



Dementia Shadowing

When your presence becomes the anchor to safety



Dementia shadowing occurs when a person living with dementia stays very close to one particular person and becomes unsettled when that person moves away. They may follow from room to room, appear restless, repeatedly seek reassurance, or become anxious when left alone. This behaviour is often misunderstood as dependency or attention-seeking, but in reality it is a neurological safety response.

As dementia progresses, the brain gradually loses its ability to internally regulate emotions, orient in space, and maintain a sense of safety when circumstances change. The person may no longer be able to rely on memory, routine, or environment to feel secure. When this happens, the brain adapts by attaching its sense of safety to a person rather than a place. That person becomes the emotional reference point — the anchor that makes the world feel predictable.

When you are present, the person's nervous system settles. Your voice, movement, and familiarity regulate their emotional state. When you leave — even briefly — that anchor disappears. The space around them can suddenly feel empty and unfamiliar, which the nervous system interprets as danger. This may lead to restlessness, following, calling out, or searching behaviours. These reactions are not deliberate. They are the body responding to the sudden loss of felt safety.

Shadowing is the brain communicating:

“When you are near, I am safe. When you go, I don’t know where safety went.”

The goal in supporting dementia shadowing is not to stop the behaviour, but to help the nervous system feel safe enough to relax. Attempts to discourage shadowing by walking away abruptly,

insisting the person wait alone, or redirecting before they feel settled often increase fear. Independence cannot come before safety. Regulation must come first.

Support begins with predictability and continuity. Let the person know where you are going and when you will return, using calm, simple language. Even if the words are not remembered, the emotional tone and consistency are felt. Returning when you say you will helps the nervous system learn that separation does not equal abandonment.

For short absences, bridging safety can be especially effective. Many people living with dementia retains strong sensory memory, particularly for smell, sound, and touch. Offering an item that carries your familiar scent — such as a jumper, scarf, or blanket you regularly use — can provide comfort while you step away briefly. Holding or wearing something that smells like you helps the nervous system recognise continuity: *“You are still here, even if I can’t see you.”* This is not about replacing human connection, but about easing the moment of separation so fear does not take over.

Transitional anchors work best when introduced before distress begins, not after. Staying nearby while the person settles with the item, then stepping away calmly, allows the body to remain regulated. Over time, this can reduce the intensity of shadowing, because the nervous system learns that safety stretches rather than disappears.

Bridging tools that can support short separations

Different people respond to different anchors. Useful bridging tools may include:

- Scent: a jumper, scarf, or blanket that smells like you
- Sound: familiar music, a radio voice, or a consistent background noise
- Routine: always sitting in the same place while you step away
- Object: a meaningful item linked to calm or familiarity

These tools are not distractions. They are signals of continuity that help the brain remain settled.

Important boundaries for families and professionals

Bridging tools should always be used with honesty and respect. They are meant as temporary supports, not substitutes for presence, and should never be used to deceive or prolong absence. The person’s response matters — if an item brings comfort, their body language will show it; if it increases confusion, it should be removed. Choice and dignity must always be preserved.

Shadowing is not manipulation, stubbornness, or a habit to break. It is a survival response in a changing brain. When safety is consistently provided, the need to shadow often softens naturally over time.

A helpful reframe is this:

Instead of asking *“How do we stop this?”*

Ask *“What does their nervous system need to feel safe enough to let go?”*

That shift moves care away from control — and toward calm, trust, and emotional security.