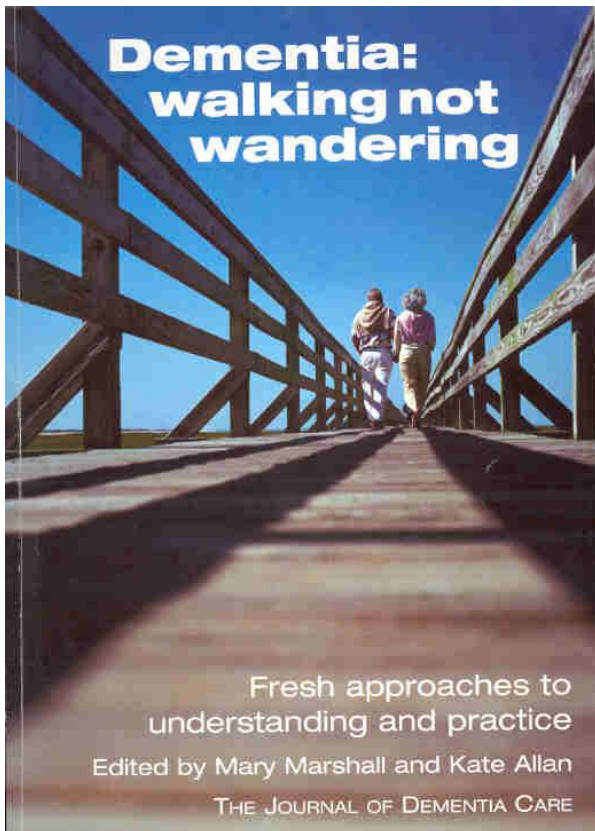


Book Review

Dementia: Walking not Wandering - Fresh approaches to understanding and practice

Edited by Mary Marshall & Kate Allan for the Journal of Dementia Care, Hawker Publications 2006. ISBN 1 874 790 68X Culvert House, London SW11 5DH www.careinfo.org



The contents from 37 well known contributors, including Australian Dr Heather Hill, are provided under ten sub-headings, following the Introduction of:

1. A Normal Enjoyable Activity
2. Reasons for Walking
3. Medical Aspects
4. Settings
5. Confinement
6. Focus on the Past
7. Movement
8. Staying Safe and Healthy
9. Therapy
10. Walking With

This new book presents a vigorous argument that for people with dementia 'walking' or 'wandering' should neither be feared nor discouraged, and certainly not classified by carers as "challenging behaviour." It offers perceptions not just of the physical aspect of walking but of its psycho-social-emotional content.

Walking not wandering. Dancing? Perhaps.....!

Old man Zen urged that when we are walking we must know that we are walking. Barbara Mettler proclaimed that if one becomes engrossed in walking for its own sake "...its lively swing, its steady beat..." (Exiner and Kelynack, 1994, p.15) when we are dominated by the feeling of the movement, then we are dancing.

It is pleasing then to find that dance therapist Dr. Heather Hill's contribution to this book addresses at once the questions, "What is this person walking for?" "What is this wanderer like?". What Heather finds missing from the symptomatic approach to the "problem" is recognition of the individual person and an understanding of his or her impulses.

No two people walk, stroll, amble, saunter, stalk or stride in quite the same way. Walking, says Heather Hill, is particular to each person, as is all movement, and it is the role of the therapist "to get inside and understand something of what motivates each person." (Ch. 7.2 p. 79) Her piece, *A Dance Therapy Perspective* is, as we would expect from Dr. Hill, practical, authoritative and humane. Though most of the contributors to the book acknowledge, the present widely held belief among carers, that 'wandering' is an inevitable consequence of dementia with "dire consequences" about which nothing can be done (Ch. 1.2 p. 11) they offer plenty of challengers to this notion.

Graham Stokes, a consultant clinical psychologist at the University of Birmingham, states that, "Wandering' is a construct which invariably says as much about the tolerance of others... as it does about the [patient's] behaviour." (Ch. 2.3 p. 28) An example within this book underlines, perhaps, his opinion. In article 7.1 *Physical And Exercise* Rosemary Oddy addresses walking purely as a physical activity. She acknowledges the desirability of such behaviour (combined with other activities such as pedaling and weight-lifting), but does not examine "What for?" Her conclusion is, "The importance of physical activity should be stressed....Success is important: it gives satisfaction to carers and keeps people with dementia 'on the move.'"

