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Interview: Second Acts Reinvigorate Lives

Life expectancy grows by five hours a day, opening up new opportunities for middle-aged and older adults. Just ask eight career women, who pursued doctorates more than 20 years after leaving school.

Despite the challenge, new careers in gerontology reinvigorated their lives and refocused their futures.

Pamela Pitman Brown and Candace Brown reported their findings in Educational Gerontology on Sept. 25, 2014.

AHB reached Dr. Pitman Brown at the department of behavioral sciences, Winston-Salem State University in Winston-Salem, N.C., U.S.A.

Ruth Dempsey: More older women are returning to school today. What's driving the numbers?



Pamela Brown: That's a good question. There are many reasons women are returning to graduate studies. Some, like the women in our sample, are looking for a promotion or a pay rise in their current position.

Some are searching for an encore career. They are changing careers after reaching a glass ceiling, or they are finally able to return to college having completed their child-rearing responsibilities.

The reasons vary. Our study showed that some always anticipated further studies stemming from a belief in the importance of education or influenced by parents with advanced degrees.

Indeed, women move in and out of careers, caregiving duties and even educational endeavours often following a non-traditional route, but these routes are rarely considered.

RD: Many encountered pushback from friends and family.

PB. I know. Surprising isn't it? We tend to expect our family and friends will be supportive of our life choices.

Anne's husband cheered her decision to go back, even the idea of moving halfway across the country, but her friends were very shocked and surprised. She actually gave up a great job to follow her dream, so, of course, people were a bit taken aback.

Teri's friends didn't want to lose her time. They wanted her to join them for lunch and volunteer with the junior league. In fact, her friends kept reminding her, "You can't teach an old dog new tricks." Teri found that humorous afterwards, but she said it reinforced her determination to master statistical software programs.

Yvette's friends and family reminded her how she had never been a great student so she was setting herself up for failure. She told us that she had found her high school transcript from the 1970s, and she had over a 3.8 GPA. She had no idea why her friends or her family considered her a poor student.

However, Yvette's husband was very supportive of her studies.

So while there were some negatives, for most of the women there was positive support, too.

RD: In the classroom, Paula found younger students could not understand why she would return to school when she had other alternatives.

PB: That's right. So while we understand the concept of retirement and encore careers, some younger students might feel that with retirement we have arrived and would simply enjoy doing nothing, as in not working. Retirement is reaching the pinnacle of success!

Paula had a great career, good retirement benefits and opportunities to travel and enjoy life with her husband. But she discovered this was not enough. She wanted to do more with her life.

RD: And women had to deal with ageist attitudes from professors . . .

PB: I know. How odd that people who are gerontologists would be ageist! It was a little shocking to hear.

As Suzy put it, "Your age is against you." For one thing, the faculty assumed students would be less technologically savvy because they were older.

As I see it, some professors failed to understand that most of these women had been employed and had grown up dealing with technological change in their workplace.

One woman, for instance, had taught computer skills in her "previous life," and had worked with numerous computer programs in the field of journalism. Another woman found that younger students came to her for assistance with Excel, but the faculty ignored her abilities.

The women mentioned again and again how their prior careers and successes were overlooked in academia. Obviously, this hurt deeply.

RD: On the job front, the women were winners ...

PB: That's right. Everyone in the study did really well.

One of the women is limited based on her husband's job location, but most secured positions and they are working successfully in their field. In fact, many of them ended up with their "dream job."

So, I guess you can teach an old dog new tricks!

RD: What advice would you give readers thinking of returning to school?

PB: Everyone is different, but I do think that you need to realize the amount of work it takes, regardless of whether you are completing an undergraduate or a graduate degree. The boy scout motto of "be prepared" comes to mind.

