

Rural and Northern Perspectives: The View from Here

Spring 2020 Volume 15, Issue 1

Message From the Chair

Welcome to the spring 2020 issue of The View from Here! First and foremost, I would like to extend my sincere appreciation for our newsletter editor, Dr. Michelle Conan, for putting together yet another wonderful issue for our section.

I have no doubt that as you read this newsletter, many aspects of your day-to-day life have changed. Canada's response to COVID 19 has enabled us to flatten the curve in many places. We have all had to make many adjustments to how we work, care for our families, and run our households. Some of us have been directly impacted by the virus, or know of a loved one who has become ill. This is definitely a trying time for many Canadians. As the same time, there are many stories emerging of strength. I have noticed in my own work that psychologists who work in rural and northern areas have many skills that serve us well with physical distancing requirements – we are comfortable working independently (often as the only psychologist in the area), consulting with colleagues remotely, and many of us have already implemented remote service delivery into our daily work prior to the arrival of the coronavirus. As psychologists, we are uniquely positioned to be able to engage in adaptive coping strategies, and to support our communities in adopting these ways of managing stress and uncertainty. Collaboration across individuals and organizations is at an all time high – as are the number of CE opportunities that have shifted to virtual platforms, and pro-bono services offered across Canada to support those impacted by COVID 19; this is all wonderful! More information on some of these efforts can be found at <https://cpa.ca/corona-virus/>



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Message from the Chair, continued...

As I write this column, I hope that we continue to move forward with resilience and kindness as we navigate so many significant changes.

The annual CPA convention will be undergoing a new format this year to reduce travel and embrace physical distancing measures. More information will be sent to you via email once details have been confirmed. Although we will not be offering the Northern Star student award this year, we are pleased to be able to offer the Distinguished Career Contribution Award, which acknowledges psychologists who have made a significant contribution to rural and northern practice. Details regarding nomination procedures are included within this issue. Please consider nominating a deserving colleague.

Our hearts have been with Nova Scotia since the tragic loss of life this spring as the result of a mass murder. This is a reminder to many that life can change so drastically and tragically overnight, devastating families and their communities. We applaud the efforts of the Association of Psychologists of Nova Scotia (APNS) who have offered supports to anyone who is in need, and those who have come together to support those grieving. Our section stands with Nova Scotia.

I hope that you all enjoy this issue and please do not hesitate to contact me if you have any questions regarding the section.

Amanda Lints-Martindale, Ph.D., C. Psych.

Volunteer Opportunity: Provincial Representatives



Would you like to be more involved in the Rural and Northern section of CPA? **The Rural and Northern section of CPA is currently looking for provincial representatives** from each province and territory across the country. We currently have representatives from British Columbia, Saskatchewan, Manitoba, Northwest Territories, Nova Scotia, and Nunavut; all other provinces and territories do not yet have a designated representative! If you are interested in representing your province, please contact our chair, Dr. Amanda Lints-Martindale at Amanda.Lints-Martindale@umanitoba.ca

Call for Nominations for the Distinguished Professional Contributions to Rural and Northern Practice Award

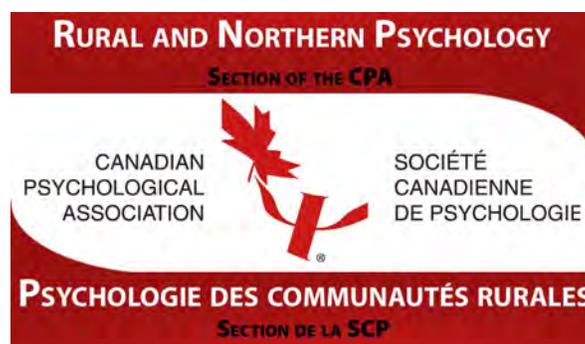
This award is intended to recognize outstanding rural and northern practitioners in psychology. Nominations will be considered for psychologists working in any area of rural and northern psychological practice (e.g., education and health services provision, consulting); and/or provide services to any patient population or professional clientele in a rural and northern setting. Services provided to diverse client groups or patient populations, including but not limited to children/adolescent/adults/older adults/elders, rural/remote/northern populations, minority populations, and persons with serious mental illness will be considered. Contributions may be judged distinguished by virtue of peer recognition, advancement of the public's recognition of psychology as a profession, advancement of rural and northern practice through supervision/research/scholarly pursuits, relevant professional association honours, or other meritorious accomplishments denoting excellence as a rural and northern psychologist, including advancement of the profession.

