



UNIVERSITY OF
WATERLOO

CASES OF PERSONS LIVING WITH DEMENTIA WHO GET LOST AND GO MISSING IN CANADA

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Public Safety
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Sécurité publique
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The following cases involve stories of people living with dementia who become lost and go missing.

These cases raise awareness of the common factors that lead a person to go missing and how to manage this risk.

- Dementia is an umbrella term for a range of symptoms including difficulties with memory, problem-solving, language, and other thinking skills. There are many types of dementia and they affect people differently. These include Alzheimer's disease, vascular dementia, frontotemporal dementia, Lewy body dementia, young onset Alzheimer's disease, and others. More information about types of dementia can be found here: <https://alzheimer.ca/en/about-dementia/other-types-dementia>

How were the cases developed?

These were inspired by an analysis of datasets from MedicAlert Foundation Canada®, police services, and search and rescue data of missing incidents among people living with dementia in Canada.

How to use this booklet

These cases can be used by people living with dementia and care partners to learn about what can happen when someone living with dementia goes missing. The end of each case provides strategies to manage risk.

Users can read the cases that resonate with them or they can read the entire booklet. A list of additional resources can be found at the end of the booklet.

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1. A public transit user living with Alzheimer's disease becomes disoriented navigating downtown

Personal information

Name: Armin Dabiri.

Age: 78 years old.

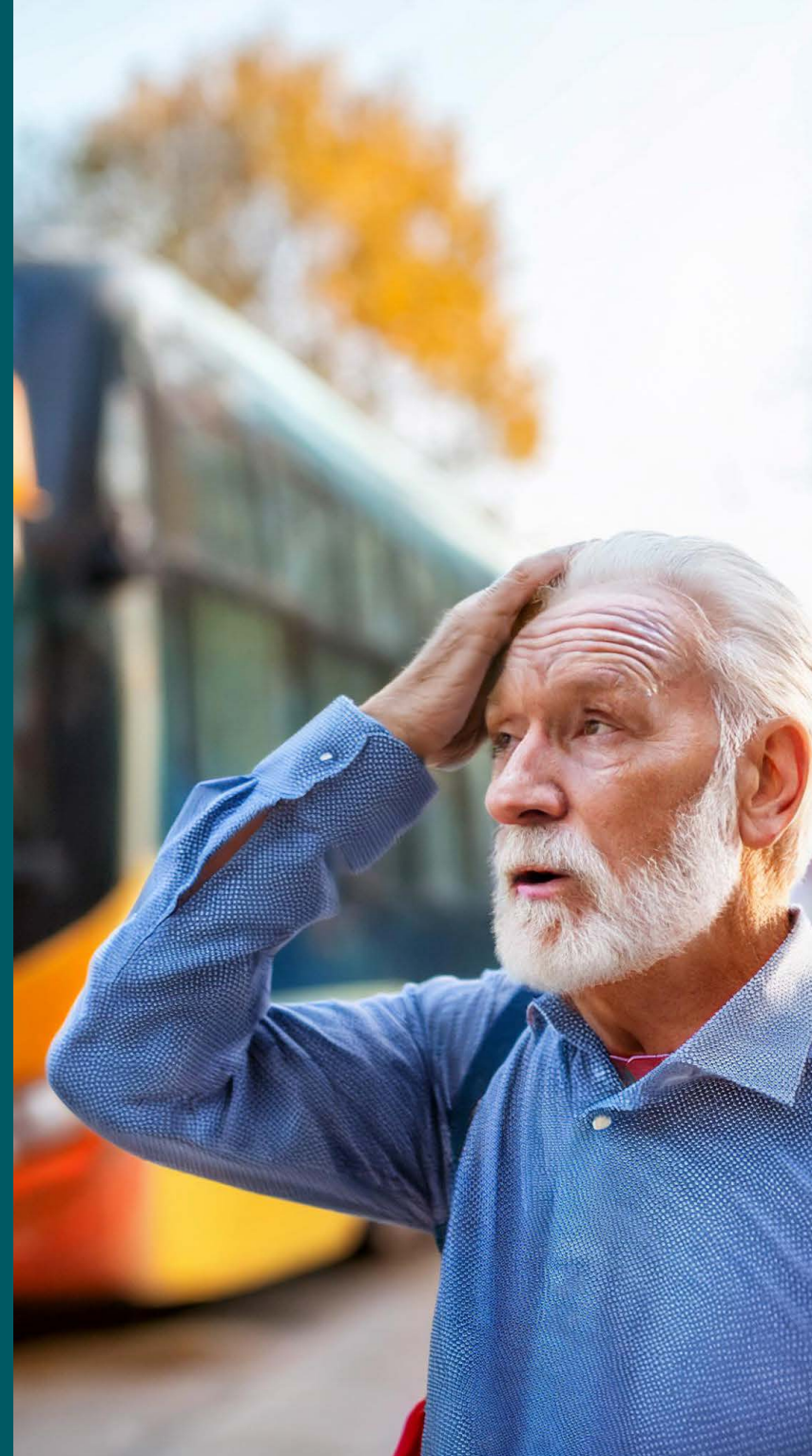
Gender: Man, pronouns are he/him.

Living situation: Two-storey home in Toronto with his 71-year-old spouse.

Social support: Spouse Leila, and two adult daughters, Maryam and Mahin.

Health history: Alzheimer's disease, depression, high blood pressure. Taking medications for these conditions.

Interests: Cooking and using public transit to explore the city.





Background

Armin's spouse

Armin's wife, Leila, has difficulties with her heart, breathing, joints, and hearing. She uses a machine to help her sleep and wears hearing aids. Lately, her joint pain makes walking harder for her.

Armin and Leila's children

Armin and Leila have three children. Maryam lives an hour away. Mahin lives in Saskatchewan, so they do not see their parents much. They both help their parents with healthcare. They took Armin to get tested for dementia and helped Leila with a hearing test. Armin and Leila also have a third child named Kian, who struggles with mental health. Kian wants to help, but has trouble keeping a job, a stable home, and does not have a phone.

History of missing incidents

About one month ago, Armin walked outside of his home in the middle of the night while still wearing his slippers and pajamas. The staff of a care home nearby brought him inside, contacted Leila, and kept him safe until she could pick him up. Understandably, Maryam and Mahin are concerned about their parents' well-being.

The day of the incident

– Getting lost

1. Resting after a long day

After a long day, Armin and Leila relax at home. They cooked a meal and had friends over for dinner. Armin feels calm and happy, which makes Leila grateful because he has been sad since he was diagnosed with dementia.

It is 6:00 pm, and Leila's knees hurt from standing all day. She asks Armin if they can go upstairs to watch TV, and he says yes. Leila is glad to take a break because taking care of Armin has made her tired, and she has not had much time for herself.

2. Armin goes downstairs

Armin wants to watch TV, but he is thirsty. He tells Leila he is going downstairs for water. Leila decides to close her eyes for a bit, thinking Armin will come back soon. She turns on her noisy breathing machine and falls asleep.

3. Armin leaves the house

Twenty minutes later, Leila hears the home security alarm beeping, which means the front door is open. Armin does not have a phone, so Leila hurries downstairs to look for him. She sees Armin's cane is gone and the door is wide open.



The day of the incident

– Being found

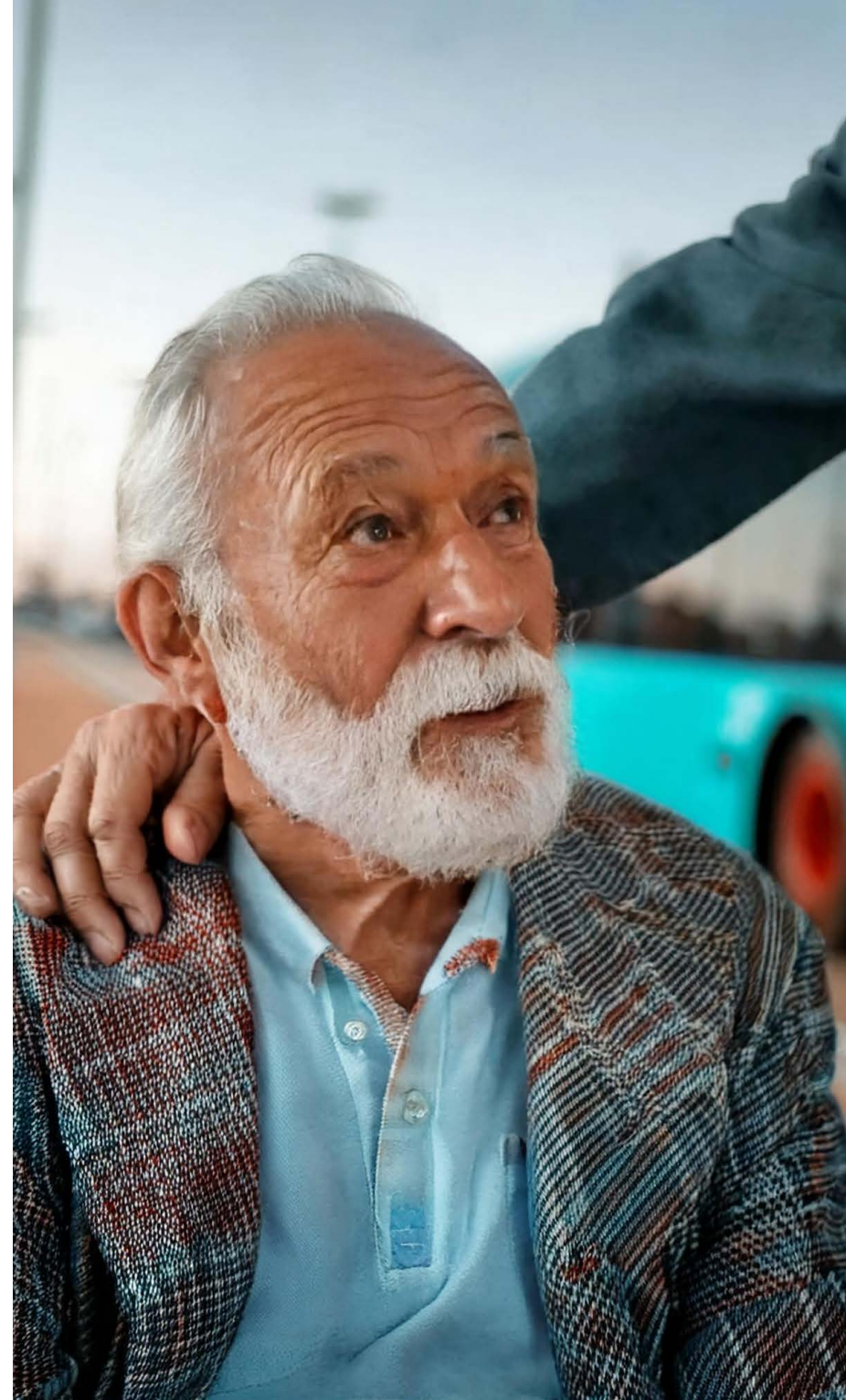
1. Leila searches the neighbourhood

Leila looks for Armin and asks people walking by if they have seen him but nobody has. Leila feels upset and starts crying because she worries that Armin is lost and missing. She knows this is an emergency and calls 911.

2. A neighbour finds Armin

Darrell, a neighbour, is walking when they see an older man with a cane heading towards an alley near a bus stop. The man looks confused and is pacing. Darrell approaches him, introduces himself, and asks if he needs help. After a pause, the man says his name is Armin and mumbles that he is unsure of where he is and that he is looking for his wife.

Darrell notices Armin is wearing a MedicAlert® Foundation Canada bracelet with a blue emblem and a 1-800 emergency number inscribed on it. They call the number and get connected to Armin's wife, Leila.



After the incident

Later that night, Leila calls Maryam and Mahin to tell them what happened. Maryam is concerned that their mom is dealing with too much. This is not the first time Armin got lost. Leila is grateful the alarm woke her up, but Maryam thinks her mom should not rely on the alarm. They talked before about getting help for their parents, but they worry their parents do not want help. Tomorrow, Maryam will visit to organize more help for them at home.

Resources

Click the link to watch a video from Dementia Network Calgary which outlines a missing incident involving a person living with dementia and how someone can help in that situation: dementianetworkcalgary.ca/

Calgary Community Coordinated Response to Missing Seniors is an Action Team with Age-Friendly Calgary. They have created a helpful resource describing what you can do when you find a person who may be missing: missingseniors.ca/found-person/

MedicAlert is a service that provides emergency medical information. The bracelet should be worn at all times so that first responders and medical personnel can access a person's emergency contacts and medical information.



2. A friendly woman living with Lewy body dementia goes missing after walking out of her long-term care home

Personal information

Name: Sarah Stone.

Age: 70 years old.

Gender: Woman, pronouns are she/her.

Living situation: 150-bed long-term care home in Winnipeg, Manitoba.

Social support: Three adult children Mary, Lisa, and Kate, and a younger sister, Carrie.

Health: Lewy body dementia, Parkinson's disease, Type 2 diabetes, and anxiety disorder. Taking medications for these conditions listed above.

Interests: Travelling, walking, and doing outdoor activities such as biking.



Background

Sarah's current living situation

Sarah moved into a long-term care home after her husband passed away and she was diagnosed with Lewy body dementia. Before moving in, Sarah loved to travel and join community activities. She also volunteered at an assisted living home after retiring from teaching. She has not participated in recreation activities organized by the long-term care home.

Sarah's family

Sarah's youngest daughter, Kate, lives 30 minutes away from the care home. Kate is recently divorced, has three young children, and works full-time. Even though she is very busy, she still visits her mom once a week. Kate also has Power of Attorney, which means she can make financial and healthcare decisions for Sarah.

Sarah's younger sister, Carrie, lives about ten minutes away and visits three times a week. Carrie is not the main decision-maker, but she helps take care of Sarah and is listed as an emergency contact on Sarah's MedicAlert® file along with Kate.



The day of the incident

– Getting lost

1. Sarah goes missing

On an otherwise normal day at the long-term care home, Sarah seems more confused and upset than usual. The unit is noisy with door alarms and people talking in the hallways. Because there are not enough staff, the regular check that gets done at 2:00 pm is delayed. At 4:00 pm, a health care aide discovers that Sarah is not in her room. After looking in the other residents' rooms, the aide tells the nurse manager that Sarah is missing.

2. Code Yellow

The nurse manager initiates a “Code Yellow”, a procedure for when a resident is missing. This alerts all the staff to thoroughly search the building. They also call the police, the doctor, and Sarah’s emergency contacts. When the police get there Sarah is still missing, and they begin searching the surrounding neighbourhood.



The day of the incident

– Being found

Two hours after Sarah is reported missing, she is found on a highway about seven kilometers from the care home. She is walking in the rain, wearing her nightgown and slippers.

1. Arpit finds Sarah

Arpit, a community member who helps at a center for older adults, sees Sarah. He knows how to recognize someone living with dementia who seems lost. Concerned that Sarah is not dressed for the weather, Arpit approaches her and asks if she is okay and needs help.

2. Help is on the way

Sarah, shivering from the rain, says she is looking for her husband and cannot remember their home address. Arpit sees that Sarah needs help. He calls 911 right away.

