

Walking With Purpose

Walking is a pleasurable and integral part of daily life. It allows us to interact with others, explore new places, accomplish tasks, and stay active. In this article, the term "walking" is used rather than "wandering," as the latter implies aimlessness, whereas walking typically serves a specific purpose.

Walking can be beneficial for individuals with dementia, though it also presents the risk of disorientation or injury, especially when their sense of location or ability to find their way home is compromised.

Ensuring safety for people with dementia while respecting their need for autonomy and decision-making is a delicate balance, as cognitive abilities can fluctuate over time.

The approach to addressing these challenges will vary based on the environment where walking occurs and the support provided by family members and caregivers in ensuring safe walking experiences.

Why do people with dementia walk around?

There are various reasons why someone with dementia may walk frequently. If a change in walking habits is observed, it may help to keep a journal for a few weeks—documenting when walking occurs and possible triggers. This can help identify patterns and determine ways to support safe walking.

If there is a sudden change in behavior, it's important to consult a doctor to rule out potential health issues like pain, discomfort, or conditions such as anxiety or agitated depression. Increased confusion may also indicate an underlying illness.

Some possible reasons for walking around include:

- Feeling disoriented or uneasy in a new environment
- Experiencing boredom and needing an activity to stay engaged
- Releasing excess energy
- Searching for familiar people or places from the past
- Responding to feelings of anxiety
- Losing track of time, confusing day and night

Supporting safe walking

Encourage movement and physical activity. Rather than restricting the desire to walk, focus on finding ways to ensure it's done safely. The approach should consider factors like the environment (e.g., the risks in a busy city versus a small, familiar community), the person's ability to manage and communicate, and the potential to reduce or manage triggers that prompt walking.



Strategies for reducing risk include:

- Create well-known walking routes for the family, ensuring they are familiar with their duration. Encourage walking during daylight hours rather than at night, wear appropriate footwear, and consider walking with a companion or in a group.
- Ensure the person carries identification
 with their name and contact details of
 someone who can be reached. This could
 be sewn into a jacket or handbag to make
 it less likely to be removed, or worn as an
 identity bracelet.
- Look into location-tracking devices such as a mobile phone with GPS, or specialized devices that use GPS or radio frequencies. You can explore options at outlets that sell portable devices or check out Wandersearch for a simple New Zealandbased tracking system using radio frequencies.
- Promote engagement in regular activities such as gardening, household chores, hobbies, and recreational pursuits.
- If there's a risk of getting lost, remove triggers that could encourage walking alone, such as coats, bags, umbrellas, or the dog leash. Install a bell or buzzer on outside doors to alert when they are opened.
- If the person insists on leaving and cannot go alone, avoid confrontation. Help them with appropriate clothing and accompany them, shifting the focus toward returning home together.

If a person with dementia goes missing:

- Stay calm and avoid panicking.
- Start by conducting a thorough search of the house, nearby areas, and familiar routes. Inform your neighbors and ask if anyone has seen the person.
- Contact local hospitals and ambulance services in case the person has been brought in for care.
- If there is an immediate risk to their life (such as severe weather or health issues) or if you haven't located them within 15-20 minutes in the immediate area, call 111 and request assistance from the Police
- When speaking with the Police, be prepared to provide a detailed description of the person, information about their walking habits, or possible locations they might have gone, such as old neighborhoods, former workplaces, or favorite spots.
- Ensure someone is available at home to answer the phone.
- If the person is still able to navigate traffic safely, they often stick to familiar routes when walking. Knowing their usual route can help reduce search time, as you'll be able to estimate how long they typically take and where they are likely to go.



Preventing Falls This Fall

Falls are one of the leading causes of injury in older adults, and the risk is even higher for people with dementia. A fall can lead to serious health complications, loss of independence, and reduced confidence in mobility. The good news is that many falls can be prevented by understanding the risks and making simple changes.

Why Do Older People Fall?

As we age, several factors increase the risk of falling, including:

- Reduced muscle strength and balance Making it harder to stay steady.
- Slower reflexes Delayed reactions can make it difficult to correct balance.
- Vision problems Poor eyesight makes obstacles harder to see.
- Medication side effects Some medicines cause dizziness or drowsiness.
- Environmental hazards Slippery floors, poor lighting, or clutter can lead to trips and falls.

Why Are People with Dementia More Likely to Fall?

Dementia increases the risk of falls due to a combination of physical, cognitive, psychological, and behavioral changes.

