



DementiaUK
Helping families face dementia

Changes in sexual behaviour



As a person's dementia progresses, it can have a significant impact on their sexual and intimate relationships and behaviour. They may also begin to display unusual or inappropriate sexual behaviour towards other people, which can be distressing for everyone involved. It is important to recognise that these changes are due to the person's dementia and may be beyond their control.

By taking steps to understand why the person's behaviour has changed, you can find ways to try to prevent difficult situations.

Sexual and intimate relationships in dementia

It is often assumed that people with dementia no longer need or desire sexual contact or intimacy – especially if they are older – but this is not necessarily the case.

Sexual and intimate relationships may change when someone has dementia. For example, they may be more or less interested in sex than they were previously, or struggle to communicate their wishes.

Some couples will continue to be sexually active; others might find different ways of sharing intimacy. These may include physical closeness like touching, cuddling and holding hands; taking part in activities together; sharing memories; or simply spending time together at home.

For more information on sex and intimacy, please see Sources of support on p7.

Types of changes in sexual behaviour

Dementia can cause changes in the brain that affect a person's sexual behaviour. There are three main categories of change that may occur. These are:

- sex talk: the language the person uses is not in keeping with their previous behaviour, eg they may say inappropriate things to family, friends or members of the public
- sexual acts, eg touching or grabbing themselves or other people, exposing themselves or masturbating in front of others
- implied sexual acts, eg an

obsession with pornographic material or requesting unnecessary genital care

Families and friends may be embarrassed or ashamed about changes and find it difficult to talk to anyone about what is happening. This may be especially problematic if the person's partner feels threatened by their behaviour, for example if there is sexual force or violence.

However, it is important they receive the support they need to cope with any physical or emotional trauma.

If the person is liable to displaying uninhibited sexual behaviour or using inappropriate language in a public place, other people may avoid going out with them, leading to both the person and their partner or family member becoming socially isolated.

If the person does display inappropriate behaviour in public – such as exposing themselves – there is a risk that the police may be called to intervene. This may lead to the person being charged with a sexual offence and possibly

detained in police custody or under the Mental Health Act (also known as being sectioned).

There may also be breakdowns in care arrangements – for example if the person with dementia behaves in a sexual manner towards their carers, who may then feel unable to continue to support them.

Why do changes in sexual behaviour happen?

Some forms of dementia can cause a loss of inhibitions, especially if there is damage in the frontal and temporal lobes of the brain – this is known as frontotemporal dementia. This may lead to the person acting inappropriately on their sexual desires or thoughts. They may not understand that their behaviour has changed, and that other people may find what they do or say upsetting or embarrassing.

In some situations, disinhibited behaviour results from the person with dementia misinterpreting other people's actions – for example, if a carer is performing personal care, they may interpret it as sexual contact.

Changes in sexual behaviour may be an expression of the person's need for closeness and comfort that they are unable to communicate in other ways.

Sexual advances towards a person other than their partner could be caused by mistaken identity due to changes in perception caused by dementia. The person may believe that the other person is their partner or forget that they have a partner and so initiate sexual or intimate contact with someone else.

Sometimes, the person's behaviour may be misinterpreted by others – for example, trying to undress or touching their genitals could indicate a physical need such as needing the toilet, feeling too hot or cold or being in discomfort, rather than a sexual act.

Problems with sexual expression may also arise because of:

- other people's prejudice
- misunderstandings – for example, the person not understanding that their partner is not consenting to sex
- ageism – the belief that older

people do not or should not have an interest in sex

- judgements about the person's sexual preferences and gender identity, for example if they identify as LGBT+ and show attraction to people of the same sex
- lack of privacy, for example in a care home

Managing changes in sexual behaviour

Changes in sexual behaviour are the result of the person's dementia rather than something they are doing intentionally, so it is important to try to stay calm and understand what is happening from the person's perspective.

If you can establish a cause, such as a desire for comfort or reassurance, needing the toilet or being too hot or cold, you can try to address it, for example by distraction, offering physical closeness like a cuddle or holding their hand, or correcting misinterpretation.

However, if this is not successful you may need to consider ways of



managing the changes in behaviour.