A few quick tips:

- Be prepared mentally, emotionally and physically for the work.
- Look at your schedule. Can you fit in class time and study time? How much time can you allocate a week. Can you go part-time? Should you go full-time?
- Do you have the space to study? Most of the women carved out a very small space of their own for computer, books, printer and supplies.
- If your previous job did not entail work with computers, take some technology classes and invest in a computer and a printer/scanner.

Probably the best advice I received was to remember it is a marathon not a sprint. Start small and work up. Take one class. See if you like it.

RD: In your paper, you mention Catherine Bateson's fascinating book *Composing a Life*. Did the themes in the book resonate with the women?

PB: Absolutely, I love Bateson's book and happened to find it when I was going back to school.

In *Composing a Life*, cultural anthropologist Mary Catherine Bateson explores that act of creation that concerns us all — the composition of our lives.

She shows how five women have learned to shape their lives around unforeseen and unplanned circumstances by using the art of improvisation. Bateson says that constancy is an illusion in women's lives

Similarly, the middle-aged women in our study used improvisation to:

- respond to new circumstances
- respond to the shifting priorities in their lives, and
- to compose a new life chapter.

Editor's note: *The original article appeared in* **AHB** *March/April 2015 with the headline* Interview: Career Women Return to School

Study: Same-Sex Couples Share Secrets of Long-Term Love

What is the key to a happy marriage? Is there a formula for long-term love? What keeps the passion alive after 10, 20 or 30 years together?

Many studies have focused on different-sex relationships, but little is known about same-sex couples' long-term relationships.

A new U.S. study asked 31 same-sex couples to discuss their relationships and to pinpoint factors that contributed to their long-term "success." Relationships ranged in length from 13 to 41 years.

Part of a larger longitudinal study on relationships, the new research is based on 18 female and 13 male same-sex couples. They came from 15 different states, and all had legal relationship status. Twenty-one of the couples were in a civil marriage, and 10 were in a civil union.

Led by Ellen Riggle from the University of Kentucky (Lexington, KY), the study found five factors in particular contributed to couples' relationship success. They are:

- positive communication patterns
- shared values
- commitment
- sharing experiences, and
- support from others.

The findings appeared online in the *Journal of GLBT Family Studies* on Feb. 17, 2016.

Communication

The couples identified communication as an important factor in their relationship success. Most said that being open and honest with each other and treating each other with respect and kindness helped to maintain their closeness.

Tim, partnered with Kurt for 25 years, believed in talking through issues. "One thing that we do is we communicate a lot," he said. "Sometimes it's effective, sometimes it's bland, sometimes it's very heated, but we don't let things fester for any length of time."

Another couple, Barb and Helen (partnered for 36 years) had adopted the mantra: "Never go to bed angry." As Barb said, "We never go to bed mad; if there has been anything that we did not agree on at the end of the day, it's discussed and cleared out before we go to bed."

After a rough patch in their relationship, Stuart and Ray (partnered for 22 years) started doing "check-ins" with each other, a couple of times a week. The check-ins give each individual time to talk about how they are feeling without any interrupting from the other person. "That's really helped us," Ray said.

Shared values

Researchers found that many couples considered shared values an important strength in their relationship.

For example, Liz and Irene (partnered for 33 years) felt that their Jewish backgrounds and similar values about money enhanced their relationship.

"I think that we had the benefit of going into a relationship where we had a lot in common in the beginning," said Liz. "We wanted the same things and we had those conversations right in the very beginning. We knew we wanted children. We knew we wanted a particular type of lifestyle."

Irene added, "I also think we're lucky in that we both have the exact same spending habits and the same child-rearing philosophies."

Marc and Dan (partnered for 26 years) came from different backgrounds, yet they shared similar values and goals. "We have a lot in common, our ethics, our politics, our devotion, our commitment," Dan said. "We're the same. We look different, but we think about certain things the same way."

Commitment

In the current study, relationship commitment acted as a ballast for couples helping each other grow and change within the relationship.

