



In Alaska, 2006.

11.

The Other Woman

*Love is a fruit in season at all times and within reach of every hand.*

—*Mother Teresa*

I first met Sarah in her room. It was a few weeks after Clyde became a resident on the third floor, the memory care unit of Monticello, where those with significant dementia lived. On my daily visits, since there was nowhere else to go and nothing else to do, I often walked with Clyde through the hallway of the third floor, holding his hand so he wouldn't go "astray" like a lost lamb. That day, as usual, we went from one end of Monticello's U to the other, passing all the familiar sights: the caregivers' station, the activity room, the big dining room, the small dining room, and the TV room, all interspersed with residents' rooms on both sides of the hallway. At the end of the U, we reversed direction and passed all the same rooms again. Along the way, I admired the unique décor of the residents' rooms: a current picture of the resident on the door, no longer youthful but still smiling; an antique dresser against one wall, finely crafted, probably an heirloom; a photo album lying open on a coffee table, perhaps displaying pictures of a significant event or a younger version of the resident; a cushion covered with cross-stitched red and pink roses, placed on an easy chair; a bedspread hand-quilted with small pieces of diamond-shaped red, blue, and white cloth. Monticello encouraged families to furnish rooms with familiar items to make the residents feel at home; nostalgia seemed to be the common theme.

As we passed a small room similar to Clyde's, my eyes met those of an old man who was lying on the bed of one of the resident rooms. A woman stood facing him at the side of the bed, her back toward us. I could see her silver hair and slender frame, her back slightly stooped.

“Hi, come in.” The man, still lying on the bed, smiled and made an inviting gesture to us. Tall and athletically built, he had a full head of gray hair. *He seems too clear-minded to be a resident on the third floor,* I thought to myself.

The woman turned around. I saw her pale complexion and fine facial structure. She smiled at us sweetly, almost coyly, like a young girl, and said nothing.

“This is my wife, Sarah. She lives here.” The man must have read my bewilderment. “I live on the second floor. Who are you?”

The second floor of Monticello housed seniors who were still mobile but had difficulty living by themselves. They were able to take care of most of their own basic needs, such as grooming, eating, and getting around by walking or wheeling themselves here and there. At Monticello, they did not have to cook, do laundry, clean house, take care of their gardens, or drive. They could enjoy as much socializing as they wished, with plenty of activities to choose from throughout the day: card games, music, lectures, dancing, exercising, crafts, and more; or as little as they wanted by keeping to themselves in their own small apartments. Unlike the third-floor residents, who seldom left the building, second-floor residents could go on outings organized by Monticello, riding in an air-conditioned van with nicely cushioned seats. They might have lunch in a local restaurant, enjoy a picnic on the lawn by White Rock Lake in the Dallas Arboretum, see a movie in NorthPark Center mall, or go shopping. The residents on the second floor had their faculties, which meant the difference between being granted freedom or being denied of it.

As it turned out, Sarah’s husband was a retired lacrosse coach from Southern Methodist University, where I was working at the time. Our shared acquaintances included some of his past associates who were my present colleagues. The coach now had heart problems and was not able

to do everything for himself, much less take care of Sarah, who had advanced Alzheimer's disease. They had moved to Monticello several years before: he on the second floor, and she on the third. He came to see Sarah on the third floor almost every day, although she no longer knew who he was.

“But I know who *she* is,” the former lacrosse coach said.

They must have been in their mid- to late eighties. Sarah's silver hair was neatly groomed and combed back into a chignon at her nape, simple yet elegant. While most other women residents wore loose sweatshirts and baggy pants that made them, well, more or less genderless, Sarah wore more refined, somewhat old-fashioned clothing, perhaps a cream-colored cotton dress with dainty light blue flowers and a row of buttons from neck to waist. Had the coach insisted on a dress code for Sarah? It definitely was feminine. Her face had fine age lines and was very pale, a sign of lack of sun exposure. Her lips, no longer full, were painted red, as were her fingernails. It was not a bright red as often seen on flags, but a muted red that looked somewhat rusty and resembled the color of blood. It reminded me of the color Indian red, which, according to Wikipedia, was “made of a pigment composed of naturally occurring iron oxides that was widely used in India,” the land of the colorful.

Caregivers groomed female residents every morning after breakfast. Their hair was done, their faces made up, and their fingernails painted. The caregiver who groomed Sarah had chosen a color that suited her well: subtle, delicate, and pleasant. Sarah always wore a vague smile. Was the expression in her eyes confusion, nervousness, timidity, or all of these?