Nomination packages must include:

1. A letter of nomination from a current Rural and Northern Section member detailing the nominee's distinguished contribution.
2. At least two letters of support from individuals (beside the nominator) who know this person's distinguished contribution to rural and northern practice. The letter is to be current, meaning written in the last calendar year.
3. A current curriculum vitae for the nominee.

Deadline for submission is May 15, 2020.

The recipient will be announced at the AGM of the Rural and Northern Section. Send nomination packet *by email* (in pdf format) to Amanda.Lints-Martindale@umanitoba.ca.



Rural and Northern Section Question and Answer Period with Cynthia Beck

By way of introduction, can you tell us a bit about yourself?

I'm a Masters student in the Clinical Psychology program at the University of Regina. I also work as a research assistant in the Online Therapy Unit and provide suicide intervention response services to southeast Saskatchewan. I farm with my husband, Wade Beck, and our two children in partnership with Wade's family. We operate a mixed farming operation of cattle and grain near Milestone, SK.

How did you become interested in the area of women in agriculture?

Agriculture has always played a major role in my life. I was born and raised on a farm in south eastern Saskatchewan. I married a farmer, and twenty years later we are raising our children just as we were raised, in agriculture.



Wade & Cynthia Beck

As an attendee representing CPA at the Advancing Women in Agriculture Conference 2019 in Niagara Falls, what were the major themes of the conference that you think are important for our readers to know about?

I believe for the first time at the Advancing Women in Agriculture Conference, a major theme was around mental health in agriculture. Many women stopped by the CPA booth to converse about mental health, and many expressed concern over the lack of mental health resources in the rural environment across Canada. Numerous women who stopped by also gathered information pamphlets to learn how to broach the subject of mental health with their loved ones and even employees. The conference also provided workshops and talks on the power of networking with industry and on engaging the consumer.

What improvements have you noticed in the area of rural mental health for women in agriculture?

Personally speaking, I have seen some improvement in the area of mental health for rural women. When I had my babies and was dealing with postpartum mental health issues, there really were no resources for me. Fifteen years ago, rural people did not talk about mental health. Gratefully, more people are speaking about mental health and social media provides that platform for many. For rural women who have internet access, they now hopefully use the social media networks for support. However, it is important to highlight that not everyone has reliable internet.

What areas need further improvements?

Rural internet and cellular service needs to improve. We have reached a point in time when internet and cellular service need to be considered essential services, especially with the rising delivery of mental health services via internet and mobile device. Rural mental health practitioners would also benefit from familiarizing themselves with the demands that an agricultural lifestyle places on rural people, especially women. The skills, cognitive ability, and time management required to farm are vast. The stress load that women in agriculture deal with would be unbelievable and unmanageable to most people. Women in the agriculture industry truly are some of the most resilient people.

What are some final thoughts that you would like to include?

If you are a mental health practitioner living anywhere near a rural area, please make sure people know how to find you. Also, do not assume that people have the option to search on the internet to find you or other mental health resources. For a rural person in distress or dealing with mental health concerns, unreliable internet can exacerbate the frustration and distress. The number one concern I heard at the Advancing Women in Agriculture Conference was that people do not know what options they have in the rural environment for mental health services. I encourage the psychology community as a whole to be thorough in disseminating the resources you have or provide, so that it can reach beyond the very real limitations of the internet.