- 7 Physical changes: Muscle weakness, slow movement, and poor coordination affect balance.
- Cognitive changes: Memory loss and confusion can make it difficult to recognize hazards, find the bathroom safely, or remember to use a walking aid.
- Psychological changes: Anxiety, agitation, or fear of falling can actually increase the risk of a fall. Depression may also reduce activity levels, leading to muscle weakness.
- A Behavioral changes: People with dementia may wander, forget to use mobility aids, or stand up suddenly, increasing fall risk.

How to Reduce the Risk of Falls

1. Make the Home Safer

- Ensure good lighting in hallways, bathrooms, and stairs.
- Remove clutter and secure loose rugs or cables.
- Use non-slip mats in the bathroom and kitchen.
- Install handrails and grab bars in key areas.
- Keep essential items within easy reach to reduce the need to climb or stretch.

2. Make the Person Safer

- Encourage supportive footwear—avoid slippers or loose-fitting shoes.
- Use walking aids if recommended, and ensure they are used properly.
- Consider hip protectors to reduce injury risk in case of a fall.
- Supervise where necessary, especially when getting up at night.

3. Maintain Physical Health

- Encourage regular movement to keep muscles strong and improve balance.
- Ensure the person has regular eye and hearing checks.
- Monitor hydration and nutrition, as dehydration and poor diet can increase dizziness.

4. Treat Behavioral & Psychological Symptoms

- Address agitation or restlessness—a calm routine can reduce sudden movements.
- Identify triggers for wandering and find safer ways to allow movement.
- Encourage a structured daily routine to reduce confusion.



5. Ask a GP to Review Medication

- Some medications cause dizziness, drowsiness, or low blood pressure—ask the GP if any can be adjusted.
- Avoid unnecessary sedatives or sleeping pills, which can increase falls risk.

6. Keep Active

- Strength and balance exercises (like Tai Chi or seated exercises) can improve stability.
- Encourage walking and gentle physical activity to maintain strength.

7. Prevent Injury

- Have a falls response plan—know what to do if a fall happens.
- Keep a phone or emergency alert device nearby.
- Learn safe ways to assist someone who has fallen—lifting incorrectly can cause further injury.

Final Thought

Falls are not an inevitable part of aging, and taking proactive steps can help keep people with dementia safe and independent for longer. Small adjustments to the home, routine, and healthcare approach can significantly reduce the risk.

Mum and Dad

"Mum seemed alright to you didn't she?" says a sister to her brother. "Mary (Mum's friend) doesn't see anything wrong with her. Yes she forgets things sometimes, but who doesn't." Her brother responds "What's Dad on about then?"

What Mary and the younger family members haven't seen is just what it took for Dad to prepare Mum to go out with them today. He needed to supervise her shower, help her dry herself, hand every item of clothing to her individually and help her put each one on. He also washes and irons her clothes, prompts her to do her hair, cooks the meals and looks after the household tasks.

They didn't hear Mum asking "Where are we going?" six to eight times during the short car journey on familiar roads. They didn't hear him explaining who Jim and Catherine were. They also don't see the agitation when things go wrong or the frustration when she is unable to do a simple task.

We need to listen to the 'carer' when they talk about the changes in their caring role. The person with dementia can 'hide' the reality of their challenges for a short time, when there is someone there to support them.





Welcome back to our first newsletter for 2025!

As of Mid March, all of our groups are back in full swing, we have 8 carer support groups, 17 social groups and our specialised CST and CST maintenance programmes all under way! the team have worked tirelessly to provide these as demand continues to grow for our services.

offer, With many services on fundraising matters more than ever keep an eye out for our dedicated volunteers for this upcoming May appeal - dates are May 22nd, 23rd and 24th.

We currently support over 500 families and much of what we do is underpinned by the contributions of our volunteers. With National Volunteer week approaching, we would love to be able to share some stories from you around how our volunteers have been able to connect with you or your loved ones.

We are also so excited to be bringing the Artful Mind Exhibition back this year! If you are interested in having your story interpretted in art form or would like to collaborate with an artist, please contact your Navigator.

