

Understanding Dementia: Sexuality and Dementia

Changed Sexual Behaviours

It is important to remember that any strange or uncharacteristic behaviour is part of the illness and not directed in a personal way. A person with dementia may no longer know what to do with sexual desire or when or where to appropriately exercise the desire.

Managing Inappropriate Behaviours

- Check for possible causes: Needs such as toileting, pain, discomfort, boredom, or loneliness may trigger behaviours.
- Gently discourage: Remain calm, respectful, and redirect without shaming.
- Stay person-focused: Separate the person from the behaviour – this is illness-driven, not deliberate.
- Redirect & distract: Shift attention to another activity or setting.
- Offer safe touch: Build routine opportunities for physical contact through hand-holding, hugs, or gentle massage to help meet the need for closeness.

Key Take Away

Because dementia changes the brain, expressions of intimacy and sexuality can become unpredictable and hard to understand. The person may not be aware their actions have changed.

- Respond with patience and compassion.
- Protect dignity while supporting safe and appropriate expressions of affection.

Resources

https://alzheimer.ca/sites/default/files/documents/Conversations-about-dementia-intimacy-and-sexuality_Alzheimer-Society-Canada.pdf

Sexuality and Intimacy

Why this matters

- The need for closeness, affection, and companionship remains, even with dementia.
- Dementia may change how a person expresses intimacy and sexuality.

How dementia can affect intimacy & sexuality

Changed behaviours: A person may not know how to express sexual desire, or when/where it is appropriate. What seems unusual is often the illness, not the person.

Increased or decreased desire:

- Some partners notice stronger sexual demands, sometimes at odd times or in inappropriate places. These can feel exhausting or objectifying, and the person may quickly forget the encounter afterwards.
- Others lose interest in physical intimacy and become withdrawn. They may accept affection but not initiate it, which can leave partners feeling hurt or rejected.

Loss of inhibitions: People may undress or touch themselves in public, or make advances to others, sometimes mistaking another person for their partner. Behaviours that seem sexual (like lifting a skirt) may actually signal other needs, such as needing the toilet.