Indeed, Kurt considered commitment even more important than love in sustaining a happy relationship. His partner agreed: "There is no relationship in the world where you are happy all the time. But there are lots of rewards with staying in the relationship and being committed that you would never know about unless you actually get past those difficult times."

Commitment included supporting each other through stressful situations as well as showing appreciation for each other and the relationship.

Couples also talked about being able to lean on each other to become their best selves. Emily, who has a 33-year relationship, said: "I think we try to be sensitive and I think we genuinely want one another to be happy. We will work hard to help the other person achieve whatever they want to achieve."

Sharing experiences

In addition to relationship commitment, couples discussed how sharing experiences, such traveling together or sharing hobbies buttressed their relationship.

Jackie, partnered with Harriet for 18 years, touted the importance of shared history:

The fact that we have so much fun together. I mean that's just the icing on the cake. And you know when things get difficult or complicated for some reason, we have so much history together and so many wonderful shared experiences that that's what sort of buoys us through the difficult times.

Another couple, Ray and Stuart discussed how having children had strengthened their bond.

Both introverts, Shirley and Judy enjoy sitting at home reading a book or going out to a movie. As Judy remarked, "Seeing friends occasionally, seeing family occasionally. We have a very boring life and we love it. We're not bored, we're content."

Even couples who had different interests recognized the value of spending time together to enhance their relationship. For instance, Delores is an avid gardener. Paula, her partner of 13 years, is not a green thumb, but she doesn't mind raking and mowing the lawn so they can spend time together.

Support

The new research found that relationship longevity was fostered by support from others, especially from family.

As Jackie remarked, "I think having the collective support of our two families has been enormous plus." Her partner Harriet added, "We're the cool aunts. We have so many nephews and nieces and cousins younger than us and that look up to us. And they reach out to us."

Dan and Marc felt a special bond with each other's mother. Marc said: "Dan's mother adored me because there were so many ways that I was different from Dan. And by the same token, my mother adored Dan for exactly the same reason."

Lastly, friends played an important role in bolstering relationships by extending couple's networks and offering support in times of stress.

Interview: Shining a Light on the Homeless in Montreal

The number of homeless older people is expected to rise as a result of unmet need and an aging population.

Victoria Burns examined the plight of adults who became homeless for the first time in later life in Montreal, Canada. Her research offers invaluable insights into the emotional lives of the homeless, and it highlights how homelessness could happen to anyone.

The study appeared in the December 2016 online edition of the Journal of Aging Studies.



Dr. Burns is currently postdoctoral research fellow at the Urbanisation, Culture Société Research Centre at the Institut National de la Recherche Scientifique in Montréal, Canada.

AHB reached her in Montreal.

Ruth Dempsey: Why did you focus on adults living in homeless shelters?

Victoria Burns: After completing my bachelor of social work degree, I worked for several years in home care with older adults. A particularly challenging part of home care is working through the relocation decision-making process (most often to a long-term care facility). I came to understand that the decision to stay in place or relocate was always an incredibly complex and emotional process because each person had a unique relationship and attachment to their homes and neighborhood.

As a person who has moved and traveled a lot over the course of my adult life, I became increasingly intrigued by the concept of "home" and the place-making process in particular. I began to question what leads a person to feel at home?

How does a house or other location become home? Can people feel at home in unconventional places, such as public spaces? What is the role of the physical and social environment in relation to feeling more or less at home? How does a person's relationship to home change with age as a result of physical and social losses?

These questions eventually led me to pursue a PhD in social work, focusing on the meaning of place and home for older adults, who literally did not have a place to call home as they were encountering their first episode of homelessness in later life.

RD: What are emergency shelters like in Montreal? Can you give me a brief description?

VB: Montreal has the highest number of homeless people in the province of Quebec and is the hub for homelessness resources. There are 738 emergency shelter beds and 232 transition beds.

Most emergency beds are for male populations (89.1 per cent compared to 10.9 per cent for women). There are four main emergency shelters for men, all of which are centrally located. The shelters have dormitories with 150 to 200 beds.