3. Waiting for help

The 911 dispatcher tells Arpit to stay with Sarah until the police and paramedics get there. When they arrive, the officers see that Sarah matches the description of the missing person.



4. Returning to the care home

Sarah needs minor treatment from the paramedics and is then taken back to the care home.

After the incident

A few hours later, Kate and Carrie go to the care home after hearing what happened. It seems that Sarah walked out with some guests who were visiting another resident. The nurse manager sets up a meeting with Kate, Carrie, and the nursing staff. They talk about what happened, how to keep Sarah safe, and ways to keep Sarah from going missing again.



Resources

Do you know?

About 20% of people living with dementia go missing from long-term care homes.* ir.lib.uwo.ca/etd/7460

How to approach a missing person

If you see a person dressed inappropriately for the weather and think they may be lost, stop to ask if they need help.

- Speak slowly and calmly using simple language.
- Ask “yes” and “no” questions.
- Ask one question at a time and allow time to respond.
- If the person doesn’t understand what you’re saying, rephrase the sentence.
- Use non-verbal communication such as pointing in a certain direction to make things clearer and easier to understand.

Source: <https://www.alzheimers.org.uk/blog/what-to-do-find-someone-with-dementia-lost>



* Kowalski, Larissa, “Hiding in plain sight: A mixed methods analysis of older adults who are reported missing in two Canadian cities” (2020). Electronic Thesis and Dissertation Repository. 7460. <https://ir.lib.uwo.ca/etd/7460/>

3. A coffee shop visitor living with frontotemporal dementia goes missing while upset

Personal information

Name: Frank Jamieson.

Age: 66 years old.

Gender: Man, pronouns are he/him.

Living situation: Single-family home with partner in Calgary, Alberta.

Social support: Judy, his common-law partner of 10 years.

Health: Frontotemporal dementia, schizophrenia, chronic back pain, heart failure, trouble sleeping, and prostate enlargement. Takes medications for these conditions.

Interests: Walking his dog, fixing cars, watching TV, and gardening.



Background

Diagnosis and health management

Frank was diagnosed with schizophrenia when he was 50. Frank manages his symptoms using medication and support from Judy and his doctor.

Recent changes in behaviour

Frank has become more outgoing lately, regularly going to coffee shops. Judy wonders if he wants to socialize because he is lonely or if his personality has changed. Sometimes, Frank acts without thinking about the results of his actions. Additionally, it is hard for Frank to speak, especially when tired or anxious. Judy worries about their limited money.



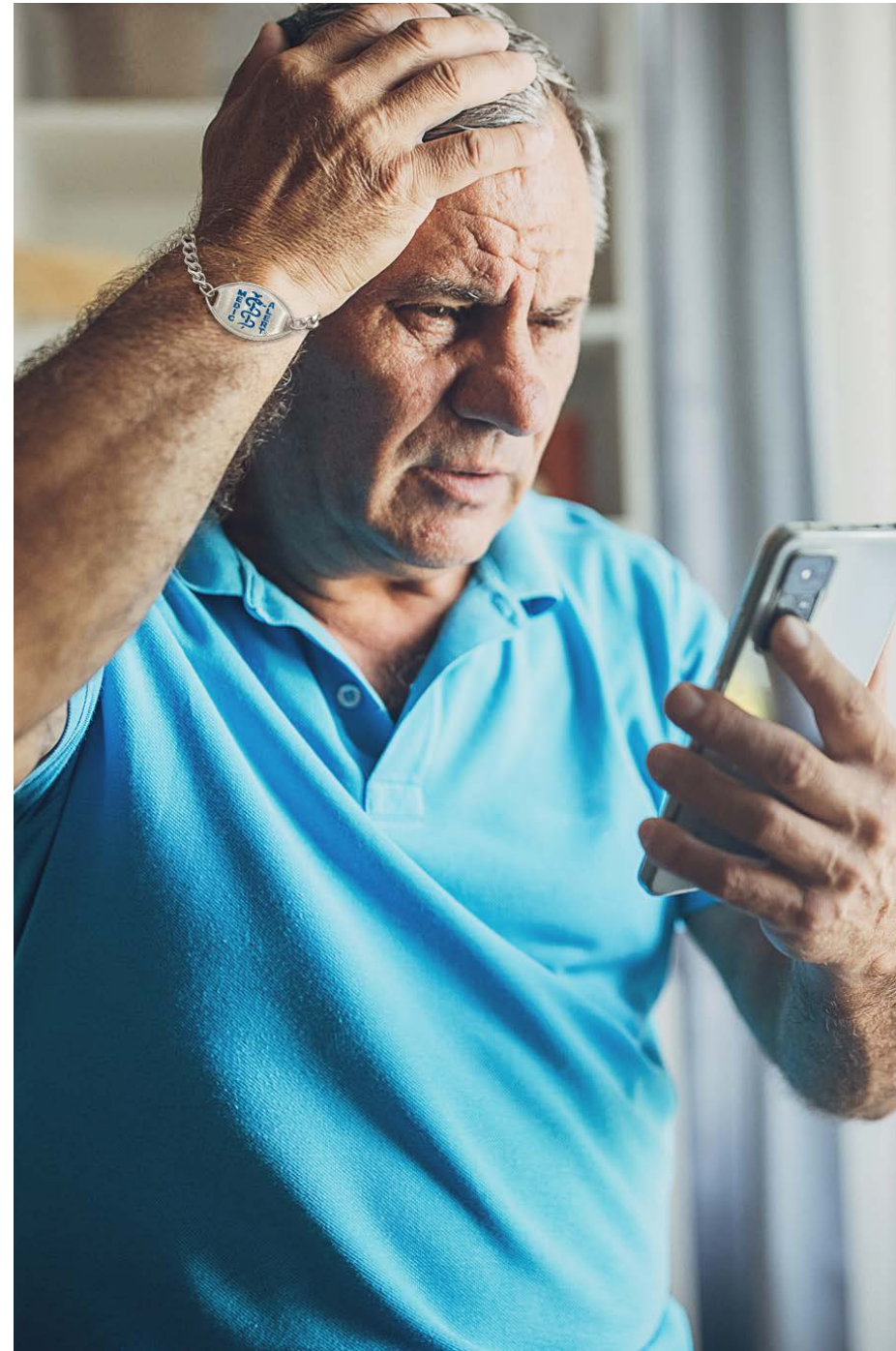
History of missing incidents

Previous incident

Two months ago, Frank got lost on a cold winter day. He kept walking until he was tired. A transit officer noticed something unusual at a train station and called the police. He called the phone number on Frank's MedicAlert® bracelet to help him.

Current ways Frank is managing the risk of getting lost

Judy thought about using locator devices, technology that tracks movements and locations. But she found them too costly. Frank has a cell phone now, but Judy worries he might not know how to use it when he feels confused. For this reason, Judy made an emergency contact card for Frank to keep in his wallet to help him share Judy's contact information in case of an emergency.



The day of the incident

– Getting lost

1. The argument

Frank's doctor tells him that he will not be able to drive as the dementia progresses. At the same time, Judy thinks it might be time to sell one of their cars to save money. Frank becomes upset because he does not want to stop driving. He shouts at Judy and goes outside to the garage where he always goes after an argument. Judy feels worried that he might hit her or hurt himself. She thinks it best to give him time alone to cool down, and she busies herself with housework. Before Judy realizes it, an hour has passed since she last saw Frank.

2. Frank is missing

Judy calls Frank, but he does not answer. She wonders if he is out walking the dog, but the dog is in the living room. Judy checks the garage, the yard, and the places Frank usually goes. She starts to feel scared. She calls the MedicAlert hotline to say that Frank is missing. Judy does not want to call the police and make Frank more upset.



The day of the incident

– Being found

1. A visit to the coffee shop

Frank walks to one of his usual coffee shops. A worker who knows him notices he looks upset. Frank orders his regular and sits down at the back of the coffee shop.

After two hours, the coffee shop worker looks over and sees that Frank is still at the table, looking tired and slumped over. She asks if Frank needs help. Frank's speech is hard to understand.

2. A police officer and staff member help

The staff member has assisted people from the community before when they needed help. She knows to look for a MedicAlert bracelet and that police should be contacted. She calls the MedicAlert hotline. The hotline operator calls Judy's number but that cellphone number is out of service.



Another patron who is an off-duty police officer comes over to help. He recognizes Frank from the neighbourhood. The police officer has another idea. He asks Frank for his wallet to try and find another phone number to call. He finds the “In Case of Emergency” identification card and get Judy’s phone number from it. She picks up right away. The police officer agrees to stay with Frank until Judy arrives.

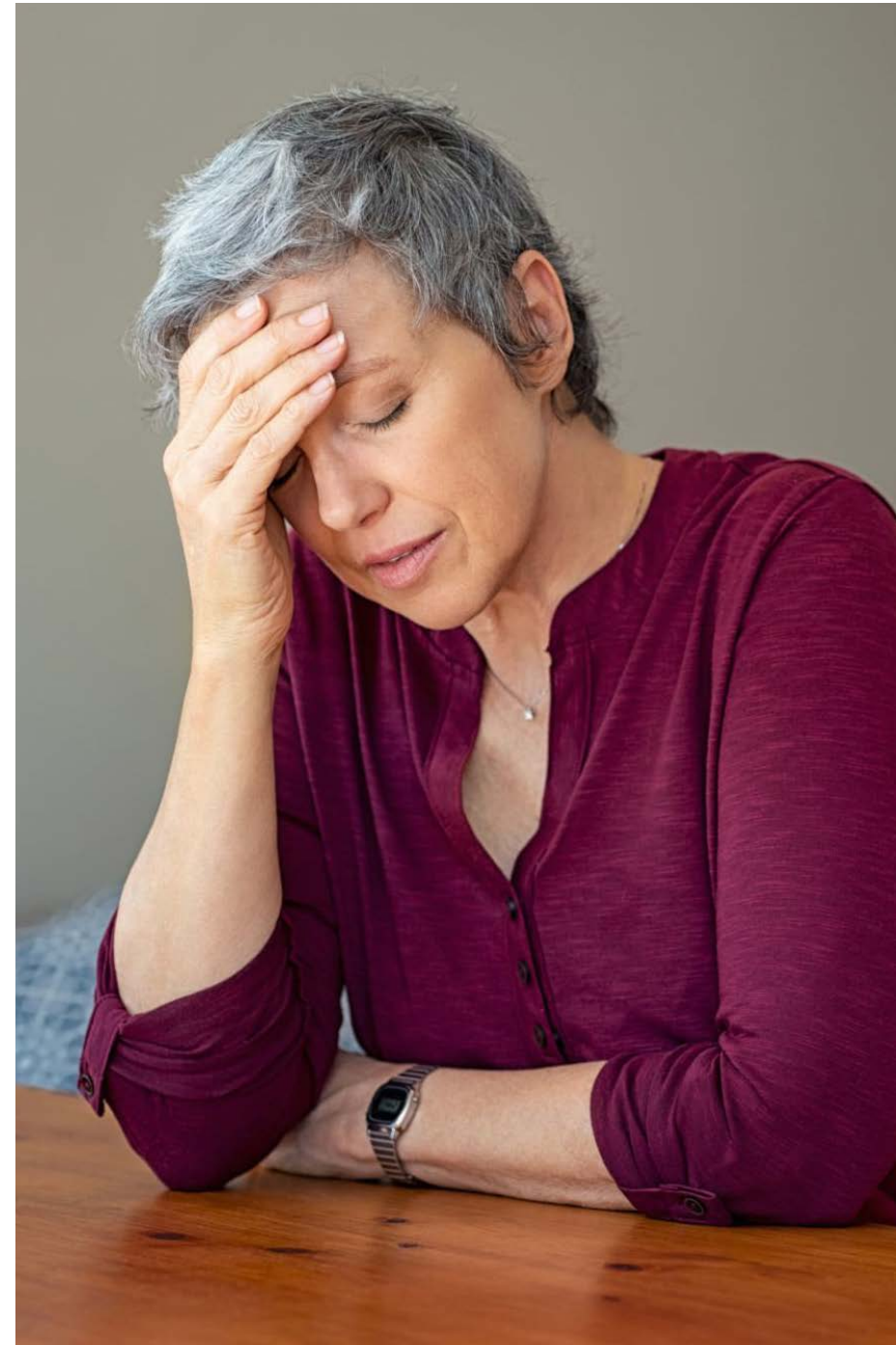
3. Judy picks up Frank

Shortly after, Judy arrives at the coffee shop and meets Frank. The MedicAlert hotline calls to check that they are back together, and that Frank is safe. Judy tells them she changed her cell phone number and that she had forgotten to update Frank’s MedicAlert file.



After the incident

Judy thinks about what will happen if she cannot look after Frank. She wonders about a public guardian, who helps with legal, money, and personal safeguarding for those who are unable. Judy knows that arguments with family members are common and nothing to be ashamed of. However, she wonders whether Frank's escalating anger means that he needs more support. She feels guilty for thinking this. Judy decides to get more help and makes an appointment with the Alzheimer Society. They help people with dementia and their families find support and plan for the future. She will get more information about in-home supports and look into other options for Frank's future care.



Resources

Caring for a person living with frontotemporal dementia can be challenging. It can put a strain on family and social relationships. For more information, please see:

- Understanding dementia: the-ria.ca/wp-content/uploads/2022/06/UnderstandingDementia_Final.pdf.
- Frontotemporal dementia: alzheimer.ca/en/about-dementia/other-types-dementia/frontotemporal-dementia?gclid=CjwKCAjw3P0hBhBQEIwAqTCuBvmITOE151chYZxF6--sh15AHC4kXo-huCUVSJe_Nt5SIPT4doG0vx0CO_IQAvD_BwE.

A missing incident is an emergency. Call 911 right away and share any factors that may have contributed to the incident, such as arguments. These clues help police and other searchers plan their search.

- The Calgary Older Adult Resource Network has a helpful resource that describes what to do if someone goes missing: missingseniors.ca/someone-missing/

Consider creating an “In Case of Emergency card”. This card can be printed and placed in the wallet, purse, or clothing of the person at risk of going missing. Many versions are available. The version below was developed by the Calgary Missing Older Adult Resource Network. It can be retrieved on page 13 of the Resource Guide for People at Risk of Going Missing located here: missingseniors.ca/wp-content/uploads/2022/04/Resource-guide-for-people-at-risk-of-going-missing.pdf.



MedicAlert is a service that provides emergency medical information. The bracelet should be worn at all times so that first responders and medical personnel can access a person's emergency contacts and medical information.

In Case of Emergency	
Full Name	_____
Date of Birth	_____ Blood type _____
Address	_____
Cell	_____ Work _____ Home _____
Current Meds	_____
Conditions	_____
Physician	_____ Phone _____
Allergy/additional Info	_____
In Case of Emergency	
Emergency Contact #1	_____
Relationship	_____ Work Phone _____
Cell Phone	_____ Work Phone _____
Emergency Contact #1	_____
Relationship	_____ Work Phone _____
Cell Phone	_____ Work Phone _____
Additional Info	_____
Last updated _____	

4. A grandmother living with vascular dementia gets lost while driving to an antique shop

Personal information

Name: Madeline Gibson.

