

Abstract

The meaning of walking about
for older adults with Alzheimer's disease

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I. Significance of the study

“Wandering” is narrowly defined as a temporary, purposeless, nearly irresistible, and compulsive fugue (Dictionary of Psychiatry, New Edition, 1993). The incidence of missing persons attributable to dementia has increased over the past nine years, so wandering is a pressing issue that needs to be addressed (National Police Agency statistics, 2022). However, wandering, as a psychiatric symptom, is likely to result in the individual being monitored for the simple purpose of accident prevention. Therefore, in this study, we will identify the wandering of elderly persons suffering from Alzheimer’s dementia in the context of human behavior known as “walking about,” clarify its purpose, and determine the meaning of their actions and behaviors. This study has the academic significance of proposing methods of care from perspectives that differ from the conventional ways of understanding wandering; it also has the practical significance of making it possible to consider methods of intervening with and exploring the behavior of “walking about.”

II. Purpose of the study

This study aims to clarify the meaning of the “walking about” that is noted in the life of elderly persons with Alzheimer-type dementia (hereinafter “ATD”). In this study, “walking about” refers to a condition in which elderly persons with ATD walk by themselves for one reason or another.

III. Study method

1. Study design: A qualitative descriptive study design that uses semi-structured interviews and participant observations.

In this study, we analyzed the meaning of the phenomenon termed “walking about,” which is recognized in society as “wandering,” through the narratives of people with experience in providing long-term care to elderly persons with ATD. We respected the subjectivity of the collected qualitative data and adopted a theme analysis method that enabled analysis that maintained the context of the data.

2. Study subjects: The subjects of the study were two members of a family who have experience

in providing long-term care to elderly persons with ATD who walk alone and six long-term care staff members who work at an outpatient daycare facility for dementia patients (dementia day service or “DS”) or at a communal daily long-term care facility for dementia patients (group home or “GH”).

3. Survey period: April 2016–September 2017.

4. Method of data collection:

- 1) Semi-structured interviews: After sharing with the subjects the perspective of this study that focuses on “walking about,” we conducted each interview by explaining that the elderly persons had received a diagnosis of ATD that met the criteria for wandering, or a wandering scale, as established by Algase (1992). We asked the subjects about the following: (a) the actual situations and circumstances of elderly persons with ATD walking about and their words and activities during that period, (b) the reasons elderly persons with ATD walk alone as well as the subjects’ views on walking about, and (c) daily-life episodes related to walking about and the elderly persons’ reactions.
- 2) Basic data on elderly persons with ATD: The following information was collected through the interviews: Their age, sex, number of years using the facility, the level of nursing care required, and the results of walking about. If observations could be made, we collected them using the Functional Assessment Staging of Alzheimer’s Disease (FAST) and the status of communication.
- 3) Participant observation of elderly persons with ATD: Data on the elderly persons’ living conditions, behaviors or actions, and self-awareness were collected to complement 1) and 2).

5. Method of analysis: The following procedures, based on Braun and Clarke’s method of theme analysis (2006), were used for analysis.

- 1) Word-for-word transcription: This record was compiled for each elderly person with ATD as narrated by each subject. We constructed an overall picture that included the life background of five individuals with ATD from the interview data and the participant observation data and used this information to interpret the interview data.

- 2) Generation of codes: For various situations related to the walking about of each elderly person with ATD, we extracted data that related to points (a) through (c) mentioned in section 4.1 (method of data collection), ensuring the context was preserved, and designated each with a code name.
 - 3) Generation of themes: All the generated codes were compiled from a similarity perspective, and themes were applied to them such that they were able to express the meaning of walking about included in the codes.
 - 4) Verification and definition of themes: We cross-checked the generated themes and subthemes with the extracted codes and the entire dataset to ensure they matched, then verified the suitability of each theme. We also identified the content that expressed the generated themes.
- 6. Ethical considerations:** This study was implemented after obtaining the approval of the administrators of the facilities targeted for the survey as well as the Ethical Review Board of the Health Sciences University of Hokkaido's School of Nursing and Social Services (Approval No.: 16N001001).

IV. Study results

1. Overview of the subjects:

Eight individuals, specifically two family members and six long-term care staff members, were the study subjects. One family member was in her 50s (daughter), and the other was in his 70s (husband). The long-term care staff members comprised two individuals in their 20s, two in their 40s, and two in their 50s. The interviews lasted 34–78 minutes and averaged around 49 minutes.

2. Overview of elderly persons with ATD:

The elderly persons with ATD who were subjects of the interviews comprised two men and three women in their 70s and 80s. The level of nursing care required ranged from III to IV. One person was living with his/her family, two were living in GH, and two had left the GH at the time of the survey. Regarding status of walking about, two individuals' frequency of walking about had reduced, while the frequencies of one individual was unchanged and two individuals had

increased. The FAST stages of the three individuals observed were between 4 and 5.

3. Themes that express the meaning of walking about:

Nine <Subthemes> and three [Themes] were generated from the 44 codes.

[**Expression of connection**] shows the manifestation of the reality of the elderly persons with ATD who remain connected to society and time. It comprised three subthemes. Four codes were generated from the subtheme <The “same as usual” continuing>, namely, [Their favorite hobbies and shopping are reasons for going out], [Going out to buy food to satisfy hunger], [Repeatedly visiting the toilet, which is their refuge], and [Driving a car “as usual” and losing their way]. These codes showed that the elderly persons’ actions and behaviors that had become habits, which included hobbies, favorite activities, somatic sensations, and coping behaviors that they had engaged in up to the present, continued to this day, and that these elderly persons had purposes and reasons for going out. To these, we added <A story of seeking life work>, which comprised five codes, and <Alternating with the past>, which comprised four codes, and established them as [**Expression of connection**]. The former subtheme shows that the individual’s work in society and their desire to play a role had taken on a storyline that was expressed in their daily life, while the latter subtheme showed that, while their time point leaped to the past in their daily conversations and during work, it continued seamlessly with the present.

[**Fulfillment and satisfaction of certainty**] comprised <**Ascertaining dubious matters**> by perceiving changes in their familiar environment, <**Compensating for a feeling of emptiness**> caused by blank, idle time in their daily life and the sensation of emptiness due to the lack of a place (or limited place) to belong, and <**Fighting a lone battle**> because of conflicts with the people around them. This theme showed their ways of coping with the certainty of the reality that ebbed and flowed amid the self’s internal and external changes and within their relationships with the surrounding people.

[**Searching for support and an anchor**] showed how the subjects searched for a place of support and an anchor, which they described as “going home.” In other words, they <**Devoted**

themselves to fulfilling their own wishes> by charging ahead toward **<A place to “go home,” which they longed for>** and which was always present inside themselves, separating themselves from relationships with surrounding people and **<Constantly attempting to “return home”>** in ways that conformed to their daily lives.

V. Discussion

The meaning of walking about by elderly persons with ATD could be interpreted as: 1. A manifestation of a reality in which the self maintains a connection with society and time; 2. Coping with a reality wherein certainties ebb and flow; and 3. Searching for support and an anchor that was included in the expression “going home.” To these people, a place to “go home to” symbolized a time and space that were connected to the self and which included their own value. In other words, walking about was believed to be an act of seeking stability of the self. Our findings suggest the need, in providing nursing care, to make assessments from the perspective of the world of the life of elderly persons with ATD, to co-exist in the reality of these people who are linked with society and whose past is connected seamlessly with the present, to support their actions and behaviors in a way that satisfies their certainties, which are steadily eroding, and to provide stability and an anchor.