Men's shelters tend to be organized around two main types of programs. First, emergency short-term programs, where access is granted without a fee for services (bed, food and clothing). Residents accessing free services are commonly referred to as "night clients" and are required to leave during the day.

And second, transition or residential programs. These require a daily or monthly fee and provide temporary residence while an individual looks for work and stable housing. Transition programs tend to be in the same physical building as the emergency night shelter but are often on a separate wing or floor.

Historically, Montreal's women's shelters were established later than the men's. In fact, two of the men's shelters began operating in the late 1800s. The first women's shelter was established in 1932, while the others opened their doors in the 1980s and 1990s.

Women's shelters are geographically more spread out over the city and vary more in terms of size, rules, regulations and services. Most require a reservation, while few require women to leave during the day. The shelters range from having private to semi-private rooms to large dormitories with 40 beds.

RD: Your study examined the lives of 15 single men and women, ranging in age from 50 to 80. They were newly homeless, what led to their becoming homeless?

VB: All of the participants were "new" to homelessness, meaning that when I met with them for an interview, it was the first time in their lives that they were on the street or required to use homeless shelters.

The population in my study differs from the long-term or "chronic" homeless person who has aged on the streets. As you can imagine, homelessness is extremely complex and there is not a single cause.

However, it was interesting to discover two distinct pathways among participants.

About half became homeless gradually while the other half had more rapid pathways.

Those with gradual pathways tended to have long histories of mental or physical illness that prevented them from working. Their homelessness tended to be related to longstanding housing issues, such as poor heating or bedbugs that became increasingly unmanageable with age.

Participants with rapid pathways tended to have led more "conventional lives" in the sense that they maintained stable employment and housing over the course of their lives. Many participants had university degrees and careers spanning 25 years or more. But, after experiencing intense social losses, such as the death of loved ones, loss of job or a health crisis, they found themselves homeless with little warning.

For both groups, contributing factors included high incidences of addiction to alcohol, drugs and gambling. Those with gradual pathways seemed to have longer, ongoing histories of substance abuse, while the rapid group had increased substance abuse closer to their homeless episode.

RD: Participants moved back and forth between private housing and homeless shelters. For instance, after 22 years, Anna found it increasingly difficult to live alone in her poorly maintained subsidized apartment. Faced with eviction, she found a comfortable place at the women's shelter.

VB: It's not that participants *physically* moved back and forth between private housing and homeless shelters, it's that once they became homeless they paradoxically felt more "at home" as they were no longer battling deplorable housing conditions. Individuals with histories of domestic violence and substance abuse felt safer as a result of surveillance. And they felt less isolated because they had established positive ties with shelter residents and staff.

RD: Several men and women spoke of the frustrations of constant surveillance. But Nicole, a victim of domestic violence welcomed the security: "I am finally starting to feel safe at the shelter. There are only women and there's 24-hour surveillance."

VB: Yes, this was another interesting paradox. Surveillance is often considered as the antithesis of "home" yet many participants felt an increased sense of comfort and security knowing they were under constant surveillance at the shelter.

RD: I was surprised to learn that the maximum stay times at shelters is 15 days for men and six weeks for women. This gives older adults little time to pull their lives together, and begin the process of finding employment and suitable housing...

VB: Yes, maximum stay policies are put in place to avoid "shelterization syndrome" which basically means getting stuck and dependent on the shelter system.

However, as you point out, maximum stay times give them little time to find work and housing. It's also important to highlight that when people come to shelters they have often fled traumatic experiences, such as suicide attempts or domestic violence and need time to rest and heal.

Constraining shelter conditions and regulations lead people to be dependent on shelters longer. The stress of being forced to leave and start over at another shelter reduces the likelihood that the person will have the energy or resources to successfully exit homelessness – once again another paradox!

RD: How did older adults relate to shelter staff?