In Support of an Alternative Rural Supervisory Model Submitted by Dr. Julian Torres, Portage la Prairie, Manitoba

In recent times, I've been led to the exploration of the many core differences between urban and rural clinical practice (see The View from Here, Fall 2019 edition). As I reflect on these differences, I recognize I conceptualize them as cultural differences, with one culture (the urban culture) given priority or default status over the other. The urban worldview, it seems, has defined treatment expectations and even ethical guidelines which make sense within the urban lifestyle, including logistics and resources (e.g., the possibility of safeguarding a certain degree of anonymity and privacy is higher in large cities than in small towns). In the aim of generating an all-encompassing set of clinical guidelines, the expectations that function in the urban setting are extended to rural areas and rural practitioners are left to adapt these guidelines to the realities of rural life. I take the need for accommodation as evidence that these guidelines were not generated with the rural worldview in mind. These issues have been largely and well documented, to the degree that they seem to define the rural literature.

In the past, I have argued that an alternative set of clinical guidelines should be considered for working with a population that holds a worldview different from that held in cities. This approach is commonly advocated when discussing trans-cultural work, which is the main reason why I conceptualize the urban-rural divide as an issue of culture. However, it has been my experience, and continuing with the cultural conceptualization, that the practice of adapted guidelines is not easily acquired once the clinician-to-be is acculturated to the dominant worldview.

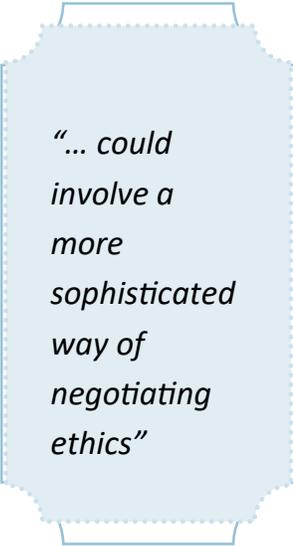
Training programs define the expectations of a psychologist's behaviour, designed and aimed at urban practice. Trainees are taught the basic dos-and-don'ts of clinical practice in urban settings, and might eventually move to rural practice once it is determined that they have been properly acculturated (i.e., competency evaluations at the end of their training). In practice, this includes an internalized ethical aversion to situations inherent to rural settings. For anecdotal evidence I invite you, dear reader, to recall your reaction, or the reactions of your colleagues, when the first instances or even discussions of "running into a client at the supermarket" occurred. It has been my experience that, across the board, the tone is one of apprehension, awkwardness, or even disgust. I have not reviewed the literature at length, but I am willing to put forward that we are not born with an inherent sense of professional ethics. These visceral reactions, given their abstract complexity, are developed through training. In my view, this is the very definition of acculturation; in this case, into a professional worldview. If this worldview makes adaptation into a rural setting more challenging, the best route into rural practice would include a clinical training program based in, and designed for, rural settings. At this time, the idea seems frankly utopic. The next best response, in my opinion, would rest in the hands of rural supervisors.

"...I conceptualize the urban-rural divide as an issue of culture"

In my experience, rural supervisors do outstanding work helping the trainee navigate the procedural adaptations required for rural practice, and they are ideally placed to socialize trainees into the culture of their professional setting. However, our current supervisory models have, unavoidably, been developed in, and for, urban settings; they are

designed to perpetuate the acculturation into the urban worldview and therefore they imply several biases. I believe the urban biases that would generate the more challenging barriers to the development of alternative rural guidelines are linked to interpersonal relationships, and these play out in the supervisory relationship itself. This is necessarily so, given that supervisors are trained into that culture and no alternative exists.

