

During our lives, the concept and practice of intimacy changes and evolves much like our individual maturity. Evolution reflecting our wants and desires transform from the inception of thoughts or ideas, into clumsy beginnings with unfamiliar feelings, expanding into an abyss of longing, desire and need for connection. This journey is fascinating and wonderous; an unknown we pursue as an act or measure of fulfillment and personal identity.

What is intimacy? While we may agree that physical connections are an important part of intimate relationships, enjoying sex and sexual interactions are only a part of the intimacy we require to feel totally connected to our partner. Intimacy is in its very essence emotional and passionate. It is a bond that builds over time. Intimacy is about trust and caring, it is feeling comfortable around the person with whom you share your most vulnerable thoughts, deepest fears, hopes and dreams.

The affect of a healthy sexual experience in a relationship is documented as directly impacting on emotional, physical, and psychological wellbeing.

Emotional intimacy requires a different sub-set of boundaries and understanding. Proposing that an emotionally intimate connection could be as powerful, if not more so, than a physical connection. One could imagine that emotionally stable relationships have the potential to serve as an immunity against potentially destructive influences. It is emotionally tested and true connections that will withstand "off time" changes that Parkinson disease may bring into your life.

Many individuals with Parkinson disease will be fully capable of and interested in maintaining physical and emotional intimacy. Other individuals with Parkinson's may have a completely different experience. Parkinson's may bring with it challenges effecting physical performance, emotional availability, cognitive change, and various other manifestations making intimacy difficult. Additionally, Parkinson disease may cause negative responses towards a loved one, causing a fractured intimacy. This may make it feel as though intimacy is completely inaccessible or void of possibility.

## How might Parkinson's Change Intimacy?

Reflect with me for a moment, remember (as you are able), the love that conveyed you through your relationship, the love that brought you into today.

Before we ever exchange a kiss, or hold hands, we explore opportunities to interact. We create opportunities to share insights, converse, build trust, test trust, extend trust. This is intimacy in its infancy. Laying next to someone, listening to them breath, intimacy. Sharing an all-knowing look across a crowded room, intimacy. These forms of intimacy are responsible for the depth of your love now. Throughout our lives we look to those moments to support us, hold space for us, witness our journey, celebrate us, challenge us, trusting the connection with a deep sense of belonging.

Without transparent conversations, we do not always recognize a pivot away from the status quo, this may unconsciously signal to your partner, there is a division. When changes occur unintentionally, your partner may perceive those changes as a threat. Communication is critical in managing expectations and creating a new path forward when it comes to the changes in your relationship.

How a partner's Parkinson's effects their physical capacity or interest in intimacy becomes necessary

conversation. Transparency demystifies unexpected changes. Responding in tandem, we quiet the fear, we soften the anger, we empower ourselves to find alternative ways to fill the void. Inadvertently creating opportunities for new growth and connection. Living with Parkinson's requires a willingness to *pivot towards* **change.** Responding together, we are stronger, better prepared to adjust.

Off-time changes, change before a natural readiness or expectation can throw our lives off balance. We may create distance between ownership of the change, in other words, "it's not my fault."

For couples not living with Parkinson's, aging naturally takes care of many conversations and changes in feelings over time. Gradually and mutually accepting transition from active sexual intimacy towards a more intentional expression of love through kindness and caring touch, love notes or acts of kindness. Intimacy changes in the very same way as our relationships evolve, similarly changing and evolving as people.

Let us imagine for a moment, Parkinson's is not part of your life; might you still have challenges around intimacy? Absolutely yes. Intimacy requires commitment and effort for everyone.

Change requires adjustment, a commitment to compromise, and honest conversations about the feelings you navigate. Relaxing around your partner, focusing on experience and pleasure, not performance or endurance, soft touches, memory sharing, story telling, making a date night, fun games or outings, quiet dinners by the fireplace. Intentionally being open to whatever comes that feels right for both of you.

Dealing with changes due to Parkinson disease, presents unique challenges. Often a person will acknowledge feeling hurt or rejected by a partner who does not want or is unable to enjoy sexual or physical connections. This is normal. Decisions to reframe



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your thinking and feelings around change will be decided by several factors and it can be difficult to know where to start. Begin with inviting a conversation. Set aside dedicated time to discuss your needs. Try asking specific questions, working together to find solutions that work collectively. Understanding that it all revolves around give and take.

- Do you understand how to create intimacy that feels the way you want/need it to?
- » Do you understand what you are feeling emotionally?
  - Offering pictures of a range of emotions might help a person with cognitive changes (ie: happy, frustrated, curious, embarrassed, etc)
- Do you know how to ask your loved one for what you need? And do they know how to ask you?
- Is what you need/want physically possible from your loved one? And vice versa.
- "What is possible?" is a wonderful place to start!

## The Road Not Taken

Two roads diverged in a yellow wood,
And sorry I could not travel both
And be one traveler, long I stood
And looked down one as far as I could
To where it bent in the undergrowth;

Then took the other, as just as fair, And having perhaps the better claim, Because it was grassy and wanted wear. Though as for that the passing there Had worn them really about the same,

And both that morning equally lay in leaves no step had trodden black.
Oh, I kept the first for another day!
Yet knowing how way leads on to way, I doubted if I should ever come back.

I shall be telling this with a sigh Somewhere ages and ages hence: Two roads diverged in a wood, and I— I took the one less traveled by, And that has made all the difference.

- Robert Frost



If you or your partner have difficulty with this conversation, seeking professional support may be helpful. Conversations around intimacy and Parkinson's can feel overwhelming. A professional can provide you and your partner with strategies and insights navigating intimacy.

Learning to trust, no one single person is responsible, nor can one single person be responsible for all change. Redefining intimacy reassurances both parties that your love is the road that will take you onto your next adventure together. This brings to mind the words of poet, Robert Frost.

Choose the road that brings you back to you, back to your loved one. Trusting your journey will unfold ever gently, lighting in you the courage to step authentically and with grace into your true self, hand in hand with your witness, your love and friend, the one with whom you choose to share your footpath.