VB: It depended on the person and the shelter. Some indicated staff treated them with lack of respect, calling them by number and not their name, for instance. However, many spoke positively of the relationships they had with shelter staff, even referring to them as their family.

RD: Your research showed four interrelated dimensions of place helped participants to feel "settled." They are control, comfort, privacy and security. What does your study recommend?

VB: The research article is based on my doctoral thesis which makes reference to a number of short and longer term recommendations. I cannot go into all the details here.

That said, by focusing on the meaning and importance of *place* in later life, this study points to a number of practice and policy implications, particularly regarding place-based solutions for older homelessness.

In many cases, homelessness could have been avoided had participants received additional support in managing their housing issues and greater access to decent affordable housing options. So, in addition to implementing more outreach programs that target precariously housed older adults, we must increase the supply of suitable affordable housing to allow older persons to age in place.

Given 49 per cent of Montreal shelter users are over the age of 50, homeless shelters must adapt their design and policies to accommodate older residents. Lack of elevators in some shelters and forbidding the use of walkers, in some cases, limited participants' access to shelter spaces.

The need to adhere to rigid schedules was especially difficult for participants who were required to take medications at certain times of day, but had to wait until designated meal times. And health and mobility issues made leaving the shelter during the day particularly hazardous.

As well, older residents, who needed more time to recover from traumatic pre-homeless experiences found it challenging to respect maximum stay times.

Some Montreal shelters have begun to adapt their policies to better cater to the needs of older residents. For instance, allowing older residents an earlier access time.

But more needs to be done, in terms of shelter design, policies and programs, to give older adults the opportunity to heal and plan for the future.

RD: Any last thoughts?

VB: Negative perceptions and stereotypes about homelessness require a major overhaul.

Unfortunately, there is a lot of misunderstanding and stigma around homelessness. For instance, the belief that people *choose* to be homeless. I have not yet met a single person who chose to be homeless, addicted to drugs, live in precarious housing or a homeless shelter.

My hope is that this study sheds new light on homelessness and older homelessness, in particular, by demonstrating that it can happen to anyone and that punitive strategies will not help people overcome their struggles.

Editor's note: To receive a copy of Dr. Burn's thesis, contact her at victoriafrances49@gmail.com).

Study: Gardening Has Made Me Happy All My Life

For many older people, gardening is more than a leisure activity, it is a passion.

Drawing on data from a series of interviews, Eva (Hui-Ping) Cheng and Shane Pegg explored the meaning of gardening for 13 older Australians. The participants were retirees, ranging in age from 57 to 84. Most were in good health, however, Mary suffered chronic backache problems that allowed her to garden for a maximum of two hours at a time. And two others had been diagnosed with cancer.

The study in the *World Leisure Journal* (Sept. 9, 2016) highlighted four themes, central to understanding older people's everyday experience in the garden. They are:

- meaning
- mental and psychological well-being
- a sense of accomplishment, and
- social interaction

Gardening gives life meaning

Gardening played a central role in the lives of most of the participants. "It's somewhere you can go at any time and it's good therapy," said one 84-year-old man. "It has made me

very happy all my life, and I'm still very happy and I hope I can go on for a few more years yet."

It is well known that a sense of purpose energizes life and gives it meaning. In this vein, 82-year-old Sue said gardening made her life worth living: "It keeps me going . . . No time to worry about me, no time to get sick. No! Just get out in the garden."

Gardening provides mental and psychological benefits

Physically, gardening tasks provide plenty of exercise from digging to toting water. And it gets people out of the house and into nature.

"It's really good," one woman said. "Because it's physical, it's mentally challenging, and it keeps your mind active because you're planning different things all the time."

In contrast, several participants spoke of the danger of sitting around watching TV all the time. They noted that gardening is pleasurable, encouraging creativity and self-expression.