Age: 84 years old.

Gender: Woman, pronouns are she/her.

Living situation: One-bedroom apartment in a suburb outside Ottawa, Ontario. Lives alone.

Social support: Robin, Madeline's daughter, and Liam, Madeline's son.

Health: Vascular dementia, high blood pressure, stroke history, heart attacks, anxiety, insomnia, bladder problems. Takes medications for blood clots, high blood pressure, and anxiety.

Interests: Coin collecting, spending time with grandchildren.



Background

Madeline's life and family

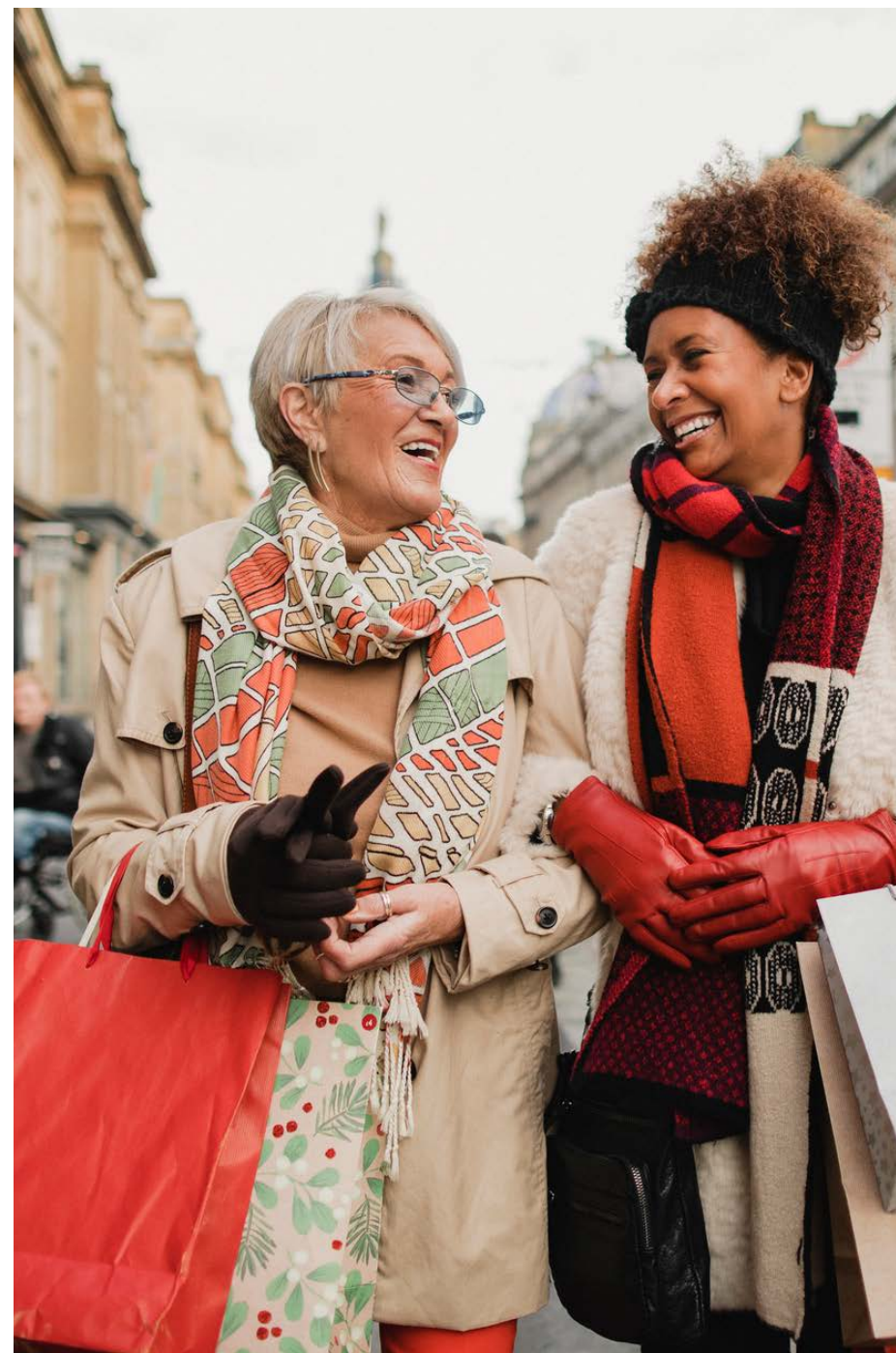
Eight years ago, Madeline moved closer to her children after her husband passed away. She lives five minutes from Robin, her daughter, and visits her grandchildren every Saturday. Her son, Liam, lives a 10-minute drive away and visits her a few times each month.

Madeline's coin collection

Madeline loves collecting coins. She drives to small towns to explore antique shops and look for rare coins.

Madeline does not wear her MedicAlert® bracelet when shopping

Although Madeline has a subscription to MedicAlert, she does not wear the MedicAlert bracelet. She takes the bracelet off when she goes shopping or visits her friends because she does not want people to know that she has dementia. She values her independence and worries about what people think of her.



The day of the incident

– Getting lost

1. Driving to the antique shop

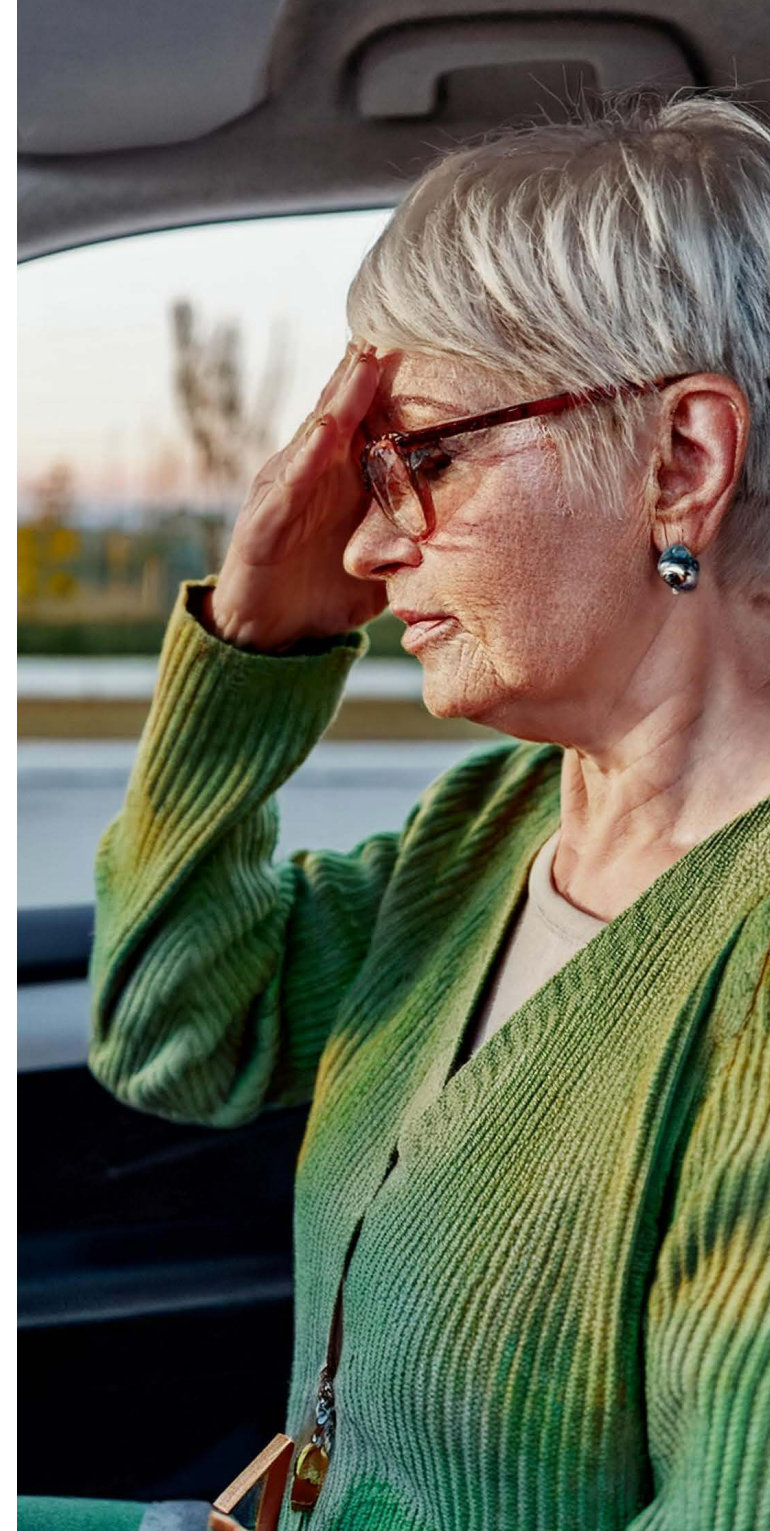
One Monday afternoon, Madeline drives about 40 minutes from home to visit one of her favourite antique shops and meet up with her friends. She has a portable car navigation system (GPS). However, she knows the route well since she visits the store every few weeks. She feels she no longer needs the GPS device and removes it from her car.

2. Lost on the road

Madeline is deep in thought; while she focuses on the road and traffic, she does not pay attention to the exits. When Madeline realizes that she also needs to use the restroom, her attention shifts to the present and she does not recognize where she is. She starts to feel anxious and worries that she has missed her exit. Her heart races.

3. Stopping at a gas station

After driving for another 30 minutes, she finds a gas station and uses the restroom. Returning to her car, she realizes the antique shop is now closed. She tries to make a plan for how to get home but is unable to retrace her way. She is in distress and loses track of time. Madeline notices people looking at her, but nobody asks her if she is okay. She feels alone and anxious.



The day of the incident

– Being found

1. Gas station employee calls for help

Nina, the gas station employee, remembers Madeline from when she used the restroom two hours ago. Nina calls the police because she wants to help, but she is working alone and she cannot leave the cash register.

2. Police arrive to help

Officers arrive, and Nina explains the situation. An officer goes over to Madeline, who is confused and anxious. She shares her name and home address. The officer says Madeline is 60 km away from home. The officer confirms that Madeline does not need medical help and asks for a family member's name and phone number. Madeline remembers her son Liam's name and the police officer helps her find his number on her phone.

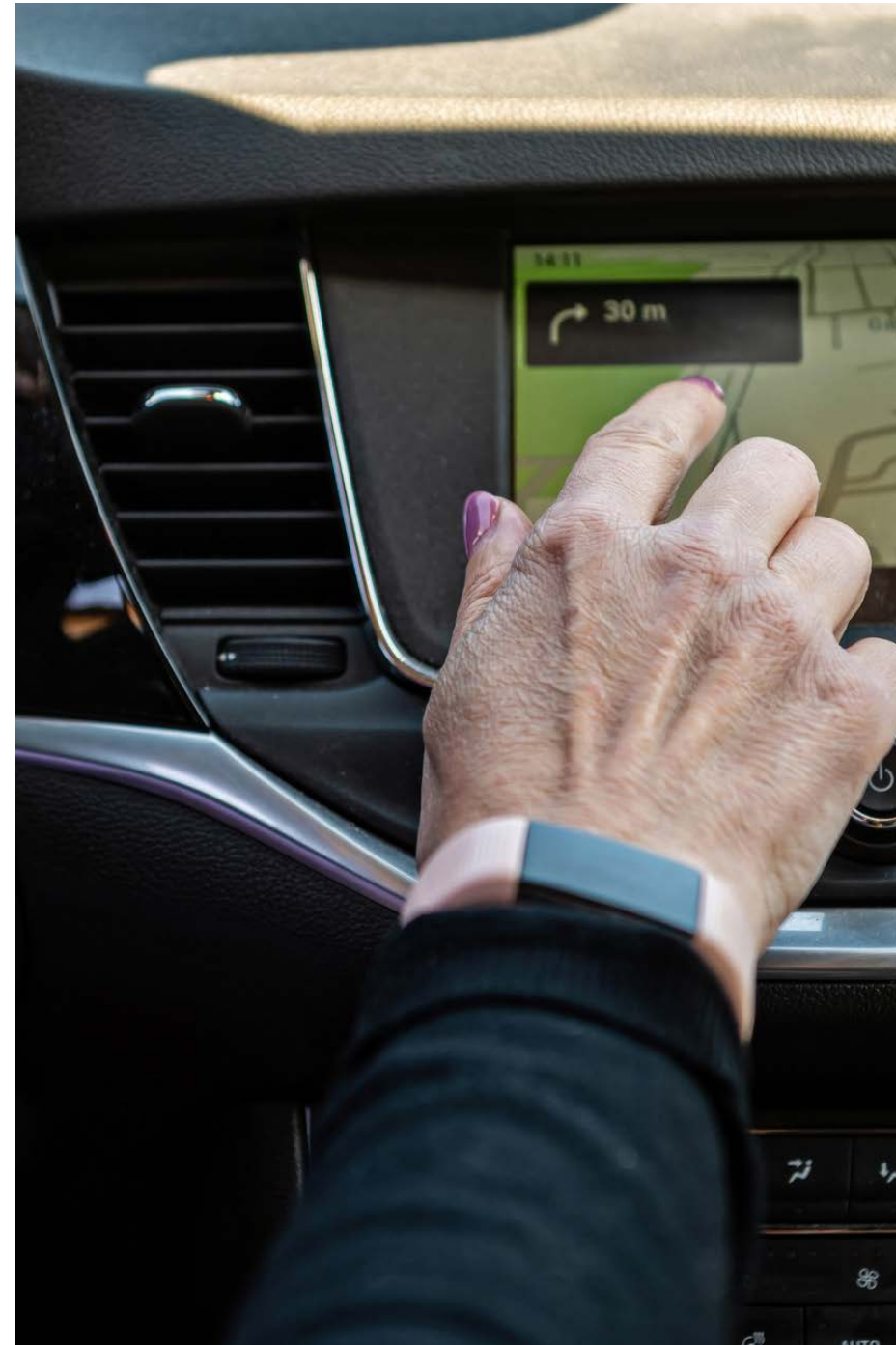
3. Family is contacted

The officer calls Liam, and they arrange for him to pick up Madeline. The officer stays with her until Liam arrives.



After the incident

Madeline's family worries about her driving ability given what happened today and after seeing several dents on her car that Madeline could not explain. Madeline, Robin, and Liam agree to discuss the need for a driving assessment. She agrees to resume using her navigation system in the car. For future safety, she will look into locator devices that can share her real time location with family members. Madeline feels it is now time for her to accept her dementia diagnosis, which she has been struggling with.



Resources

Locator devices can help people living with dementia maintain their independence by giving others access to their real time location in case they need help finding their way. There are many types of locator devices available. The Alzheimer Society of Canada has resources that describe the differences between locator devices.

