

Supporting Sexuality and Intimacy for LGBTI people with dementia



Sexual expression, the need for human contact, and the opportunity to form intimate relationships are fundamental to a person's health and well-being, including older people with dementia. When expressed in aged care, some care workers, other residents, and families may feel uncomfortable and may want to control or minimise these activities.

It is the obligation of aged care organisations to provide an environment that supports inclusion, and diversity as well as the ability for residents to make independent choices. When supporting lesbian, gay, bisexual, transgender and intersex (LGBTI) people with dementia, it is important for care staff to acknowledge, understand and respect their sexual/intimacy needs.

This sheet contains information for care staff to support both the sexual and intimacy needs of an LGBTI person with dementia and understand why changes in behaviour may occur if these needs are not being met.

Why an LGBTI person living with dementia may be experiencing behaviours and psychological symptoms of dementia when their sexual needs are not supported

- Due to historical discrimination and abuse, older LGBTI people may face considerable barriers in fully expressing themselves even in environments that recognise and affirm everyone's right to sexual expression.
- Due to progression of dementia, it may be difficult for a person to communicate their sexual needs and therefore not have their needs met. This may lead to agitation, loneliness, isolation, and depression.
- Staff may be uncomfortable and not understand situations of sexual expression such as same-sex intimacy, and may assume that such behaviour is not consensual.
- Care staff may find intimacy and sexuality a difficult topic to confront and may lead to avoiding the person and the situation, impacting care delivery.

Care Staff Helpsheet

- Partners of LGBTI older people may not be acknowledged by their family of origin, which can create conflicts with the family and cause stress for the person with dementia.
- The person may express a desire to wear clothing typically associated with a different gender. If misunderstood, some could view this behaviour as delusional or disinhibited. If gender expression is discouraged, this could lead to the person withdrawing or even becoming aggressive if their choices are not being respected or are being restricted.

Determining whether the act of intimacy or sexual activity is consensual can be more difficult for a person with dementia. It should not be assumed that a person living with dementia cannot consent to intimate and sexual activities. It is important that care staff, family and health professionals don't discriminate in the consent process due to personal views. It is the role of care workers to support people with dementia in all areas of their life and well-being, including sexuality and intimacy, without judgment or discrimination.

What you can do to support an LGBTI person



- Topics that feature sexuality and intimacy are often taboo, particularly in older age. Talk to the person and make discussions about intimacy and sexual needs a part of everyday conversations.
- Take time to understand whether the behaviour is the result of sexual or intimacy needs not being met. This is important as it will determine the strategies to support the person.
- Be sensitive, kind and caring by using inclusive language to avoid bringing back any shame and trauma. For example, avoid using the term 'queer' as this was used to abuse LGBTI people in the past.
- Work with staff to identify instances of sexual expression that may make staff uncomfortable and impact the way they deliver care. Engage with training and work with staff involved to ensure that their beliefs do not further disadvantage the person with dementia.

Care Staff Helpsheet



- Respect the person's confidentiality by talking to trusted family members, family of choice or friends about information regarding sexual or gender identity to support conversations and understand the needs of the person.
- Respect the person's right to privacy. Create physical space/areas within the care home to allow this, close their bedroom door, place 'do not enter' signs on the door and knock before entering their room.
- Support the person to wear the clothing of their choice, and how they would like to present themselves and encourage them to spend time with people who support their appearance and lifestyle.
- If changes in someone's behaviour persists or escalates OR care providers are looking to explore ideas around how to support the needs of LGBTI people living with dementia, consider referring to Dementia Support Australia who is partnering with LGBTIQ+ Health Australia.

Resources

- Aged Care Quality Standards factsheet:
www.agedcarequality.gov.au/providers/standards
- Care staff upskilling resources:
www.lgbtiqhealth.org.au/inclusive_language_guide
dta.com.au/resources/sexualities-and-dementia
www.youtube.com/watch?v=LFFYkOus2eQ
- Sexuality Assessment Tool (SexAT) for residential aged care facilities:
www.latrobe.edu.au

Our partnership with LGBTIQ+ Health Australia enables DSA to access LGBTI specific strategies and approaches.

<https://www.lgbtiqhealth.org.au/>