

“I’M NOT DEAD YET!”

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Sexual expression is not limited to youth and virility. Physical desire and sex are experienced by most persons throughout the lifespan. Sexual expression among persons living in nursing homes is often a complicated consideration of resident rights, personal desire, the duty to protect, and liability. This case examines one nursing home resident’s struggle to experience sexual connection in the time of COVID-19.

INTRODUCTION

Leonard was looking for love. More specifically, Leonard was looking for a lover... and, he had a plan. Leonard had lived in the nursing home for 47 years, having been left in the lobby on his eighteenth birthday by his elderly mother and her younger paramour. Leonard was born with cerebral palsy and was dependent on others for most of his needs. He could not ambulate, bathe, dress, eat, toilet, or transfer without help. Except for his right arm, which he used to control his electric wheelchair, his body constantly betrayed him. Many people underestimated Leonard, assuming that his frail body equated a frail brain, but Leonard had a sharp wit and a keen mind. He was a voracious reader (of books on tape) and loved nothing more than a good political debate. He was dependent upon Medicaid but had managed to secure a private room in the recently renovated wing of the large nursing home. Leonard was considered by residents, staff, family members, and volunteers as an informal leader at the home. He attended every resident council meeting and frequently advocated for the rights of persons whom he believed could not advocate for themselves. He was proud of his status at the home and frequently noted: “I’ve been here so long, I’m like the furniture. COVID couldn’t even kill me.”

Today, on his sixty-fifth birthday, he announced to his social worker, Brooke Gaines, that he had been saving his personal allowance from his Medicaid allotment of \$30.00 per month, and he wanted Brooke to help him create an account on either Tinder or Ashley Madison. “Maybe both,” Leonard said. Leonard wanted love. Actually, Leonard wanted sex. At the very least, he wanted to watch. Leonard had never had a relationship. He had never had a date. He had never shared a kiss or a

cuddle and today, as Brooke sat, holding the cupcake and stunned to silence, he announced: “It’s about time.”

Brooke Gaines was sure she looked shocked, but she tried to hold it together. She was fairly new to the nursing home, having recently graduated with her MSW just a few months prior. Her mind raced, as she mentally reviewed her past classes, none of which had prepared her for this conversation, which – so far – was pretty one-sided. She sat, conscious of breathing into her mask, badly wanting to present the cupcake and leave as soon as possible, but she knew that if she left, this conversation would continue over days, weeks, months. Leonard had a quest. For her part, Brooke did what Brooke did best, folding her hands, mentally repeating scripture, and punctuating her thoughts with silent pleas and prayers. All the while, CNN played in the background and Jake Tapper reported the latest pandemic statistics.

“Look, I got the money. I got the private room. I know my rights... and I’m not dead yet!”

Brooke’s cell phone buzzed, reminding her of the up-coming care plan meeting. “Thank you, Jesus,” Brooke thought. Placing the cupcake on the side table, she again wished Leonard Happy Birthday and, closing his door behind her, she walked towards the conference room, Tinder on her mind.

SUNNY ACRES NURSING HOME

Sunny Acres Nursing Home was one of the largest – and oldest – nursing homes in the American South East. It opened in the late 1970s, a less restrictive living environment for persons needing care. Most of the early residents were older persons who had transferred to Sunny Acres from the state-run mental institutions. Today, the majority of residents were well-over the age of retirement, but there were exceptions. Many younger persons moved to Sunny Acres, especially those who had physical needs that could not be met outside of formal care. Most of the residents of Sunny Vale had lower incomes – or no incomes at all – and the majority were dependent on Medicaid to cover the costs of care. Medicaid also provided a monthly allowance for residents’ personal use. Social workers often shopped for residents throughout the week, purchasing sodas, candy, birthday cards, lipsticks, or other desired items. Many residents had limited social connections and a number of residents had outlived family members and some persons had been abandoned by relatives. The staff worked hard to make the nursing home as much as a “home” as possible. Many residents, like Leonard, described the people who worked at Sunny Acres as “my family.” Sunny Acres enjoyed a good reputation. There had never been a scandal or a news story about resident abuse. State inspections

sometimes found issues, but those were quickly resolved. Staff tended to stay, too, and a few employees had been at Sunny Acres about as long as Leonard.

Sunny Acres was huge, with 284 dual-certified “beds,” accommodating “rehab” patients who needed to become stronger to return home and “permanently placed” residents who had made a permanent move to the nursing home. It had two floors and six wings. Two years ago, a state of the art rehabilitation center and wing was added to the nursing home, where Leonard lived in a private room, having secured this prime real estate through careful and consistent prodding of the administrative staff. The nursing home was associated with a local hospital and persons discharging from hospital care, who needed rehabilitation or physical therapy, were often sent to Sunny Acres. Many never returned to their family homes. Truth be told, most persons who moved to Sunny Acres, stayed at Sunny Acres... even younger persons who came into care, tended to remain. Leonard, for example, had arrived on his eighteenth birthday. Forty seven years on, he had spent the whole of his adult life in the nursing home. He did not expect to leave. “I’ve been a dead man, walking, for a long time,” he said.

NURSING HOME SOCIAL WORKERS

Social workers are an important part of nursing homes. They work with multiple-disciplinary care teams, including doctors, nurses, medical specialists, activity directors, and dietitians to develop personal plans of care for each resident. They provide biopsychosocial assessments of residents and help assure that resident rights are upheld. Social workers are advocates and sometimes provide clinical services for residents who are experiencing emotional issues or challenges with mental health. In places like Sunny Acres, where few residents have contact with family, the residents often form strong, trusting relationships with social workers. These relationships extend throughout the life-course and social workers are often at the bedside of persons who are at the end of their lives. Often nursing home social workers are responsible for keeping track of the personal funds of residents and, in some cases, help residents make purchases from these accounts.

BROOKE GAINES

Brooke Gaines was fairly new to Sunny Acres. She had graduated with her MSW six months ago and was thrilled when she landed the first job for which she had interviewed. Brooke was a 24 years old and had gone straight through her BSW and graduate programs. She had been reared by her grandmother and knew she wanted to work with old folks. Sunny Acres, for Brooke, was more than a job. Before her graduation, Brooke had prayed for a place where she could serve others. Sunny Acres was an answer to a prayer and she had been called. The days at Sunny Acres could be long and Brooke didn’t have much time left to meet people or socialize. “I guess I am just married to the job,” she laughed with her Grandmother.

But now, Brooke walked down the long hallway. It was 312 steps from Leonard's place to the conference room and all the way, Brooke prayed. She was not prepared for what Leonard was asking. She was relieved that he wasn't on today's care plan list. She could spend the next hour or so thinking about other people and other things... but now, as she walked, her thoughts kept repeating: "Whatever am I going to do?"