- <https://alzheimer.ca/en/help-support/im-caring-person-living-dementia/ensuring-safety-security/tracking-devices>
- <https://alzheimer.ca/sites/default/files/documents/Tracking%20Devices-Alzheimer-Society.pdf>

The following resource from the University of Waterloo outlines some locator devices available in Canada:

<https://uwaterloo.ca/aging-innovation-research-program/locator-devices>

The Driving and Dementia Roadmap provides safety considerations related to driving with dementia: <https://www.drivinganddementia.ca/#>

MedicAlert is a service that provides emergency medical information. The bracelet should be worn at all times so that first responders and medical personnel can access a person's emergency contacts and medical information.



5. A fisherman living with young-onset Alzheimer's disease gets lost while biking to visit his friend

Personal information

Name: Richard Manning.

Age: 51 years old.

Gender: Man, pronouns are he/him.

Living situation: Bungalow with partner, Julia, in Niagara-on-the-Lake.

Social support: Julia, Richard's partner, and Mitch, a lifelong friend.

Health: Young Onset Alzheimer's disease, hearing impairment, depression. Takes medications for memory loss, and depression.

Interests: Biking, fishing, and visiting friends.



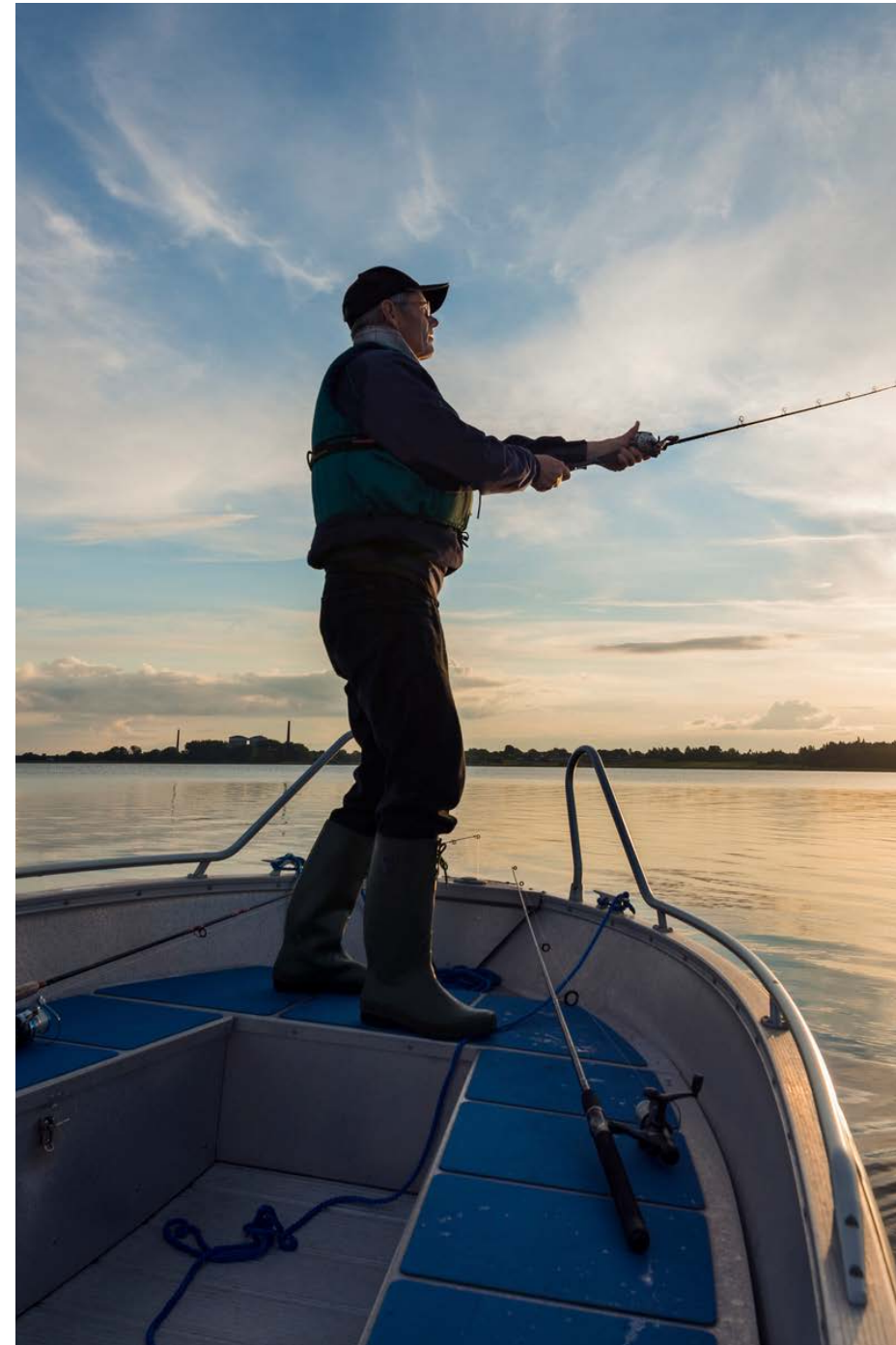
Background

Richard's life and family

Richard is a retired family doctor who has lived in the same home since he was a child. Richard enjoys the company of his partner of 10 years, Julia, and his friends. When Julia is at work, Richard uses his smartphone to stay in touch with her.

Fishing and friendship with Mitch

Every Thursday morning in the summer, Richard bikes over to his friend Mitch's house to fish at their favourite spot. He enjoys catching up with Mitch over coffee. Richard highly values Mitch's continued friendship because shortly after disclosing his dementia diagnosis to other friends, those relationships dwindled.



The day of the incident

– Getting lost

1. Biking to Mitch's home

One Thursday morning, Richard is biking to Mitch's house, a 15-minute bike ride away on a country road when he feels a sharp cramp in his leg. He stops to stretch and continues his ride.

2. Anxiety and confusion sets in

Richard feels anxious due to the noise of the passing cars and the leg cramp. He is happy that he is nearly at Mitch's home. When he arrives, he sits on the porch.

3. Richard loses track of time

Richard thinks about his former friends and is nostalgic. When he told them about his dementia diagnosis, they treated him differently, as if he could not remember anything and was unable to hold a conversation, despite being able to. Yet, dementia affects each person differently and Richard is still able to communicate with others.



The day of the incident

– Being found

1. Richard is found on a neighbour's porch

A high school student, Mitch's neighbour, is getting ready for her part-time job at a coffee shop. She looks at the clock and notes that it is 6:50 am. When she opens the front door to leave, she sees a man sitting on their porch, looking upset. The student goes inside and gets her parent.

2. Mitch's neighbours offer help

The neighbours ask Richard if he needs help and they invite him into their home. After a delay, Richard remembers he is supposed to be meeting Mitch at 6:00 am. The parent asks Richard if he has Mitch's phone number, which prompts Richard to pull out his cell phone. As Richard reaches into his pocket for the phone, the student notices a silver bracelet with a medical symbol on it; neither she nor her parent know the purpose of the bracelet.



3. Julia and Mitch are concerned

Meanwhile, Mitch calls Julia to say that Richard has not arrived. Julia drives to Mitch's home. Usually Richard texts them once he is outside Mitch's home, but it is already almost 7:00 am and their calls are going straight to voice mail. They do a preliminary search of the neighbourhood, but see no sign of him. They call the police to report Richard missing.

4. Reunited at last

The neighbour calls Mitch to explain that Richard is safe at their house. The police arrive at Mitch's home. Julia and Mitch update the police and together they drive to reunite with Richard.

5. Learning about MedicAlert®

The police thank the neighbours for their assistance and explain that they should contact 911 anytime they find a lost person. A missing person is an emergency. The police also explains they can contact the MedicAlert hotline if they encounter someone needing help who is wearing a MedicAlert bracelet.



After the incident

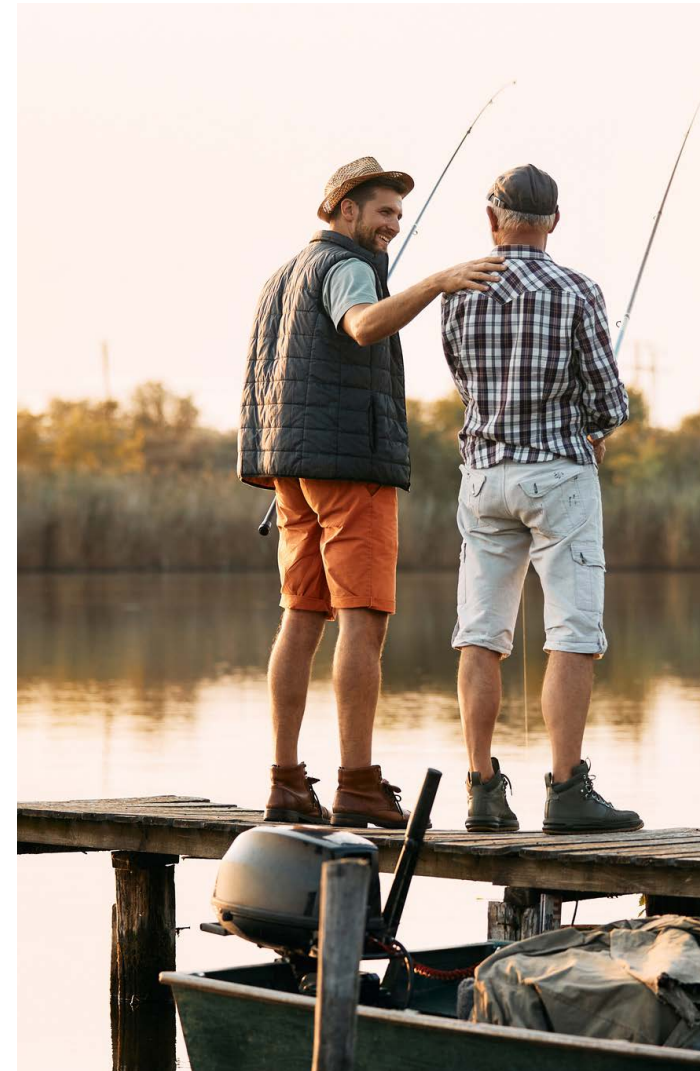
Richard feels embarrassed about getting lost. This makes him realize that he may need some help finding his way around his community. Later that day, the police officer involved calls Richard and Julia and recommends they reach out to the local Alzheimer Society, a Canada-wide organization that helps people living with dementia and their circle of support.

Resources

The Alzheimer's Society of Canada has resources related to living well with dementia. They challenge negative assumptions about what life looks like after a diagnosis of dementia. alzheimer.ca/en/help-support/im-living-dementia/living-well-dementia.

Physical activity remains a vital part of one's well-being, even after a diagnosis of dementia. Information about physical activity for persons living with dementia can be found here: dementiaexercise.com/resources-for-people-with-dementia/.

MedicAlert is a service that provides emergency medical information. The bracelet should be worn at all times so that first responders and medical personnel can access a person's emergency contacts and medical information.



6. An outdoor enthusiast with undiagnosed memory changes gets lost while hiking

Personal information

Name: Janice Brown.

Age: 84 years old.

Gender: Woman, pronouns are she/her.

Living situation: Lives in Kelowna, British Columbia with her adult child, Louis, and his spouse.

Social support: Louis, Janice's 50-year-old son; Bernice, Janice's younger sister.

Health: Some memory decline, hyperthyroidism, high blood pressure, fractured wrist in 2010. Takes antithyroid medications, high blood pressure medication, and pain relievers.

Interests: Spending time outdoors, canoeing, hiking, cross-country skiing, and gardening.



Background

Janice's life and family

Janice lives with her son Louis and his spouse. They moved in with her after Louis noticed Janice becoming forgetful. Recently, Louis found her keys in the fridge. Janice could not remember putting the keys there. Janice attributes her memory decline to normal aging.

Louis buys a locator device

Louis recently got a locator wristband for his mom. He hopes the tracking device's GPS can be used to find his mother if she gets lost. He asked her to wear it in case she ever got lost, but Janice refuses.

Camping trip with Bernice

Janice has spent many of her adult years camping with her friends and family. At 84, she still enjoys being out in nature. Janice planned her annual camping trip with her sister Bernice for a weekend in June. The plan was to camp for one night. Janice had not told Bernice about her memory changes and periods of disorientation.



The day of the incident

– Getting lost

1. Getting ready for the trip

As they pack, Janice offers to make coffee but suddenly cannot operate the coffee maker and asks Bernice to take over. Bernice finds it odd but does not think much of it.

2. Setting up camp

Once they arrive at the campsite at 5:00 pm, Bernice and Janice set up a campfire. Janice is having a great time until the campfire smell becomes too strong for her. She tells Bernice she will get some fresh air and that she will be back soon.

3. Exploring a trail

While walking, Janice recognizes a familiar trail. She decides to explore it but gets hungry and decides to go back to the campsite.

4. Lost on the trail

Janice realizes she does not know where she is, and that the temperature is getting colder. She knows she's camping with her sister but does not know why she is alone. She sits on a rock, trying to retrace her steps, but starts to cry from fear.



The day of the incident

– Being found

1. Bernice calls 911

Bernice becomes worried when Janice does not return. The campsite does not have cellular service, so she drives to the visitor centre to call 911. Police arrive 30 minutes later and through questioning Bernice, find out that Janice might be living with dementia. They call the local volunteer search and rescue (SAR) team.

2. A formal search begins

The SAR search manager receives a call from the police. The search manager dispatches 12 volunteers while they prepare the command truck and the equipment. It will take at least an hour before the volunteers arrive at the campsite. They canvas the area and begin their search 30 minutes later. The volunteers are assigned to search connected trails. Searchers have radios, GPS navigators, and backpacks containing first aid and search equipment.

Some use e-bikes and others search on foot. They call Janice's name, use whistles, and look for evidence such as foot prints. They search within tall bushes located off-trail. They check in with the search manager at the command post using their radios. The search manager knows what part of the area has been checked by using GPS tracking on the searchers. They continue planning their next steps.



3. Janice is located

After searching for about 50 minutes, two searchers, Sandra and Hafiz, find Janice sitting on a rock by a footbridge. They ask her name and she tells them that it is Janice. She appears uninjured and can walk, but is cold, hungry, and very tired. She is also confused and disoriented. Sandra and Hafiz radio the command post to let them know Janice had been found. The search manager dispatches an all-terrain vehicle with a wheeled stretcher to Janice's location.