Sarah did not mingle with the other women. Instead, she either walked alone or sat quietly, usually with one of the caregivers. I was told that she had been pestered by some of the other women residents. At the time, the cognitive world of the twenty or so third-floor residents

was a rudimentary one. The fragile veneer of civilization was even more fragile because Alzheimer's hampers one's ability to inhibit behaviors, civilized or not. Did the others instinctively perceive Sarah's softness as a sign of weakness, making her, by the law of the jungle, easy prey for those tougher than she? Was Sarah the victim of her own gentle demeanor?

Were the others jealous of Sarah? After all, who else dressed so gracefully and had visits from a tall, handsome man with a full head of hair? "*Les hommes sont cause que les femmes ne s'aiment point*" (Men are the reason why women don't love each other), observed seventeenth-century French philosopher Jean de la Bruyère. And the German poet Friedrich von Schiller called jealousy the "magnifier of trifles." In the small universe of the third floor, the residents had plenty of time to spare but little ability to reason. It was all too easy for the most trivial conflicts to turn into the Battle of Waterloo.

"O! Beware, my lord, of jealousy; It is the green-eyed monster which doth mock the meat it feeds on," lamented Shakespeare's Iago.<sup>1</sup>

I added Sarah to our walking routine whenever I saw her solitary figure wandering aimlessly around the third floor like an apparition.

It had been a couple of weeks since I last saw the former lacrosse coach on the third floor. One evening, while walking with Clyde and Sarah, I asked a caregiver why we hadn't seen the coach here to see Sarah. "He had another heart attack. He is on the fourth floor now," she replied.

Fourth floor? One floor higher meant a step closer to life's final destination. The fourth floor of Monticello was for severely ill residents who needed constant medical care; they were bedridden and had no mobility. They seldom moved back down. More often than not, they were

moved out, to meet their maker. The former lacrosse coach could no longer come to the third floor to see his sweetheart.

I looked at Sarah. She did not appear to be affected by this change. She moved around with the same frailty and quiet delicacy, wearing the same vague smile and the same hazy expression. A protective instinct flooded my heart, the kind of instinct that causes most animals to protect their young and feeble.

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One day at lunchtime, I was making my regular visit to Monticello. As soon as I got out of the elevator, one of the caregivers saw me. “Where is Dr. Wingfield?” She looked around her. “He was here a moment ago. Let me find him for you.”

At the far end of the hallway, I could see Clyde and Sarah walking away from us, hand in hand. The caregiver followed my eyes. Immediately, she started to rush toward them with a hasty apology. “Sorry, I didn’t see them together.” Before I could respond, she and another caregiver went to intercept the two. Once they did, they tried to separate them, but Sarah held Clyde’s hand tightly and wouldn’t let go. The caregivers must have used some force to disconnect her hand from Clyde’s; I could hear Sarah’s faint voice imploring, “Noooo.” As one of the caregivers was taking her away, Sarah tried to turn back, her arm stretching out to reach Clyde. By now I was close enough to hear Sarah’s tearful plea, “Honey, don’t let them do that to me!” Her voice was shrill, as if a piece of flesh were being torn away from her.

“He is not your husband!” The caregiver grabbed Sarah’s hand and shoulder firmly and continued to pull her away. “His wife is here to see him.”

I took Clyde’s hand, now freed from Sarah’s, with her despairing, helpless voice still echoing in my head and the image of her usually serene face, twisted with fear and emotional

pain, imprinted in my memory. I knew right away that the incident would leave no trace in Clyde's or Sarah's consciousness. Their dementia spared them the burden of dwelling on unpleasant experiences, a blessing of their impairment. But the incident haunted me and made me tremble for a long time.

“Some family members don't like it. We get blamed for that,” the caregiver explained. “I hope you don't mind.”

*Mind? Should I mind? Mind what?*

By nature, we human beings form attachments with each other, sometimes with strangers. Most of us are instinctively attracted to the opposite sex, even when we don't know who we are or who anyone else is, as in the case of people with dementia. It is not unusual for residents in dementia-care facilities to develop affectionate or even romantic relations with the opposite sex, even if they have spouses or partners already. In an interview with the *New York Times*, former Supreme Court Justice Sandra Day O'Connor spoke about the demands of caring for someone with Alzheimer's disease, including unexpected, sometimes bittersweet, developments. Her husband of over fifty years, John O'Connor, suffered from Alzheimer's. His deteriorating health played a significant role in her decision to retire early so that she could devote more time to his care. “He was in a cottage, and there was a woman who kind of attached herself to him. It was nice for him to have someone there who was sometimes holding his hand and to keep him company,” she told the interviewer.<sup>2</sup>

In the 2006 film *Away from Her*, after the thirty-day no-visit adjustment period required by the nursing home, husband Grant goes to see his wife, Fiona, who has Alzheimer's disease and recently entered the nursing home. Fiona has already forgotten him. Instead, she has become

attached to a fellow resident, Aubrey, a man confined to a wheelchair who has lost the ability to speak.

