

# OLD

## (but not dead yet)

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Today is the day I leave my life behind. Living on my own has become increasingly harder, and my dizzy spells will sooner or later cause me to fall and break something. Mentally things are not so bad yet, but I still am getting somewhat forgetful, and regularly have trouble finding the right words or people's names. Nothing like Alzheimer, but annoying nonetheless. Perhaps if I had a partner, and some children to help out, I would have been able to stay in my apartment for a while yet, but not having anyone to fall back on makes it too hard. And I am starting to feel lonely too - many friends and relatives have already died, have Alzheimer, or live too far away to easily visit due to our physical limitations.

So, I have selected a home for the elderly that will take me in, and today is the move. The things I can take along I have selected and packed, and a neighbor is so kind to bring them to my new home. The salvation army is coming to my apartment later, take whatever they think they can sell, and scrap the rest.

In the last minutes before the taxi is supposed to arrive, I make one last round through my old home, and say farewell to all the things that have been part of my life for so long, but now have to stay behind, and will probably be destroyed soon. It is hard, but I tell myself that it will be a relief to no longer have to struggle to keep my life in order, and myself safe.

When the taxi arrives, I resolutely leave, not wanting to prolong the difficult moment. I hand the key to the neighbor, for her to bring over my stuff later, and let the salvation army in later.

After the taxi drops me off, I go to the wing where my new room will be. But the manager's office is empty, and I don't quickly spot any other staff either. So, I start walking through the corridors to see if I can find someone. But I get dizzy, and look around for somewhere to sit until it passes. There are no chairs, but there is a bed standing in the corridor. I manage to reach it and sit down without falling. But the dizziness doesn't pass quickly, and I decide I had better lie down for a moment.

Stretching myself out, while keeping my shoes off the bed, I feel some lumps under me, and I try to feel if I can't straighten them to lie more comfortably. Then I realize they are Segufix straps. Now, that is interesting. I have encountered those in fetish pictures before, and have fantasized about them, but never got my own set; they are pretty expensive, and without a playing partner they have limited use. Actually, I had never seen or handled them in person, and I am quite surprised to suddenly encounter them here. Even at my age, and in these unusual circumstances, my body stirs a bit, and I can't resist pulling them around me a bit to experience how it would feel. There are no posts or locking buttons, so what I can do is limited, but interesting nonetheless.

At that moment a young candy-striper appears in the corridor, sees me in the bed, quickly turns around, and disappears again. But not for long; in a few moments she reappears with a somewhat older woman in scrubs. I hear her saying, "I saw him in that bed marked 'Suicide Risk', and he was undoing those straps. So, I thought I should warn someone."

The woman replies, "You were right. We can't have such clients get free and attempt to take their own lives. Obviously, we are here to preserve life for as long as God has decreed, but apart from that we would be in so much trouble if one would succeed." Then she continues, "I don't know this client, but he is probably a transfer from another unit; knowing that we had a suicide risk client that recently passed away, management probably thought we have the experience now, so we would be best suited to deal with another one. I don't know how he got loose, but let's make sure he is secured again. Do you have any experience yet with such straps?"

"Not yet. Can you show me?"

So, the older one takes the initiative, and shows the candy-striper how the system works. Apparently, there is a little bag with the posts and locks on the foot end of the bed I'm in, that I hadn't yet seen. During that whole exchange there was no indication they were aware they were dealing with a person, and only now the older one says to me, "Hello Sir, how are you doing?". But then without waiting for an answer she continues, "Don't worry, we're going to make sure you are safe once more."

Of course, this is all rather surreal to me, and I don't resist when they start applying the straps around my waist and torso. Partly because it is all so unexpected, partly because I am not consulted, and don't fancy my chances resisting the two of them, especially lying down, and also partly because here is finally an opportunity to experience those interesting Segufix straps for myself. Everything will probably be cleared up when the manager that I dealt with before shows up, so I welcome the experience while it lasts. I am actually a little disappointed that the locks hardly make a sound when they engage; not like the snap of a padlock.

The younger one is also told to remove my shoes, and then the older one adds, "Since we don't know how he got loose, we had better secure his hands as well." Still not feeling like resisting, I hold my hands up for them to put the cuffs on, and then they are connected to the strap around the bed at waist level.

"You seem to be familiar with these straps," the younger one says to me, but not wanting to divulge why my interest, I just give a non-committal grunt. Then even my ankles are strapped in.

"Let's put him in the empty room here, it is probably going to be his room anyway, and he will be out of the way and have some privacy," the older takes the initiative once more, and so they roll 'my' bed into a room that might be about 9 by 12 feet (3m x 4m), and is empty apart from a night stand on wheels, a washing basin, and a wardrobe. "I'll notify the manager, so she can figure out why he is here and what his care plan should be." And then to me, "Sir, you just relax here for a moment, and the manager will come by shortly. Here is a bell cord, so you can ring for help if there is anything wrong." Then both of them leave.