4. Waiting for help to come

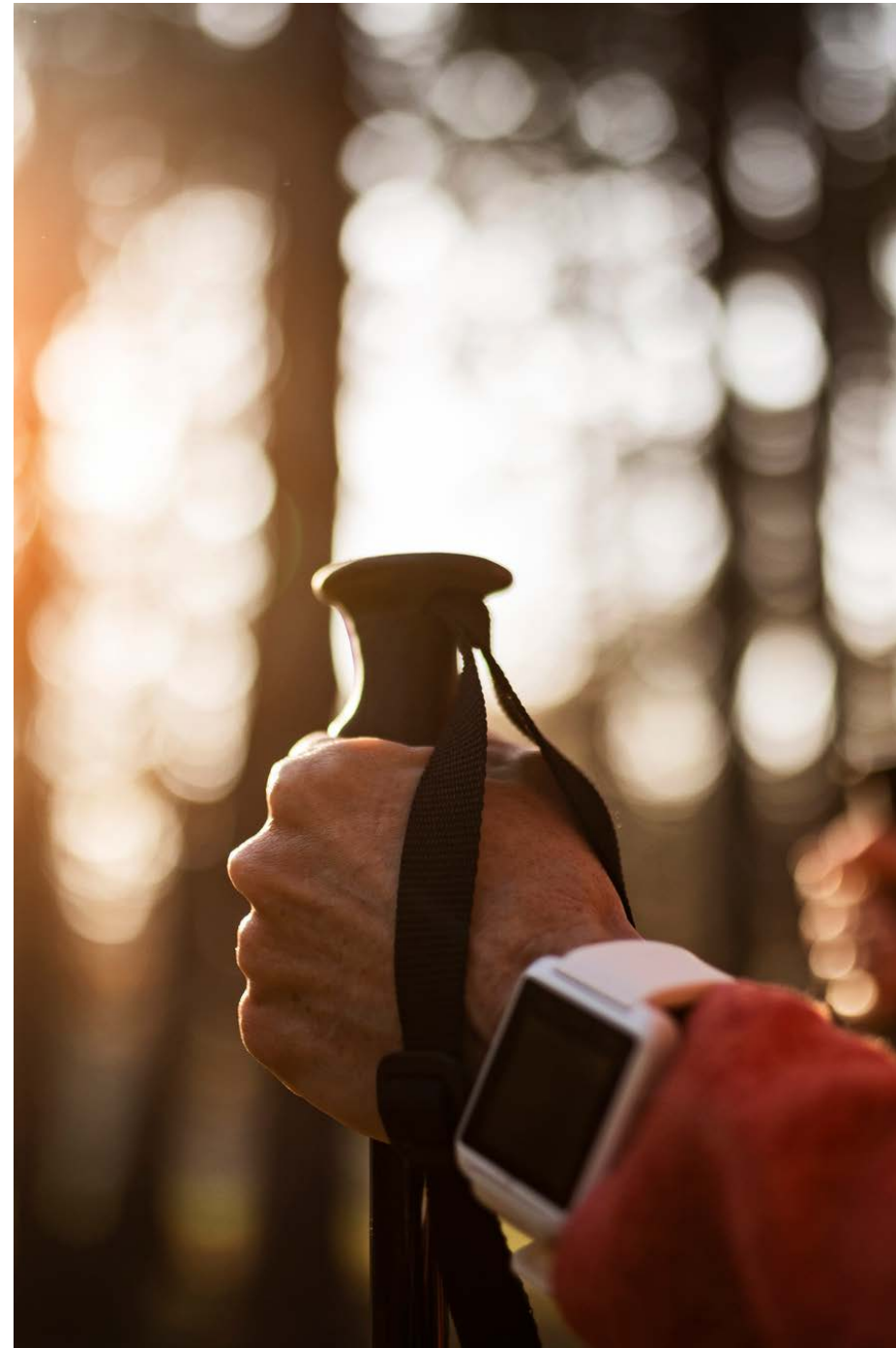
While they wait for help to arrive, they give Janice a survival blanket, a snack, and they make her a warm cup of tea. About 20 minutes later, the team with the stretcher arrives in an all-terrain vehicle. They secure Janice on the stretcher to ensure that she makes it back to the campsite safely, and upon their return, the ambulance meets them. The paramedics give Janice clearance to return home with Bernice.



After the incident

Janice agrees to wear the locator device

Bernice and Janice drive home, deciding not to continue the camping trip. Louis and Bernice talk to Janice about her memory issues and safety. Janice agrees to wear her locator device when outdoors and to see her doctor about her memory decline. Janice's family is relieved she is safe.



Resources

Participating in leisure activities that contribute to one's quality of life while maintaining safety can be challenging. The Canadian Guideline for Safe Wandering is a tool that can be used to explore a person's level of risk of going missing and identify strategies to maintain safety. This website can be found here: canadiansafewandering.ca/#more_information.

There are differences between normal aging and dementia. The following resource published by the Alzheimer Society of Canada explains these differences: alzheimer.ca/en/about-dementia/do-i-have-dementia/differences-between-normal-aging-dementia.

Getting a dementia diagnosis can be a long process. The following resource explains testing for dementia: alzheimer.ca/en/about-dementia/do-i-have-dementia/how-get-tested-dementia-tips-individuals-families-friends#:~:text=If%20you%27ve%20determined%20that,an%20official%20diagnosis%20of%20dementia.



7. A musician with possible dementia becomes disoriented walking home

Personal information

Name: Vira Melnyk.

Age: 82 years old.

Gender: Woman, pronouns are she/her.

Living situation: Lives in a single-family home with her husband in Spruce Grove, a suburb of Edmonton, Alberta.

Social support: Walter, her husband of 56 years, and adult children Karina, Jacob, and Anna.

Health: Suspected dementia, arthritis, knee replacement, cataracts. Takes medicated eye drops and pain relievers.

Interests: Singing in choir, playing piano, volunteering at community activities, and spending time with her family.



Background

Vira's life and family

Vira and Walter are well-known for their volunteer pursuits and church involvement. They have three children: Karina, who talks with them daily and visits on weekends; Jacob, who lives in the same suburb as his parents; and Anna, who lives in Toronto and visits twice a year.

Vira's memory changes

In the last two years, Walter has noticed Vira becoming more forgetful. She has missed taking medications, repeats stories, has difficulty remembering discussions, and has left her purse at church a few times.

Vira resists seeking medical advice

Vira is embarrassed about her memory problems and has asked Walter to keep them private. Walter worries he is not giving her the support she needs.



The day of the incident

– Getting lost

1. Vira walks to church

One day in early April, Vira plans to walk to the church to meet the music director at 2:30 pm. It is a beautiful spring day. Walter reminds her that he would like to take out some cash to add to the Easter baskets they are preparing for their grandchildren. Vira offers to withdraw the cash from the bank since it is on her way to church.

2. Vira withdraws cash from the bank

Vira walks to the bank, withdraws the money as planned, and bumps into a familiar face. Although she cannot remember the woman's name, she recalls the woman is an old friend and fellow music teacher.

3. Vira and her friend spend time together

The woman invites Vira to come with her to Edmonton to pick up music books. Vira feels she should be doing something else but agrees because she enjoys browsing for books.

4. Vira becomes disoriented upon return to Spruce Grove

After being dropped off in Spruce Grove by her friend, Vira remembers she was supposed to attend the choir meeting. Embarrassed, she rushes to the church but becomes disoriented. The street looks different due to the new development of crescent streets, and she feels like she is walking in circles. She looks at her watch and realizes it is 5:00 pm.

5. Vira slips and falls into a ditch

Vira sees a field in the distance and thinks it is near her home. The sun is setting, and the air is getting cooler. She enters the field, slips on the muddy path, and falls into a ditch. Her right arm is sore, and she cannot stand up. She calls for help, but no one responds.

The day of the incident

– Being found

1. Walter searches for Vira and calls the police

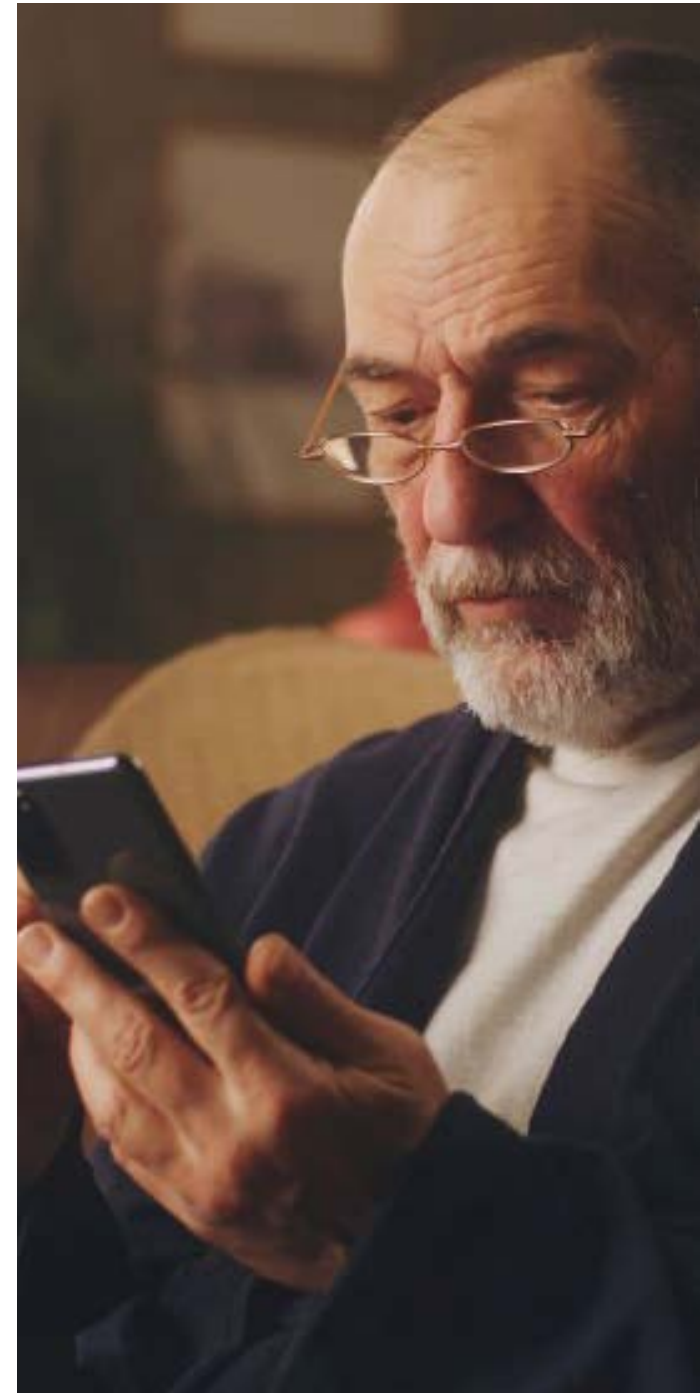
Walter arrives home at 6:00 pm and is surprised that Vira is not there. He drives to the church, finds it locked, and calls the music director, who confirms that Vira did not attend the meeting. Walter calls his children. They have not heard from Vira. Walter knows this is an emergency and calls the police to report that Vira is missing.

2. A police officer finds Vira

David, a police officer, has been assigned to monitor the safety on the highway. At 7:30 pm, he pulls into the highway turnout on the outskirts of the Spruce Grove suburb. He heard about a missing older woman on the police radio earlier. As he steps out of his car, he hears someone calling for help. He finds Vira in the ditch, and she says she is lost. David radios police headquarters, a dispatcher calls an ambulance and Walter.

3. Walter arrives and Vira is taken to the hospital

The ambulance arrives, and Vira is taken to the hospital for assessment. Walter arrives at the scene, relieved that Vira has been found.



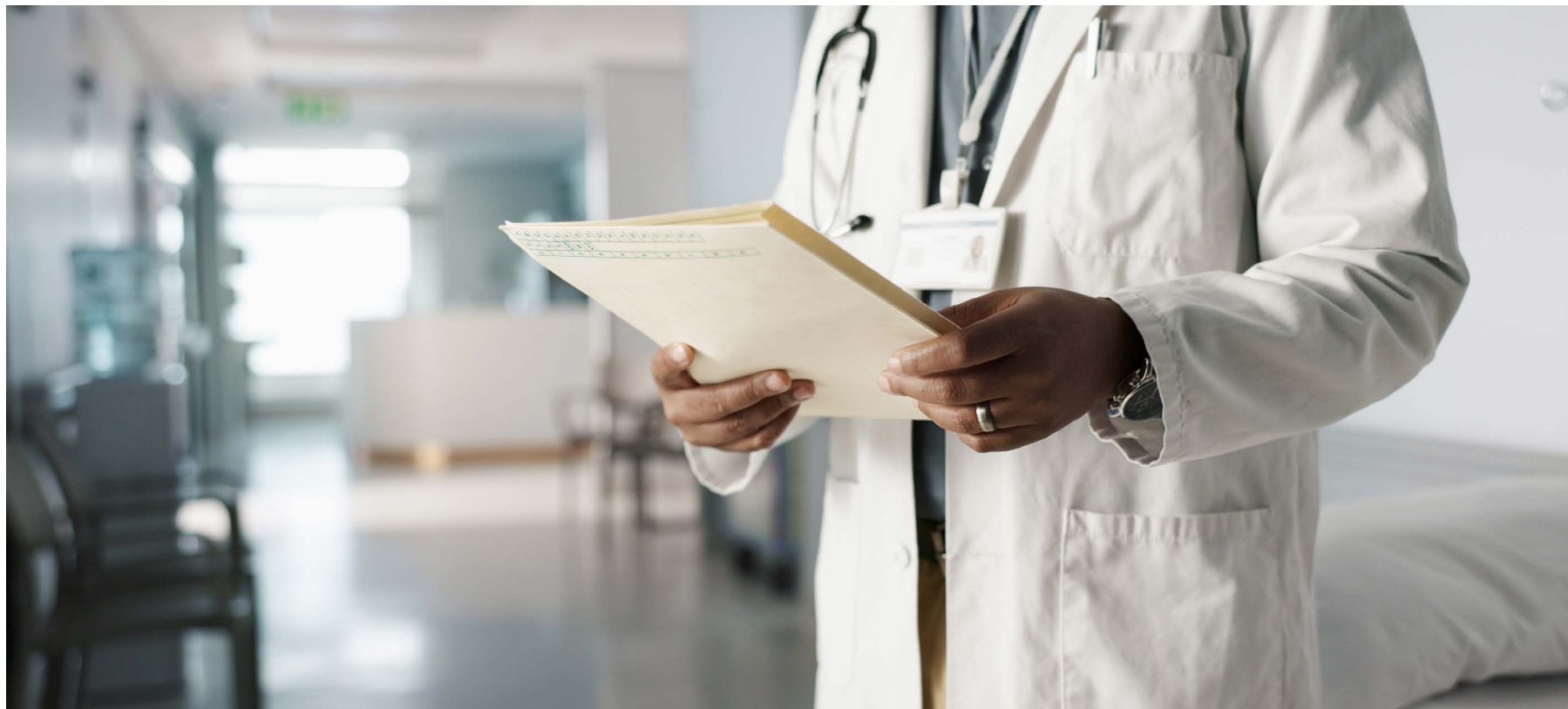
After the incident

Vira is willing to see a doctor

The incident makes Walter realize that Vira's cognitive challenges need to be addressed. Walter explains his concerns to Vira. While she is still reluctant, she agrees to speak with her doctor.

The couple create a safety plan

Vira and Walter create a safety plan, which includes carrying each other's contact details and completing the Herbert protocol (see resources for additional information). Walter will remind Vira to charge and carry the cell phone. He also decides to investigate wearable GPS locator devices as a backup plan. These devices can be used to help locate a person who is lost or missing.



Resources

It is helpful to collect information about the person at risk of going missing before a missing incident occurs. This information can help first responders to find a person who goes missing.

The Herbert Protocol is a document in which important information is gathered. It has been implemented in various parts of Canada and Scotland. The Calgary Missing Older Adult Resource Network provides the Herbert Protocol form (see pages 15-20). missingseniors.ca/wp-content/uploads/2022/04/Resource-guide-for-people-at-risk-of-going-missing.pdf.

