my mom changed to a different person, we had to learn how to live a new way with her. We had to learn how to accept all the changes. It wasn’t one bit easy to do, but we know that God helped us. We learned to
never argue with her; we learned she is always right; we learned it doesn’t matter how many times she asked something or told us the same thing over and over.

Ken was a great support. There is nothing that he wouldn’t have done for my mom. His love and patience for her was unconditional. Now looking back, I realize that the blessings were abundant. We lived a slower life, we enjoyed home services, we laughed about small things, and we learned that life wasn’t just about our own selves. It was about caring for someone we loved so deeply.

Our memories of this time are countless. A special memory is when our youngest boy walked with her to her bedroom so she could go and rest. Before he left her room, he preached the gospel to her. She thanked him so much. Yes, her mind was almost gone, but true faith lived in her heart until her journey’s end.

Maureen Wuollet