“It’s a common tale but true,” Peter, Paul, and Mary sang in “Lemon Tree.” Many residents with dementia in nursing homes or assisted-living facilities form attachments with residents of the opposite sex. To make the matter more complicated, some people with dementia who form such attachments become sexually disinhibited. Holding hands and flirtation might be innocent and harmless enough, but in some instances, residents with dementia engage in sexual conduct. A mind that has lost the ability to remember or to reason does not necessarily lose the desire for pleasure, and a person with dementia may very well retain the physical ability to indulge in sexual relations. Ken Robbins, a geriatric psychiatrist and clinical professor at the University of Wisconsin–Madison, points out that “attraction, hugging, flirting, fondling, and yes, sexual relations know no expiration dates.” Because we are social animals, “social connections and human touch help ward off the depression and loneliness that old age and institutional living can bring.”<sup>3</sup>

But who gets to decide what is safe and appropriate, and based on what criteria? It is not easy to answer the question of whether people are able to consent to sex if they can’t balance a checkbook, or if they can barely speak. What we do know is that the spousal relationship is one of the most intimate, intense, and exclusive bonds between people. By chance, two strangers come together, fall in love, vow to take care of each other, and promise to be faithful. When we marry, we accept certain boundaries and responsibilities. But what happens when the ill spouse can no longer comprehend the meaning of a spousal relationship and its boundaries? After all, love is probably among the most difficult things to understand, even when our faculties are intact.



While the institution of marriage may seem to be solid in the eyes of law and other people, inside the marriage, the well spouse often descends into an abyss of emotional and physical deprivation. In *Away from Her*, Fiona's husband, Grant, and Aubrey's wife, Marian, the two well spouses, both extremely lonely, attempt a tentative relationship. They wonder, however, about the true nature of this relationship. Do they feel guilty? Conflicted? While the movie does not elaborate on that, it makes plenty clear that it was not a relationship of love between Marian and Grant, the two lonely souls.

In her article "Of Love and Alzheimer's," *Wall Street Journal* reporter Alicia Mundy tells the story of Sid. Sid was in his seventies, and his wife of more than forty years had Alzheimer's disease. He lived with his wife three days a week and stayed the other four days with another woman. While he had developed a new intimate relationship, Sid loved his wife. He had no intention of divorcing her, and was committed to taking care of her. This story generated a flurry of discussion, with people taking sides either hailing Sid as a hero husband or accusing him of adultery.<sup>4</sup>

Life does not always provide simple answers. Well spouses caring for a partner who is cognitively impaired and terminally ill must reconsider, most often alone, the complicated and uncertain nature of their changing spousal relationship.

So what about my Clyde and the other woman, Sarah?

The hideous disease called Alzheimer's strips away a person's facade of civilization, taking with it not only the rational mind but also the refinement and sophistication of his sense of what constitutes acceptable social behavior. What is left of the person with Alzheimer's, however elderly that person may be, is someone still seeking to connect with another human being, and still wanting to be accepted by the opposite sex. After all, connecting with another

human being, especially with the opposite sex, is one of the most important desires humans have, a matter of survival and evolution of human race. My rational mind was able to see Clyde and Sarah, two beings as innocent as young children (at the time, Clyde's mental capacity was diagnosed as similar to that of a two-year-old). I rejected the idea that their togetherness was a betrayal of the marital love they had each vowed to keep. I have always considered generosity and empathy to be among the elements of true love, so I decided to accept my Clyde's "other woman." With that, the boundaries of my spousal relation were redefined and my love for Clyde transformed.

Believing that compassion had triumphed, I told the caregiver that I didn't mind Clyde's spending time with Sarah.

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For the rest of Clyde's stay at Monticello, when I visited, I often found Clyde and Sarah together. Most times they were holding hands, walking back and forth. Sometimes they sat on the sofa together in Clyde's room. Clyde talked and Sarah listened. The conversation went something like this:

Clyde: "Honey, you know that, that, that . . . You know it?"