For some people, it can be difficult to share information about their memory challenges or dementia with others, including family members. The Alzheimer Society of Canada has created a resource called “Talking about your diagnosis” that outlines strategies for communicating with others. alzheimer.ca/en/help-support/im-living-dementia/talking-about-your-diagnosis.

8. An architect with undiagnosed dementia becomes lost in an unfamiliar place

Personal information

Name: Kobi Adami.

Age: 68 years old.

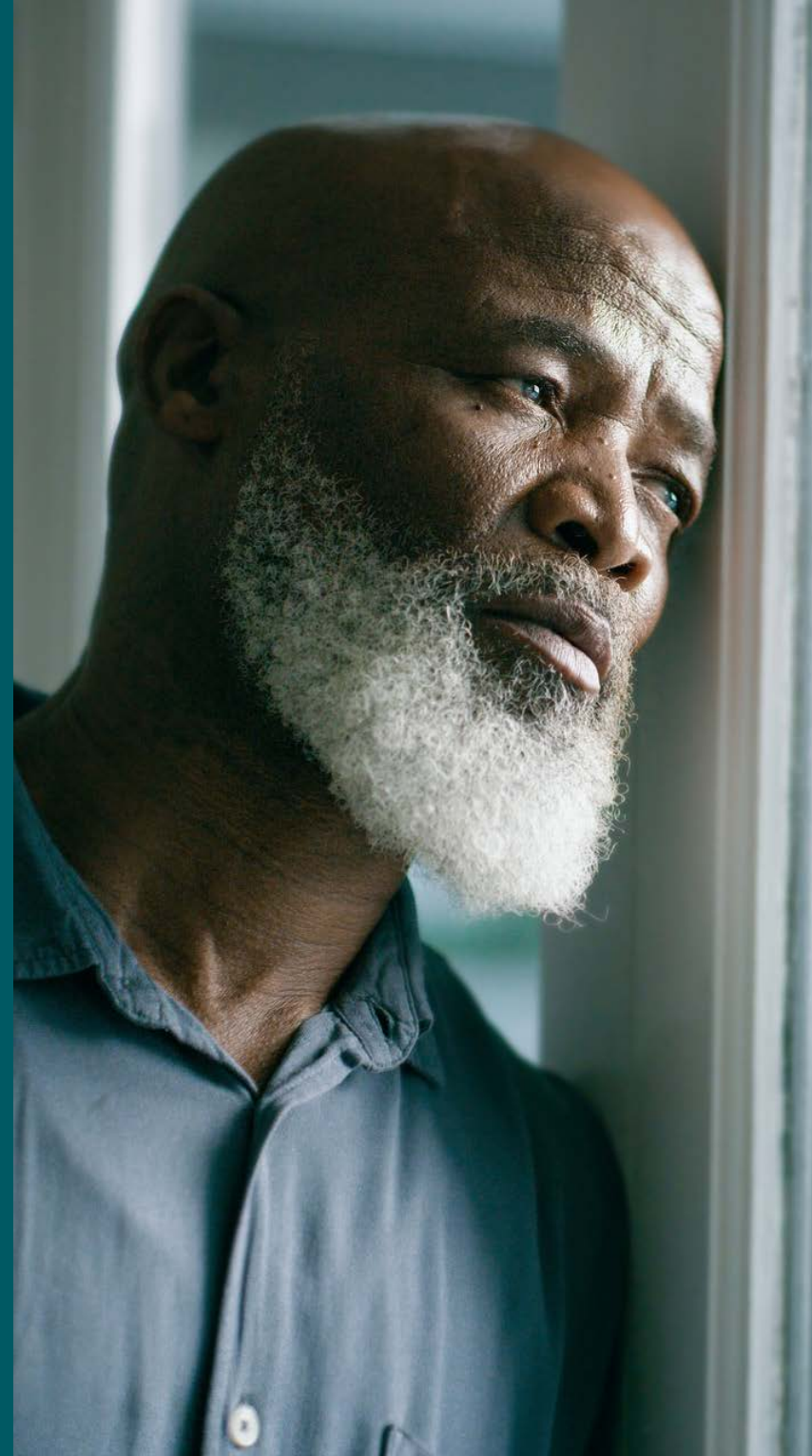
Gender: Man, pronouns are he/him.

Living situation: Lives in a condo in Halifax, Nova Scotia.

Social support: Ada, his spouse of 45 years, and son Abe, who lives in France. His sister, Alesha and her husband who live in Moncton, New Brunswick.

Health: Heartburn and high cholesterol. Takes medications for these conditions.

Interests: Cooking, gardening, walking, and dancing.



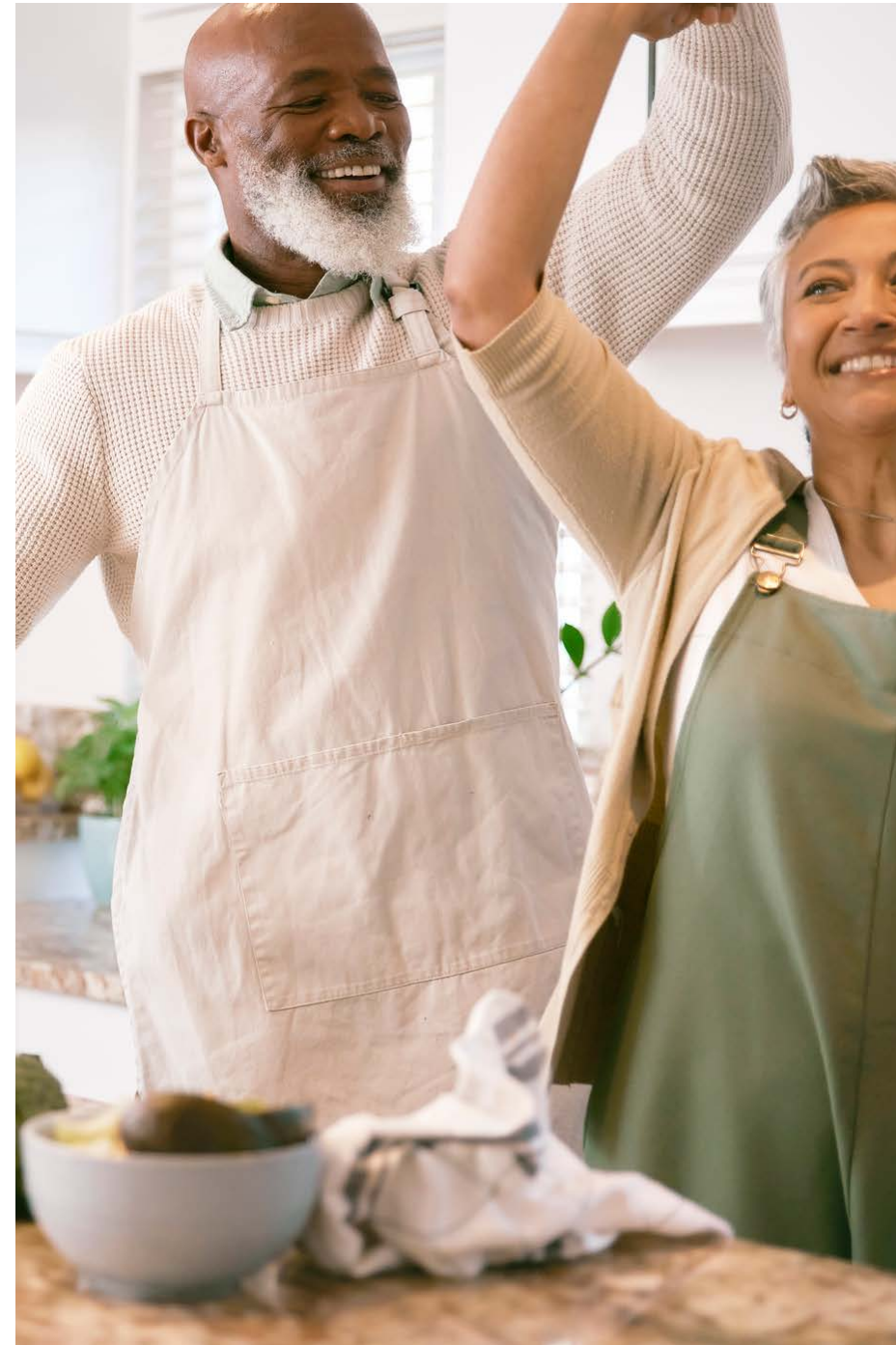
Background

Kobi's life and family

Kobi immigrated to Canada from Ghana with his parents and sister, Alesha, about 60 years ago. He is very close to his sister and her husband James, who is also his childhood friend and attended the same university for architecture that he did. Kobi is active in his community, enjoys evening walks, gardening, volunteering, and attends dance classes with his wife, Ada.

Kobi's memory changes

Kobi had no issues with his memory until six months ago. He handles his family's finances but has been forgetting to pay bills, only remembering when he receives overdue notifications. He thinks these lapses are minor and does not want to bother his wife or sister with them.



The day of the incident

– Getting lost

1. Kobi goes on a trip to visit his sister

Kobi and his spouse visit Alesha and her husband in Moncton, New Brunswick, to celebrate their 40th wedding anniversary on a pleasant evening in May. It is Kobi's first visit since Alesha and James moved six months ago.

2. Kobi catches up with friends at the party

Excited to explore Moncton and catch up with friends from university at the cocktail party, Kobi has a great time reminiscing with his friends.

3. Kobi feels overwhelmed and wants to find a quiet space

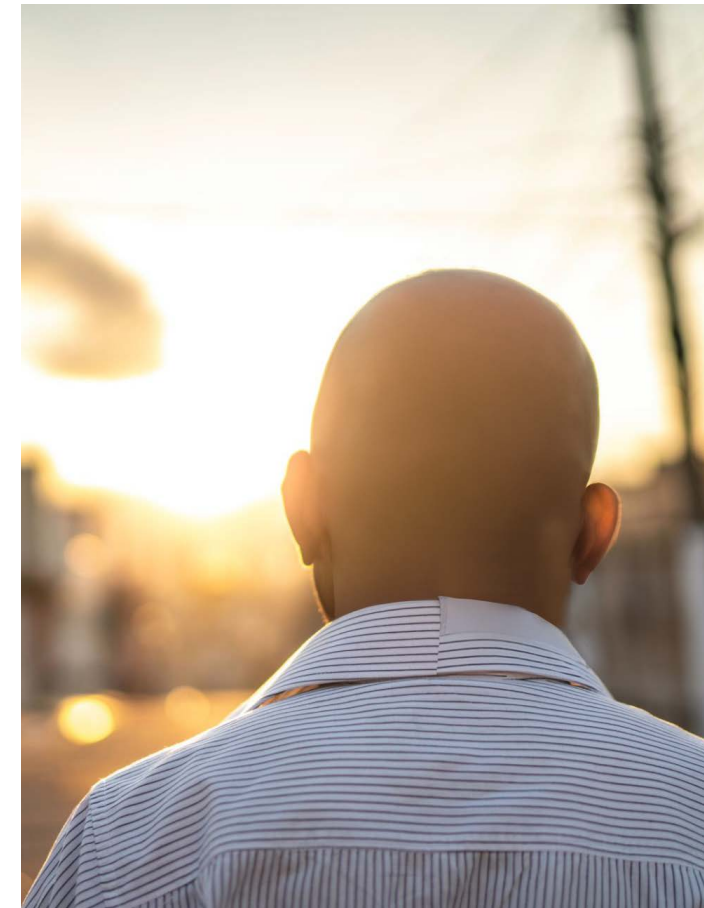
Around 8:00 pm, a few hours into the party, Kobi starts feeling uncomfortable with the loud music and crowd. He decides to go on a walk in the twilight evening to get some fresh air, finding the quiet neighbourhood relaxing.

4. Kobi becomes lost in a new neighbourhood

Kobi does not realize how far he has walked until an hour later. He tries to retrace his steps but cannot remember the house number or street name. The identical townhouses in the neighbourhood add to his disorientation.

5. Kobi realizes he forgot his phone

Kobi starts to panic and feels anxious, realizing he left his phone at his sister's place and has no way to contact his family.



The day of the incident

– Being found

1. Kobi's wife Ada becomes worried about his whereabouts

An hour has passed since Ada last saw Kobi. It is unusual for him to leave without telling anyone. Ada calls Kobi's cell phone and realizes it is on the sofa. Unable to find him, Ada and Alesha call 911 and provide the operator with more information on Kobi's disappearance and what happened.

2. Police arrive and begin a search

Two police officers arrive at Alesha and James' home. Given that it has been over 1 hour since anyone has seen Kobi, they call for more police officers to help with the search. They search the property and start a neighbourhood search. As it is now dark, more officers are called in to help, and a search plan is developed based on possible directions Kobi may have walked.



3. Police find Kobi

An officer searching in their cruiser in a nearby neighbourhood notices a man matching Kobi's description. He appears confused and lost. The officer approaches him, and Kobi explains that he got lost after leaving his sister's party. The officer sees he is uninjured and does not require medical attention. Kobi feels embarrassed and does not want his sister or wife to know he got lost.

4. Kobi is reunited with his family

The officer radios their colleagues and updates them on Kobi's location. They drive Kobi back to Alesha and James' home.



After the incident

Kobi seeks medical help

Kobi confides in James, Alesha, and Ada about his memory lapses, asking them not to discuss the incident further. They are worried about Kobi's safety and that he might go missing again since nobody noticed he had left the party. They express their concerns for his safety and encourage him to speak with his doctor. Kobi agrees. Kobi's family is relieved he is safe.



Resources

Having a conversation with a loved one about changes in one's memory can be uncomfortable. Here is a helpful resource: mybrainguide.org/talking-to-a-loved-one-about-memory-loss/.

Understanding why a loved one might lose the way and become lost can lead to better supports that keep them safe. More information can be found here: alzheimer.ca/en/help-support/im-caring-person-living-dementia/understanding-symptoms/disorientation-losing-ones-way.

Like Kobi, some persons living with dementia become lost and go missing in response to a reaction to their environment. Some environments can become overwhelming and individuals may leave these environments when they get overstimulated. When they do, they may become disoriented. farrlawfirm.com/dementia/sensory-overload-how-people-with-dementia-are-impacted-by-noise/.



9. A retired pastor living with young onset Alzheimer's Disease becomes lost while on a walk and is never found

Personal information

Name: Reverend Shin Ik Noh.

Age: 64 years old when he went missing in 2013.

Gender: Man, pronouns are he/him.

Living situation: Single family home in Coquitlam, British Columbia, with his spouse.

Social support: Spouse (Florence), two adult children (Sam and Rebecca) and their families.

Health: Young onset dementia (midstage at the time of missing incident), was taking medication to slow down and manage dementia symptoms.

Interests: Going for walks, attending church services, reading, going for coffee, socializing with family and friends.