If the person becomes disinhibited in public – for example, if they say inappropriate things, undress or behave in a sexually provocative way – the following may be helpful:

- Avoid places that are likely to trigger changes in sexual behaviour eg crowded and over-stimulating environments
- Try to distract the person if their behaviour is becoming disinhibited: suggest a cup of tea, or a walk to a quieter, less stimulating place
- Limit alcohol as this may further reduce inhibitions. You could offer soft drinks or low alcohol products

- Carry a Help Card – this is a card that explains that the person has dementia and how it may affect their behaviour. This can be discreetly shown in challenging situations
- Quietly explain to others why the person is behaving in this way
- If the person is masturbating publicly, discreetly guide them to their room or away from a public area for privacy
- In cases of mistaken identity, attempt to reorientate the person by reminding them who the other person is and gently steering them away

It is important not to avoid going out or seeing other people for fear of the person doing something embarrassing, as social contact is important for mental and emotional wellbeing for you and the person with dementia.

In a personal care situation, you or the carer should calmly explain to the person what is happening to avoid misunderstanding – for example, “I am going to help you take your clothes off and have a wash.”

If the person is heterosexual and showing problematic sexualised behaviour during personal care, it may be worth thinking about having a same-sex carer. If they are attracted to people of the same sex, you may wish to consider having a carer of the opposite sex.

It is important to share your concerns regarding sexual behaviour with family and with the person's health and social care workers. Many people are embarrassed about doing this, but professionals have experienced these changes in behaviour many times before so will be able to give helpful advice and support.

You can also contact our Helpline for non-judgmental support from a specialist dementia nurse – see Sources of support on p7 for details.

Aggressive and abusive behaviour

On rare occasions, a person with dementia may become sexually aggressive or abusive. If this happens, remove yourself from the situation until the person calms down.

In an emergency where you fear for your safety, phone 999 and ask for the police.

If you have been injured, you should make an urgent appointment with your GP, call 111 for advice, or go to A&E, depending on the severity of the injuries.

The health professional can record what has happened and advise you on what to do next. This may depend on whether the person with dementia is deemed to have had 'mental capacity' when they carried out the act, and what action you would like to take. For instance, you may not wish to involve the police, but a Mental Health Act assessment for the person with dementia may be appropriate.

Emotional support is also very important, whether that is from a family member, friend and/or professional. There are various charities that provide advice and support around domestic and sexual violence for both men and women – please see Sources of support on p7. You could also speak to your GP about what support is available.

Sources of support

To speak to a specialist dementia nurse about changes in sexual behaviour or any other aspect of dementia, please call our Helpline on **0800 888 6678** (Monday to Friday 9am–9pm, Saturday and Sunday 9am–5pm) or email helpline@dementiauk.org

To book a phone or video call appointment with an Admiral Nurse, please visit dementiauk.org/closer-to-home

Dementia UK resources

Changing roles and relationships

dementiauk.org/changing-relationships-and-roles

Sex, intimacy and dementia

dementiauk.org/sex-intimacy-and-dementia

Coping with distress

dementiauk.org/coping-with-distress

Dealing with restlessness

dementiauk.org/dealing-with-restlessness

When someone stops recognising you

dementiauk.org/stops-recognising-you

Other resources

NHS sexual health information

nhs.uk/live-well/sexual-health

Rape Crisis (England and Wales)
rapecrisis.org.uk

Rape Crisis (Scotland)
rapecrisisscotland.org.uk

Rape Crisis (Northern Ireland)
rapecrisisni.org.uk

Domestic abuse: how to get help
gov.uk/guidance/domestic-abuse-how-to-get-help

Women's Aid
womensaid.org.uk

Men's Advice Line – for male victims of domestic abuse
0808 801 0327
mensadvice.org.uk

Hourglass (Action on Elder Abuse)
wearehourglass.org

The information in this booklet is written and reviewed by dementia specialist Admiral Nurses.

We are always looking to improve our resources, to provide the most relevant support for families living with dementia. If you have feedback about any of our leaflets, please email feedback@dementiauk.org

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For more information on how to support Dementia UK, please visit dementiauk.org/donate or call **0300 365 5500**.
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If you're caring for someone with dementia or if you have any other concerns or questions, call or email our Admiral Nurses for specialist support and advice.

Call **0800 888 6678** or email helpline@dementiauk.org

Open Monday-Friday, 9am-9pm
Saturday and Sunday, 9am-5pm



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