

Characteristics and Underlying Meaning of Hoarding Behavior in Elders With Alzheimer's Dementia: Caregivers' Perspective

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ABSTRACT

Background: Dementia and its associated problem behaviors remain bothersome to family and professional caregivers. Exploring characteristics and the underlying meaning of disruptive behaviors in elders with Alzheimer's dementia can be a first step to pursuing patient-centered care. Although hoarding is relatively harmless, unattended excessive hoarding can create health and safety issues for both patients and caregivers.

Purpose: This study examined the characteristics and underlying meaning of hoarding behavior among Taiwanese elders with Alzheimer's dementia from the perspective of family caregivers.

Methods: We used an exploratory research design and purposive sampling. A total of 12 family caregivers of elders with Alzheimer's dementia received qualitative interview. We used one-on-one in-depth interviews to collect data and content analysis to analyze data.

Results: Three main characteristics related to hoarding behavior emerged from the data were "influence of former and current symptoms," "recurrence of the original personal characteristics and habits," and "re-experiencing past economic crises." These three characteristics reflected patients' past social and family background and the current life situation. We elicited "a desire for security" as the underlying meaning of hoarding behavior.

Conclusion: Findings of this study provide a reference for family and professional care providers to understand dementia-related problem behaviors. Improved caregiver understanding of dementia patient behaviors may help improve caregiver-patient interaction and communication and help caregivers better meet patient needs.

KEY WORDS:

Alzheimer's disease, dementia, hoarding behavior, security needs, elders, caregivers.

Disease Association, 2012). Given continued growth trends in the elderly population, the number of elders with dementia is expected to double by 2026 (Taiwan Alzheimer's Disease Association, 2012). Alzheimer's disease (AD) is the major cause of dementia in community studies of Chinese and Western populations (Fuh & Wang, 2008). Behavioral and psychological symptoms in dementia (BPSD) are often difficult to handle. Behaviors such as agitation, aggression, repetitive behavior, sleep disturbance, and hoarding can be severely distressing to family caregivers and tax their abilities to care for AD patients, often becoming a key reason for institutional placement (Fuh, 2006).

It is estimated that 70%–90% of AD patients exhibit some degree of BPSD (Chang, Chen, & Lin, 2008; Chiu, Chen, Yip, Hua, & Tang, 2006). Behavioral changes challenge formal and informal caregivers. One study reported that 25% of professional caregiving stress is derived from patients' disruptive behaviors (Chang et al., 2008). Patients with high-demand disruptive behaviors pull staff away from caring for others in need (Kovach, Noonan, Schlidt, & Wells, 2005). Therefore, managing symptoms and behaviors in dementia patients may improve quality of life for patients as well as caregivers.

Rather than being irrational, BPSD may reflect underlying unmet needs. Algase et al. (1996) developed a need-driven dementia-compromised behaviors (NDBs) model to recognize that problem behaviors occur because of patient inability to make her or his needs known to the caregiver. Therefore, behaviors can be seen as attempts for communicating inner distress in the face of unmet needs (Algase et al., 1996). If behaviors are treated as meaningful indicators of unmet needs linked to past experiences, then

Accepted for publication: April 11, 2012

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doi:10.1097/jnr.0b013e3182656132

Introduction

Approximately 6.7% of people who are 65 years of age and older in Taiwan have dementia (Taiwan Alzheimer's