Sarah: "Yes, dear."

Clyde: "Did you, did you, see that? Did you?"

Sarah: "Yes, dear."

The two became partners in crime. They got into other residents' rooms, "stole" things, and created chaos. One time I caught them in another resident's room. Clyde was struggling to drag the bedspread off the bed. The pillows were already on the floor and clothes were scattered all over the room. Sarah was pleading softly, "Honey . . ."

There was no past or future between them, just the present moment. Neither knew the other's name, who the other person was, or where they both were, but they were often together. Clyde still recognized me and was always happy to see me, but felt no shame at being with the other woman.

I took both of them walking with me, Clyde on one side and Sarah on the other. Hand in hand, our threesome looked pretty handsome on the third floor, going up and down the hallway, passing all the activity rooms and peering into other residents' rooms. At lunchtime, I sat with them in the small dining room designed for those who had forgotten how to feed themselves. I put a heaping spoonful in Clyde's mouth, then a small spoonful in Sarah's.

One evening, most of the residents were in the TV room watching America's biggest hero, Indiana Jones, for the hundred and first time, I was sure. Clyde, Sarah, and I sat at the back by the wall, with the night-shift caregivers. "Does Sarah have any children?" I asked a caregiver. "Does she have anyone other than her husband?"

"Come, Sarah," one caregiver said to Sarah, and she walked over to her, as docile as a little girl. The caregiver reached into Sarah's pocket and took out a worn black leather wallet, opened it, and showed it to me. Inside the wallet, there were two photos: a young man on one side and a young woman on the other, both of them good-looking, both of them smiling.

"Sarah, who is this?" asked the caregiver, pointing to the man.

Sarah looked at the photo, raised her eyes, and looked at the caregiver, with her usual faint smile and expression of bewilderment and coyness, as if she were embarrassed that she couldn't answer.

The photos were of Sarah's son and daughter, her only children. Both were long deceased. Her son had died in a car crash, and breast cancer had taken away her daughter.

Unimaginable tragedy had struck this frail woman, not once, but twice.

I pulled Sarah to me and cuddled her skinny body against mine, feeling her small, protruding bones. *Sarah, the cruelty of life cannot hurt you anymore.* Sarah smiled at me, with serenity and childlike innocence, as if she were at a point of harmonious equilibrium, beyond all earthly troubles.

One afternoon when I was with Clyde and Sarah, a caregiver was rushing around, looking for Sarah. “Where is Sarah? Where is Sarah?”

“She is here. What’s happened?”

“Her husband wants to see her. We need to get her ready.”

They put Sarah in a forest-green corduroy dress with a white lace collar, combed her hair, and freshened up her lipstick. She sat there like a young bride being prepared for her wedding. In no time they were done, and Sarah was whisked upstairs to the fourth floor to see the coach. I wondered if the coach knew about Sarah’s attachment to my Clyde, and if he minded.

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Residents on the third floor could have meals in the nice big dining room on the first floor if they had visitors who could take them there. I got to Monticello early one day to take Clyde down to the first floor for lunch. Having meals downstairs broke the boredom of eating in the same place again and again, and I appreciated the greater number of food choices available there. I still liked to have a romantic date with my husband, just the two of us. No, it was not like dining at The French Room in the historic Adolphus Hotel in downtown Dallas or having a quiet drink “In some secluded rendezvous that overlooks the avenue,” as in the song “Cocktails for Two,” my favorite version of which was sung by Bing Crosby.<sup>5</sup> But it was good enough.

Upon seeing me come out of the elevator, the caregiver helped me find the two partners in crime, who most often were drifting around hallways or rummaging in someone else's room making a mess. We spotted them coming out of one room and wandering into another. By now, the caregiver knew how to divert Sarah's attention from Clyde. She gently and adeptly inserted her hand between Sarah's and Clyde's and coaxed, pointing down at Sarah's feet. "Come on, Sarah, Beth wants to see your shoes. They are so pretty." Sarah followed her finger and looked down. She had on a pair of old-fashioned flat-soled black leather Mary Janes. She smiled distractedly, and her attention drawn away from Clyde. Seamlessly, I took Clyde's left hand, which was still faintly warm and damp from Sarah's palm, and looked at him with a big smile. Happy to have reclaimed my husband!

And I froze. My heart ached as if I had been hit on the chest. A pair of lips, in that muted Indian red, embossed perfectly on the center of my Clyde's left cheek, so bloody red, so shocking!