Rural practice guidelines that are more sensitive to the rural population's experience and worldview could involve a more sophisticated way of negotiating ethics, and the dreaded overlap of professional and personal relationships. The default approach to these issues is to take the safest route available and keep professional distance in relationships to avoid the possibility of abuse of power that would ultimately harm the client. The same principles and values are at play, implicit through the internalized acculturation of the supervisor, in the tacit interpersonal rules of the supervisory relationship. I propose that acculturation to alternative rural guidelines necessarily start with a supervisory style that is designed for this purpose. Given that psychology training programs model the behaviour expected for urban interpersonal exchanges, rural supervisors could use the supervisory relationship to model a more sophisticated approach to relationship ethics and better suited to the rural setting.



"... could involve a more sophisticated way of negotiating ethics"

Acknowledging my lack of supervisory experience (in rural settings or otherwise), I fall short in generating useful principles upon which to build a new supervision model. As a thought experiment, I imagine that a rural supervision model would allow the supervisee to practice delving into the grey areas of relationship ethics. If I may be allowed the metaphor, I envision the principles of relationship ethics as "To avoid getting burned, stay out of the kitchen." This is a very useful principle, except in cases where our clients are found inside this metaphorical kitchen; then it would be necessary to develop practices to go into the kitchen, closer to the fire, and remain unburned. The savvy reader will understand that the kitchen represents the uncomfortable grey area of relationship ethics in which one may be thrust as a rural practitioner, with fire representing the ethical transgression. The supervisory relationship offers an opportunity for supervisors to model how to "work within the kitchen" and navigate "getting closer to the fire" without getting burned. In practice, I imagine this relationship would involve more personal information than we are used to. The goal would be to get to know the other professional more personally, while exploring the necessary steps to remain objective and safe from the abuse of power. As a change in training paradigm, it would necessarily involve the previous informed consent of the supervisee, who should fully understand the type of experience offered. Supervisors would need to consult regularly with other professionals to work on their modelling and ensure no transgressions occur.

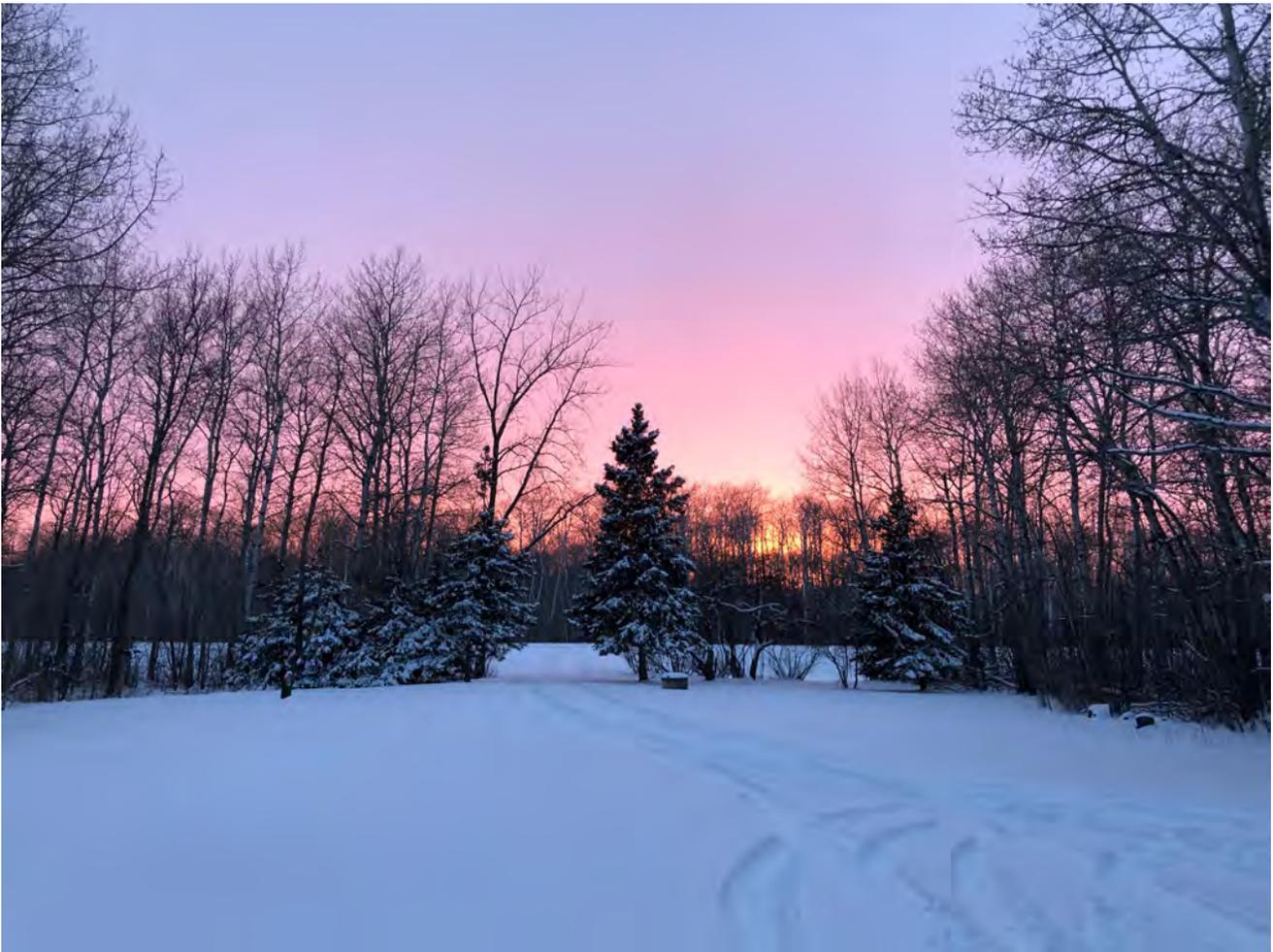
On the one hand, I admit that, while this approach might possibly be useful for the professional development of a rural practitioner, at first glance it does not seem appealing and it feels risky. On the other hand, I acknowledge that it might be a reaction based on my acculturation into the urban worldview. Dear rural reader, I invite you to reflect on your own experience in supervision, as a supervisee or supervisor, and imagine what changes to the process of supervision (if any) would be more conducive to a better adaptation into rural practice. If you like, you may contact Dr. Conan, our wonderful newsletter editor, with your thoughts and reactions. We'd love to hear from you.