Background

Shin's family

Shin and his wife Florence got married in 1980. Shin immigrated from Korea to Canada, leaving his career as a chemical engineer and settling in Coquitlam. Their adult children, Sam and Rebecca, and their families, live close by. Since Shin's diagnosis of young onset dementia at the age of 59 years, Sam and Rebecca help their parents by taking Shin to medical appointments and providing rides for Shin. Sam owns a small business, and Shin accompanies Sam on his errands to give Shin's wife a break from caregiving. Shin and his wife are proud grandparents of a granddaughter. Shin speaks fluent English and Korean.



Shin's career and community service

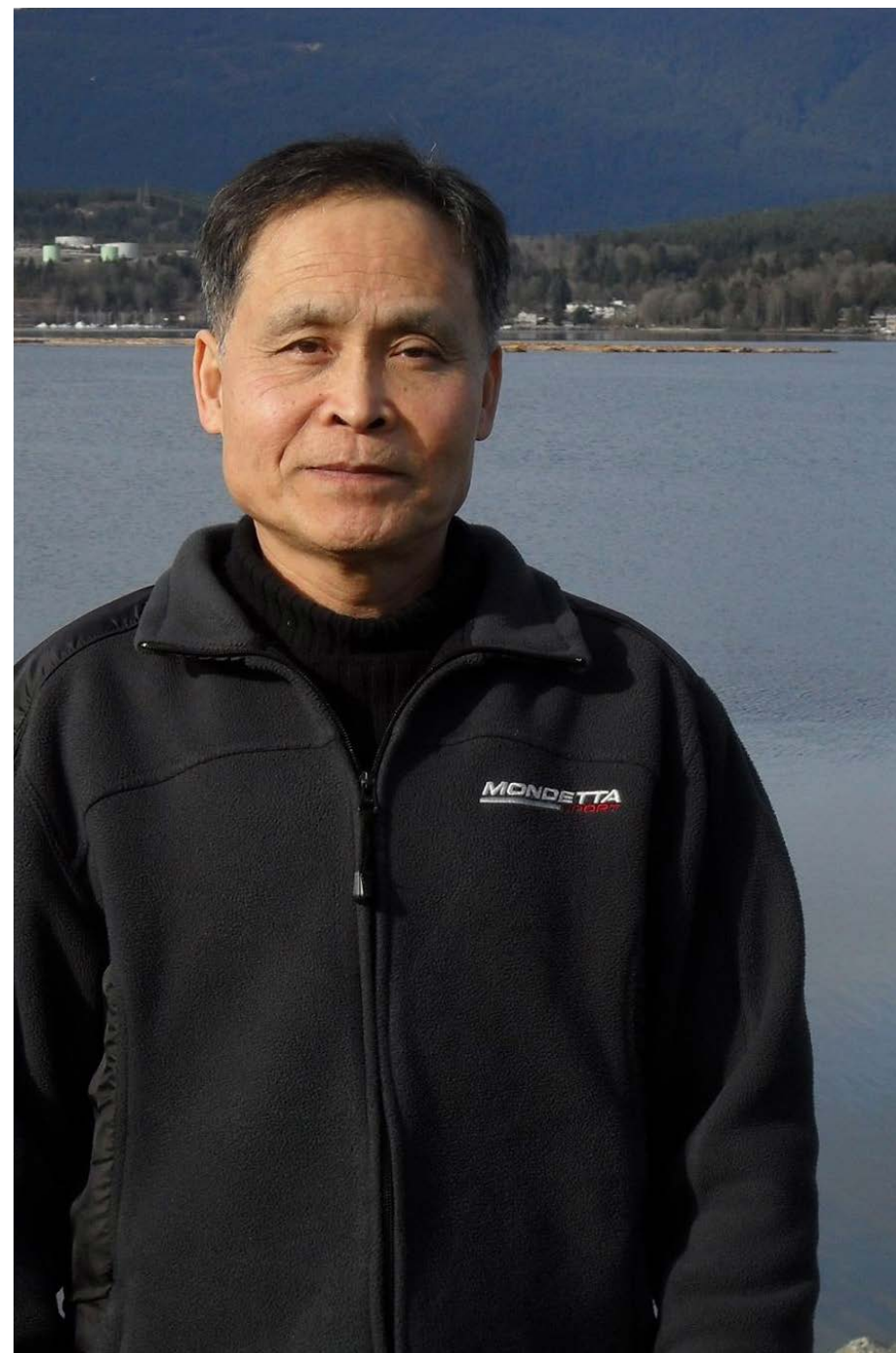
Shin and his wife Florence worked hard to create a good life for their family in Canada. Initially, Shin worked many odd jobs to support his family before obtaining a master's degree in theology. He became a church pastor in Calgary in 1989. He then founded a Korean immigrant church in Coquitlam in 1993. He retired from his position as pastor in 2005. Shin looks forward to going to church each Sunday, where he continues to see members of his congregation. Shin is highly respected in his community. He has dedicated his life to helping others through his work as a pastor and through his volunteer work at emergency shelters. He is known for his wisdom, sense of humor, perseverance, and kindness.



Diagnosis and history of missing incidents

Shin has good days and bad days. He forgets dates and details like when he last ate, and he repeats questions. Communication is becoming more difficult. It can be challenging to reason with Shin at times, especially when he wants to do an activity that he may no longer be able to do, such as going for walks alone. Shin prefers to keep his diagnosis private. Only his family and his doctor know that he has dementia.

Shin is an avid walker. In the year before he went missing, he got lost twice while out for a walk alone. He was found by an RCMP officer once and, another time, by a neighbour who noticed Shin pacing back and forth not far from home. The neighbour recognized that Shin needed help and brought him home. The officer and the neighbour respected Shin's wish not to inform his family that he was lost. Until this most recent missing incident, Shin's family members were unaware that he had been lost twice in the past and received help to return home. Unfortunately, Shin's family was also unaware that he could potentially get lost even with the young onset dementia disease, as they were not informed.



The day of the incident

– Getting lost

Shin goes on a walk

He is at home with his wife Florence, and they are looking after their two-year-old granddaughter. Shin is very eager to go for his morning walk. He is in good physical shape and can walk long distances. Florence asks Shin to wait until his granddaughter wakes up from a nap so that they can go together. She tries to stop him, but Shin becomes upset. Shin agrees that he will only walk around the block and then return home to wait for Florence and granddaughter. On September 18, 2013 at 10:20 AM, Shin leaves his home wearing appropriate clothing and a medical identification bracelet.

Shin does not return from his walk

When Shin does not return from his walk a couple hours later, Florence calls their son Sam for help. Sam is concerned for his father's safety. He contacts police to report his father missing. However, he wonders if it is too soon to do so and if he should try to look for his dad himself.



The search

Local search

Officers are dispatched to interview Shin's wife and Sam. Friends and family help search local areas and places that Shin liked to visit such as the local parks, churches, and coffee shops. A search is initiated and the area surrounding Shin's home is searched by police. The local search and rescue team is asked by police to help with the search later in the evening on the day he left home, with no results.

Sharing Shin's diagnosis

News about Shin being missing spreads slowly. It takes more than 24 hours to be released by the media. Shin's family struggles with deciding whether to share Shin's diagnosis since they want to respect Shin's wishes of keeping his dementia diagnosis private.

The family decides to disclose Shin's diagnosis and was overwhelmed by the support and understanding they received from friends and members of their community. Desperate to get the word out, Shin's family starts utilizing social media. They set up a Google map for members of the public to plot their own searches and



to use collective data gathering. Sam's fitness studio becomes search headquarters for the public to pick up flyers and maps.

Expanded search

The search expands. Police search public transit stations, bus shelters, soup kitchens, food courts, shopping malls, fast-food restaurants, and convenience stores. Police seek the assistance of the search and rescue team to search challenging terrain, bushes, creeks, parks, construction sites, and shorelines. The search area is enlarged to Vancouver and other suburbs. Unfortunately, Shin is not found.

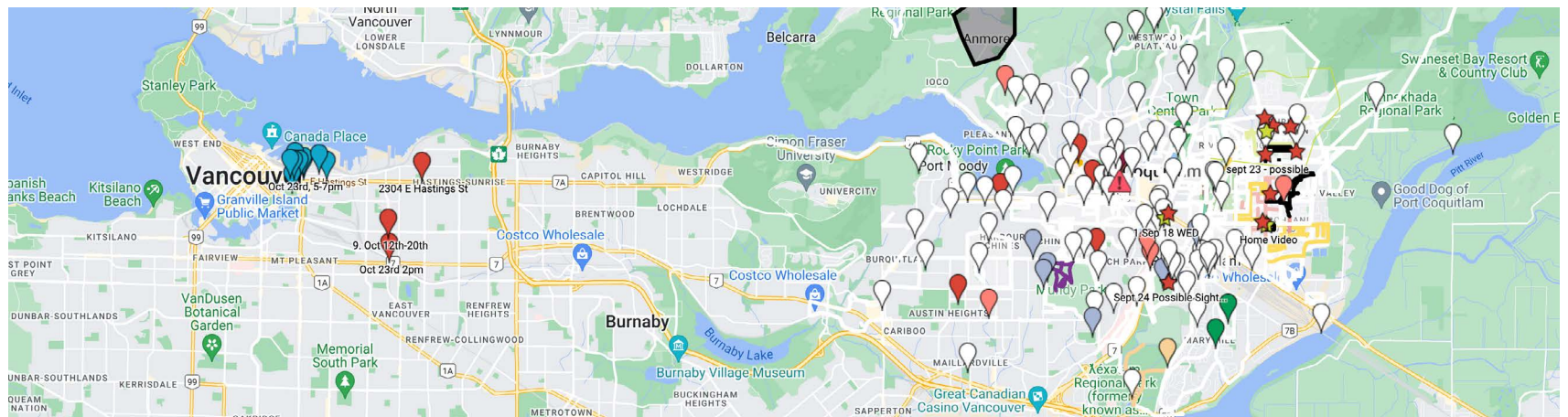
Volunteers get involved

Shin's family knows that he may not ask for help and that the public can assist by keeping an eye out for him. Sam and his sister organize searches involving hundreds of volunteers. They distribute posters containing information about Shin including his photo, ride public transit and walk the streets in hopes of spotting Shin. They have coffee watches at Tim Hortons and McDonald's in case Shin goes to these to warm up. Shin's family set up a website, a Facebook group, and use social media to spread the word. Money, food, and supplies were donated by the public and businesses to support the search. The missing incident is widely covered in the media. Despite these efforts, Shin is not located.

Potential sightings

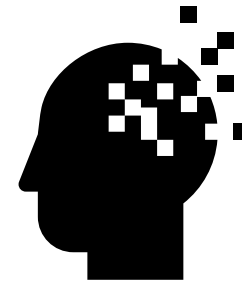
On Sunday September 22, 2013, the family learns of confirmed sightings of Shin by a member of his church and a construction worker. The church member saw Shin on the day that he went missing, but they did not realize that Shin was lost so they did not intervene. The construction worker's sighting suggests that Shin may have taken a wrong turn and ended up kilometres from his home. Police, search and rescue, and Shin's family follow up on many other sightings. A group of unhoused people living on Burke Mountain, approximately 5 kilometres from his home, report giving Shin food, but his identity is not confirmed. This potential sighting and others do not lead to finding Shin.

Areas searched were tracked on Google Maps



After the incident

Despite the efforts of police, search and rescue, Shin's family, and volunteers, he has not been found. For years, the family has maintained hope and continued to look for him. They want closure and have come to the painful realization that he may never be found. Sam and his family want to prevent others from going through the same circumstances and grief. Sam co-founded BC Silver Alert, a community-led program for notifying community subscribers about missing persons with dementia, cognitive impairment, and autism. The system uses various channels, including social media platforms like Facebook and X (previously Twitter), as well as via email or SMS messages.



BC Silver Alert

We would like to thank
and acknowledge the Noh
family for giving permission
to share their story.



Resources

It is an emergency when a person living with dementia is missing. Call 911 right away.

It is a common myth that a person needs to wait 24 hours to report the person as missing. If a missing person is not found within 24 hours, up to half of missing people living with dementia will be found seriously injured or deceased.

Some people living with dementia and their care partners may not have access to the support they need due to a lack of culturally safe care and language barriers. A diagnosis of dementia can come with stigma and shame. This can result in delays in diagnosing dementia, getting support, reporting missing incidents, and giving permission to publicly disclose the missing incidents.

The Alzheimer Society of Canada has the following resources:

- Information on dementia in various languages including Chinese, Punjabi, Hindi, Spanish, and Portuguese: <https://alzheimer.ca/en/help-support/dementia-resources/more-languages>
- A report that describes barriers to culturally appropriate care faced by racially diverse communities: <https://alzheimer.ca/en/whats-happening/news/equity-diversity-inclusion-dementia-diagnosis-canadian-perspective>
- 10 ways to reduce stigma against dementia: <https://alzheimer.ca/en/about-dementia/stigma-against-dementia/10-easy-ways-fight-stigma-against-dementia>

Alert systems, such as Silver Alerts, exist in some places. These systems use media outlets (e.g., radio and TV stations), social media (e.g., X or Facebook), or traffic signs to share missing persons information to the public and reduce risks of harm. The University of Waterloo created a policy brief that can inform the development of community alert systems in Canada:

https://uwaterloo.ca/aging-innovation-research-program/sites/default/files/uploads/files/policy_brief_community_alert_systems_finalcitation.pdf

Information about the BC Silver Alert system, co-founded by Sam Noh and Michael Coyle (a search and rescue volunteer) can be found here: <https://bcsilveralert.ca/>



10. A woman living with dementia becomes lost while walking her dog and is still missing

Personal information

Name: Susan.

Age: 79 years old when she went missing in December 2021.

Gender: Woman, pronouns are she/her.

Living situation: Single family home in rural Nova Scotia, with her long-time common-law partner.

Social support: Partner (Larry), two adult children (Jennifer in Halifax and Alan in Toronto), and sister (Nancy) and brother-in-law (Gord) who live in a small town in southern Ontario. Neighbours and community members.

Health: Dementia, rheumatoid arthritis, and sleep disruptions due to health conditions. Taking medication to manage symptoms of health conditions.

Interests: Reading, listening to music, walking outside with her dog and family.



