Altered States
Our Body Image, Relationships and Sexuality
by Sandra Houston, PhD

Body image (the attitudes we have about our body) and self-perception (our thoughts, feelings and reactions to our selves) are issues that everyone deals with.

Early in life, we are taught to be aware of our body shape, size and physical attributes. Our body image changes as we go through life, interacting with others in various situations, both good and bad. The Hollywood ideal is impossible for most of us to achieve, yet our self-perceptions are shaped and driven by the media and lead us to want to be thinner, prettier and healthier. The further we see ourselves from these artificial standards of beauty, the more likely our body image will suffer.

Obviously, after the loss of a limb, we become even further removed from these ideals. We are forced to deal psychologically with changes in function, sensation and body image. But the more you focus your energy on what’s missing – not just the limb but also the things you could do before – the more likely you will become depressed and angry. In fact, many studies have found that the more negative amputees feel about their body image, the less satisfied they are with their life. It doesn’t have to be that way for you, however. Psychological studies have also found that the majority of amputees are well-adjusted and have full and rewarding lifestyles.

The way to learn to live with these altered perceptions is by recognizing that you’re still basically the same person inside that you were before the amputation. Successful adjustment is achieved by focusing on overcoming obstacles, learning to do the things you enjoyed before (which may require some creative adjustment), and seeing yourself as a whole person who just happens to have a missing body part. Don’t limit yourself with the label of “disabled.” The focus should no longer be on what’s gone, but on the future.

If you have a prosthesis and are learning to use it, your body image will probably begin to change to incorporate the artificial limb. You’ll know this is starting to happen when you begin to feel naked without it.

Relationships
Relationships with others come in many forms. There are those people we are intimate with, nodding acquaintances, and those in between. Regardless of the degree of closeness, the connections we have to others have a profound impact on our quality of life. People who feel lonely and isolated are far more likely to experience depression and even physical disease than those who have a sense of connection and community. When we have no one else to communicate with, we are left to focus solely on ourselves. With nothing else to distract us, we tend to dwell on our problems and pain.

Some amputees may view their body change as a mark of shame. Afraid of rejection, they may view themselves as less desirable and then
Healthy relationships are based on a mutual give and take of friendship, trust and respect. You may have lost some of your independence after the amputation so some of these relationships may need a discussion of how to adjust the balance of give and take. An amputee’s spouse or parent may often feel overwhelmed by the new responsibilities he or she has to face. Communication is the key here. Discuss everything. “no holds barred.” The more you can openly and honestly discuss your anger, fear and frustrations, the healthier and stronger the relationship will become.

**Sexuality**

Many people believe that if you don’t have sexual intercourse, you’re not a sexual person. The truth is that we’re all sexual beings. Sexual interaction is, however, the physical expression of our feelings and emotions in a loving relationship. Unfortunately, sexuality (which embraces the whole self) is often used synonymously with sex (generally meaning sexual intercourse).

Touching, affection and emotion are often overlooked aspects of sexual activity, even though touching and being touched are basic human needs. In fact, studies show that babies who don’t receive the comfort of a loving touch develop later than those who do.

Unfortunately, some amputees say that limb loss limits their sexuality. This is often associated with a negative self-image. Because society’s view of sexuality is based on youth and physical attractiveness, you may feel that you are less sexually attractive after your amputation and avoid this part of life.

Sexual intimacy places you in a vulnerable position with your partner and puts you at risk for rejection. It is crucial, therefore, that you and your partner discuss your fears and anxieties about your body and how it might now look and function somewhat differently. Without open communication, there is a lot of room for misunderstanding and hurt feelings.

Our sensuality and sexuality always begin with us, and we sometimes create our own barriers to expressing these components. One of these barriers is concentrating too much on the performance and not enough on the sensations. To fully experience the sensations of touch, you must let go of all thoughts and expectations and focus on the sensations of pleasure available at that moment. As your awareness of the sexual sensations improves, both your self-image and level of sexuality will improve.

Sex is a give and take proposition. We alternate between focusing on our partner’s pleasure and our own. There are many ways to share pleasure so give yourself permission to expand your definition of sexual expression. What may have once been a comfortable position for you may, since your amputation, be uncomfortable or even painful. In addition, you may experience balance problems. Sometimes, something as simple as positioning with pillows can help with your stability. Sex is the fun part of a relationship so experiment, explore, and enjoy discovering what works best for you and your partner now. Amputees all over the world have returned to loving, sexual relationships after their amputation. You can too.

**About the Author**

Sandra Houston, PhD is a clinical psychologist and retired professor of psychology from the University of Central Florida. She had a private practice for 30 years, specializing in marriage and sex therapy. She has been a hip-disarticulation amputee since 1982. With over 50 professional publications and presentations, she continues lecturing and writing in the field of rehabilitation psychology.