TD Explainer Sexual harm and people with cognitive impairments

People with cognitive impairments are at increased risk of both becoming victims of sexual harm or being accused of it. Sometimes the latter is due to disinhibited behaviour rather than any criminal intent and this Explainer helps understand and manage that distinction.

What do we mean by 'people with cognitive impairments'

By 'people with cognitive impairments' we mean a wide range of different groups who, for various reasons, may not be able to follow norms and rules about acceptable behaviour.

One such group would be some people with intellectual disabilities who may not understand boundaries or have issues around impulse control. Another group would be people with degenerative disorders such as dementia or Alzheimer's who may be confused as to who others are and so what behaviour is appropriate.

The key issue here is behavioural disinhibition—acting in ways which would normally be prevented by social rules. At the same time, there is increased risk of becoming victims for those with cognitive impairments.

In no way should it be suggested that all people with cognitive impairments are at risk of disinhibited or sexually harmful behaviour, or carry the same risk of victimisation. In this Explainer, we are talking about a subset of individuals.

Some examples of inappropriate sexualised behaviour

To give a better idea of what we mean here, it may be helpful to consider some examples:

An adult with dementia exposes themselves in a public place.

A child with learning disabilities is encouraged by their friends to make sexualised comments to a stranger

An adult with cognitive impairments is persuaded to expose themselves over the internet

An adult with cognitive impairments kisses and inappropriately touches their carer while drunk

We can immediately see in these examples a range of motivations and responsibilities for the activity. Some are based on misunderstandings, some are directly caused by others, and some appear to be intended by the individual. Some of these, were they done by someone without cognitive impairments, would unambiguously be sexual offences.

Understanding the reasons for the behaviour

The challenge for us is to understand where the behaviour comes from.

In the first example, there are a number of non-sexual reasons that the individual may have exposed themselves. Often, such behaviour can be a sign of distress or discomfort—for instance, where there is an untreated genital irritation. While the effect may be uncomfortable for the viewer, the intention is to resolve a discomfort for the individual. Resolving this discomfort resolves the inappropriate behaviour.

In the next two examples, the behaviour is prompted by others. The individual performing the inappropriate behaviour is a victim themselves. In the third example, the person persuading the adult with cognitive impairments to expose themselves is potentially committing a crime—where the impairment is sufficient to prevent the victim giving consent, this sexual activity would be a form of abuse.

The final example is more difficult to judge, and we would need to know more to fully understand it. What was the intention of the adult, and did they understand who they were kissing and touching?

Risks of victimisation

We have seen from our examples that there is a danger that those with cognitive impairments can be abused. As we've seen in previous Explainers, offenders look for those they can control and who are likely not to report abuse.

Often inappropriate behaviour is modelled on behaviours which the individual has experienced, so it can be a sign that something much bigger is happening.

Further questions you might want to think about:

What practical steps can we take to resolve incidents of behavioural disinhibition? How can we support positive sexual behaviours for those with cognitive impairments? What are our routes to safeguarding?



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If you've found this explainer useful, you may be interested in learning more through one of our training programmes.

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