

A hidden national trauma

A hundred years ago Britain was in trauma: there was hardly a family in the land that had not been left bereaved by the First World War. Also haunted by the memory of those who did not return were the men who did, guilty at having been spared, almost all of them unable to talk about what they had seen.

The decades after the War saw not just economic recession, but also a decline in religious practice, as the teaching in many faith communities now failed to answer new questions. The “rampant omnibus” of the First World War, to use the historian Trevor Wilson’s arresting expression, killed the Liberal Party and the myth of progress; it may also have dealt a serious blow to the Church of England as well.

By contrast, the Catholic Church had a reasonably “good” war, as its devotional life was better fitted, if not to answer the question of suffering, then at least to provide it with a series of images through which it could be expressed. The Stations of the Cross, and devotion to Our Lady of Sorrows, as well as to the Little Flower, all seemed to assume new and deeper significance after the War.

The way devotional practices can become an objective correlative to the national mood demands more attention. The way we pray is surely connected to the way we feel. And the way we feel may often seem beyond words, but only expressible through that which transcends language. Devotion to Our Lady as Mother of Sorrows, and devotion to Jesus Himself as Man of Sorrows, has great resonance in lands where tragedy is an everyday state of affairs. Such devotion provides people with a way of knowing what they feel when feelings cannot be put into words.

Britain today, as a hundred years ago, is also a traumatised society; but the trauma that affects almost every family (and of which we talk surprisingly little) is the slow, agonising bereavement that dementia brings.

Watching someone you love disappearing into the darkness of Alzheimer’s disease is a distressing experience that many of us have had. Yet this trauma remains, to a remarkable degree, unaddressed. The sense of loss in the wake of the First World War generated famous works of poetry, literature and music. Our reaction to Alzheimer’s has produced very little. Mention can be made of John Bayley’s books about his wife Iris Murdoch and other memoirs, but they remain isolated examples. People who feel bereft in the face of Alzheimer’s and other forms of dementia do not have a corpus of



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literature, music or poetry to which they can turn. Nor do they have religious practices that might make sense of their experiences.

Or do they? As has been often observed, people with dementia do retain some faculties longer than others; in particular it has been observed how music “makes sense” to those with dementia even when language has escaped them.

We generally learn music before we learn anything else: my earliest memory is of the song “Frère Jacques”, and others will have similar memories. Perhaps music will be the last thing I appreciate too.

And the same goes for prayer. That was taught early, and like many a favourite tune, repeated again and again. Prayer also can continue to be appreciated long into the gathering dusk of the fading day. The simpler the prayer, the better, and often the more profound.

The rosary depends on the repetition of the three most well-known Catholic prayers. When I visit those living with dementia, that is what I do: I say the rosary with them – not all of it, just a decade – and they join in. Many of those I visit have rosaries hanging by their beds, and religious pictures as well. That these accompanied them to the care home, along with family photographs, shows their importance. But these rosaries need to be used to be effective.

If one prays the rosary with dementia patients, or indeed with anyone who is unwell, the rosary becomes, by force of

association, a prayer not just *for* the sick but *with* the sick. There is a big difference. We all know that we must pray for the sick; that is a duty. But one can pray for the sick without really knowing any of them. Praying with the sick is a more intimate act of solidarity; and when one carries on the prayer on one’s own, it becomes an extension of that prayer with them. You take them into every rosary, and in so doing the person with dementia is no longer alone, but part of the Church’s cycle of prayer. The voice of prayer is never silent, as the hymn has it, and in praying the rosary we give a voice to those who may be voiceless, and we are with those who might otherwise be alone.

The rising incidence of dementia brings grave dangers for us all. It sharpens the desire of some to legalise euthanasia. It creates a class of people who are easily regarded as non-people who have been pushed to one side, who cannot socialise, who cannot participate. That we have “put away” the demented carries with it a burden of guilt.

We need to face the truth that people with dementia are still people and still here, still in our midst. One way, perhaps the best way, is to pray with them. Every parish needs a rosary group that goes from care home to care home, to remind ourselves that those with dementia are still part of the Body of Christ the Church.

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