What's Your View Photo Challenge!

We encourage our readers to submit their photos from around the country! *What's Your View?* Send us your favourite picture of the geography outside your door, and we will post it in the newsletter!

Below:
Near Dauphin, MB

Submitted by Michelle Conan



Editor's Comments

Submitted by Dr. Michelle Conan, C. Psych.



I hope that you have enjoyed this spring issue of *The View from Here*—our Rural and Northern Newsletter. I am pleased to have the role of newsletter editor for our section.

If you would like to make a contribution to *The View From Here*, please contact me (Michelle.Conan@umanitoba.ca) or Dr. Amanda Lints-Martindale (Amanda.Lints-Martindale@umanitoba.ca). Submissions can be made at any time, and can include:

- **an article for our regular feature “a week/day in the life of a rural and/or northern psychologist”**
- research findings and summaries
- information on upcoming conferences and training opportunities
- articles on the experience, challenges, and benefits of practicing in rural and/or northern locations
- photos
- ethical dilemmas
- book review(s)
- any other topic related to rural and northern psychology in Canada!

The Newsletter is produced by the Rural and Northern Section of the Canadian Psychological Association (CPA) and is distributed to members of the Section. The purpose of the Rural and Northern Section is to support and enhance the practice of rural and northern psychology. The goals of the section are: 1) Establish a network of professionals interested in the areas of rural and northern psychology (this may include individuals currently practicing in rural/northern areas of those with an interest in this area), 2) Enhance professional connectedness by facilitating linkages between rural and northern practitioners, 3) Distribute information relevant to the practice of rural and northern psychology, 4) Provide a forum to discuss practice issues unique to this specialty, and 5) Introduce students and new or interested psychologists to rural and northern practice.

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