It takes me a while to get my head around what had just happened, but gradually I get my composure back, and start to take stock of the situation. I try pulling on the straps to get a feeling of them, and how well they hold me. Of course, there is no way I am going to get out or tear them. My heart is still beating fast, and there is more activity in my pants than I have had in years. Gradually I calm down and try to look around the room a bit more. But there is not that much to see, and lifting my head is tiring, so I just put it on the pillow again. I give the straps a few more pulls, and decide I am actually pretty comfortable, and it feels quite relaxed. Lying here with nothing I can do, I don't have to worry about getting dizzy and falling, nothing I have to try to remember, no struggle to keep myself alive and healthy. A peace descends on me, and before I know it my eyes drop and I drift into sleep.

I am woken by a voice saying, "Good morning, mister Benson. I'm sorry about what happened just now. Let me release your hands." I try to sit up, confused about where I am, but the straps hold me down, and gradually I realize again where I am and what happened. In the meantime, my hands are released by the woman I recognize as the manager I had talked to before. She also releases my ankles, but then stops. I hook my thumb under one of the straps down my chest, and look at her questioningly. "We'll get to that in a while, but let's first go through some administrative details and your medical file." She uses the remote control of the bed to bring me up to a more sitting position. In the meantime, I use the opportunity to wiggle my arms and legs a bit, now they are no longer held into a fixed position. The straps around my upper body don't bother me, and now that I am sitting up and don't need to lift and twist my head to look at her, so for now I don't complain about the delay, although I can't really think of a reason why she does it like this.

But my attention is drawn into the administration, and soon I am hardly aware anymore that I'm still restrained. When we get to the medical part, she tells me she hasn't received my dossier from my doctor. Suddenly I realize that even though I have discussed this with my primary physician, because of all the chaos of the move, I ended up forgetting to notify him of my final decision.

The manager reassures me that it is not a problem, and they will put in the request for the transfer of my dossier. So, she asks me which doctor it is. But I can't remember his name. In my little address book, he is under the D for doctor, and I know I need to take bus 14 and get out at this little square. But I don't have the address book with me - I have packed it in the boxes that my neighbor will bring over later. The manager stays calm, and just tells me to let her know when I remember or find it in my booklet. In the meantime, she asks me what I can tell her about any health issues, dietary requirements, allergies, and such. Her attitude helps me calm down, and again I feel the relief of having people now to help me and take care of my mistakes or memory lapses.

When she has finished filling out my file on her laptop, she brings up the straps again. "Now, mister Benson, about those restraints. There is a bit of a difficulty. The nurse told me that you seemed familiar with the straps, and fully cooperated with them, not protesting at all. And then I even find you asleep in them. So, I wonder, how can I be sure that you are not suicidal if you are apparently so used to being restrained? We can't check your doctor's dossier yet. On the other hand, you came to us yourself, and why would you do that if you wanted to end your life? But we have a policy that we can't release potential suicide risks only on their own word - some of them are such good liars. So, I'll organize an appointment with our resident psychologist, and let him evaluate you. With his all-clear we can release you."

It doesn't seem like I have a choice, so I accept this, grateful that the manager at least tries to find a solution for my own stupidity and forgetfulness. She folds her laptop closed, and puts it on the nightstand. Then she lowers the bed back and starts strapping my arms and legs in again, telling me that it is part of the regulations when a potential suicide risk is left on their own. And that is shouldn't take long before someone will come and take me to the psychologist.

Then she is gone, and I am on my own again with nothing to do. I try not to listen to that little voice telling me this is all my own fault, forgetting to notify my doctor and now even his name, and enjoy the peacefulness I experienced when I fell asleep. Thinking back to that train of thought helps, and I start to relax again.

A while later the same two women that originally restrained me enter. The candy-striper is pushing in a wheelchair with something lying on the seat. I nod to them friendly; after all they were just doing what they thought was right. But the older one apologizes anyway, for mistaking me for an existing client. Then she explains that they are going to take me to the psychologist in a wheelchair, because they are not yet allowed to fully release me. So, all the straps on the bed are opened one by one, and I am guided to the wheelchair. But I am not yet allowed to sit down: first they put some sort of a jacket on me. I have to put my arms in first, and it turns out to be a sleeveless jacket with some straps dangling from the bottom, the sides, and the shoulders. It is some sort of slippery, fairly thick material, that can probably be wiped clean. Holding the straps while I step into the wheelchair, the bottom strap is pulled underneath the seat to the back, and the waist and shoulder bands are also pulled together behind the back rest, and somehow connected. Once they are in place, I cannot stand up anymore, or even slouch. I think I caught a glimpse of those Segufix locks in their hands, so I guess they used the same system to lock the straps as on the bed.