As Joan explained:

I think the thing with gardening is that it gives you an enormous amount of pleasure, to go out and you see all the flowers out in bloom and everything looks lovely, and the bees, the birds all around them and the butterflies. It gives you enormous amount of pleasure just looking at all that.

Gardening provides a sense of accomplishment

Participants admitted gardening took time and effort. "Gardening does take up a lot of time, but that, you know, I just love it," one woman said. "If I'm not gardening, I'm not at my happiest."

Similarly, John found endless satisfaction growing a lot of his own plants: "When I get things to grow, it's like a new life, like a baby. I grow a lot of things from seeds, I grow them by myself. I propagate a lot of stuff myself from the seeds and see the whole thing."

Researchers found many participants viewed themselves as amateur gardeners, as did their family and friends.

Compliments from friends and neighbours added to participants' life satisfaction. As 69-year-old Anna said, "It makes me feel great when [the garden] looks good. . . . It does help my self-esteem, and I think it also makes me a more interesting person."

Gardening nurtures connection

Gardening also provides opportunities for social interaction and conversation. Many of the participants were members of gardening clubs. The clubs sponsored plant sales, clinics, bus tours and open gardens.

Anna, who had recently joined a club, touted opportunities to visit other members gardens and to acquire new plants and cuttings with little or no expense. She especially enjoyed swapping stories of her plant successes and failures.

Another 62-year-old participant remarked, "The people I have met through gardening are tremendous and I have made many great friends along the way."

Roundup

PORTUGUESE PROGRAM BONDS GENERATIONS: *The Intergenerational Toy Library* brings children and older persons together to play, create games and enjoy each others' company.

Research shows that playing games stimulates cognitive, emotional and physical development in children and slows the loss of cognitive, sensory and other functions in older persons.

Implemented in 2014 in Arada, Portugal, the pilot for the *Intergenerational Toy Library: One, Two, Three...Let's Play Again?* involved, in total, 88 children (aged three to six) and 15 older persons aged 74 to 96.

The initiative was part of the European project, <u>Together Old and Young</u>, aimed at nurturing intergenerational relationships and learning.

Intergenerational Toy Library

The program involved several partners:

- University of Aveiro
- Centro Comunitário São Pedro de Aradas, a private nonprofit institution with day care and kindergarten programs, and
- older persons from different seniors' homes in the area.

How it worked

Each week, older adults and children met for planned activities. The ratio included five older persons to eight children.

During each two-hour session, three activities occurring simultaneously in three different rooms in a seniors' facility.

Room 1 featured board games, such as puzzles and dominos.

Room 2 focused on creating and building games with different themes. Learning colours or identifying animals, for example.

Room 3 featured physical activities designed to provide exercise and improve motor skills.

Children rotated through the three rooms participating in all the activities, while the older adults remained in one room and engaged in the same activity. The overall process was facilitated by two intergenerational educators.

Benefits: The program showed that games and toys are powerful tools in enhancing interaction between young children and older persons. Clear rules and instructions can lead old and young to play together for long periods, totally focused and engaged.

Children taught older persons how to play with a tablet, and older persons taught children how to play a variety of board games. Most importantly, the playing and building process allowed old and young to learn and have fun together.

The program was profiled online in the *Journal of Intergenerational Relationships* on Aug. 25, 2016.

EXPLORING THE BENEFITS OF ROBOTIC PET THERAPY: More and more nursing facilities are turning to robotic therapy pets to soothe the agitation and anxiety that often accompany dementia and Alzheimer's.

In 2009, researchers at the University of Winnipeg led Canada's <u>first project</u> to study robots and their impact on individuals with cognitive impairment. The team examined the impact of Paro, a cuddly version of baby harp seals found off the coast of Quebec's Îles de la Madeleine (Magdalean Islands), on residents living with dementia in Deer Lodge Centre, a long-term care and rehabilitation facility in Winnipeg.

