Going the Extra-Mile to Prevent Wandering
written by Luciana Mitzkun Cramer, Educator and Care Specialist

The Oxford English dictionary defines wandering as walking or moving in a leisurely, casual or aimless way. Dementia patients wander, but not always casually as this formal definition suggests.

In dementia patients, wandering means acting on a desire to be elsewhere. Some do indeed wander casually, mainly because they can’t think of anything else to do—it just feels right to keep on moving. Not all wanderers do so aimlessly; some wander with resolve. Some patients wander to get away, when they feel that they are not at home, or there is something or someone bothering them. Some wander to reach a specific location—it may really exist, or just be imaginary, perhaps the product of a hallucination or an old, misplaced memory. Furthermore, wanderers are resourceful when it comes to modes of transportation: they will use everything available to them, whether it be walking, driving, public transportation, or even hitchhiking. Don’t bother telling them not to wander; they don’t know they are wandering. All they know is that they just want to keep on going.

Wandering can be dangerous. According to the Alzheimer’s Association, 6 out of 10 dementia patients will wander at some point. Wandering may leave a person exposed to the elements, without food or water for hours or sometimes days and at serious risk of injury. It is estimated that 20% of wanderers who are not found within 24 hours do not survive. A few are never found.

In 2015, 86-year-old Rollande Towe walked away from his camping site in San Bernardino, California. What was supposed to be a nice family weekend outing turned into a nightmare when he did not return. The family contacted the sheriff, who launched an extensive search and rescue operation. Nearly 3-days later, he was found lying in the sand in the Mojave Desert unable to recall how he had survived the desert’s plummeting temperatures and unfriendly wildlife. Mr. Towe had Alzheimer’s disease. He was weak and dehydrated, but amazingly otherwise fine.

Others are not so lucky. Retired trucker and Alzheimer’s patient Charles Springer was just 69-years-old when he walked out of his house never to be seen again. His mother kept up hope that he would be picked-up by a trucker and awaited his return for months, then years. In 2011, after missing for 2.5 years, Mr. Springer’s remains were found by a deer hunter in a wooded area 1.7 miles from his home in Belmont, Maine.

Sometimes dementia patients wander with tragic consequences for their entire family. Not knowing where a loved one might be or whether she is in dire straits can be devastating. There are only two choices with regard to wandering: search and rescue, which is better left to trained professionals, or prevention, which is the caregiver’s responsibility.

Preventative measures for wandering cannot be implemented soon enough. The moment a per-
son becomes afflicted with dementia, the risk of wandering is ever-present. There is no way of knowing when a loved one with dementia will wander. There is no dementia stage to which wandering is restricted; it can happen to any patient at any time throughout the course of the disease. Caregivers who say oh no, she is not a wanderer, are ignoring the effects of dementia concerning her ability to make decisions. Wandering is not always habitual, it may happen only once, and one time is too many. We just can’t predict when. But there’s one thing we can be certain of: if she can move, she can wander!

Here are some things you should consider doing in an effort to prevent wandering:

**Allow and plan for safe wandering**
Wandering can be a natural way for dementia patients to disperse negative energy, such as anger and anxiety. Make sure your loved one has safe pathways for walking around the house, and a safe route to walk outdoors.

Sometimes people wander off in search of the bathroom or a midnight snack, get distracted and end up leaving the house. Illuminate pathways, and use night lights to keep them safe. The right lighting helps those with dementia to stay oriented. You can also place a picture of a toilet on the door to the bathroom or of food on the door to the kitchen to help with orientation in the home.

**Use technology**
There are GPS devices that can be used to find his precise location on a map; GPS trackers can be worn as a bracelet, or can be inserted into a shoe. Some alert you if your loved one has wandered beyond a certain area. There are also devices that alert you if a door is open in the house, which can be particularly useful in the middle of the night.

The Medic-Alert with Safe Return program offered by the Alzheimer's Association can provide an additional layer of security. The potential wanderer wears a bracelet containing information that connects to a national database as well as the local sheriff’s department.

**Monitor exits**
Install little bells on top of doors to alert you when they are opened. Install a lock toward the bottom of the exit door and paint it the same color as the door. She will not notice it in such an unusual place.

For those in advanced stages, you can put a mirror or a stop sign on the door, a strategy frequently used in professional dementia care settings. A dark rug in front of the door may act as a deterrent; she might think it's a hole and avoid it. Do not ever lock a person with dementia in a home, unless there is someone—who is not also suffering from dementia—there with her. In case of an emergency, such as a fire, she will be trapped.

**Provide activities**
There are two things that are known to elicit wandering: too much activity and too little activity. Too much activity will overwhelm him and he will want to leave. Too little activity will cause boredom, and he will leave in search of what to do. Dementia patients often lack the ability to initiate activities, and it is up to caregivers to organize them. Keep your loved one involved in activities that are appropriate for his cognitive abilities, such as gardening, sorting objects, or folding clothes. Also, consider enrolling her in an adult daycare program that provides dementia-friendly activities daily.

**Exercise**
Take her on walks with you, and make sure she gets plenty of physical activity on a regular basis. Physical fitness is the best tool we have to fight dementia. It also provides a safe outlet for troubling emotions, often curtailing the need for wandering.

### Tips & Tools: Tracking devices

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<tr>
<th>Device Name</th>
<th>Type of Device</th>
<th>Indications</th>
<th>Price</th>
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<tr>
<td>GPS Shoe</td>
<td>GPS tracking device located in the heel of the right shoe</td>
<td>Location is updated every 30 minutes</td>
<td>$299.00 for the device + $24.95 per month, plus a one-time activation fee of $35</td>
</tr>
<tr>
<td>GPS Smart Sole</td>
<td>Shoe insert enabled with GPS technology</td>
<td>Radius can be set for the user and the caregiver will be alerted if the person travels outside this zone</td>
<td>$299 per pair Monitoring plans starting at $24.95 per month, plus a one-time activation fee of $35</td>
</tr>
<tr>
<td>Safe Link</td>
<td>Small pager tracker device carried by the person</td>
<td>Sends geographic coordinates to central servers and family members</td>
<td>Device: $169.99 Monthly Service: $18.97</td>
</tr>
<tr>
<td>PocketFinder</td>
<td>Device can fit in the palm of the hand</td>
<td>Allows caregivers to track wearers through a user-friendly app</td>
<td>$129.95 plus monthly service charge</td>
</tr>
<tr>
<td>Comfort Zone Check-In</td>
<td>Small device that can be carried in a purse or a pocket, or an app in a Sprint cell phone that the person carries with them</td>
<td>Syncs directly to a caregiver’s smart phone or computer</td>
<td>Device: $149 Activation: $45 2 min locate Monthly: $39.99</td>
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<tr>
<td>Gizmo Pal</td>
<td>Device is worn as a watch.</td>
<td>Can make and receive phone calls, also has a locator connected to a smartphone</td>
<td>$79 Verizon subscription for this service</td>
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