*This creature, this dear man! You made me feel so loved and adored so completely, and you belonged to me so exclusively for so long—where did you go?*

When we are children, our parents love us, but we must share their love with

siblings, which, in my case, meant that I got a fifth of their affections. As a mother, I love my son. I gave him life. He is a part of me. But spousal love is quite different. Two strangers come



Author's family in Shanghai. She is in the back with her dad. 1957.

together to achieve a degree of complete mutual trust, to form a bond so strong that they vow to maintain till death do they part. We are born alone, we die alone, but with this spousal love we create a sense that we are no longer alone and that we are worthy of the kind of love that belongs only to us, unconditionally.

All that now seemed to become an illusion.

In my mind I heard, endlessly chanting, an ancient Chinese lyric from *The Book of Songs*, the earliest Chinese poetry collection, known as a marriage vow in China:

In death or in life we may be parted (死生契闊);

With you I made this pledge (與子成說):

I hold your hand in mine (執子之手),

And we will grow old together (與子偕老).<sup>6</sup>

At the same time, I heard the echoing refrain of Poe's mysterious ebony bird:

"Nevermore . . . Nevermore."<sup>7</sup>



"In death or in life we may be parted"--Saying goodbye before the soldier leaves for battlefield.

I held back the twitch in my throat as we got into the elevator and descended to the first floor to have lunch as planned. We sat down side by side at a corner table by the window. Inside this vast, beautifully decorated dining room, well-dressed people greeted each other, chatting, eating, and laughing. To conceal my sorrow, I avoided eye contact with anyone and turned my face toward the window. Outside in the courtyard, the limbs of the crape myrtles swayed gently, red flowers and green leaves bathing in the sun, unaware of the brokenhearted observer. The beautiful scene was incomprehensible to me. My entire mind was occupied by a rhythmic, monotonous, and persistent voice:

I hold your hand in mine (執子之手),

And we will grow old together (與子偕老).”

“Nevermore.”

“Nevermore.”

One teardrop rolled gently down my face, then the rest gushed out as if a dike had broken. I felt no anger, no resentment, no bitterness, no jealousy; only grief and a tremendous sense of loneliness.

Clyde sat by me, silent. The server brought our food and set it down on the table. I picked up some food with the fork to feed him. He didn't open his mouth as usual. My throat caught, and I couldn't speak. The tears that kept welling up and rolling down filled my mouth with their saltiness and blurred my vision of Clyde's familiar face.

*Baby, how much I need you, how much I want to feel your strong shoulder!*

Then, suddenly and unexpectedly, shaking his slightly bent head, his baritone voice full of sadness, Clyde said slowly and clearly:

“Hon, there is no one else but you.”



In Alaska, 2006.



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<sup>1</sup> William Shakespeare, *Othello, the Moor of Venice*, act 3, scene 3, lines 191–92, in *The Oxford Shakespeare: The Complete Works of William Shakespeare*, ed. W. J. Craig (London: Oxford University Press, 1914), accessed November 7, 2019, <https://www.bartleby.com/70/4433.html>.

<sup>2</sup> “Case Closed,” interview with Deborah Solomon, *New York Times Sunday Magazine*, March 16, 2009, accessed November 15, 2019, <https://www.nytimes.com/2009/03/22/magazine/22wwln-q4-t.html>.

<sup>3</sup> Paula Spencer Scott, “Sex in the Nursing Home,” *AARP Bulletin*, AARP, June 1, 2015, accessed November 15, 2019, <http://www.aarp.org/home-family/caregiving/info-2015/sex-in-assisted-living-facilities.html>.

<sup>4</sup> Alicia Mundy, “Of Love and Alzheimer’s,” *Wall Street Journal*, November 3, 2009, accessed November 15, 2019, <https://www.wsj.com/articles/SB10001424052748704317704574503631569278424>.

<sup>5</sup> Arthur Johnston and Sam Coslow wrote “Cocktails for Two,” which made its debut appearance in 1934 in the film *Murder of the Vanities*. “Cocktails for Two by Duke Ellington,” Songfacts, accessed November 7, 2019, <https://www.songfacts.com/facts/duke-ellington/cocktails-for-two>.

<sup>6</sup> “They Beat Their Drums,” *The Book of Songs: The Ancient Chinese Classic of Poetry*, trans. Arthur Waley, ed. and trans. Joseph R. Allen (New York: Grove Press, 1996), 28.

<sup>7</sup> Edgar Allan Poe, “The Raven,” *The Raven and Other Poems* (New York: The Berkley Publishing Group, 1990), 2–10.