Today Paro is used in dementia care in more than 30 countries. The findings of a recent Australian study, published in the *Journal of Aging Research* (vol. 2016) reinforces the use of Paro as a therapeutic tool. For people with dementia, the researchers found that use of the furry seal improved mood, reduced challenging behaviours and encouraged social interaction.

But Paro is not cheap. Now in its ninth version, the extremely lifelike seal is touted as a medical device and costs about \$6000 US.

Enter the robotic cats, called Joy for All Companion Pets. They cost \$99 and are made by Hasbro. The company's first product, the robotic cat comes in three models: orange tabby, creamy white and silver with white mitts.

The Hebrew Home at Riverdale in the Bronx got its first cat robot a year ago. The staff tried it out on an older resident in the Memory Care wing, who was searching frantically for her long-deceased parents. The woman calmed right down. Since then, the Hebrew Home has acquired 24 more cats, with plans for possibly 50 more.

The robotic cat is designed to mimic a real animal. When people scratch the back of the cat's head, it purrs. After petting, the cat opens its eyes and meows for more.

Mary Farkas, the director of therapeutic activities at the Hebrew Home told the *New York Times*, that she has seen many residents form close bonds with their furry friends.

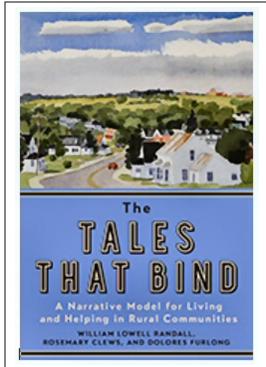
"For a lot of our residents, it's a chance to be a caregiver, and to be in an active, empowered role again," she said. "A lot of times this disease causes passivity, and we're always looking for ways to combat that."

NEW BOOK HELPS RURAL PRACTITIONERS: Rural communities are aging rapidly.

Every year, thousands of new practitioners in professions such as education, social work, medicine and the church move to rural settings to work.

Most professionals are trained in large urban centres. Some new practitioners find rural life and rural practice are like working in a new language.

In *The Tales that Bind*, William Lowell Randall, Rosemary Clews and Delores Furlong, present a narrative approach to facing these challenges. They argue that the real teachers about rural life are the people who are living it, and that success as rural practitioners requires "knowing the story" – whether that is personal, communal or regional.



AgingHorizons.com, 905-60 Cartier Street, Ottawa, Ontario K2P 2E1, Canada web: www.AgingHorizons.com tel: 613-234-0851

The Tales that Bind draws on in-depth interviews with more than 40 practitioners working in a range of professions and communities throughout rural New Brunswick, Canada. Written in a bright conversational tone, this impassioned book has three sections:

In **Part One**, the authors present:

- the background of the study
- the New Brunswick story, and
- the researchers own stories.

Part Two presents fictionalized vignettes, illuminating the realities of small-town life, captured through the eyes of a

- teacher
- social worker
- physician
- minister,
- police officer, and
- a community activist, among others.

Part Three explores lessons from the study. They include:

- a curriculum framework
- recurring themes, and
- a host of practical strategies.

Many of the practitioners in the study talked about everyday stress, and their struggle to adapt what they had learned in their professional training to the needs of residents in their small town or remote hamlet.

So what's the secret to establishing a successful rural practice?

According to the authors:

It involves bringing an open mind to the ongoing conversation within a given small community, letting its residents teach us what it is *they* need, and learning how our skills can "meet" their needs, not assuming that, as "trained professionals" we know this in advance.

TO SET THE DARKNESS ECHOING: The late Seamus Heaney, who won the Nobel prize for literature in 1995, was born on a farm in County Derry in 1939.

He lived through the Troubles that devastated Northern Ireland communities between 1968 and 1998.

Poets change the way we look at the world. They provide a glimmer of something better. In his poem *The Cure at Troy*, Seamus Heaney wrote:

History says, don't hope On this side of the grave. But then, once in a lifetime The longed-for tidal wave Of justice can rise up, And hope and history rhyme.