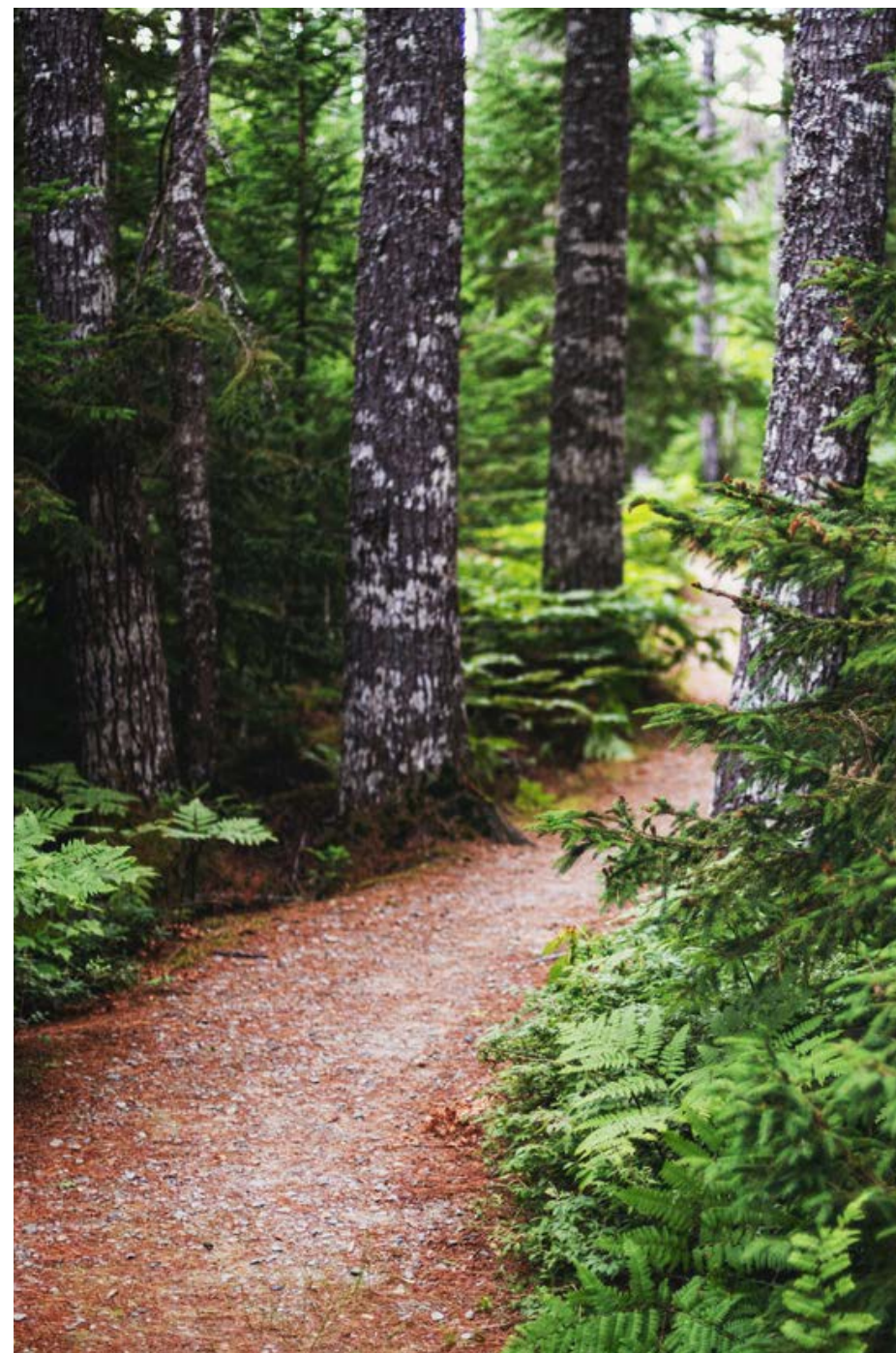
Background

Life in rural Nova Scotia

Susan was born in Toronto and lived in Toronto, Kingston and in rural Ontario at different points in her life. She worked as a daycare provider and a bank teller, then as an elementary school teacher, and in her later years as an adult English as a Second Language and literacy teacher. She and Larry were long-time partners and had lived together since 2004. She moved to Cape Breton in 2012 and enjoyed singing in a local choir and managing several websites.

Dementia diagnosis

Two years before she went missing, Susan was diagnosed with mild dementia. Her family observed it was difficult for her to remember names, dates, and recent events, and she could no longer use a computer. Others noticed that she repeated herself in conversations. Susan suspected that her memory was changing but was reluctant to get diagnosed because of the stigma of having dementia.



Independence

Susan values her independence. Even as a young person, she feared eventually having to live in a hospital or care home. Larry supports Susan at home so that she can maintain her independence, dignity, and quality of life.

Previous missing incidents

Susan walks her dog five or six times per day for 20 to 30 minutes. She is in good shape and is a fast walker. Walking helps Susan manage her rheumatoid arthritis. She follows the same route, walking up and down the same road and through a nearby field. One day, a neighbour spotted Susan walking with her dog along the highway. He asked if she needed help. Susan said she did not know how to get home, so the neighbour drove her. It comforted Susan's family to know that her neighbours and community were willing to help if needed.

Another time, Susan got lost while visiting her sister Nancy. Susan took her dog out for a walk, and got confused on her way back.

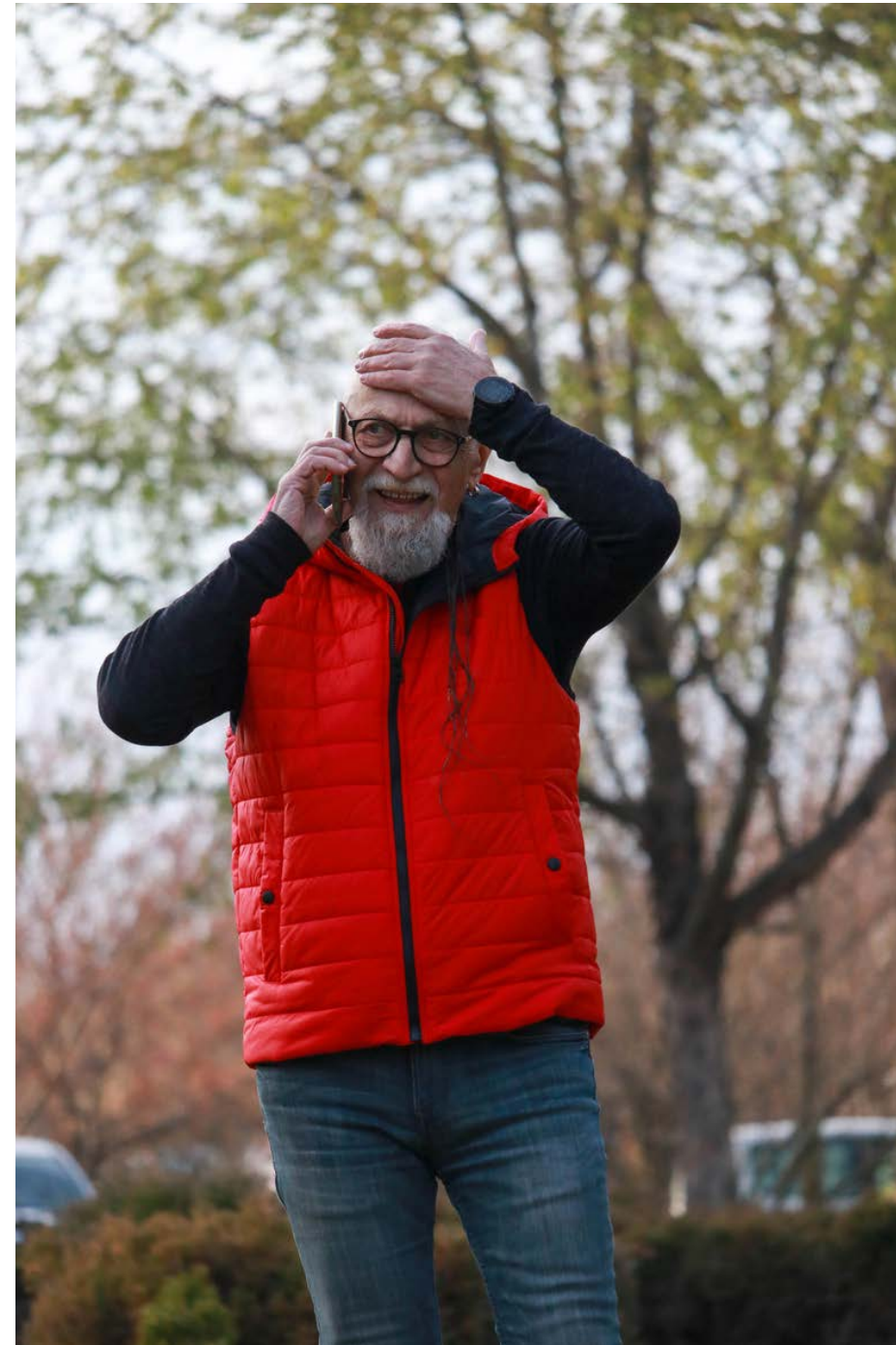


She realized that she was lost and asked a person for help. The person called the police. When Susan didn't return home, Nancy also called the police to report her sister missing. The police connected the two reports, and Susan was reunited with her family. Each time Susan was returned home by first responders, she and her partner would downplay her cognitive decline.

On a third occasion, Susan and Larry stayed with friends in a town well known to Susan. She took her dog for a walk and became lost. Susan went to the fire station for help. Staff drove her home using the address on her identification card. When Larry realized that Susan had not returned to their friend's home, he checked their own home and found her there.

Adopting new family dog

In summer 2021, Susan's beloved dog passed away. The loss was devastating. The dog was Susan's faithful companion. Larry adopted another dog for Susan later in the summer. The new dog barked frequently and this disturbed Susan. Still, she spent a lot of time with the new dog, but their relationship was different than with her previous dog.



The day of the incident

– Getting lost

A vehicle change and flooding cause distress

It is an unseasonably warm day in early December 2021. Bridges and roads near Susan and Larry's home are damaged due to flooding. Susan is distressed each time she sees or hears about the damage. A week before, Larry was in a car accident with a deer. Larry's truck was damaged, so he rented a different vehicle while his truck was being repaired. The car rental company told Larry that he shouldn't have the dog in the car, so Larry, Susan and the dog can't go out together for afternoon drives or errands as they normally would. Susan's emotions are heightened.

Susan stays home by herself while Larry goes shopping

On Friday mornings, Larry always goes on his own to grocery shop in a nearby town and then skates for an hour at a local arena. Susan is at home by herself.



Larry realizes Susan is missing

When Larry returns home from shopping, Susan is not there. He thinks that she is walking with the dog. When she does not return a short time later, he gets worried and starts looking for her. He drives down the roads near their home and asks neighbours if they saw her. Then, the dog returns to the house. It is muddy and its leash is broken. Larry is extremely worried. It is now midafternoon and becoming dark and cold. He calls the Royal Canadian Mounted Police (RCMP) to report Susan missing.



The search

RCMP search for Susan

The RCMP arrive to interview Larry and search the property. They organize a search using dogs, local search and rescue teams, and a helicopter.

Change in weather conditions

The weather has changed drastically. It is cold and snowing. Susan was not suitably dressed as the weather was unseasonably warm when she left the house. The teams search the field and the forest near Susan's home. It is an old logging area with overgrown paths, hills, and dense forest. The search goes on until midnight. Larry searches past 3:00 AM, stopping only because of heavy snow.



Weather impacts the search

The search resumes on the next two days, Saturday and Sunday. There is heavy rain on Monday and Tuesday, and searching is suspended. The search resumes on Wednesday, but the rain has washed away traces. There are few clues that searchers can use. The dense forest and terrain make the search challenging. They find Susan's glove in the forest but no other traces of her. The search is called off on Thursday due to a blizzard and it doesn't resume.

No traces of Susan

Susan is never found. She continues to be greatly missed by family and friends.

We thank and acknowledge Susan's family for giving permission to share their story.



Resources

People living with dementia can experience stigma in different ways. Internalized stigma can result in a person living with dementia downplaying symptoms and prevent someone from reporting declining cognitive function. The Alzheimer Society of Canada has developed a resource about stigma: <https://alzheimer.ca/en/about-dementia/stigma-against-dementia/what-does-stigma-against-dementia-look>

A group of Canadian researchers produced an interactive tool called Dementia in New Light: A Digital Learning Experience. It explores stigma and how to challenge it to support people living with dementia. It can be found here: <https://dementiainnewlight.com/>

The Alzheimer Society of Canada has a video about the benefits of pets for people with dementia. It can be found here: <https://alzheimer.ca/en/help-support/dementia-resources/dementia-talks-canada/video-animal-therapy-service-dogs-pets-and-dementia-care>





Resources

Toolkit to manage the risk of getting lost and going missing for people living with dementia.

This toolkit contains strategies to help with the common concerns of people living with dementia and their care partners regarding the risks of becoming lost.

Emergency card

People living with dementia can carry an “In Case of Emergency” card. It has important information to help them if they go missing. This card was made by the [Calgary Missing Older adult Resource Network](#), see page 16.

The Herbert Protocol

Important details about the person at risk can be gathered in The Herbert Protocol. This information can help first responders when someone is missing. Keep this information at home on your fridge and give it to care partners. Click this link to access the ‘[Resource Guide for Older Adults at Risk of Going Missing](#)’; fill out the form on pages 15-20.

Safety and leisure activities

Balancing leisure time with safety can be challenging. [The Canadian Guideline for Safe Wandering](#) provides strategies to promote safe wandering and manage the risk of getting lost when doing leisure activities.

Driving with dementia

It can be challenging to drive a car when the driver has a hard time remembering, navigating, and attending to the environment. This [Driving and Dementia Roadmap](#) includes safety considerations related to driving with dementia.

In Case of Emergency	
Full Name	_____
Date of Birth	_____ Blood type _____
Address	_____
Cell	_____ Work _____ Home _____
Current Meds	_____
Conditions	_____
Physician	_____ Phone _____
Allergy/additional info	_____
In Case of Emergency	
Emergency Contact #1	_____
Relationship	_____ Work Phone _____
Cell Phone	_____ Work Phone _____
Emergency Contact #1	_____
Relationship	_____ Work Phone _____
Cell Phone	_____ Work Phone _____
Additional Info	_____
_____ Last updated _____	

Locator devices

Locator devices help people living with dementia share their location with family in case they are lost. They may also help the police find people should they go missing. The [Alzheimer Society of Canada](#) shares more information about the purposes of locator devices. The [University of Waterloo Aging and Innovation Research Program](#) outlines features of locator devices, including cost and battery life.

What to do if you find a missing person

A missing incident is an emergency. Call police and ask the operator or service how you can help. [A video from Dementia Network Calgary](#) outlines a missing incident involving a person living with dementia and how to help.

Links

- **Toolkit** to manage the risk of getting lost and going missing for people living with dementia, made by the University of Waterloo. <https://uwaterloo.ca/managing-risks-of-disappearance-in-persons-living-with-dementia/toolkit-0>
- **“In Case of Emergency” card** made by Calgary Missing Older Adult Resource Network. See page 14. <https://missingseniors.ca/wp-content/uploads/2022/04/Resource-guide-for-people-at-risk-of-going-missing.pdf>
- **The Herbert Protocol** described by Calgary Missing Older Adult Resource Network. See pages 15-20. <https://missingseniors.ca/wp-content/uploads/2022/04/Resource-guide-for-people-at-risk-of-going-missing.pdf>
- **The Canadian Guideline for Safe Wandering.** https://canadiansafewandering.ca/#more_information
- **The Driving and Dementia Roadmap.** <https://www.drivinganddementia.ca/>
- **Locator device overview**, as described by the Alzheimer Society of Canada. <https://alzheimer.ca/en/help-support/im-caring-person-living-dementia/ensuring-safety-security/tracking-devices>
- **Locator device features**, as described by the University of Waterloo Aging and Innovation Research Program. <https://uwaterloo.ca/aging-innovation-research-program/locator-devices>
- **What to do if you find a missing person.** Dementia Network Calgary’s video dementianetworkcalgary.ca/



For more information

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