Education Opportunities

April

 Supporting a Person with Dementia

March

- o Thur 12th Tauranga 10-12pm
- About Dementia
 - Wednesday 26th Tauranga 10 -11.30am

- Understanding Changed Behaviour
 - Monday 11th Tauranga 12.30 -3pm
- About Dementia
 - Wed 30th Tauranga 10 - 11.30am

 Supporting a Person with Dementia

May

- Friday 9th Katikati 10.30 - 12.30pm
- Wednesday 14th Tauranga 6 - 8pm
- About Dementia
 - Monday 12th the Mount 2 - 3.30pm

Please contact your navigator if you would like to attend any of these sessions

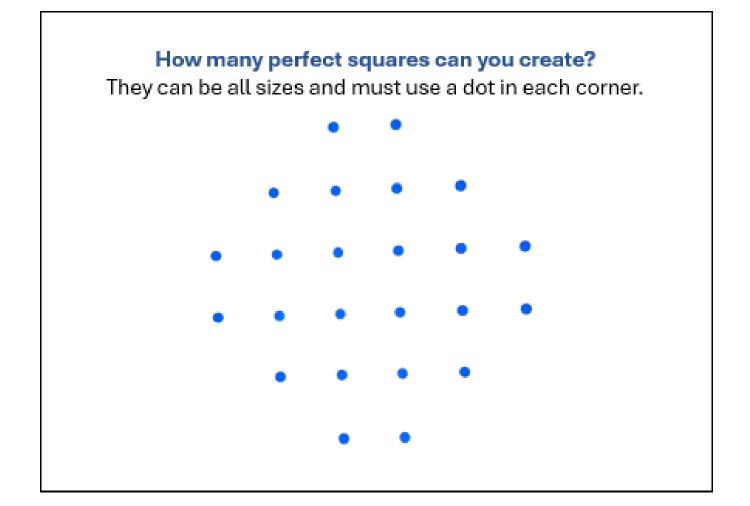


Brain Awareness Month

Adelle Tanner Activities Coordinator

Its brain awareness month and there's no better time than to do a challenge that will keep our brains sharp –

Research has demonstrated that social interaction and cognitive stimulation are so important for our brain health. And our activity groups are designed to get people thinking; talking and engaging in a range of activities (not child-like) and discussions, that are rewarding and fun. You can enjoy doing something familiar or try something new; keep active and connect with others. Our groups are inclusive, even for the quieter individuals, and seek to focus on people's strengths and their opinions.





Poem By Caroline Bartle

Caroline Bartle is Alzheimers NZ Dementia Learning Centre Director.

Originally from the United Kingdom, Caroline is an internationally recognised leader in dementia mate wareware education. Her research focuses on organisational learning and workforce development in the field of dementia mate wareware care.

I was scared at first, not gonna lie
Thought dementia meant saying
goodbye

To the person inside, lost in the fog But boy, was I wrong about this job

Showed up thinking I had to fix things Do this, do that, pull all the strings But soon I figured, that ain't the way Sometimes just sitting's okay

Holding hands, not saying a word Felt more real than anything I'd heard Sharing a cuppa, seeing them grin Made me realise what I was missing

When talking got tough, we put on some tunes

Saw toes tapping, memories in bloom Flipping through photos, hearing old tales

Gave me wind behind my sails

I stopped trying to fill every minute Found out silence ain't so bad when you're in it

Being there, really there, you know?
That's when I saw the care start to grow

They taught me 'bout dementia training Fancy words and skills they're naming Qualifications? Sure, they're fine But real learning? It's you and me, all the time

They sent me to classes, gave me a diploma

Thought that'd fix it like a magic formula But sitting here now, I gotta confess Paper knowledge ain't much in this mess

The real stuff? It's right here, every day In how we muddle through, come what may

No lecture taught me to read your eyes Or find the meaning in your sighs

Certificates on my wall? Just for show
The true learning? It's here, go slow
In moments shared, in silence, in touch
That's where I learned what matters
much



We thank the following for their ongoing support

















PLEASE SUPPORT OUR WORK!

Did you know that we are a charity? Only a small proportion of our costs are met by contracts and we work hard to fundraise the rest locally. Please consider the ways you may be able to support us to continue to provide our services to everyone who needs help dealing with dementia.

I/We	would	like	to suppor	rt people	in my	loca	communi	ty	by:
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Becoming a mer	mber - membe	ership subscription i	s \$40 per year	Life membership \$200								
With a gift of	\$2	\$50	\$100	Other								
By giving regularly and/or making a bequest (please send me further information)												
Please charge my	VISA	Mastercard	Card num	ber								
	Expiry	/ CVC	Signature	of card holder								
Name:												
Address:												

Gifts \$5 and over are tax deductible.

For direct credit and/or automatic payment, Alzheimers Tauranga - WBOP bank details are: Westpac, Tauranga Centre 03-0435-0470677-00. Use your name as a reference.



Phone: _