How much more pleasing to turn to page 72, *Paradise In Walking* by James Hillman (reprinted

with permission from *Resurgence* magazine), which illuminates many of our emotional reasons for walking, “With the soul-calming language of walking, the dartings of the mind begin to form into a direction.” I love his proposition, “There is probably an archetypal cure going on in walking...” Yes, Mr. Hillman! I remember from my childhood, my mother who when assailed by the sick irascibility of my poor shell-shocked father, would walk out into our garden at a swinging pace, her head lifting, becoming more and more buoyant, sometimes, at last, a soft bird-like song on her lips. An insight of Hillman’s which will resonate with dance movement therapists is that walking brings him in touch with his “animal nature” - “cat-like, bullish, stiff like a stork, prancing and strutting” “like a young buck.” And I can’t resist his conviction that “walking is an activity to which one naturally turns.” Heidegger, he points out, recommended it for philosophising. Students at Aristotle’s school were called “peripatetic” as they conversed and ruminated while walking. Monks and nuns walk, (not necessarily together!). Nietzsche claimed that only the thoughts one thought while walking, not sitting thoughts, were of any value. (Sitting, by the way, is very bad for one’s spine! See Heather Hill p. 79.)

Janet Price, an educationist and dedicated walker who has never owned a car (Ch. 6.3 pp. 68-69) quotes an American naturalist, Hal Borland, “All walking is discovery.” And she describes the great history of walking: the Roman Legions, the pilgrimages of the Crusaders, and the writers and poets – Coleridge, Ruskin, Wordsworth, Shelley, who all walked many hours each day.

Faith Gibson, an emeritus professor of social work, commenting in *Lifestyle Factors Influencing Present Behaviour* (Ch. 6.2 pp. 61-67) points out that nowadays the use of the word “wandering” implies a socially unacceptable state: a worry and a nuisance which may try the patience of those nurses and carers who are of a “rigid” disposition. Whereas, before the 20th century, walking (or riding) was simply what people did, according to their social and financial status. If one couldn’t afford horses, walking might be little other than a means of locomotion to one’s workplace. And as for wandering “lonely as a cloud” as Wordsworth did, such ambulation has now come more and more to be regarded as unacceptable: wandering “from the straight and narrow” for example.

Finally, a piece by Rosalie Hudson (Ch. 10.3 pp. 110-114) is devoted to *Spirited Walking*: a partnership which involves the companion, carer, friend in keeping a physical contact with the other.

“When...spirituality is understood as the essence of a person...paths will open up, inviting the carer to walk beside the person...discovering together this person’s unique spirit.” She draws advice from *The Australian Nursing Journal* (Nay, R. *The Dignity of Risk*, 2000). 9(9)33 “Over zealous risk management may protect a physical body from bruising but it may also damage irreparably the already vulnerable human soul.”

Dementia: Walking not wandering will be of practical use to those of us caring for the elderly in a variety of capacities, and offers all of us some greater understanding about an aspect of the human condition.

Reference

Exiner, J. and Kelynack, D. (1994) *Dance Therapy Redefined*. C. J. Thomas.

Reviewer: Jenny Czulak Riley

Grad. Dip. Movement & Dance, Grad Cert. Dance Therapy (University Melbourne), Australian DMT pioneer, founding member of DTAA, author Growing Older, Dancing On, is an experienced DMT group leader for older adults, and continues to be very active in the DTAA.

In Memoriam

Johanna (Hanny) Exiner died peacefully on December 29, 2006, after a very long illness. We would like to express our sympathy to Ron and Jess Exiner and their family. A private family cremation was held in January. An event to celebrate Hanny’s life, which we can all attend, will be conducted in March. **See insert for details of this celebration. They will be made available before this edition is posted.**

We would like the family to know that their loss is shared by the Dance-movement Therapy community. The Hanny Exiner Memorial Foundation, established for the purposes of fostering Dance-Movement Therapy research projects in Australia, will ensure her name and work live on and continue to honour someone who devoted her life to the development of dance in Australia. This was initially as a pioneer in the field of dance education, and then exploring dance as a therapeutic medium, prior to devoting her energies to the formation of the Dance-movement Therapy Association of Australia.

Tributes are invited for the next edition of ‘Moving On’.