When I was restrained on the bed, I could not see around me that much, but this time I can, and I notice the candy-striper is wearing something unusual. It looks like those old candy-striper jumpers with the red and white stripes, but instead of a skirt bottom it has pants, making it something between overalls and a jumpsuit. Like those old uniforms it buttons on one shoulder and on one side of the waist. I have always liked one-piece suits like this, and it looks really good on her.

Being intrigued by the uniform, I hardly notice them pulling two straps from this garment around me, and wrap them around my wrists. They are probably about a foot long up to the cuffs, so I can still move my hands from my lap to the armrest and such, but I won't be able to reach the wheels and thus propel myself forward.

Then they roll me out of the room, through several corridors, a lift, and more corridors. I feel embarrassed with the people seeing me like this, but there is nothing I can do about it, and in the end, nobody really stares at me. At least not that I can see. Apparently, it is not that unusual a sight.

The psychologist is a pretty young man, but then again, most people look young to me nowadays. He is already briefed about what is expected of him, but he takes his time to put me at ease before he starts with the more relevant questions. Unluckily I can't deny that it has been hard leaving my old life, apartment, and self-reliance behind. And I can't really understand his questions about what purpose life still has for me, or in other words what I still have to live for. In the end he tells me his conclusion - no concrete indications that I am suicidal, but also too little evidence that I am not. He will have to let the manager know that he can't give the all clear, and I'll have to wait on the dossier of my primary physician. Of course, that is a disappointment, but I can see why that is his decision, and I am not quite sure I already want this treatment to stop yet, anyway. The vest is not uncomfortable at all, and even gives nice support. And I still have enough arm movement that it doesn't feel very hampering. That is, until I try to put my hand out towards the psychologist to shake his, and I abruptly reach the end of the strap. But the cuff is soft, and it doesn't hurt. He quickly steps up to me and accepts my hand.

Then the candy-striper comes to pick me up, and she brings me to the common room, where there are a number of my fellow inhabitants. I feel ashamed about being introduced while in restraints, but I don't get a choice. She puts me at a table with some other gentlemen, and tells me there soon will be tea. My table mates introduce themselves, and I do the same. There is a brief question about my restraints, but when I say it is just a temporary safety measure because they are not convinced

yet that I am not a suicide risk, that apparently is good enough for them, because the topic soon moves to other subjects.

At the end of the day, I am finally rolled back to my new room by two new nurses. There are some of my boxes; apparently the neighbor has brought them around while I was with the psychologist, or else didn't find me in the common room. The nurses start to get me ready for bed, and ask me for my pajamas. They should be in one of the boxes, but they can't find them, and when I am rolled next to the boxes, I see that my neighbor hasn't brought me the ones I wanted. That is disappointing, but there is nothing I can do about that now. I apologize to the nurses, and don't know what we should do now. Then one of them remembers that there are still a number of items left from the previous owner, and since we seem to be of similar size, she is going to get them and see if they would be usable.

When she returns, she apologizes that all that she could find are these anti-strip jumpsuits, with a back zipper and a flap over that so that the wearer can't undress, or access his incontinence materials. Seeing it my heart beats a little faster - it is another one of my interests. But I hide my enthusiasm, and try to accept the option a little reluctantly. This of course also means that I need to be put in a diaper for the night, also because I still need to be fixated on the bed for the night. The procedure is extra embarrassing, because there is some arousal visible in my crotch area, but the professionals just ignore it and complete the job of diapering, dressing, and restraining me on the bed. It feels like it is a routine for them, and it probably is, if the previous occupant of my room was treated the same way. Then I am left alone for the night, and I quickly fall into a deep and restful sleep.

## Epilogue

It's a month later now, and the situation has not really changed. The boxes the neighbor brought over also didn't contain my address book, and I never managed to remember the name of my doctor. Within days it all settled into a routine, and nobody questioned anymore if this is how it should be. I am moved from bed to wheelchair in the morning and back for the night. In between I have regular appointments to exercise with the physiotherapist to keep my muscles in shape.

I learned that the candy-striper uniform was a twist on the original jumper, where the bottom was replaced with pants because there were also boys now doing their community service in the hospital. The girls had a lot of fun with that, because the boys were often struggling to take theirs off for the bathroom, and were unaccustomed to ask for help.

Everybody is nice to me, and everything is taken care of. I am totally relaxed, and there are all sorts of activities and outings to keep us occupied. If I would have known it would have turned out this way, I would have done the transfer years earlier!